

THE OSHA COMMUNICATOR

A PUBLICATION OF THE OREGON SPEECH-LANGUAGE & HEARING ASSOCIATION



Past President's Message

By Janet Lambert

Our Fall Conference was another great success, and I am pleased that so many could attend. It was a pleasure to preside at the Friday business meeting and to have such nice support for our bylaw changes. And I thank you all for your

recognition and “payment in applause” for all our OSHA Board members.

Our recognition of our legacy participants at Saturday's lunch was especially wonderful and, judging from their reports, quite meaningful to them. Thank you for your

kind attention to these outstanding colleagues. Here is a wonderful story from that lunch time. When we were at our tables and answering the questions regarding our licensures, I was impressed to see our legacy participants engaged in discussion with the questions in hand. I approached the table and said, “Look at you all discussing licensure when you don't really need to!” Louise Feldman (President 1970) replied, “True, but we were some of the first licensees so it is interesting!” I love that!

And how amazing to see the years we have spent in our professions—from those very new to those nearing retirement. And how lovely to hear the applause and cheers

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One State, Two Organizations

Wendy Gunter and Ashley Northam

It can be easy to confuse the roles of two important but distinct organizations for speech and hearing professionals in Oregon: Oregon Board of Examiners for Speech Pathology and Audiology (BSPA) and Oregon Speech-Language Hearing Association (OSHA). This is partly because they work closely together to serve consumers and professionals (SLPs, SLPAs, and audiologists) in Oregon regarding speech and hearing services. At times the goals of the two organizations may overlap, such as in working towards passing a particular legislative bill. There are other similarities, too. Both are governed in part by boards, with some members with “day jobs” as speech language pathologists and audiologists.

But what are the differences? BSPA licenses and regulates the practice of SLPs, SLPAs and audiologists in Oregon for consumer protection. Its board is comprised of 2 audiologists, 2 SLPs, 1 ENT, and 2 public members, all of whom are appointed by the governor. The Oregon Administrative Rules and Statutes guide the BSPA in its actions and determinations, such as whether an applicant

is qualified for a license or whether a complaint against a licensee represents a violation; The professional development approved by this Board is required to pertain to the clinical practice of Speech-Language Pathology. To learn more, go to <http://www.bspa.state.or.us/BSPA/>.

OSHA, on the other hand, does not issue licenses or reprimand professionals. OSHA is a volunteer professional association formed to advocate for professions and ultimately the people we serve. It includes a broader scope of members, such as Educators of the Deaf and Hard of Hearing and students of speech language pathology and audiology. OSHA has a comparatively large board and is governed by bylaws, which are created and modified by the membership. Through OSHA, a number of professional needs are met, such as the annual conference for professional development and networking, committee work on local issues as needed, and attention to individual concerns. To learn more about OSHA, go to <http://www.oregonspeechandhearing.org/>.

President's Message

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for our students! From Students to Legacy, we do support each other.

As I write this last message, I am moving into the Past President portion of the three-year term for OSHA presidents. This means I will be encouraging the membership to nominate clinicians to receive our various awards. I urge you to begin thinking about that professional who has distinguished her/himself and to make that nomination. Of course, there will be more later, and our website contains information regarding the nomination process for all the awards.

Back in April I began sharing brief descriptions about Board positions and need to finish that task here. So, here we go:

With our bylaws change, we added two new voting positions to the Board. Previously, we had an SLP Representative as an affiliate, but with our votes, this position is now a voting member of the Board. This person provides insight to the specific needs of the SLPAs in the state. In addition, the Higher Education Faculty position, which should be filled in the coming weeks, is needed to represent an important portion of our membership.

The state of Oregon is divided into four regions with a Regional Representative from each. These representatives bring the issues and interests of the membership working in each region. They are the "go to" people who bring your concerns to the Board, whether you work in private practice, in a school, in a hospital setting, or other environment.

The Committee Chairs for Audiology, Clinic-based SLP & Healthcare, School-based SLP and SEAL, EI/ECSE, and Educators of the Deaf and Hard of Hearing represent the clinicians practicing in these specific arenas. They can offer focused support and answer questions pertaining to these workplace settings.

The ASHA Advisory Council Representative brings Oregon's needs to our national association and participates in the governance of the organization. Likewise, Oregon's local concerns are championed by our Legislative Chair, along with John McCulley, our OSHA lobbyist. They keep us and our clients as top priorities.

We now have up to three Student Representatives who, combined, hold one vote. As student participants, they learn how our state association business is conducted and bring insights from the university setting.

The Membership Chair encourages professionals in our state to join OSHA and be a part of focused efforts around state concerns for our professions. Our membership represents who we are to various stakeholders.

The Technology, Advertising, and Publications Chairs work together to provide information and support to our members, advertisers, and to related fields and organizations that have an interest in what we do. They field questions regarding what is news, what is newsworthy, and what is advertising.

The Ethics Chair is a great resource for those work-related dilemmas that might conflict with ASHA's Code of Ethics, or that relate to hiring practices or uncomfortable compromises. General guidance is provided to those who need it, and any special needs are brought to the Board's attention.

Finally, the Historian holds the key to the past and to OSHA's history. I know there is a strong effort now to collect all the historical elements possible and convert them to digital form. What a wonderful contribution this will be!

We have a sound and stable state organization with a committed volunteer Board that works for the welfare and well-being of ALL professionals in the state. We have a strong membership whose participation in our state matters and events is outstanding. Nancy Fulton, your incoming president, and I have walked in confidence and with pride as representatives of the Oregon Speech-Language-Hearing Association. It has been a privilege to serve and a pleasure to be your president this past year.

Gratefully yours,
Janet Lambert

Region 4 Representative Needed Nancy Fulton

OSHA needs a representative from Region 4 (serving Wasco, Sherman, Gilliam, Morrow, Umatilla, Union, Wallowa, Jefferson, Wheeler, Grant, Baker, Deschutes, Crook, Harney and Malheur counties) to serve on the OSHA Board. Responsibilities include attending quarterly board meetings in Salem and communicating with speech language pathologists and audiologists in Region 4. The representative can be from any work setting, including the public schools, a hospital or medical clinic, or a private practice. If you are interested, please contact Nancy Fulton at ancynay@comcast.net.

OSHA 2011 Awards

Ashley Northam

The following individuals received awards at the 2011 OSHA Conference in Salem. Recipients were nominated by their colleagues or institutions. As part of her presentation as OSHA President, Janet Lambert also asked each of the past presidents of OSHA to stand and be recognized for their past and continued service.

Congratulations to the 2011 award recipients!



The **Distinguished Service Award** honors a person or organization who has contributed to the advancement of the visibility, viability, or vitality of our professions. This year's recipient of

the Distinguished Service Award was the **Oregon Public Utility Commission**. The award was accepted on behalf of the commission by **Matt Smith** and **John Cray**.

The **Outstanding Clinician Award** recognizes a speech-language pathologist, audiologist or educator of the deaf/HOH who consistently demonstrates outstanding clinical, advocacy or leadership skills. The award may recognize general clinical work or a specific, recent clinical achievement. This year, the Outstanding Clinician Award was awarded to **Patti Hall**.



The **President's Award** is given by the current (outgoing) OSHA President and is designed to award special recognition to an executive board member, committee chair, or member of the association who has provided

exemplary service to the association. The 2011 recipient of the President's award was **Jill Dolata**, for her exceptional work as chair of the OSHA Technology Committee.

The **Teaching and Service Award** recognizes a colleague whose published research or teaching has contributed to

advancing clinical knowledge and/or practice in the fields of speech-language pathology, audiology or education of the deaf/HOH. This award was received by **Elynn Arwood** (not pictured).

The **Award of Scholarship** is awarded by the faculty of each university program to recognize an outstanding graduate student entering into the second year of the program. This year's recipient of the **Portland State University Student Recognition Award** was **Dunya Chirchi**. The **University of Oregon Student Recognition Award** was awarded to **Rikkie Schley**.



Dunya Chirchi



Rikkie Schley

The **Outstanding Leadership Award** recognizes exceptional leadership within OSHA. The 2011 Outstanding Leadership Award recipient was **Janet Lambert**, for her hard work and dedication as OSHA President.

We encourage everyone to think about nominating a colleague for next year's awards. The process is easy, and it's a great way to recognize an outstanding colleague! This year, there were no nominations received for Honors of the Association. We hope to have nominations in each category next year.



Janet Lambert



Past Presidents and Past Honors of the Association Recipients were honored on Saturday's OSHA luncheon.

OSHA Legislative Committee

Karen Aguilera, Legislative Committee Chair

I am pleased to have the opportunity to serve as chair of the legislative committee for OSHA. The legislature in 2012 will meet for a brief 35-day session, during which our state senators and representatives will consider major changes in how health care is coordinated and delivered in Oregon.

The Oregon Health Authority is currently developing criteria for Community Care Organizations (CCOs) as part of the state's health care reform initiative, intended to focus on prevention, improve coordination of care and health care equity, reduce waste, and help control health care costs. Local control, global budgets with shared savings, primary care health homes, and performance measurement will be key components of Oregon's health care transformation. These changes are expected to begin with OHP clients and persons who are enrolled in both the Medicare and Medicaid programs. Eventually, the CCO model is expected to be extended to other insured groups, including public employees and Oregon educators.

It will be critical as these efforts unfold that speech-language pathologists and audiologists be involved and informed, in order to have a voice in helping to shape the future of health care in the state and to ensure accessibility to our services for those who need them. OSHA members can become involved and learn more about Oregon's health care transformation efforts by visiting www.health.oregon.gov

During the 2011 legislative session, OSHA took a "neutral" position on SB555, the bill directing insurance companies to cover services that are deemed medically necessary, including ABA, for individuals with Autism Spectrum Disorders. The bill failed to pass out of committee due to cost concerns and the budgetary climate of the 2011 legislature. Proponents of the bill have regrouped and are meeting on an ongoing basis with various supporters and stakeholders in an attempt to develop a new "autism" bill that will have reduced cost estimates; there is a possibility that the bill will be introduced in the 2012 short session.

The OSHA legislative committee has been involved in these discussions during the past several months. The current draft of the bill is intended to provide improved access to and coverage for medically necessary services to individuals with ASD, and it also contains language to include coverage for other developmental delays and disorders. In addition to reimbursement for ABA, the present draft mandates insurance coverage for speech-language therapy that includes coverage for the services of SLPAs. OSHA has been advocating for provisions in the bill that will establish adequate minimum training and qualifications and state regulation and oversight of ABA providers and their "line therapists", in order to ensure fundamental consumer protection for this vulnerable client population.

These are exciting and challenging times, and there are substantial changes on the horizon that could have a significant impact on speech-language pathologists and audiologists in Oregon. I look forward to hearing from OSHA members on these issues or others that arise during the upcoming legislative session that may be of concern to the professions. If you have input or would like to lend your talents to the work of the legislative committee, please do not hesitate to contact me at kaguilera@kidtalkoregon.org.

OSHA Newsletter Invites Your Contributions!

Please help inform, educate, entertain and inspire our professional community by submitting an article to the OSHA Newsletter. Possible categories include "Where I Work" (clinicians write about their place of work), "Clinical Focus" (ideas about a technique, game or strategy), "Anecdotes" (humorous, poignant, food for thought) and "Unsung Heroes". Submissions can be emailed to Daniela DeYoung (deyoungd@reed.edu) or Yael Webber (yaelw@artzcenter.org) and should be received by February 3rd to be included in our upcoming issue.



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Universal Licensure Update

John Tracy and Wendy Gunter

At the Saturday lunch at the OSHA conference, the following information was shared to update the membership on universal licensure:

What are we talking about?

Consolidating speech-language pathology licensure in the state of Oregon. Currently, the Oregon Board of Examiners of Speech Pathology and Audiology (BSPA) has the authority to license all speech-language pathologists (SLPs) but allows for Teachers Standards and Practices Commission (TSPC) to license certain SLPs through an exemption in the Oregon Revised Statutes (ORS). ORS 681.230(2) states these SLPs must hold a valid teaching license with a communication disorders endorsement issued by TSPC and be employed by an ESD, school district, or charter school.

Why is the Oregon Speech-Language-Hearing-Association (OSHA) talking about universal licensure for SLPs?

In 2009, TSPC began considering “getting out of the business of licensing SLPs.” The OSHA Board decided that, as the ASHA-recognized professional association for the state of Oregon, it was our role to determine OSHA’s position, if any, on the issue of universal licensure. This fits with OSHA’s mission statement to facilitate advocacy for the professions by supporting the collective professional interests of the Association’s members and empowering members to improve clinical services by enhancing and maintaining the highest level of knowledge and skills.

What is OSHA’s position regarding universal licensure?

The OSHA executive board met on July 21, 2011 and agreed on a position supporting investigation into universal licensure and moving towards a process of license consolidation.

How did the OSHA Board come to this conclusion?

Primarily through two volunteer ad hoc committees formed specifically to investigate this issue and work with stakeholders: Professional Standards Review Committee and Educational Liaison Committee. Both committees submitted reports that can be reviewed on the OSHA website. Multiple means were used for eliciting OSHA member feedback, including Town Hall meetings held across the state during summer 2010 and moderated round table discussions at the fall 2010 OSHA conference.

Members then completed a worksheet at the conference in groups of 10 to give input regarding a transition plan to universal licensure. Tallied responses for highlighted questions and general impressions are:

- 1. Should passing the Praxis examination be required to obtain a BSPA license for those holding a TSPC license in Communication Disorders?*
Yes: 3
No: 6
Total responses: 14
- 2. Should completion of college courses be a requirement for BSPA licensure for those with TSPC-only licensure?*
Yes: 1
No: 5
Total responses: 13
- 3. Should those with TSPC-only license be awarded a BSPA license after passing an observation by a seasoned clinician?*
Yes: 4
No: 2
Total responses: 14

There were 7 comments that indicated being in favor of universal licensure. Out of a total of 145 SLPs participating in the survey, 127 held the BSPA license, while 18 (or 12%) held TSPC-only license.

Based on comments on the worksheets and discussions at other OSHA-sponsored events, here are some frequently asked questions regarding universal licensure:

Without a teaching license from TSPC, can an SLP with BSPA-only license still case-manage students on IEPs?

Yes. There are currently school-based SLPs in Oregon who fill all the roles and responsibilities required for the job who hold only BSPA licensure.

Without a teaching license from TSPC, can an SLP with BSPA-only license and the prerequisite amount of experience in the schools as an SLP be eligible to earn a public school administrator’s license after completing the required administrator training program?

Yes. We are aware of a recent case in which an administrator’s license was granted because the experience in the educational setting had been met.

Would having a BSPA-only license require a SLP in the schools to be a member of the classified union, or lose union representation altogether?

No. The OSHA ad hoc Professional Standards Review Committee submitted in their July 6, 2010 report that, "There are 186 bargaining agreements in the state relating to licensed professionals in the schools. None have been brought to our attention at this time as to limiting involvement of district employees based on license held." Monica Smith, Bargaining Coordinator at Oregon Education Association notes in an e-mail, "I wouldn't expect to find contracts that explicitly exclude professional employees who are not TSPC licensed because those employees are appropriately included in the same bargaining unit as licensed teachers, according to ERB and the PECBA."

What are the differences in cost between a TSPC license and a BSPA license?

As was pointed out by more than one member at the summer 2010 OSHA Roundtables regarding universal licensure, a straight comparison is difficult. For example, university graduates currently have the cost of additional examinations in order to qualify for initial licensure. Also, many SLPs on a particular type of TSPC license are required to take graduate courses for TSPC license renewal, which can be expensive if it is not reimbursed by their school districts. *See the chart below for a cost comparison of the two licenses.*

If I want to move and have the BSPA license, would that be honored by school districts in other states?

States vary in the ways they license SLPs. Two states in

the union still do not have any type of SLP licensure, while others have universal licensure or a health board. In general, proof of ASHA CCCs is the easiest way to get a license to practice in most states.

If the Communication Disorders/Speech Impaired licenses are eliminated by TSPC, will I lose my other endorsements, such as that in Reading?

If you do not renew your TSPC license, then yes, you would lose the other endorsements you earned as well.

If all school SLPs go to a universal license, does that mean we will only be able to work with students receiving speech and language as a related service? If so, who will provide services to those students for whom communication is the primary disabling condition?

All speech-language pathologists receive the same core education and training in our university systems, regardless of which license(s) we decide to hold. A BSPA-licensed SLP is currently able to fulfill the duties of a SLP in the schools, including providing evaluations, treatment, case management, and consultation. In fact, many of us in Oregon are providing services to students who have communication as a primary disability right now!

If you are interested in volunteering to help with the efforts regarding universal licensure or would like to give input regarding the consolidation process, please contact John Tracy at mrjtra@yahoo.com or Wendy Gunter at wendy.gunter@thehellofoundation.com.

REQUIREMENTS	TSPC		BSPA	
	Required	Cost	Required	Cost
Pre-Licensure				
Nat'l. Teacher Exam. Praxis II Test in Speech-Language Pathology	Yes	\$80.00	Yes	\$80.00
Protecting Students and Civil Rights in the Educ. Environment Test	Yes	\$130.00	No	\$0
*National Education Service Essential Skills Test(reading, writing and math)	Yes	\$100.00	No	\$0
Licensure Application Fee	Yes	\$100.00	Yes	\$100.00
Post Licensure/Renewal				
Continuing Education Hours	Yes (125 hours per 5 Yr. renewal cycle)	Variable	Yes (30 hours per 2 Yr. cycle)	Variable
Completion of Graduate Courses for Renewal	?	?	No	\$0
Renewal Fee	Yes (5 Yr. cycle)	\$100.00	Yes (2 Yr. cycle)	\$160.00

*TSPC now uses the Oregon Licensure Assessment: National Education Service Essential Skills Test

Cognitive Rehabilitation and the Oregon Health Plan

Kathy de Domingo, MS, CCC-SLP, FACMPE

For the past five years, a group of professionals affiliated with the Brain Injury Association of Oregon has been involved in advocacy efforts concerning access to cognitive rehabilitation services for Oregonians with acquired brain injury. The group, internally dubbed “The Blues Group”, has been involved in a number of advocacy efforts. These include preparing and presenting testimony during the 2009 and 2011 legislative sessions, presenting on the subject of both evidence based practices and reimbursement issues at multiple professional conferences and, most recently, testifying before the Oregon Health Services Commission. The outcomes have not always been what the group wanted, but as in therapy, incremental progress is still progress. The revisions to the Prioritized List of Health Services, effective 10/1/11, reflect that progress.

Julia Greenfield and Yesenia Gutierrez, attorneys with Disability Rights Oregon, gained a spot on the June

docket before the Health Services Commission. Testimony presented to the group of physicians and public health officials raised 3 questions.

1. Why was the CPT code describing cognitive rehabilitation (97532) removed from the list of authorized codes?
2. What is the definition of medical stability as described in Guideline #6 (the guidelines that allow the reader to interpret allowed services according to the diagnostic group)?
3. Can there be an exception process for persons with acquired brain injury who are no longer receiving inpatient rehabilitation but are still recovering from their injuries and able to benefit from outpatient rehabilitation services?

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Working With a Person Who Stutters in Haiti

Glenn Weybright, M.S., CCC-SLP, BRS-FD

In late April and early May, 2011, I spent 8 days with a medical team helping treat Haitian children and adults in a primary care medical clinic in the village of Gramothe, Haiti, about 15 miles south of Port Au Prince. I was invited by a pediatrician friend and wound up working under close medical supervision as a pharmacy assistant.

I felt called to go but secretly was praying for a chance to use my speech-language pathology skills. That seemed doubtful. I mean, speech therapy is very low on the list of needs of people who walk up to 12 hours to get to the doctor, right? And, even if there was a need, I don’t speak Haitian Creole, right?

Well... At the airport in Port Au Prince, I was singled out to have my luggage searched. From out of nowhere appeared a Haitian woman who reassured me in English that she would stay with me. With her help, I made it though the inspection and discovered she was the director of the orphanage associated with the organization I was going to help (Mountain Top Ministries). She discovered I was an SLP and, stopping dead in her tracks, told me she

had a 26 year old son who stuttered and that he would be at the clinic all week when I was there because he worked with the medical teams as an interpreter and that he spoke English and that he really wanted to work on his speech. Amazing.

So, every lunch hour for five days, this young man and I gobbled our Haitian rice and beans and worked on his speech. As we all know, there is no cure for stuttering; the treatment approach I use is to teach tools for managing the stuttering so that communication can be enhanced.

This young man was ravenous to learn. He practiced thirty minutes or more each night and showed significant improvement at the end of the week. He needs to practice daily to help make his tools more automatic. I am in e-mail contact with him, and at my request the Stuttering Foundation has donated books and a DVD to this young man. At the end of our week together, he said to me, “You came from out of nowhere. You must be from God.” I could have said the same to him.

Cognitive Rehabilitation and the Oregon Health Plan

Continued from page 8

The answer to question number one was simple; review of the billing information showed such low incidence of submitting the code that there did not appear to be a need to maintain the code on the list. As for medical stability - the physicians described it as when a patient is discharged from inpatient care. They also allowed for further discussion and development of the subject that continues as of this writing. While acknowledging that medical stability can have different meanings with different conditions, there was agreement that the best determinant of this is the patient's primary physician.

After presenting on the subject of reimbursement and coding for cognitive rehabilitation over the years, this author has heard from a number of SLPs and occupational therapists that they avoid using the 97532 CPT code for cognitive retraining and opt for other, less controversial codes. In addition, the decision is often guided by the correct coding initiative rules that direct coding combinations and the need to avoid the perception of "unbundling" for the purposes of seeking higher reimbursement from the insurers. For example, when an SLP bills 92507 for a Speech Treatment, 97532 is considered a component code. If both are billed, the insurer's computer edits would read this combination as "unbundling" and would deny payment for the 97532 codes that were billed, even if these were delivered as separate and distinct services on the same date of treatment.

In other instances, the insurer may have a medical policy that describes cognitive rehabilitation as "experimental and investigational" and will therefore not cover this service. In this case, the patient must be informed in advance of delivering the service and written agreement provided to receive and pay for the non-covered service.

Effective 10/1/11 for Oregon Health Plan members, the 97532 CPT code has been restored as a covered code. When reviewing the Prioritized List, beginning on Line 100, one will notice specific ICD-9 CM codes that can be paired with 97532. Examples of this would include 800.01 – 800.02 (Fracture of vault of skull, closed without mention of

intracranial injury), 431 (Intracerebral hemorrhage), and 740 – 742 (Anencephalus and similar anomalies, Spina Bifida, Other congenital anomalies of nervous system). These codes were reviewed by a physiatrist, two SLPs (one who specializes in pediatrics, the other in adults) and an OT, for being reasonable diagnoses for the provision of cognitive rehabilitation services.

This author would also advocate that as a provider, it is best to do your homework with all involved insurers. If your treatment session is focused on areas such as attention and executive function skills, use the 97532 code. If your session includes communication/language skills, then you will need to bill the 92507 code as an all-inclusive code.

Finally, more specific guidelines were provided regarding rehabilitation for persons with acquired brain injury. Survivors who are considered medically stable (i.e., are at least 3 months post acute event and no longer in an in patient setting) could receive up to 6 visits of speech therapy and/or 6 visits of physical or occupational therapy per year. This is an increase from the general allowance of 2 visits per year over the age of 12. For more information on the Oregon Health Plan and the Prioritized List, please check the Oregon Health Authority website at <http://www.oregon.gov/OHA/healthplan/index.shtml>



Past OSHA Presidents attended a breakfast at the 2011 conference in Salem. Pictured above are Historian James Huffman (left) with Past Presidents (clockwise from left back row) Wendy Gunter, Janet Lambert, John Tracy, Don Nelson, Jane Eyre McDonald, Warren Johnson, Lezlie Pearce-Hopper, Ashley Northam, Janet Brockman, Allyson Goodwyn-Craigne, current President Nancy Fulton, and Jennifer Larsen.

Important CE Eligibility Compliance Information

Susan McKey

As of July 1, 2011, individuals must meet at least one of the following conditions in order to be eligible to earn ASHA CEUs:

- ASHA Member (includes Life members and international affiliates)
- ASHA Certificate of Clinical Competence (CCC) Holder
- Licensed by a state or provincial regulatory agency to practice speech-language pathology (SLP) or audiology
- Credentialed by a state regulatory agency to practice SLP or audiology
- Credentialed by a national regulatory agency to practice SLP or audiology
- Engaged in a Clinical Fellowship under supervision of an individual with ASHA CCC
- Currently enrolled in a masters or doctoral program in SLP or audiology

If an attendee at a continuing education event is not an ASHA member or CCC holder but meets any one of the other criteria, the attendee may indicate his or her eligibility on the ASHA Participant form at the course or inform the ASHA Registry of eligibility by completing the web form found at <http://www.asha.org/Forms/CE-Eligibility-Earn-CEU-Form/>. If the attendee does not meet the eligibility criteria, he or she should not fill out the ASHA CEU Participant Form.

Please note: ASHA no longer asks attendees to report their social security numbers, but please be prepared to report your ASHA membership number on the participant form.

Awards for Continuing Education

Yael Webber

The Continuing Education Board (CEB) recently announced the professionals in the state of Oregon who earned an Award for Continuing Education (ACE) from January through March of 2011. As many of you know, individuals may meet the requirements for the ACE by earning 7.0 ASHA CEUs within a 36-month period.

ASHA seeks to encourage professionals to continue lifelong learning and to maintain current knowledge and skills. To facilitate this, ASHA approves providers to offer relevant continuing education activities and recognizes professional participation through the ACE.

Please join OSHA and ASHA in congratulating the following individuals on their accomplishment:

AWARDEE NAME	AWARD PRESENTED	AWARDEE CITY
Megan Baskin	February 2011	Portland
Norma Blomberg	March 2011	Woodburn
Wendy Gunter	March 2011	West Linn
John Hanlan	February 2011	Portland
Dana McSpaden	January 2011	Salem
Janet Murphy	January 2011	Tualatin
Anna Rouse	February 2011	Portland
Katherine Segrin	February 2011	Albany
Paul Willoughby	January 2011	Portland
Marcia Zegar	February 2011	Salem



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TECHNOLOGY:
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**ASSOCIATION
EXECUTIVES:**
John McCulley;
Julie McCulley

OSHA Regions:

Region 1: Clatsop, Columbia, Tillamook, Washington, Yamhill, Polk, Lincoln, and Benton counties.

Region 2: Multnomah, Hood River, Clackamas, Marion, and Linn counties.

Region 3: Lane, Douglas, Coos, Curry, Josephine, Jackson, Klamath, and Lake counties.

Region 4: Wasco, Sherman, Gilliam, Morrow, Umatilla, Union, Wallowa, Jefferson, Wheeler, Grant, Baker, Deschutes, Crook, Harney, and Malheur counties.

Oregon Speech—Language & Hearing Association Newsletter Advertising Rates

Deadlines: Copy must be received by January 7 for Vol. 1, April 1 for Vol. 2, June 15 for Vol. 3, and October 20 for Vol. 4.

Requirements: All ads must be in black and white — Word or PDF format.

Size Options and Cost

Quarterly Newsletter: (8 1/2" x 11" format)

Size	Single Issue	2 Issues	3 Issues	4 Issues
Business Card (3 1/2" x 2")	\$25	\$40	\$60	\$80
1/4 pg (3 1/2" x 4 3/4" vertical)	\$45	\$80	\$120	\$160
1/2 pg (7 1/2" x 4 3/4" horizontal)	\$110	\$200	\$300	\$400
Full Page (8" x 10 1/2")	\$180	\$300	\$450	\$600

The OSHA Newsletter is published 4 times per year: Vol. 1 (early February), Vol. 2 (early May), Vol. 3 (mid July), Vol. 4 (early November).

Has Your Contact Information Changed?

Since OSHA's membership is now all online, you can check and make changes to your account information at any time on OSHA's website: www.oregonspeechandhearing.org. No paper dues notices were sent this year — three reminders were sent by email. Some members found that those emails landed in their spam folder. Please add info@profadminsrv.com to your address book to be sure you will receive any email notices that are generated from the website. Be sure to log in and check that the information (especially your email address) is correct. It is easy to make changes, and if you need help or don't remember your username and password, contact Julie McCulley at 503-370-7019 or julie@profadminsrv.com.