support for a strong proposal for reimbursement—essential to a successful meeting with Medicaid. You will need data on, for example, the types of patients who can be served and types of services that can be delivered through telepractice; clients who show positive outcomes from telepractice; the number of clients who would benefit from telepractice services and why; and potential cost savings. ASHA and your state association can provide guidance and resources, but Medicaid wants to hear from the practitioners who are trying to provide telepractice.

Data will come from private practitioners, school-based clinicians, academicians researching telepractice, and clinicians providing telepractice services in a variety of settings. Enlist your state association to help with member surveys. Consider working with occupational and physical therapists as well as their associations to gather a larger voice. Verify that the state association is following any proposed telepractice-related state legislation. ASHA’s state advocacy team works closely with state associations to track new legislation and can help individual members as well (800-498-2071).

Many states have laws or regulations that allow telepractice reimbursement, and not all state Medicaid plans oppose it. Implementation, however, is taking time, and many states want the research to support the practice. Many state Medicaid plans are beginning to reimburse—starting with physicians and psychologists—and adding additional providers as they work through the process.

Cheris Frailey, MA, CCC-SLP, is ASHA director of state education and legislative advocacy.
•cfrailey@asha.org

**Virginia and Ohio:** Approved for Medicaid-eligible children in the schools.

**Missouri:** SLPs are included as participating providers in health care settings, based on the originating site, under specific stipulations and with technology preapproved by the telehealth network.

**California:** Reimburses all licensed providers.

**Maine and Colorado:** Reimburse under broad provisions.

**Kentucky:** Services provided by SLPs employed by a physician, hospital outpatient department, home health agency or nursing facility. A provider must be an approved member of the Kentucky Telehealth Network and comply with standards and protocols established by the Kentucky Telehealth Board. Because there are no stipulations on the location of the client—per the Telehealth Network and Board—there is potential for hospital-based SLPs who have a school contract to provide services to eligible children and bill Medicaid.

**New Mexico:** Reimburses for health care and is including school-based speech-language pathology, but manual updates are still in process.

**Minnesota:** Reimburses in schools if the provider meets all service requirements of the student’s Individualized Education Program.

*State statutes, regulations or manuals indicating Medicaid reimbursement for telepractice do not guarantee reimbursement.*