## H. Angela Mezzomo, PhD, CCC-SLP 103 Mulberry Ave Pasadena, MD 21122 Mezzomoang@aol.com

Re: House Bill 1112: Audiology and Speech-Language Pathology Interstate Compact

Dear Chairperson Pendergrass,

I am writing to encourage your favorable report for HB 1112: Audiology and Speech-Language Pathology Interstate Compact.

I have been a licensed speech-language pathologist (SLP) for over 30 years, working in Maryland for the last 14 years. When I moved to Maryland, I needed to apply for a Maryland license. I was already licensed in New York and New Jersey. I also maintain my Certificate of Clinical Competence (CCC) from the American Speech-Language Hearing Association (ASHA). The licensing requirements in Maryland were not more stringent those in New York or New Jersey, nor were they nor stringent than those required by ASHA. Had I not been proactive in obtaining my license prior to moving, I would not have been able to start working immediately. However, the need for an additional license created a financial burden.

Since I moved to Maryland, I have served on the Governor's Commission on Autism (2009-2012) as well as the Telehealth Workgroup (2018-2019). I heard first hand from people who have difficulty finding licensed, qualified SLPs to provide services to people in more rural areas of our state, individuals who need highly specialized treatment techniques or finding an SLP to start treatment immediately to someone with a recent traumatic brain injury or other sudden incidents. School systems struggle to find therapists in order to meet the needs of students. There are therapists in neighboring states who may be willing to provide services, but unwilling to add one more fee to their ongoing expenses.

My husband is a disabled Vietnam Veteran. He has a significant hearing loss secondary to his service as a machinist mate in the US Navy. It took us several months to get appropriate hearing services for him after moving to Maryland. We initially traveled back to NY until our insurance would no longer pay for out of state services. Had an Interstate Compact been in place when we relocated, he would have more likely been able to receive services when we first moved.

Current Military spouses find themselves being relocated and having to start the licensing process in their new state. They may not have a choice in the relocation. The added burden of having to go through the licensing process, possible multiple times in a career can be taunting.

Passage of HB 1112 would be a big step to addressing some of the issues above, as well as other concerns outlined by ASHA. I hope that you will give HB 1112 a favorable report.

Sincerely,

Dr. H Angela Mezzomo