



Ohio Board of Speech-Language Pathology and Audiology www.slpaud.ohio.gov
77 South High Street, Suite 1659 • Columbus, Ohio 43215-6108
Telephone: (614) 466-3145 Fax: (614) 995-2286 E-mail: board@slpaud.ohio.gov

February 1, 2012

Dear Business Entity:

Ohio Law requires each organization that employs a licensed individual in the direct practice of speech-language pathology and audiology to submit a business filing form. The form is available on our website in PDF or Word format at <http://www.slpaud.ohio.gov/bus.stm> or enclosed. Pursuant to Ohio Administrative Code section 4753-1-03(A), Business Filings are due at the Board office by March 1, 2012. You will only be contacted if we need additional information.

If you have already submitted a notarized form, please disregard this letter.

Section 4753.12 (A) of the Ohio Revised Code states:

4753.12 Lawful practice.

Nothing in this chapter shall be construed to:

(A) Prohibit a person other than an individual from engaging in the business of speech-language pathology or audiology without licensure if it employs a licensed individual in the direct practice of speech-language pathology and audiology. Such entity shall file a statement with the board, on a form approved by the board for this purpose, swearing that it submits itself to the rules of the board and the provisions of this chapter which the board determines applicable.

Rule 4753-1-03 (A) of the Ohio Administrative Code states:

4753-1-03 Business filing.

(A) Pursuant to division (A) of section 4753.12 of the Revised Code, an entity may provide speech-language pathology or audiology services without licensure if it employs or contracts individuals in the direct practice of speech-language pathology or audiology, in accordance with Chapter 4753. of the Revised Code and Administrative Code. Such entity, through its designated agent, no later than March first of each even numbered year, at the discretion of the board, shall submit a business filing with the board containing the following information: a statement swearing that it submits itself to the rules of the board and the provisions of Chapter 4753. of the Revised Code and the Administrative Code, and a list of all names, and addresses under which the entity provides speech-language pathology and audiology services and the names, license numbers, and home addresses of all individuals engaging in the direct practice of speech-language pathology and audiology as officers, agents or employees of the entity during the previous calendar year.

BY THE OHIO BOARD OF SPEECH-LANGUAGE PATHOLOGY AND AUDIOLOGY

Gregg B. Thornton, Esq.
Executive Director

Enclosure
(Continued on page 2)

ADDENDUM

Dear Employer:

In follow-up to the previous information regarding the 2011 business filing, the Ohio Board of Speech-Language Pathology and Audiology is including this addendum to further assist you in providing speech-language pathology and audiology services to consumers. We understand that not all circumstances listed below will apply to all employers.

Employers of Speech-Language Pathologists, Audiologists, Conditional Speech-Language Pathologists, Student Permit Holders, Speech-Language Pathology Aides, and Audiology Aides: It is recommended that employers verify that a prospective speech-language pathologist or audiologist holds a valid and active license with the Board prior to providing professional services. Additionally, employers may periodically verify the licensure status of speech-language pathologists and audiologists under their employ. Licenses may be verified on-line at: <http://www.slpaud.ohio.gov/lv.stm>. On-line license verification should be considered as fulfilling the primary source requirement for verification of licensure.

Biennial Renewal: Employers should additionally verify active licensure at the time of biennial renewal. The biennial renewal deadline is December 31st of every even year. Anyone who does not renew their speech-language pathology, audiology, or aide license by midnight on December 31, 2012 will have an expired license and must immediately cease practice until their license is renewed. A licensee has up to one year from the renewal deadline to submit the application for late renewal.

Unauthorized Practice: Practicing without a valid license is considered unauthorized practice pursuant to Ohio Revised Code 4753.02 and is subject to disciplinary and/or criminal action. Third party insurance providers such as Medicare and Medicaid will not reimburse for services provided by an unlicensed individual.

An employer may report to the Board any form of disciplinary action taken against a licensee. Notification should be submitted in writing to the Board office within one year from the date of incident.

Employers of Conditional Licensees: Conditional licensees must submit the Supervised Professional Experience (SPE) Plan form within 30 calendar days of the start date of employment. A conditional licensee's credential status is reflected as '**Active Pending Receipt of SPE Plan**' until a plan is approved. This is a legal practice status provided the plan is submitted on time. Professional services provided by a conditional licensee are eligible for reimbursement through Medicare and Medicaid. All requests for reimbursement must be submitted by the Board approved supervisor of record.

Aides: Speech-language pathology aides and audiology aides must be working under a Board approved supervisor and plan. **Any change in the approved aide application including the termination of employment of aide or supervisor must be reported to the Board in writing within 30 days of the change.**

Join Our Mailing List for Board News, Updates and Alerts: If you are interested in receiving our eNewsletter and other updates from the Board, please join our listserv at <http://slpaud.ohio.gov/subscribe.stm>.

Please do not hesitate to contact the Board at (614) 466-3145 or via e-mail at board@slpaud.ohio.gov with any questions.

BY THE OHIO BOARD OF SPEECH-LANGUAGE PATHOLOGY AND AUDIOLOGY

Gregg B. Thornton, Esq.
Executive Director

(Business Filing Form begins on page 3)



Business Filing for Calendar Year 2011

Submit by March 1, 2012

The entity is responsible for designating who completes the business filing form. However, the person who maintains a master list of ALL individuals licensed by this board and a list of all of the entity's different locations, should complete the form. If you need additional space, please copy this form or add pages as necessary.

Section I

List all names under which your entity employed and/or contracted with individuals in the direct practice of speech-language pathology or audiology services in calendar year **2011**. If you did not employ any individuals as this, complete Sections: I (below), II and IV.

Business Name	Complete Address	Telephone Number

Section II

- I did not employ individuals in the direct practice of speech-language pathology or audiology in calendar year 2011. I attest to this by checking the box, in Section II, and notarization in Section IV.

Section III

List the individuals who were **employed/and or contracted** with your entity, during calendar **year 2011**, that provided:

1. direct speech-language pathology or audiology services
2. hearing screenings
3. audiometric testing

Ohio Board of Speech-Language Pathology & Audiology licenses will begin with **SP** for speech-language pathologist or **A** for audiologist followed by 4-5 numeric digits. AIDES will begin with **AIDE**. then 4 (four) numeric **digits** followed with **SP** or **A**. Conditionals will begin with **COND**. followed by 7 (seven) numeric **digits**.

Employee/Licensee Name	Ohio Board License No.

By employing and/or contracting with individuals in the direct practice of speech-language pathology or audiology, we submit ourselves to the rules of the Board and the provisions of Chapter 4753. of the Ohio Revised and Administrative Code.

Pursuant to OAC section 4753-1-03(B), the business filing shall be submitted on the form approved by the board for this purpose and shall be verified by the notarized signature and title of the individual filing the statement on behalf of the entity.

Section IV

Form completed by:

Name (Printed)	Title	Signature
Telephone Number	E-mail	

State of Ohio
County of _____

On this the _____ day of _____, 20 ____, I certify that the preceding or attached document is a true, exact, complete, and unaltered original document.

Notary Seal (Signature of Notary) (Name of Notary Typed, Stamped or Printed)
Notary Public, State of _____ My commission expires _____

Notary Signature _____

This form may be accessed on our web site at <http://www.slpaud.ohio.gov/bus.stm>. This notarized page must be submitted via regular U.S. Mail to the address below. Only the list of names can be faxed to (614) 995-2286 or e-mailed to board@slpaud.ohio.gov:

Ohio Board of Speech-Language Pathology and Audiology
77 South High Street, Suite 1659
Columbus, Ohio, 43215-6108

If you have any questions, please call Connie Stansberry at (614) 728-2438.

- Self-Employed Ohio licensees do not need to complete a Business Filing. Therefore if you received this in error, please disregard it.
- If this form is mailed to the individual licensee at their place of employment, the Human Resource/Administrative Department, that maintains a master list of all employees, should complete the form.