

A large, white outline map of the state of South Carolina serves as a background for the central text. The map is oriented horizontally and occupies the middle portion of the image.

ADVOCACY HEADLINES

STAY INFORMED...GET INVOLVED!

★ SUMMER 2025 ★

State legislation monitoring



- Senate bill 78 - work experience credit for educators: ensures SLP can earn some credit for non-teaching experience prior to coming to the school setting, improving recruitment efforts for school-based SLP staffing. We will continue to prioritize both recruitment and retention in our advocacy efforts.
- House bill 3196 - educator assistance act: see our previous update on www.scscha.net (advocacy tab—> important advocacy updates) on how this helps with educator contracts and certification. This new law should help with retention of school-based SLPs.
- Regulation document 5318 has an expiration date of 5/4/25 which means a much needed update on the SC Dept of Ed SLP certification should be included in regulations this year, section 43-64. This update included a collaboration between SCSHA and the Office of Educator Services and makes certification simpler. The grandfathered SLT certificate holders are not affected by the updated SLP certification regulations. The regulation updates all certifications at the advanced level. We plan to remain engaged with the OES staff on other regulations pertaining to SLPs.
- H3974 Private providers (in schools) became a priority for us in 2025. We emailed out an update a few weeks ago, and that information needs a quick update! The house bill did ultimately receive passage and now awaits the senate to determine its fate. We are not currently planning on a separate bill for SLP, OT, and PT to participate in this type of hybrid outpatient therapy on school grounds, but are available for conversations if the subject arises again. We are continuing to remain involved on H3974 in 2026.
- SCSHA maintains a bill tracking list to help guide our efforts. Some of the bills we are still watching include H3021, H3927, H4562, S42, S346, S377 (not an all inclusive listing).
- The state legislature held a conference committee on the state budget and the conference committee version of the budget was shared with us by the lobbyist on 5/21/25. We don't have any major concerns so far, and will engage with our lobbyist if that changes.
- Our lobbyist played a crucial role in advocating for SCSHA this year. It may sound like an exaggeration, but we would not have seen improvement on educator regulations, work experience credit, or on H3974 without our lobbyist and a willingness of all stakeholders to discuss issues in a non-polarizing way.

State agency activity

Not all advocacy that is needed occurs in the form of a proposed bill. In fact, many nuances of policy change occur with involvement with state agencies. Here are a few of the state agency policy updates from 2025:



SCDE

We are working with the SCSHA school SLP committee on workload. The SC Dept of Education, office of special education services continues to work towards implementing a workload model. We are hopeful that the 25-26 school year will be a year of progress in improving this particular area of concern for school-based SLPs.

DHHS

In the last few months, the committees (BabyNet, Legislative affairs, Reimbursement, and School SLPs) have engaged in discussions on current issues that have resulted in strategically reaching out to state agencies for additional information or sharing information with SCSHA members. We are waiting to hear back from DHHS on a question related to place of service (POS) code billing for BabyNet, and remain involved in pushing for continued policy improvement in BabyNet, something which ASHA staff have been supporting in a meaningful way both behind the scenes and with us on a joint meeting with DHHS.

We are working toward asking for some other actions from DHHS in terms of Medicaid coverage, including:

- Need to add CPT codes for aphasia evaluation, cognitive evaluation and treatment, FEES, FEES interpretation and report, Stroboscopy, and laryngectomy OP supplies which are not DME. If there is a CPT code that you think needs to be added to the list for our request in 2025, please get in touch by June 10th.
- Providers continue to ask for a Medicaid rate increase for OP services for CPT 92507 and 92526. We will continue to ask! Rates are subject to state plan provisions, but this code is the one our private practices identified as an area of needed improvement to keep their practices open.
- Working on ensuring providers can correctly bill code combinations such as 92609+ 92507 on the same date of service. We have heard that MCOs may be quoting the NCCI inaccurately regarding code combination rules. While coding combinations like this should be relatively uncommon, if the MUE allows the code combination to be billed with a -59 modifier, then providers should be able to bill this without problems. We've engaged with ASHA's coding director and they are working on a resource for members since SCSHA is not the only association with members experiencing this issue.
- Adults seeking speech therapy through Medicaid coverage sometimes face challenges in terms of red tape to access services, such as prior authorization requirements that are too restrictive. We are working to collect the information on this relative to barriers to care for adults. If you have information you'd like to offer about your experiences with adult patients, please get in touch by August 10th.

The SC Department of Health and Human Services recently proposed a partial Medicaid expansion program, called "Palmetto Pathways to Independence." It is a waiver application and they sought public comment regarding this proposal. SCSHA submitted comments by the deadline of May 30, 2025 on behalf of our members concerns, asking for a narrow medical exception process to work requirements, third party liability concerns and retroactive recoupment, and a need for a pathway to improve provider rates on our most widely used treatment codes (92507 and 92526).

State agency activity continued...

SC LLR & Licensing

We've been working in the SCSHA legislative committee the last few years on assessing what kinds of improvements may be needed in the licensing statute for SLPs and Audiologists, which most of us call the practice act. The SC Academy of Audiology reached out to SCSHA with proposals from their audiology members. SCSHA does have some audiology members as well as a new VP of Audiology on the SCSHA executive board. We will be connecting with these individuals for their feedback. If you know of an audiologist who needs to join SCSHA, refer them to our website! We will hold a members-only meeting regarding any proposals from the legislative affairs committee for practice act updates before they are proposed to legislators.

SC Stakeholders in Public Health

The South Carolina Institute of Medicine and Public Health convenes academic, governmental, and community-based stakeholders around important health policy issues. IMPH publishes policy briefs, analyses, and reports based on in-depth research, collaboration, and consensus-driven taskforce recommendations.

They recently released two important reports that our members may be interested in:

- [Maternal and Infant health action plan](#)
- [Health outcomes associated with Medicaid expansion](#)

For more information on the SCIMPH, go to their [website](#).

Federal advocacy updates

The ASHA advocacy team has been hard at work advocating on issues related to education, medicaid, and others. We were able to get several of these staff members on a SCSHA virtual town hall in April. Thank you to the many members who attended the town hall!

The biggest moving part right now at the federal level is the Budget reconciliation bill. It is an ongoing process and we are following ASHA's lead on advocating specifically on Medicaid.

Please check out Medicaid updates on the federal level on ASHA's website.

<https://www.asha.org/news/2025/take-action-for-medicaid/>

<https://www.asha.org/advocacy/>

We are asking all SCSHA contacts to consider using ASHA's take action links, or contact Senator Lindsey Graham and Senator Tim Scott now, about saving Medicaid and SNAP. Families of children and adults with disabilities, or who have communication and swallowing impairments prior to qualifying for disability status, depend on these lifelines. Our patients with feeding and swallowing impairments often need SNAP to fill in nutritional gaps. Pushing more responsibility to states to fund more of these programs will lead to constrained funding with tough decisions by the state agencies around the country.



Federal advocacy updates continued...

Cuts to Medicaid could impact program coverage, eligibility, and provider rates. While any change is uncomfortable, some changes could be harmful and ultimately result in decreased access to care for those who need it. The SC Dept of Health and Human Services has some incredible policy staff who are doing their best to ensure that the patients who need care can get it.

What about the US Dept of Education?

- IDEA is protected, but it is possible that the department which administers and provides oversight for IDEA could change depending on federal actions.
- Student loans could be impacted by federal actions, one of which is possibly to move student aid management out of USDOEd and move to another agency.
- The USDOEd was established by Congress, and we await official updates from ASHA to learn more as executive or congressional action occurs.

US Dept of Health and Human Services

- Research funding has been an area of concern for our institutions of higher education. While SCSHA does not have much of a role in this, we can help you collaborate across institutions. You can contact our VP of Higher Education, who is also serving SC on the ASHA council of ambassadors to learn more about federal level advocacy on research.
- While many other changes have been in the news, it is not always clear what impacts individual members will experience. If you haven't been checking out the ASHA advocate, get engaged.
- We've been hearing about a three pronged focus by DHHS on 1) promote evidence-based prevention, 2) empower people to achieve their health goals, and 3) drive choice and competition. This information is further described on the CMS innovation center websites below.
 - <https://www.cms.gov/priorities/innovation/about/strategic-direction>
 - <https://www.cms.gov/priorities/innovation/about/cms-innovation-center-strategy-make-america-healthy-again>
- Switching from an illness/injury model of care, to a preventative model of care, will take some policy change, which is one of the reasons we need SC Medicaid to improve restrictions on care for adults with Medicaid. Per a conversation with ASHA staff, while value based care isn't a perfect model for service delivery, implementing value based care could expand the role of therapy to earlier in episodes of care and help achieve longer health spans for folks instead of coming to see us only after injury/illness.
- Let SCSHA know how we can help communicate your concerns to ASHA!



SCSHA Members Join Teams!

Earlier this year, the SCSHA board decided to move away from traditional social media for real-time advocacy updates. This left a gap for how we engage with our members. So, we have created a SCSHA members-only community in Microsoft Teams! Several of our committees, and our executive board, are starting to use Teams this year as well.



Some positive features we hope to use:

- Large membership capacity and meeting platform
- Non-social media base for participation, meaning no one has to create or use social media in order to engage with SCSHA
- Keeping conversation going with real people
- Easy for members to bring their concerns to SCSHA or discuss with each other
- Ensures we are engaging with active members of the state association
- Fast dispersal of information such as important advocacy updates and request for member feedback
-

What about notifications?

Subscribers can manage notifications and set up quiet hours. We will strive to avoid posting more than once per business day when it is possible.

How can you join the page?

Members were emailed a link to join the Teams page. If you aren't getting member emails, get in touch with us at SCSHAed@gmail.com to troubleshoot your account. We have found a number of people who thought they were members who never paid the 2025 invoice, so we encourage you to double check your member status on SCSHA.net to ensure your membership is active!

When does the SCSHA private Facebook group get archived?

We currently plan to archive the private Facebook group on or around March 17, 2025. The public facing SCSHA pages on Instagram and Facebook will remain active!

What if I have suggestions for an online platform for the future?

We welcome your suggestions! Please use the SCSHA "contact the board" form on SCSHA.net.

As always, thank you for staying involved with SCSHA and supporting our state association each year. Ongoing membership renewal really does make the difference in being successful advocates!

Sincerely,

Kelly A. Caldwell

Email: ckcaldwell716@gmail.com

Cell: (252)375-7584

SCSHA VP of Government Affairs

ASHA SIG 13 affiliate (swallowing disorders)