

MEDICAID BLOCK GRANTS

ACTION

Request your members of Congress to reject legislative efforts to turn Medicaid into a block grant program without minimum coverage requirements. Moving to block grants could jeopardize the provision of both habilitation and rehabilitation services provided by audiologists and speech-language pathologists.

WHAT YOU NEED TO KNOW?

Audiology and speech-language pathology services are required services under Medicaid for children up to 21 years of age, under the Early Periodic, Screening, Diagnostic, and Treatment (EPSDT) provisions of the Social Security Act. Moving to block grants—without continued federal requirements for EPSDT—may make it more difficult for children to receive audiology and speech-language pathology services. Audiology and speech-language pathology services are optional for the adult and senior populations.

Individuals who are covered by Medicaid and have experienced a serious medical condition—such as a stroke—are at an even greater risk of not receiving rehabilitative services that can restore function and enable them to return to work and/or be actively involved in their communities. As noise-induced hearing loss becomes more prevalent in adolescents (1 in 6 has high-frequency hearing loss), an increasing number of these individuals could greatly benefit from preventative and diagnostic services provided by audiologists.

WHAT YOU NEED TO SAY?

- Coverage of audiology services and communication devices increases patient independence and employability, which ultimately affects state budgets.
- Various studies have demonstrated that hearing aid use can significantly reduce the physical and psychosocial dysfunction (e.g., isolation, depression, hypertension, stress) that often accompanies hearing loss.
- Speech-language pathologists provide cognitive, communication, and swallowing interventions for both children and adults. For children, these services are considered habilitative and, in many cases, are medically necessary.
- Speech-language pathologists work closely with individuals who have swallowing difficulties. Without
 appropriate intervention, these individuals risk malnutrition and life-threatening medical conditions (e.g.,
 aspiration pneumonia) that often require additional hospital and medical attention; thus, placing additional
 costs on the Medicaid program.

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