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BOARD OF SPEECH-LANGUAGE PATHOLOGISTS  
AND AUDIOLOGISTS RULES

AS OF JUNE 30, 2021

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DEPARTMENT OF LABOR AND INDUSTRY

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Subchapter 1

Organizational Rule

24.222.101 BOARD ORGANIZATION (1) The Board of Speech-Language Pathologists and Audiologists hereby adopts and incorporates the organizational rules of the Department of Labor and Industry as listed in chapter 1 of this title. (History: 37-15-202, MCA; IMP, 2-4-201, MCA; NEW, Eff. 3/7/76; TRANS, from Dept. of Prof. & Occup. Lic., Ch. 274, L. 1981, Eff. 7/1/81; TRANS, from Commerce, 2004 MAR p. 2284.)

Subchapter 2

Procedural Rules

24.222.201 PROCEDURAL RULES (1) The Board of Speech-Language Pathologists and Audiologists hereby adopts and incorporates the procedural rules of the Department of Labor and Industry as listed in chapter 2 of this title. (History: 37-15-202, MCA; IMP, 2-4-201, MCA; NEW, Eff. 3/7/76; TRANS, from Dept. of Prof. & Occup. Lic., Ch. 274, L. 1981, Eff. 7/1/81; TRANS, from Commerce, 2004 MAR p. 2284.)

24.222.202 PUBLIC PARTICIPATION RULES (1) The Board of Speech-Language Pathologists and Audiologists hereby adopts and incorporates by this reference the public participation rules of the Department of Commerce as listed in chapter 2 of ARM Title 8. (History: 37-15-202, MCA; IMP, 2-3-103, MCA; NEW, 1980 MAR p. 970, Eff. 3/14/80; TRANS, from Dept. of Prof. & Occup. Lic., Ch. 274, L. 1981, Eff. 7/1/81; TRANS, from Commerce, 2004 MAR p. 2284.)



Subchapter 3

Definitions

24.222.301 DEFINITIONS (1) "Asynchronous" means interactive transmission of data occurring bi-directionally in real time and:

(a) when applied to telepractice, not requiring the patient and the provider be available at the same time. Examples of such communication, also known as "store-and-forward" transmission, include e-mails, faxes, recorded video clips, audio files, and virtual technologies and e-learning programs; or

(b) when applied to supervision of aides/assistants, not requiring the aide/assistant supervisor and the aide/assistant be available at the same time. Examples of such communication, also known as "store-and-forward" transmission, include e-mails, faxes, recorded video clips, audio files, and virtual technologies and e-learning programs.

(2) Audiology aides or assistants shall be classified in one of the following categories:

(a) "audiology aide or assistant" means a person meeting the minimum requirements established by the board who performs any of the activities defined under the "practice of audiology" definition of 37-15-102, MCA, under the supervision of a licensed audiologist; and

(b) "industrial audiology aide or assistant" means an audiology aide who conducts pure tone air conduction threshold audiograms for the purpose of industrial hearing tests in addition to other acts and services as provided in the statutes and rules.

(3) "Certificate of clinical competence" means a current certificate issued by the American Speech-Language-Hearing Association (ASHA).

(4) "Professional experience supervisor" means the Montana licensed speech-language pathologist who supervises the holder of a Montana limited license during the supervised professional experience as described in statute and these rules. The professional experience supervisor must have:

(a) a Montana license in good standing; and

(b) been licensed for at least two years, excluding any period of licensure under a limited license.

(5) Speech-language pathology aides/assistants shall be classified in one of the following categories:

(a) "aide/assistant I" means a person who holds an undergraduate degree in communication sciences and disorders or has successfully completed a post-baccalaureate program in communication sciences and disorders; and

(b) "aide/assistant II" means a person who does not hold an undergraduate degree in communication sciences and disorders.

(6) "Supervision of aide/assistant" means observation and guidance by the supervising licensed speech-language pathologist or audiologist while a clinical activity is performed by the speech-language pathology or audiology aide/assistant and may include the following:

(a) observation of a portion of the screening or treatment procedures performed by the aide or assistant;

(b) coaching the aide or assistant; and

(c) modeling for the aide or assistant.

(7) "Synchronous" means interactive transmission of data occurring bi-directionally in real time and:

(a) when applied to telepractice, requiring the patient and the provider be available at the same time. Examples of such communication include videoconferencing, remote control software application, computer applications, e-mail, and self-monitoring/testing model (which refers to the patient who receives the services and provides data to the provider without a facilitator present at the site of the patient); or

(b) when applied to supervision of aides/assistants, requiring the aide/assistant supervisor and the aide/assistant be available at the same time. Examples of such communication include videoconferencing, remote control software application, computer applications, and e-mail. (History: 37-1-131, 37-15-202, 37-15-301, MCA; IMP, 37-1-131, 37-15-102, 37-15-202, 37-15-301, 37-15-303, 37-15-313, MCA; NEW, Eff. 3/7/76; AMD, 1981 MAR p. 363, Eff. 4/17/81; TRANS, from Dept. of Prof. & Occup. Lic., Ch. 274, L. 1981, Eff. 7/1/81; AMD, 1983 MAR p. 274, Eff. 4/1/83; AMD, 1999 MAR p. 408, Eff. 3/12/99; TRANS, from Commerce, 2004 MAR p. 2284; AMD, 2006 MAR p. 2413, Eff. 10/6/06; AMD, 2008 MAR p. 385, Eff. 2/29/08; AMD, 2017 MAR p. 2079, Eff. 11/10/17; AMD, 2018 MAR p. 2306, Eff. 11/17/18.)

Subchapter 4

General Provisions

24.222.401 FEES (1) Fees are payable to the board.

(2) Fees are:

(a) limited license (speech-language pathologist):

(i) application \$ 27

(b) speech-language pathologist:

(i) application 192

(ii) annual renewal of active license 110

(iii) placement of license on inactive status 55

(iv) annual renewal of inactive license 55

(c) audiologist:

(i) application 192

(ii) annual renewal of active license 110

(iii) placement of license on inactive status 55

(iv) annual renewal of inactive license 55

(d) speech-language pathologist and audiologist (dual license):

(i) initial application 192

(ii) annual renewal of active license 110

(iii) placement of license on inactive status 55

(iv) annual renewal of inactive license 55

(e) aide or assistant annual registration 30

(3) Additional standardized fees are specified in ARM 24.101.403.

(History: 37-1-134, 37-15-202, MCA; IMP, 37-1-134, 37-1-141, 37-15-307, MCA; NEW, 2002 MAR p. 3325, Eff. 11/28/02; TRANS, from Commerce, 2004 MAR p. 2284; AMD, 2006 MAR p. 1583, Eff. 7/1/06; AMD, 2006 MAR p. 2413, Eff. 10/6/06; AMD, 2014 MAR p. 3066, Eff. 12/25/14; AMD, 2017 MAR p. 2079, Eff. 11/10/17.)

24.222.402 FEE ABATEMENT (1) The Board of Speech-Language Pathologists and Audiologists adopts and incorporates by reference the fee abatement rule of the Department of Labor and Industry found at ARM 24.101.301.

(History: 37-1-131, 37-15-202, MCA; IMP, 17-2-302, 17-2-303, 37-1-134, MCA; NEW, 2006 MAR p. 2413, Eff. 10/6/06.)

Rule 24.222.403 reserved

24.222.404 BOARD STANDARDS AND POLICY (REPEALED) (History: 37-15-202, MCA; IMP, 37-15-202, MCA; NEW, Eff. 3/7/76; TRANS, from Dept. of Prof. & Occup. Lic., Ch. 274, L. 1981, Eff. 7/1/81; TRANS, from Commerce, 2004 MAR p. 2284; REP, 2017 MAR p. 1401, Eff. 8/19/17.)

24.222.405 NONROUTINE APPLICATIONS (1) For the purpose of processing nonroutine applications, the board incorporates the definitions of routine and nonroutine at ARM 24.101.402 by reference.

(2) Nonroutine applications must be reviewed and approved by the board before a license may be issued. (History: 37-1-131, MCA; IMP, 37-1-101, 37-1-131, MCA; NEW, 2017 MAR p. 1401, Eff. 8/19/17; AMD, 2021 MAR p. 556, Eff. 5/15/21.)

Rule 24.222.406 reserved

24.222.407 APPLICANTS WITH CRIMINAL CONVICTIONS (1) The board incorporates ARM 24.101.406 by reference with no modifications. (History: 37-1-131, MCA; IMP, 37-1-101, 37-1-131, MCA; NEW, 2021 MAR p. 556, Eff. 5/15/21.)

Subchapter 5

Licensing and Scope of Practice

24.222.501 APPLICATIONS FOR LICENSE (REPEALED) (History: 37-1-131, 37-15-202, MCA; IMP, 37-1-101, 37-1-104, MCA; NEW, Eff. 3/7/76; TRANS, from Dept. of Prof. & Occup. Lic., Ch. 274, L. 1981, Eff. 7/1/81; AMD, 1983 MAR p. 274, Eff. 4/1/83; TRANS, from Commerce, 2004 MAR p. 2284; AMD, 2006 MAR p. 2413, Eff. 10/6/06; REP, 2017 MAR p. 1401, Eff. 8/19/17.)

24.222.502 SPEECH-LANGUAGE PATHOLOGIST AND AUDIOLOGIST LICENSES (1) Applicants for licensure must submit a completed application on forms provided by the department, electronically or by paper. Completed applications include appropriate fees and required documentation.

(2) Applicants for speech-language pathologist licensure without a current certificate of clinical competence granted by the American Speech-Language-Hearing Association must:

(a) have a minimum of a master's degree in speech-language pathology or communication disorders from a program accredited by the Council on Academic Accreditation in Audiology and Speech-Language Pathology of the American Speech-Language-Hearing Association or its equivalent. The transcript must be certified and sent directly from the school;

(b) during the graduate degree program, have completed a supervised clinical practicum experience;

(c) following graduation from the post-graduate degree program, have completed a 36-week speech-language pathology supervised professional experience; and

(d) pass examinations as determined by the board in ARM 24.222.510.

(3) Applicants for speech-language pathologist licensure with a current certificate of clinical competence as granted by the American Speech-Language-Hearing Association or its equivalent are deemed to have met the requirements of (2)(a) through (c). These applicants must:

(a) submit proof of the certificate of clinical competence; and

(b) pass the state jurisprudence exam as described in ARM 24.222.510.

(4) Applicants for audiologist licensure must:

(a) have a minimum of a Doctor of Audiology degree (Au.D.) or a Ph.D. in audiology from a program accredited by the Council on Academic Accreditation in Audiology and Speech-Language Pathology of the American Speech-Language-Hearing Association or its equivalent. The transcript must be certified and sent directly from the school; and

(b) pass examinations as determined by the board in ARM 24.222.510.

(5) An audiologist licensed prior to January 1, 2007, who maintains that license in good standing is not required to obtain a doctorate.

(6) Incomplete applications will automatically expire one year from the date the fee was received. If an application expires, the applicant must reapply and pay all appropriate fees. (History: 37-1-131, 37-15-202, 37-15-303, MCA; IMP, 37-1-131, 37-15-301, 37-15-303, MCA; NEW, 2006 MAR p. 2413, Eff. 10/6/06; AMD, 2008 MAR p. 385, Eff. 2/29/08; AMD, 2017 MAR p. 1401, Eff. 8/19/17.)

24.222.503 QUALIFICATIONS FOR ACTIVE TEMPORARY LICENSE

(REPEALED) (History: 37-15-202, MCA; IMP, 37-15-202, MCA; NEW, Eff. 3/7/76; TRANS, from Dept. of Prof. & Occup. Lic., Ch. 274, L. 1981, Eff. 7/1/81; AMD, 1999 MAR p. 2249, Eff. 10/8/99; TRANS, from Commerce, 2004 MAR p. 2284; REP, 2017 MAR p. 1401, Eff. 8/19/17.)

24.222.504 MILITARY TRAINING OR EXPERIENCE (1) Pursuant to 37-1-145, MCA, the board shall accept relevant military training, service, or education toward the requirements for licensure as a speech-language pathologist or audiologist.

(2) Relevant military training, service, or education must be completed by an applicant while a member of either:

- (a) United States Armed Forces;
- (b) United States Reserves;
- (c) state national guard; or
- (d) military reserves.

(3) An applicant must submit satisfactory evidence of receiving military training, service, or education that is equivalent to relevant licensure requirements as a speech-language pathologist or audiologist. Satisfactory evidence includes:

- (a) a copy of the applicant's military discharge document (DD 214 or other discharge documentation);
- (b) a document that clearly shows all relevant training, certification, service, or education the applicant received while in the military, including dates of training and completion or graduation; and
- (c) any other documentation as required by the board.

(4) The board shall consider all documentation received to determine whether an applicant's military training, service, or education is equivalent to relevant licensure requirements. (History: 37-1-145, MCA; IMP, 37-1-145, MCA; NEW, 2014 MAR p. 1266, Eff. 6/13/14; AMD, 2017 MAR p. 1401, Eff. 8/19/17.)

Rule 24.222.505 reserved

24.222.506 LICENSURE OF OUT-OF-STATE APPLICANTS (1) Applicants for licensure as speech-language pathologists or audiologists who are currently licensed in another state or jurisdiction must submit a completed application on forms provided by the department, electronically or by paper. Completed applications include appropriate fees and required documentation.

(2) Applicants must:

(a) hold a current, active license in good standing to practice speech-language pathology or audiology in another state or jurisdiction whose standards at the time of application are substantially equivalent to Montana standards;

(b) have graduated from a program accredited by the Council on Academic Accreditation in Audiology and Speech-Language Pathology of the American Speech-Language-Hearing Association or its equivalent. The transcript must be certified and sent directly from the school;

(c) have passed the national exam as described in ARM 24.222.510; and

(d) pass the state jurisprudence exam as described in ARM 24.222.510.

(3) Applicants with a current certificate of clinical competence as granted by the American Speech-Language-Hearing Association or its equivalent will be deemed to have met the requirements of (2)(b) and (c) by submitting proof of a current certificate of clinical competence.

(4) An audiologist currently licensed in another state or jurisdiction who was granted that license prior to January 1, 2007, will not be required to obtain a doctorate to qualify for licensure to practice audiology in Montana if the license was issued under standards substantially equivalent to current standards in Montana.

(5) Incomplete applications will automatically expire one year from the date the fee was received. If an application expires, the applicant must reapply and pay all appropriate fees. (History: 37-1-131, MCA; IMP, 37-1-304, MCA; NEW, 1996 MAR p. 2976, Eff. 11/8/96; TRANS, from Commerce, 2004 MAR p. 2284; AMD, 2006 MAR p. 2413, Eff. 10/6/06; AMD, 2008 MAR p. 385, Eff. 2/29/08; AMD, 2017 MAR p. 1401, Eff. 8/19/17.)

24.222.507 TEMPORARY PRACTICE PERMITS (REPEALED) (History: 37-1-319, 37-15-202, MCA; IMP, 37-1-305, MCA; NEW, 1996 MAR p. 2976, Eff. 11/8/96; TRANS, from Commerce, 2004 MAR p. 2284; AMD, 2008 MAR p. 385, Eff. 2/29/08; REP, 2017 MAR p. 1401, Eff. 8/19/17.)

24.222.508 LIMITED LICENSES (1) A limited license permits an individual to complete a supervised professional experience as described in ARM 24.222.509 in order to meet requirements for licensure as a speech-language pathologist.

(2) Applicants for limited licensure must submit a completed application on forms provided by the department, electronically or by paper. Completed applications include appropriate fees and required documentation.

(3) Applicants for limited licensure must:

(a) have a minimum of a master's degree in speech-language pathology or communication disorders from a program accredited by the Council on Academic Accreditation in Audiology and Speech-Language Pathology of American Speech-Language Hearing Association or its equivalent. The transcript must be certified and sent directly from the school;

(b) during the graduate degree program, have completed a supervised clinical practicum experience;

(c) pass examinations as determined by the board in ARM 24.222.510; and

(d) have a professional experience supervisor as defined in these rules.

(4) Limited licenses expire two years from the date issued and are not renewable. If a limited license expires and the supervised professional experience is not completed, the person must reapply for another limited license. (History: 37-1-131, 37-15-202, 37-15-301, 37-15-302, 37-15-303, 37-15-307, MCA; IMP, 37-1-131, 37-15-301, 37-15-303, MCA; NEW, 2017 MAR p. 2079, Eff. 11/10/17.)

24.222.509 SUPERVISED PROFESSIONAL EXPERIENCE (1) A limited licensee may perform all duties and functions of a licensed speech-language pathologist while engaged in a supervised professional experience.

(2) A Montana supervised professional experience must:

(a) be a minimum of 36 weeks totaling no less than 1260 hours. A minimum of 1008 of the total 1260 hours must be in direct client contact, which includes, but is not limited to:

(i) assessment;

(ii) diagnosis;

(iii) evaluation;

(iv) screening;

(v) treatment;

(vi) report writing; and

(vii) family/client consultation.

(3) The limited licensee and professional experience supervisor must both notify the board ten days prior to any change in supervisor.

(4) Per ARM 24.222.2301, the supervisor may be subject to disciplinary action for failure to adequately supervise the limited licensee. (History: 37-1-131, 37-15-202, 37-15-301, 37-15-303, MCA; IMP, 37-1-131, 37-15-301, 37-15-303, MCA; NEW, 2017 MAR p. 2079, Eff. 11/10/17.)



24.222.510 EXAMINATIONS (1) Speech-language pathologist and audiologist applicants must pass the following examinations:

(a) the national Praxis exams in speech-language pathology or audiology or their equivalents. Test results must be sent directly to the board from the testing agency; and

(b) a jurisprudence examination prescribed by the board covering the statutes and rules governing the practice of speech-language pathology and audiology in Montana.

(2) The jurisprudence examination must be passed with a score of 80 percent or greater. Any applicant who fails the jurisprudence examination may retake the examination. (History: 37-1-131, 37-15-202, MCA; IMP, 37-1-131, 37-15-303, MCA; NEW, Eff. 3/7/76; TRANS, from Dept. of Prof. & Occup. Lic., Ch. 274, L. 1981, Eff. 7/1/81; AMD, 1989 MAR p. 2194, Eff. 12/22/89; AMD, 1998 MAR p. 2165, Eff. 8/14/98; TRANS, from Commerce, 2004 MAR p. 2284; AMD, 2006 MAR p. 2413, Eff. 10/6/06; AMD, 2017 MAR p. 1401, Eff. 8/19/17.)

24.222.511 PASS/FAIL CRITERIA (REPEALED) (History: 37-15-202, MCA; IMP, 37-15-304, MCA; NEW, Eff. 3/7/76; TRANS, from Dept. of Prof. & Occup. Lic., Ch. 274, L. 1981, Eff. 7/1/81; TRANS, from Commerce, 2004 MAR p. 2284; REP, 2006 MAR p. 2413, Eff. 10/6/06.)

24.222.512 WAIVER OF EXAMINATION (REPEALED) (History: 37-15-202, MCA; IMP, 37-15-305, MCA; NEW, Eff. 3/7/76; TRANS, from Dept. of Prof. & Occup. Lic., Ch. 274, L. 1981, Eff. 7/1/81; TRANS, from Commerce, 2004 MAR p. 2284; REP, 2006 MAR p. 2413, Eff. 10/6/06.)

24.222.513 INACTIVE STATUS AND CONVERSION TO ACTIVE STATUS

(1) A licensee may place the license on inactive status by paying the appropriate fee and either:

- (a) indicating on the renewal form that inactive status is desired; or
- (b) informing the board office in writing.

(2) The inactive licensee shall:

- (a) renew annually; and
- (b) keep the board informed as to any change of address during the inactive status period.

(3) A licensee shall not practice speech-language pathology or audiology in Montana while on inactive status.

(4) Upon application and payment of the appropriate fee, the board may consider an application to convert an inactive status license to an active status license if the applicant:

(a) signifies to the board, in writing, that upon conversion to an active license, the applicant intends to actively practice in Montana;

(b) presents satisfactory evidence that the applicant has attended ten hours of continuing education which comply with the continuing education rules of the board for each year or portion of a year that applicant has been inactive;

(c) submits license verification from all jurisdictions where the applicant is licensed or has held a license during the inactive status period, documenting that the applicant is either:

(i) in good standing and has not had any disciplinary action taken against the applicant's license; or

(ii) if not in good standing, an explanation of the violation(s) resulting in that status, including the extent of the disciplinary action imposed; and

(d) presents satisfactory evidence the applicant has not been out of active practice for more than five years. (History: 37-1-131, 37-1-319, 37-15-202, MCA; IMP, 37-1-319, MCA; NEW, 1996 MAR p. 2976, Eff. 11/8/96; TRANS, from Commerce, 2004 MAR p. 2284; AMD, 2006 MAR p. 2413, Eff. 10/6/06.)

24.222.514 LICENSE RENEWAL (REPEALED) (History: 37-1-131, 37-15-202, MCA; IMP, 37-1-141, MCA; NEW, 2006 MAR p. 2413, Eff. 10/6/06; REP, 2018 MAR p. 2306, Eff. 11/17/18.)

Rules 24.222.515 through 24.222.519 reserved

24.222.520 SPEECH-LANGUAGE PATHOLOGY SCOPE OF PRACTICE

- (1) The scope of practice of speech-language pathology includes but is not limited to:
- (a) screening, identification, assessment, treatment, intervention, and provision of follow-up services for disorders of:
    - (i) speech, including articulation, phonology, fluency, and voice;
    - (ii) language, including morphology, syntax, semantics, pragmatics, and disorders of receptive and expressive communication in oral, written, graphic, and manual modalities;
    - (iii) oral and pharyngeal functions, including disorders of swallowing and feeding;
    - (iv) cognitive aspects of communication; and
    - (v) social aspects of communication;
  - (b) determination of the need for augmentative communications systems and provision of training in the use of these systems;
  - (c) planning, directing, and conducting or supervising programs that render or offer to render a service in speech-language pathology;
  - (d) provision of nondiagnostic pure-tone testing, tympanometry, and acoustic reflex screening, limited to a pass/fail determination;
  - (e) aural rehabilitation, including services and procedures for facilitating adequate receptive and expressive communication in individuals with hearing impairments;
  - (f) oral motor rehabilitation, including services and procedures for evaluating and facilitating face, lip, jaw, and tongue mobility and control;
  - (g) cognitive retraining, including services and procedures for evaluating and facilitating memory, attention, reasoning, processing, judgment, and other related areas in individuals with language impairment resulting from head injury, stroke, or other insult;
  - (h) dysphagia therapy, including services and procedures for evaluating and facilitating swallowing and feeding in those individuals with swallowing disorders;

(i) consultation to educators, parents, and related service providers as members of interdisciplinary teams about communication management and educational implications of speech/language disorders;

(j) education to the general public as a means of prevention;

(k) designing and conducting basic and applied speech-language pathology research, and the dissemination of research findings to other professionals and to the public, to:

(i) increase the knowledge base;

(ii) develop new methods and programs; and

(iii) determine the efficacy of assessment and treatment paradigms;

(l) education and administration in speech-language pathology (communication disorders) graduate and professional education programs; and

(m) administration and supervision of professional and technical personnel who provide support functions to the practice of speech-language pathology.

(History: 37-1-131, 37-15-202, MCA; IMP, 37-15-102, MCA; NEW, 2006 MAR p. 2413, Eff. 10/6/06.)

Rules 24.222.521 through 24.222.524 reserved

24.222.525 AUDIOLOGY SCOPE OF PRACTICE (1) The scope of practice of audiology includes but is not limited to:

- (a) identification, assessment, management, and interpretation of auditory/vestibular disorders;
- (b) otoscopic examination and external ear canal management for removal of cerumen in order to:
  - (i) evaluate auditory/vestibular disorders;
  - (ii) make ear impressions;
  - (iii) fit hearing protection or prosthetic devices; and
  - (iv) monitor the continuous use of hearing aids;
- (c) administration and interpretation of behavioral, electroacoustic, or electrophysiologic methods used to assess auditory/vestibular disorders;
- (d) evaluation and management of children and adults with auditory processing disorders;
- (e) supervising and conducting newborn screening programs;
- (f) measurement and interpretation of sensory and motor evoked potentials, electromyography, and other electrodiagnostic tests for purposes of neurophysiologic intraoperative monitoring;
- (g) provision of hearing care by selecting, evaluating, fitting, facilitating, adjustment to, and dispensing prosthetic devices for hearing loss, including:
  - (i) hearing aids;
  - (ii) sensory aids;
  - (iii) hearing assistive devices;
  - (iv) alerting and telecommunication systems; and
  - (v) captioning devices;
- (h) assessment of candidacy of persons with hearing loss for cochlear implants and provision of fitting, and audiological rehabilitation to optimize device use;
  - (i) provision of audiological rehabilitation including:
    - (i) speech reading;
    - (ii) communication management;
    - (iii) language development;
    - (iv) auditory skill development; and
    - (v) counseling for psychosocial adjustment to hearing loss for persons with hearing loss, their families, and care givers;
  - (j) consultation to educators as members of interdisciplinary teams about communication management, educational implications, classroom acoustics, and large-area amplification systems for children with hearing loss;

- (k) prevention of hearing loss and conservation of hearing function by designing, implementation, and coordinating occupational, school, and community hearing conservation and identification programs;
- (l) consultation and provision of rehabilitation of persons with balance disorders using habituation, exercise therapy, and balance retraining;
- (m) designing and conducting basic and applied audiologic research, and disseminating research findings to other professionals and to the public, to:
  - (i) increase the knowledge base;
  - (ii) develop new methods and programs; and
  - (iii) determine the efficacy of assessment and treatment paradigms;
- (n) education and administration in audiology graduate and professional education programs;
- (o) measurement of functional outcomes, consumer satisfaction, effectiveness, efficiency, and cost-benefit of practices and programs to maintain and improve the quality of audiological services;
- (p) administration and supervision of professional and technical personnel who provide support functions to the practice of audiology;
- (q) screening of speech-language, use of sign language, and other factors affecting communication function for the purposes of an audiological evaluation or initial identification of individuals at risk for other communication disorders;
- (r) consultation about accessibility for persons with hearing loss in public and private buildings, programs, and services;
- (s) assessment and nonmedical management of tinnitus using:
  - (i) biofeedback;
  - (ii) masking;
  - (iii) habituation;
  - (iv) hearing aids;
  - (v) education; and
  - (vi) counseling;
- (t) consultation to individuals, public and private agencies, and governmental bodies, or as an expert witness regarding legal interpretations of audiology findings, effects of auditory/vestibular disorders, and relevant noise related considerations;
- (u) case management and service as a liaison for consumers, families, and agencies in order to monitor audiologic status and management and to make recommendations about educational and vocational programming; and
- (v) consultation to industry on the development of products and instrumentation related to the management of auditory/vestibular function. (History: 37-1-131, 37-15-202, MCA; IMP, 37-15-102, MCA; NEW, 2006 MAR p. 2413, Eff. 10/6/06.)

Subchapter 6 reserved

Subchapter 7

Aides/Assistants

24.222.701 GENERAL REGISTRATION AND AIDE/ASSISTANT

SUPERVISION REQUIREMENTS (1) Per 37-15-313, MCA, speech-language pathology aides/assistants must work directly under the supervision of a Montana-licensed speech-language pathologist. Audiology aides/assistants must work directly under the supervision of a Montana-licensed audiologist.

(2) The aide/assistant supervisor assumes full legal and ethical responsibility for the tasks performed by the aide/assistant and for any services or related interactions with a client.

(3) Aide/assistant supervisors are required to provide at least ten percent of the services to each individual client.

(4) In order to supervise, aide/assistant supervisors must have been licensed in Montana or another state or jurisdiction for at least one full year.

(5) No aide/assistant supervisor may supervise more than three full-time-equivalent aides/assistants.

(6) The aide/assistant supervisor must register aides/assistants annually per 37-15-313, MCA. The annual registration period is September 1 through October 31.

(7) As deemed appropriate by the aide/assistant supervisor, aides/assistants who are not supervised on-site may be supervised using asynchronous and synchronous methods as defined in ARM 24.222.301.

(8) Aide/assistant supervisors shall:

(a) ensure the aides/assistants are adequately trained and educated for the tasks they will perform. The amount and type of training required must be based on:

(i) skills and experience of the aide/assistant;

(ii) needs of the patients/clients served;

(iii) service setting;

(iv) tasks assigned; and

(v) any other factors as determined by the aide/assistant supervisor; and

(b) maintain appropriate records regarding aide/assistant activities, including, but not limited to services and related client interactions. (History: 37-1-131, 37-15-202, MCA; IMP, 37-1-131, 37-15-102, 37-15-313, MCA; NEW, 1981 MAR p. 363, Eff. 4/17/81; TRANS, from Dept. of Prof. & Occup. Lic., Ch. 274, L. 1981, Eff. 7/1/81; AMD, 1983 MAR p. 274, Eff. 4/1/83; AMD, 1989 MAR p. 2194, Eff. 12/22/89; AMD, 1999 MAR p. 408, Eff. 3/12/99; TRANS, from Commerce, 2004 MAR p. 2284; AMD, 2006 MAR p. 2413, Eff. 10/6/06; AMD, 2008 MAR p. 385, Eff. 2/29/08; AMD, 2013 MAR p. 1833, Eff. 10/18/13; AMD, 2018 MAR p. 2306, Eff. 11/17/18.)

24.222.702 SCHEDULE OF SUPERVISION - CONTENTS (REPEALED)

(History: 37-1-131, 37-15-202, MCA; IMP, 37-15-102, 37-15-313, MCA; NEW, 1981 MAR p. 363, Eff. 4/17/81; TRANS, from Dept. of Prof. & Occup. Lic., Ch. 274, L. 1981, Eff. 7/1/81; AMD, 1989 MAR p. 2194, Eff. 12/22/89; AMD, 1994 MAR p. 1992, Eff. 7/22/94; AMD, 1998 MAR p. 2165, Eff. 8/14/98; AMD, 1999 MAR p. 408, Eff. 3/12/99; TRANS, from Commerce, 2004 MAR p. 2284; AMD, 2006 MAR p. 2413, Eff. 10/6/06; AMD, 2008 MAR p. 385, Eff. 2/29/08; AMD, 2013 MAR p. 1833, Eff. 10/18/13; REP, 2018 MAR p. 2306, Eff. 11/17/18.)

24.222.703 PROHIBITED SERVICES – SPEECH-LANGUAGE

PATHOLOGY AIDES/ASSISTANTS (1) Speech-language pathology aides/assistants are not allowed to provide telepractice services per 37-15-314, MCA.

(2) Speech-language pathology aides/assistants I are not allowed to:

(a) refer clients to outside professionals; or

(b) perform diagnostic evaluations under supervision unless the

aide/assistant has:

(i) completed 100 graduate-level clinical clock hours, of which at least 25 hours were diagnostic; or

(ii) completed ten semester hours of graduate credits in the professional area.

(3) Speech-language pathology aides/assistants II are not allowed to:

(a) conduct speech-language evaluations;

(b) interpret data or clinical experience into diagnostic statements of clinical management policies;

(c) transmit clinical information, except to the aide/assistant supervisor;

(d) determine the selection of cases;

(e) write or plan individual or group therapy/rehabilitation plans;

(f) attend child study or individualized education plan (IEP) meetings without the permission of the aide/assistant supervisor; or

(g) refer clients to outside professionals. (History: 37-1-131, 37-15-202, MCA; IMP, 37-1-131, 37-15-102, 37-15-313, 37-15-314, MCA; NEW, 1981 MAR p. 363, Eff. 4/17/81; TRANS, from Dept. of Prof. & Occup. Lic., Ch. 274, L. 1981, Eff. 7/1/81; AMD, 1989 MAR p. 1566, Eff. 10/13/89; AMD, 1993 MAR p. 2913, Eff. 12/10/93; AMD, 1996 MAR p. 2976, Eff. 11/8/96; AMD, 1999 MAR p. 408, Eff. 3/12/99; TRANS, from Commerce, 2004 MAR p. 2284; AMD, 2006 MAR p. 2413, Eff. 10/6/06; AMD, 2008 MAR p. 385, Eff. 2/29/08; AMD, 2013 MAR p. 1833, Eff. 10/18/13; AMD, 2018 MAR p. 2306, Eff. 11/17/18.)

24.222.704 UNLICENSED INDIVIDUALS (REPEALED) (History: 37-15-

202, MCA; IMP, 37-15-313, MCA; NEW, 1999 MAR p. 2249, Eff. 10/8/99; TRANS, from Commerce, 2004 MAR p. 2284; REP, 2006 MAR p. 2413, Eff. 10/6/06.)

Rule 24.222.705 reserved



24.222.706 PROHIBITED SERVICES – AUDIOLOGY AIDES/ASSISTANTS

- (1) Audiology aides/assistants are not allowed to provide telepractice services per 37-15-314, MCA.
- (2) Audiology aides/assistants are not allowed to:
- (a) perform any task without the expressed knowledge and approval of the aide/assistant supervisor;
  - (b) determine case selection or evaluation protocols;
  - (c) interpret observations or data into diagnostic statements of clinical management strategies or procedures;
  - (d) participate in team or case conferences, or any interdisciplinary team, without the presence of the aide/assistant supervisor or an audiologist designated by the aide/assistant supervisor;
  - (e) write, develop, or modify a patient's individualized treatment plan;
  - (f) assist with patients without following the treatment plan prepared by the aide/assistant supervisor;
  - (g) compose or sign any formal documents (e.g., treatment plans, reimbursement forms, or reports);
  - (h) transmit clinical information either orally or in writing to anyone, including the patient, except at the direction of the aide/assistant supervisor;
  - (i) select patients for treatment services or discharge patients from treatment services;
  - (j) disclose clinical or confidential information either orally or in writing to anyone other than the aide/assistant supervisor, except at the direction of the aide/assistant supervisor;
  - (k) counsel or consult with the patient, family, or others regarding the patient status or service, or make referrals for additional services, except at the direction of the aide/assistant supervisor;
  - (l) make ear impressions;
  - (m) fit hearing aids or other amplification devices;
  - (n) map cochlear implants; or
  - (o) write progress notes that are not cosigned by the aide/assistant supervisor.
- (3) Audiology and industrial audiology aides/assistants shall comply with the supervision plan and functions submitted by the aide/assistant supervisor at the time of application, and with all other statutory or rule requirements. (History: 37-1-131, 37-15-202, MCA; IMP, 37-1-131, 37-15-102, 37-15-313, 37-15-314, MCA; NEW, 2013 MAR p. 1833, Eff. 10/18/13; AMD, 2018 MAR p. 2306, Eff. 11/17/18.)

Subchapter 8 reserved

Subchapter 9

Telepractice Standards

24.222.901 DEFINITIONS (REPEALED) (History: 37-1-131, 37-15-202, MCA; IMP, 37-1-131, 37-15-102, 37-15-202, 37-15-314, 37-15-315, MCA; NEW, 2014 MAR p. 1266, Eff. 6/13/14; REP, 2018 MAR p. 2306, Eff. 11/17/18.)

Rules 24.222.902 and 24.222.903 reserved

24.222.904 PROVISION OF TELEPRACTICE SERVICES (1) The provision of speech-language pathology or audiology services in this state through telepractice, regardless of the physical location of the speech-language pathologist or audiologist, constitutes the practice of speech-language pathology or audiology and is subject to state licensure requirements and regulation by the board. (History: 37-1-131, 37-15-202, MCA; IMP, 37-1-131, 37-15-102, 37-15-202, 37-15-314, 37-15-315, MCA; NEW, 2014 MAR p. 1266, Eff. 6/13/14.)

Rules 24.222.905 and 24.222.906 reserved

24.222.907 LIMITS ON TELEPRACTICE (1) Except as provided in 37-15-103(5), MCA, no person licensed as a speech-language pathologist or audiologist in another state may engage in the practice of speech-language pathology or audiology in Montana, including telepractice services, unless a license to practice has been issued in Montana.

(2) All telepractitioners must abide by any statute or rule of this state governing the maintenance of patient records and patient confidentiality, regardless of the state where the records are maintained. (History: 37-1-131, 37-15-202, MCA; IMP, 37-1-131, 37-15-102, 37-15-202, 37-15-314, 37-15-315, MCA; NEW, 2014 MAR p. 1266, Eff. 6/13/14.)

Rules 24.222.908 and 24.222.909 reserved

24.222.910 DELIVERY OF TELEPRACTICE SERVICES (1) Telepractice services may be delivered using asynchronous and synchronous methods as defined in ARM 24.222.301.

(2) Live versus stored data refers to the actual data transmitted during the telepractice. Live, real time, and stored clinical data may be included during the telepractice. (History: 37-1-131, 37-15-202, MCA; IMP, 37-1-131, 37-15-102, 37-15-202, 37-15-314, 37-15-315, MCA; NEW, 2014 MAR p. 1266, Eff. 6/13/14; AMD, 2018 MAR p. 2306, Eff. 11/17/18.)

Rules 24.222.911 and 24.222.912 reserved

24.222.913 QUALITY OF TELEPRACTICE SERVICES (1) Elements of quality assurance include the competency of licensees, selection of patients, appropriateness of technology to the service being delivered, identification of appropriate outcome measures, collection of data, and satisfaction of the patient, caregiver, and provider.

(2) Telepractice services must conform to professional standards, including all appropriate and applicable codes of ethics.

(3) Licensees shall not engage in false, misleading, or deceptive advertising of telepractice services.

(4) Telepractice services may not be provided solely by correspondence, e.g., mail, e-mail, and faxes, although such may be adjuncts to telepractice.

(5) Licensees shall engage in only those aspects of the professions that are within the scope of their competence, considering their level of education, training, and experience.

(6) Telepractice services must be in compliance with safety and infection control policies and procedures. (History: 37-1-131, 37-15-202, MCA; IMP, 37-1-131, 37-15-102, 37-15-202, 37-15-314, 37-15-315, MCA; NEW, 2014 MAR p. 1266, Eff. 6/13/14.)

Rules 24.222.914 and 24.222.915 reserved

24.222.916 ESTABLISHING THE PRACTITIONER-PATIENT RELATIONSHIP (1) A practitioner-patient relationship may commence via telepractice following a practitioner's evaluation of the prospective patient to assess the patient's:

(a) need for services; and

(b) candidacy for telepractice, including behavioral, physical, and cognitive abilities to participate in telepractice services.

(2) Prior to initiating services, a speech-language pathologist or audiologist shall:

(a) make reasonable attempts to verify the identity of the patient;

(b) obtain alternative means of contacting the patient other than electronically;

(c) provide to the patient alternative means of contacting the licensee other than electronically;

(d) document whether the patient has the necessary knowledge and skills to benefit from the type of telepractice provided by the licensee;

(e) determine the availability of a facilitator, if needed, with the necessary level of training to assist at the patient's location;

(f) provide orientation and training to the patient in the use of telepractice equipment and the telepractice protocol at an appropriate level for the patient; and

(g) inform the patient in writing of the following:

- (i) the limitations of using technology in the provision of telepractice;
- (ii) the potential risks to the confidentiality of information due to technology used in telepractice;
- (iii) the potential risks of disruption in the use of telepractice;
- (iv) when and how the licensee will respond to routine electronic messages;
- (v) in what circumstances the licensee will use alternative communications for emergency purposes;
- (vi) who else may have access to patient communications with the licensee;
- (vii) how communications can be directed to a specific licensee;
- (viii) how the licensee stores electronic communications from the patient; and
- (ix) that the licensee may elect to discontinue the provision of telepractice services.

(3) The written document required by (2)(g) shall be signed by both the licensee and the patient and maintained in the clinical record. If the patient is a minor, the document shall be signed by the patient's parent or guardian. (History: 37-1-131, 37-15-202, MCA; IMP, 37-1-131, 37-15-102, 37-15-202, 37-15-314, 37-15-315, MCA; NEW, 2014 MAR p. 1266, Eff. 6/13/14; AMD, 2017 MAR p. 1401, Eff. 8/19/17.)

Rules 24.222.917 through 24.222.919 reserved

24.222.920 COMPETENCE – PRACTICE LIMITS – MAINTENANCE AND RETENTION OF RECORDS (1) A licensee using telepractice to deliver services shall:

- (a) limit telepractice services to the licensee's scope of practice;
- (b) maintain continuing competency or associate with a group who has experience in telepractice delivery of care;
- (c) use methods for protecting health information that include authentication and encryption technology;
- (d) limit access to protected health information to only those necessary for the provision of services or those required by law; and
- (e) ensure that confidential communications obtained and stored electronically cannot be recovered and accessed by unauthorized persons when the licensee disposes of electronic equipment and data.

(2) A speech-language pathology or audiology aide or assistant may function as a facilitator, but may not provide telepractice services. (History: 37-1-131, 37-15-202, MCA; IMP, 37-1-131, 37-15-102, 37-15-202, 37-15-314, 37-15-315, MCA; NEW, 2014 MAR p. 1266, Eff. 6/13/14; AMD, 2017 MAR p. 1401, Eff. 8/19/17.)

Subchapters 10 through 20 reserved

Subchapter 21

Continuing Education

24.222.2101 POLICY (REPEALED) (History: 37-1-131, 37-1-319, 37-15-202, MCA; IMP, 37-1-131, 37-1-306, MCA; NEW, 1982 MAR p. 378, Eff. 2/26/82; AMD, 1996 MAR p. 2976, Eff. 11/8/96; TRANS, from Commerce, 2004 MAR p. 2284; AMD, 2006 MAR p. 2413, Eff. 10/6/06; REP, 2017 MAR p. 1401, Eff. 8/19/17.)

24.222.2102 CONTINUING EDUCATION – SPEECH-LANGUAGE PATHOLOGISTS AND AUDIOLOGISTS (1) Licensees are required to obtain the following continuing education (CE) hours annually, prior to renewal on February 1. Credit will be granted only for CE completed during the one-year period prior to renewal:

- (a) ten continuing education hours for speech-language pathology or audiology; or
- (b) 15 continuing education hours for dual licensure in speech-language pathology and audiology, with at least five hours each in speech-language pathology and audiology.

(2) Continuing education requirements will not apply until the licensee's first full year of licensure.

(3) Licensees are responsible for selecting quality programs that focus on protecting the health, safety, and welfare of the public and contribute to speech-language pathologists' and audiologists' professional knowledge and competence.

Acceptable CE activities:

- (a) directly relate to the scope of practice of speech-language pathology and audiology as defined in board statutes and rules;
- (b) review existing concepts and techniques;
- (c) convey information beyond the basic professional education;
- (d) update knowledge on advances in speech-language pathology or audiology practices; and/or
- (e) reinforce professional conduct or ethical obligations of the licensee.

(4) All licensees shall affirm an understanding of their recurring duty to comply with CE requirements as part of annual license renewal.

(5) The board will randomly audit up to 50 percent of renewed licensees' CE annually.

(6) All CE must be documented to show proof of completion. The licensee is responsible for maintaining and making CE documentation available upon board request. Documentation must include:

- (a) licensee name;
- (b) presenter or sponsor;
- (c) course title and/or description of content;
- (d) course date(s); and
- (e) number of CE hours earned.

(7) Licensees found to be in noncompliance with CE requirements may be subject to administrative suspension. Licensees may not apply CE hours used to complete delinquent CE requirements for the next education reporting period.

(8) Any CE hours required by disciplinary order do not apply toward the hours that are required annually under this rule. (History: 37-1-131, 37-1-319, MCA; IMP, 37-1-131, 37-1-306, MCA; NEW, 1982 MAR p. 378, Eff. 2/26/82; AMD, 1983 MAR p. 274, Eff. 4/1/83; AMD, 1985 MAR p. 1611, Eff. 11/1/85; AMD, 1989 MAR p. 2194, Eff. 12/22/89; AMD, 1996 MAR p. 2976, Eff. 11/8/96; AMD, 1998 MAR p. 2165, Eff. 8/13/98; AMD, 1999 MAR p. 408, Eff. 3/12/99; TRANS, from Commerce, 2004 MAR p. 2284; AMD, 2006 MAR p. 1583, Eff. 7/1/06; AMD, 2006 MAR p. 2413, Eff. 10/6/06; AMD, 2008 MAR p. 385, Eff. 2/29/08; AMD, 2017 MAR p. 1401, Eff. 8/19/17; AMD, 2018 MAR p. 2306, Eff. 11/17/18.)

24.222.2103 CONTINUING EDUCATION DEFINITIONS (REPEALED)

(History: 37-1-131, 37-1-319, 37-15-202, MCA; IMP, 37-1-131, 37-1-306, MCA; NEW, 1982 MAR p. 378, Eff. 2/26/82; AMD, 1989 MAR p. 2194, Eff. 12/22/89; AMD, 1996 MAR p. 2976, Eff. 11/8/96; TRANS, from Commerce, 2004 MAR p. 2284; AMD, 2006 MAR p. 2413, Eff. 10/6/06; REP, 2017 MAR p. 1401, Eff. 8/19/17.)

Rules 24.222.2104 through 24.222.2114 reserved

24.222.2115 RENEWALS (REPEALED) (History: 37-1-141, 37-15-202, MCA; IMP, 37-1-141, MCA; NEW, 2006 MAR p. 1583, Eff. 7/1/06; REP, 2017 MAR p. 1401, Eff. 8/19/17.)

Subchapter 22 reserved

Subchapter 23

Unprofessional Conduct

24.222.2301 UNPROFESSIONAL CONDUCT (1) The board defines "unprofessional conduct" for licensees as follows:

- (a) practicing beyond the scope of practice encompassed by the license;
- (b) practicing beyond the level of practice for which the licensee is trained;
- (c) accepting and performing occupational responsibilities, which the licensee knows or has reason to know that the licensee is not competent to perform;
- (d) failing to refer patient or client to qualified professional when such advice or service is called for;
- (e) violating statutory child abuse and elderly abuse reporting requirements;
- (f) guaranteeing the results of any speech or hearing therapeutic procedure;
- (g) failing to adequately supervise auxiliary staff to the extent that the client's health or safety is at risk;
- (h) failing to report the unsafe practice of speech-language pathology or audiology to the board, or to the appropriate facility;
- (i) failing to report unlicensed practice of speech-language pathology or audiology to the board, or to the appropriate facility;
- (j) allowing aides and assistants to perform functions not allowed under the board's rules;
- (k) failing to provide appropriate supervision to aides and assistants and services to clients; and
- (l) failing to provide appropriate supervision to the holder of a limited license who is engaged in supervised professional experience. (History: 37-1-131, 37-1-319, 37-15-202, MCA; IMP, 37-1-131, 37-1-316, 37-1-319, 37-15-202, MCA; NEW, 1989 MAR p. 2194, Eff. 12/22/89; AMD, 1996 MAR p. 2976, Eff. 11/8/96; TRANS, from Commerce, 2004 MAR p. 2284; AMD, 2006 MAR p. 2413, Eff. 10/6/06; AMD, 2013 MAR p. 1833, Eff. 10/18/13; AMD, 2017 MAR p. 2079, Eff. 11/10/17.)

Subchapter 24

Complaint Procedures

24.222.2401 COMPLAINT PROCEDURE (REPEALED) (History: 37-15-202, MCA; IMP, 37-1-308, 37-1-309, MCA; NEW, 1996 MAR p. 2976, Eff. 11/8/96; TRANS, from Commerce, 2004 MAR p. 2284; REP, 2017 MAR p. 1401, Eff. 8/19/17.)

24.222.2402 SCREENING PANEL (1) The board screening panel shall consist of:

- (a) one speech-language pathologist who has served longest on the board;
- (b) one audiologist who has served longest on the board; and
- (c) one public member of the board.

(2) The presiding officer may reappoint screening panel members, or replace screening panel members as necessary at the presiding officer's discretion. (History: 37-1-136, 37-15-202, MCA; IMP, 37-1-307, 37-15-201, MCA; NEW, 1996 MAR p. 2976, Eff. 11/8/96; TRANS, from Commerce, 2004 MAR p. 2284; AMD, 2018 MAR p. 2306, Eff. 11/17/18.)