

SESSION OF 2021

**SUPPLEMENTAL NOTE ON SENATE BILL NO. 77**

As Amended by House Committee on Health  
and Human Services

**Brief\***

SB 77, as amended, would enact the Audiology and Speech-Language Pathology Interstate Compact (Compact). The Compact's uniform provisions are outlined below.

***Section 1: Purpose***

The purpose of the Compact would be to facilitate the interstate practice of audiology and speech-language pathology with the goal of improving public access to audiology and speech-language pathology services.

***Section 2: Definition***

The Compact would define various terms used throughout the Compact.

***Section 3: State Participation in the Compact***

The Compact would provide licensure requirements for states participating in the Compact. Licenses issued by a home state to an audiology or speech-language pathologist would be recognized by each member state as authorizing the practice of audiology or speech-language pathology in each member state. States would be required to implement criminal history record checks of license applicants. The privilege to practice audiology or speech-language pathology

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\*Supplemental notes are prepared by the Legislative Research Department and do not express legislative intent. The supplemental note and fiscal note for this bill may be accessed on the Internet at <http://www.kslegislature.org>

would be derived from the home state license. Member states would be authorized to charge a fee for granting a compact privilege and would be required to comply with bylaws and rules of the Audiology and Speech-Language Pathology Compact Commission (Compact Commission).

#### ***Section 4: Compact Privilege***

The Compact would require audiologists and speech-language pathologists to comply with certain requirements to exercise compact privilege and would state audiologists and speech-language pathologists could only hold one home state license at a time. The Compact would also establish the requirements to restore an encumbered license.

#### ***Section 5: Compact Privilege to Practice Telehealth***

The Compact would require member states to recognize the right of an audiologist or speech-language pathologist licensed in a member state to practice in another member state *via* telehealth.

#### ***Section 6: Active Duty Military Personnel or Their Spouses***

The Compact would allow active duty military personnel or their spouses to designate a home state where such service member or spouse has a license in good standing and would allow such military personnel or spouse to retain that home state designation during the period of time the service member is on active duty.

#### ***Section 7: Adverse Actions***

The Compact would allow a member state to take adverse action against an audiologist's or speech-language pathologist's privilege to practice in such member state and to

issue subpoenas. Only the licensee's home state would have the power to take adverse action against the audiologist's or speech-language pathologist's license issued by such home state. The Compact would allow joint investigations by member states of licensees.

### ***Section 8: Establishment of the Audiology and Speech-Language Pathology Compact Commission***

The Compact would create the Compact Commission and include provisions relating to the membership, voting, powers and duties, and financing of the Compact Commission.

### ***Section 9: Data System***

The Compact would require the Compact Commission to develop, maintain, and utilize a coordinated database and reporting system on all licensed individuals in member states. Additionally, the Compact Commission would be required to promptly notify all member states of an adverse action taken against a licensee or applicant. Any information contributed to the database could be designated by a member state as not for the public.

### ***Section 10: Rulemaking***

The Compact would authorize the Compact Commission to exercise rulemaking powers. The bill would require notice of proposed rules to be filed at least 30 days prior to the meeting where the Compact Commission will consider such rule. Additionally, the Compact Commission would be required to grant the opportunity for a public hearing if certain conditions are met. However, the Compact would also provide for emergency rulemaking procedures.

***Section 11: Oversight, Dispute Resolution, and Enforcement***

The Compact would require the Commission, upon member request, to resolve disputes arising among member states and between member states and non-member states. In addition, the Compact Commission would be allowed to enforce the provisions of the Compact and, by majority vote, could initiate legal action in federal court against a member state.

***Section 12: Date of Implementation of the Interstate Commission for Audiology and Speech-Language Pathology Practice and Associated Rules, Withdrawal, and Amendment***

The Compact would be effective on the date on which the Compact statute is enacted into law in the tenth member state. Any member state would be allowed to withdraw from the Compact by enacting a statute that would repeal the Compact, but this would not take effect until six months after the enactment of the repealing statute. Member states could amend the Compact, but any amendment would not be effective until it is enacted by all member states.

***Section 13: Construction and Severability***

The Compact would be required to be liberally construed and the provisions of the Compact would be severable.

***Section 14: Binding Effect of Compact and Other Laws***

The Compact would not prevent the enforcement of any other law of a member state that is not inconsistent with the Compact. Laws in conflict with the Compact would be superseded to the extent of the conflict and all lawful actions of the Compact Commission would be binding upon member states.

The bill would be in effect upon publication in the *Kansas Register*.

## **Background**

The bill was introduced by the Senate Committee on Public Health and Welfare at the request of Senator Baumgardner.

[*Note:* SB 77 contains provisions identical to provisions in 2020 Senate Sub. for HB 2487 as passed by the Senate Committee on Education.]

## **Senate Committee on Public Health and Welfare**

In the Senate Committee hearing, Senator Baumgardner, a representative from the Kansas Speech-Language-Hearing Association (KSHA), and a speech-language pathologist and clinical associate professor from the University of Kansas provided **proponent** testimony. The proponents generally stated the bill would operate similarly to compacts already in place in Kansas. The proponents stated the bill would benefit the public and improve continuity of care by providing portability for military spouses, improve access to speech-language pathologists and audiologists, and help facilitate tele-therapy practice by simplifying the current process for licensure across states.

Written-only **proponent** testimony was provided by representatives of the American Speech-Language-Hearing Association and KSHA and by an audiologist from the University of Nebraska-Lincoln.

No neutral or **opponent** testimony was provided.

### ***House Committee on Health and Human Services***

In the House Committee hearing, representatives of KSHA provided **proponent** testimony. The representatives stated the bill would improve continuity of care, portability for military spouses, and access to speech-language pathologists and audiologists as well as facilitate telehealth and simplify the licensure process.

Written-only **proponent** testimony was provided by Senator Baumgardner; representatives of Greenbush, KSHA, and the tiny-k Alliance; and by a speech-language pathologist and clinical associate professor from the University of Kansas.

Written-only **opponent** testimony was provided by a representative of the American Academy of Otolaryngology-Head and Neck Surgery.

Written-only neutral testimony was provided by a representative of the Kansas Medical Society.

The House Committee amended the bill to change the effective date to upon publication in the *Kansas Register*.

### **Fiscal Information**

According to the fiscal note prepared by the Division of the Budget on the bill as introduced, the Kansas Department for Aging and Disability Services estimates enactment of the bill would have a fiscal effect on agency expenditures; however, a fiscal impact cannot be estimated. The agency states that if enough additional adverse actions need to be taken with out-of-state licensees, an additional attorney position may be required for the increase in workload. Additional agency expenditures may be necessary to modify the licensee database to differentiate types of licensees and to grant access to the database by other compact member states. There could also be increased travel and other

expenditures that would arise from membership in the compact. Any fiscal effect associated with the bill is not reflected in *The FY 2022 Governor's Budget Report*.

Speech-language pathology; audiology; compact; Audiology and Speech-Language Pathology Interstate Compact