**Policy No. 2019-001**

**Amended August 1, 2022**

**Policy: Providing Speech-Language Pathology and Audiology Services by Electronic Means**

The Board of Registration of Speech-Language Pathology and Audiology (“Board”) issues this policy, as amended on August 1, 2022, on providing speech-language pathology and audiology services by electronic means, which the Board refers to as “telepractice” as defined in this Policy.

**DEFINITIONS**

The following terms used in this Policy are defined as follows:

“Board” means the Massachusetts Board of Registration for Speech-Language Pathology and Audiology.

“Client” means a natural person who is a consumer of speech-language pathology or audiology services either in person or through telepractice.

"Facilitator" means a person who is physically present with the client and facilitates telepractice services at the direction of a speech-language pathologist or audiologist.

“State” means a state or territory of the United States, the District of Columbia or Puerto Rico.

“Telepractice” and “telepractice services” mean the application of telecommunication technology to deliver speech-language pathology or audiology services, as defined by G.L. c. 112, § 138, using audio-visual mechanism in real-time (synchronous), stored and recorded sessions (asynchronous), or a combination of real-time and recorded sessions (hybrid models).

“Telepractitioner” means a speech-language pathologist or audiologist who provides telepractice services after obtaining the initial training described in this Policy.

**POLICY**

Telepractice is a permitted mode of practice in Massachusetts subject to the terms of this Policy.

**Licensure**

1. All persons who provide telepractice services to clients who reside or are located in Massachusetts must be licensed by the Board.
2. Massachusetts-licensed Speech-Language Pathologists and Audiologists must comply with statutes, regulations and policies of the state or country where the client is located and with applicable Massachusetts statutes, regulations and policies to the extent they do not conflict with the applicable law of the state or country where the client is located. If the client receiving telepractice services is located in Massachusetts, Board licensees must comply with all Board statutes, regulations and policies, including compliance with the American Speech-Language-Hearing Association’s Code of Ethics pursuant to Board regulation 260 CMR 1.03(17).

**Standards**

1. A telepractitioner must be competent in the type of services provided and in the methodology and equipment used to provide the service.
2. The scope, nature and quality of telepractice services must be equivalent to the quality of services delivered face-to-face and in-person.
3. Before providing telepractice services, a speech-language pathologist or audiologist must obtain ten (10) hours of training in telepractice in classroom courses or via distance learning. Training must include equipment and technology, clinical practice via telepractice, security and encryption of data, and compliance with Health Insurance Portability and Accountability Act (HIPAA) and Family Educational Rights and Privacy Act (FERPA). Telepractitioners must maintain documentation of their training for inspection by the Board upon request. Licensees are encouraged to remain current on any changes or updates regarding the provision of telepractice services.
4. A telepractitioner may begin a client relationship via telepractice following an evaluation of the prospective client by a licensed speech-language pathologist or audiologist to assess the prospective client’s need for services and candidacy for telepractice. Licensees must use their best clinical judgment to determine whether the use of telepractice is the appropriate mode of practice to diagnose and/or treat the client, taking into consideration any issues, including but not limited to, audiological, anatomical, physical, cognitive or behavioral issues, which may impede, limit and/or affect the use of telepractice with the client.
5. Prior to initiating telepractice services, a telepractitioner must:

	1. Document whether the client has the necessary knowledge and skills to benefit from the type of telepractice provided by the licensee;
	2. Obtain informed consent of the client to use a private environment with a secure connection;
	3. Assess the equipment and environment to be used by the client for the telepractice services, or ensure that such an assessment has been performed;
	4. Provide orientation and training to the client in the use of telepractice equipment and the telepractice protocol at an appropriate level for the client;
	5. Provide orientation and training to a facilitator, if needed for the client, in the use of telepractice equipment and the telepractice protocol;
	6. Give the client written notification of telepractice services, including notification of:

		1. The limitations of using technology in providing telepractice;
		2. The potential risks to the confidentiality of information due to technology used in telepractice;
		3. How communications can be directed to a specific licensee;
		4. Options for service delivery by telepractice and in person;
		5. The client’s right to refuse or discontinue telepractice services;
		6. Instructions on filing and resolving complaints; and
	7. Obtain the signature of the client or the parent or guardian of a minor client on this written document, and maintain this document in the clinical record.
6. The office or off-site location from which telepractice services are being transmitted should be controlled and managed for security and confidentiality of client information in compliance with HIPAA and FERPA guidelines and all other applicable state and federal laws.
7. Telepractitioners must know and comply with existing law, rules and regulations regarding security, privacy protections, reimbursement for services, licensure, liability and malpractice.
8. In addition to the above requirements, licensees must address the particular impact of telepractice on every aspect of providing speech-language pathology services or audiology services, by taking action including but not limited to:
9. Maintaining appropriate documentation of all services provided to the client;
10. Taking into account cultural and linguistic variables that affect the assessment and treatment of individuals receiving services via telepractice;
11. Evaluating the effectiveness of services provided by telepractice and measuring their outcomes;
12. Ensuring the confidentiality and privacy of patients and their transmissions, and complying with all Massachusetts, HIPAA and FERPA requirements and any other applicable state and federal requirements regarding patient records and confidentiality of patient information; and
13. Collaborating with physicians for timely referral and follow-up services as necessary.
14. Where Speech-Language Pathology or Audiology Assistants are providing services via telepractice, the Board’s regulations and policies, including but not limited to rules on supervision, remain applicable: at least 10% of services rendered by the Assistant each month must be provided under Direct Supervision and an additional 10% of the Assistant’s services must be supervised either directly or indirectly.
15. Licensees who supervise clinical fellows or graduate students should follow ASHA and CFCC guidelines regarding their participation in telepractice.