

## POLICY STATEMENT

### **Wider Access to the Full Spectrum of Hearing Technology Benefiting People with Hearing Loss**

According to the National Institute on Deafness and Other Communication Disorders (NIDCD), National Institutes of Health, access to devices and emerging technologies that could help people with hearing loss is limited because consumers face multiple barriers, including a system that is confusing and involves competing interests. This thwarts the ability of the individual to find the best and most affordable options to address his or her particular situation. The Hearing Loss Association of America (HLAA) supports a hearing health care system that provides consumers access to the full spectrum of safe and effective hearing technology to meet their individual needs. This model should include:

- Easy access to the full spectrum of hearing technology based on individual need and ability to pay. Hearing technologies include hearing aids and the full range of assistive listening devices including personal sound amplification products (PSAPs).
- To the greatest degree possible, hearing technology should not be proprietary and should be usable by consumers of all brands of hearing devices.
- Access to appropriate hearing technology through multiple points of entry, including: hearing health care specialists (audiologists, hearing aid specialists, otolaryngologists); direct website access; pharmacies; and retail outlets.
- Creation of functional performance standards for all hearing technology.
- Utilization of multiple platforms – websites, informational brochures, product labeling and in-store information – to provide the information and education needed to ensure informed consumer decision making, including, but not limited to:
  - expected performance of the hearing technology;
  - means of comparison to other similar hearing technology; and,
  - limitations of the hearing technology.

### **Background**

Data from Johns Hopkins University Medical Center found that one in five Americans age 12 and over, approximately 48 million people, has a hearing loss, while one in eight Americans has a hearing loss in both ears.<sup>1</sup> Hearing loss can occur at any point in an individual's life, from birth through old age, and the majority of people with hearing loss

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<sup>1</sup> Lin, Frank.; Niparko, John.; Ferruci, Luigi. Hearing Loss Prevalence in the United States. Archives of Internal Medicine 171(20): 1851-2, 2011.

are in the workforce. According to Ear Professionals International Corporation's (EPIC) "Listen Hear!" survey, more than 10 percent of full-time employees have a diagnosed hearing problem. Another 30 percent suspect they have a problem but have not sought treatment.<sup>2</sup>

According to the NIDCD, 18 percent of adults aged 45-64, 30 percent of adults aged 65-74, and 47 percent of adults 75 years or older, report hearing loss.<sup>3</sup> According to AARP, hearing loss is the third most prevalent chronic health condition facing seniors. Over the next 15 years, 78 million people will move into the 60+ age bracket and the incidence of hearing loss will escalate well beyond the current one in 10 affected persons.

The result of this demographic shift will place greater demands on all age-related health care issues, particularly on hearing health care. However, among adults age 70 and older with hearing loss who could benefit from hearing aids, fewer than one in three (30 percent) has ever used them. Even fewer adults age 20-69 (approximately 16 percent) who could benefit from wearing aids have ever used them.<sup>4</sup>

Although hearing loss is a major public health issue, the current hearing health care delivery model is complex, confusing, and requires multiple visits, to obtain hearing aids. Out-of-pocket expenses for a pair of hearing aids range from \$4,000-\$6,000 in 2015. This is not a one-time expense: hearing aids typically are replaced every four to six years, so people with hearing loss who do purchase hearing aids can be expected to continue to do so for the remainder of their lives.

A U.S. hearing aid industry study of people who decided not to purchase hearing aids indicated that cost was reported to be an obstacle by 64 percent of those in most need of hearing health care; 66 percent said they were likely to get a hearing aid if it was 100 percent covered by insurance. At the same time, Medicare does not cover hearing aids and private insurance coverage is limited at best, usually covering only a small portion of the cost and often covering costs only for children. Medicaid is state-specific and often also covers hearing health care only for children.

There is something decidedly deficient about a delivery model that benefits only 16 to 30 percent of Americans who need the services and technology. Access to hearing health care and personal hearing technology is critical for those who need it. Numerous studies document that the economic and societal cost of ignoring hearing loss occur across the trajectory of a person's life, from a newborn's ability to acquire language,

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<sup>2</sup> Address Hearing Loss in the Workplace and Reap the Rewards, BHI Urges Employers and Employees for National Employee Wellness Month, Washington, DC, June 2, 2014.

<http://www.betterhearing.org/news/address-hearing-loss-workplace-and-reap-rewards>, downloaded March 31, 2015.

<sup>3</sup> NIDCD Working Group on Accessible and Affordable Hearing Health Care for Adults with Mild to Moderate Hearing Loss. August 25-27, 2009, Bethesda, Maryland.

<http://www.nidcd.nih.gov/funding/programs/09HHC/Pages/summary.aspx>, downloaded March 31, 2015

<sup>4</sup> "Quick Statistics." NIDCD Health Information. National Institutes of Health, 3 Oct. 2014.

<http://www.nidcd.nih.gov/health/statistics/pages/quick.asp>

through school, to a working adult's ability to compete in the marketplace, to a senior's ability to stay engaged with their family and community.

There is a clear need for an alternative to the expensive, confusing and sometimes inaccessible system that is currently available to deliver hearing aids to those who need them. At the same time, there is a growing need among the people aging into hearing loss for access to a wider range of technology at less expensive price points.

## **New and Emerging Technology**

The health care field is rapidly changing with apps and telemedicine becoming the norm. Likewise, we see the field of hearing health care and personal hearing technology on the cusp of delivering new ways to provide hearing assistance and technology, such as:

- Remote assessment, hearing device programming, and at home management
- Self-testing and self-fitting
- Smartphones as a platform for mobile hearing health care
- Smartphones and applications being used as personal hearing technology
- Personal sound amplification products (PSAPs)

## **Consumer Access**

Any system that provides hearing technology to consumers must seek to empower consumers by giving them the tools needed to ensure they can make informed decisions about their own hearing health care. HLAA supports:

- **Elimination of the cost barrier.**  
Better hearing is not only intrinsically valuable but also instrumental in achieving other societal and individual objectives. Surveys of persons with hearing loss who do not use a hearing aid have found that 30 percent do not avail themselves of the device because of cost. Point-of-service payments have, therefore, been shown to act as a deterrent and barrier to care. In addition, the packaging of any service together with the sale of the device should be transparent, that is, the information must be readily available to the consumer. A wide range of emerging and cutting-edge hearing technology, including those at much lower price points than traditional hearing aids, must be made readily and easily available to consumers.
- **Elimination of the access barrier.**  
Barriers to obtaining hearing technology must be eliminated. Consumers must have the range of choices for obtaining hearing technology, including the Internet, in stores, and via traditional face-to-face sales by professionals.

- **Interoperable with other hearing technology.**  
 To the greatest degree possible, hearing technology should be interoperable and useable by consumers without requiring the purchase of proprietary technology.
- **Comprehensive insurance coverage of services, from audiological testing to post-fitting adjustment and service, when hearing aids are obtained.**  
 The effectiveness of hearing aids is associated with the successful coordination of an array of services, including: audiological assessment to determine hearing loss and how best to address it; procurement of an appropriate hearing aid; initial instructions on how to use and maintain the hearing aid; fitting and adjustment of the hearing aid; periodic adjustments; and aural rehabilitation (AR), including counseling, speechreading, and auditory training.
- **Monitoring of safety and efficacy.**  
 Given both the sizeable population eligible for coverage and the constantly changing technology to address hearing loss, it is imperative that data on service, cost, utilization, and efficacy be collected. This would allow for evaluation of care, and highlight deficiencies and gaps in care. Presently, “best practices” guiding the successful fitting of hearing technology is not adhered to consistently by all practitioners. In the absence of benchmarks, standards of care vary a great deal, as do the resulting outcomes. New and emerging hearing technology must meet evidence-based, nationally-set industry standards for effectiveness. Emerging hearing technologies must be shown to be safe and efficacious.
- **Consumer education.**  
 With a wide array of hearing technology available, consumers must be given enough information to make educated and informed decisions about which hearing technology is appropriate and addresses that individual’s needs. Information about hearing technology must be provided in such a way that a comparison among various hearing technology is readily available and understandable to consumers, posted to websites, and included in informational brochures or other electronic and/or print material. Consistent, clear and understandable labels on packaging and included in any inserts or product instructions. Professionals and manufacturers of hearing technology must partner with consumers and consumer organizations to share information and promote greater access to services and hearing technology, including hearing aids, personal sound amplification products, assistive listening systems and devices, bone-anchored devices, implantable devices and cochlear implants.
- **Consumer consultation.**  
 The makers and sellers of hearing technology and applications, as well as the makers of devices designed to interface with hearing aids, and the hearing aid industry as well, must regularly consult with consumers and/or consumer organizations to provide input on the functionality and design of the hearing technology, as well as during the course of developing technical standards.

HLAA believes the goal for hearing health care must be to eliminate barriers to effective, accessible, and affordable hearing health care and ensure access to a full range of personal hearing technology. There must be a wide range of solutions to fit the needs of the variety of individuals with hearing loss, from children to working adults to seniors, from mild hearing loss to profound, from low-income to wealthy populations. Therefore the Hearing Loss Association of America supports a hearing health care system that provides consumers access to the full spectrum of safe and effective hearing technology to meet their individual needs.

***Approved by the Board of Trustees of Hearing Loss Association of America  
April, 2015.***

***Other position statements that relate to this topic include:***

**Screening for Hearing Loss in Primary Health Care**

**Medicare Coverage of Hearing Aids and Aural Rehabilitation**