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ACADEMY OF  
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Dear Colleague:

There have been many changes in the delivery of hearing health care services over the past few years. Patients are demanding more transparency; they are questioning the cost of hearing aids and the services provided and may be coming to your practice with a device purchased over-the-counter or through the Internet. We believe that this is a trend that is not going to go away. As we all know and have discussed over the past several years, it is time to take a critical look at our current service (and product) delivery models and decide what changes need to occur to secure our professional future and to ensure continued and increased access to consumers who need the care we provide.

Changes are all around us. The federal government, through the National Institute on Deafness and Other Communication Disorders (NIDCD), is funding innovative research to improve accessibility and affordability of hearing health care services, including the development of low-cost technologies and innovative delivery systems. The Department of Veterans Affairs is piloting teleaudiology, and manufacturers of hearing aids are developing software and cell phone applications to assist consumers (and non-audiologist providers) in programming hearing aids remotely.

Meanwhile, others in the industry are creating direct-to-consumer business models to market their products. Some insurance companies are trying to develop their own models for delivery of hearing health care just as they have done for other types of health care. The entrance of insurance companies into the field of hearing health care and the hearing aid delivery system creates a truly unique dynamic, given that they have the infrastructure (resources and access to millions of subscribers) that may enable them to negotiate lower rates on hearing aids, create direct-to-consumer delivery models, and develop networks that may or may not include audiologists.

Consumers have complained that hearing aid cost and current service delivery models are barriers to accessing hearing health care. Insurance companies argue that the shortage of audiologists to meet subscribers' needs justifies their entry into this area of health care. We firmly believe that audiologist-directed hearing health care can be the solution to more effective and efficient service delivery. It is incumbent upon us to establish audiologist-driven, patient-centric models that effectively address the challenges of greater access to effective and affordable hearing health care - otherwise, we risk our services being minimized in the hearing health care delivery system of the future.

What is the audiology community willing to do to help meet the hearing health needs of consumers? We urge you to consider how your individual practice may be impacted by the paradigm shift to consumer-driven health care. We understand and support the concept that each practice is unique and that business decisions should be made by each audiologist based on specific needs. And we believe that all audiologists should understand the changing climate and review their current practice models for sustainability.

The following questions/suggestions may help you gauge how well your practice model

aligns with new hearing health care paradigms and determine if adjustments are needed.

- What role does the sale of hearing aids play in your practice model? Do you have options in place to accommodate consumers who arrive at your practice with a hearing aid purchased elsewhere?
- Are the costs associated with the care you provide transparent to the patient? If appropriate, do you itemize the cost of your services? When discussing amplification and other treatment, do you offer patients options? Do you engage family and others to support the patient with hearing loss?
- Do you charge your patients appropriately for the products and services that you provide? Are you familiar with policies of competitive entities in your immediate locale? Are your services clearly defined and valued in your contracts with payer groups?
- Do you provide treatment for hearing loss that reflects the full scope of practice for audiology? Do you provide information on hearing assistive technology, listening training, and counseling—all of which could expand and enhance the service delivery model for your patients?
- Do you use or have you considered employing audiology assistants to provide appropriate care under your supervision, thereby enabling you to expand professional services for your patients?
- How do you plan to engage consumers in your local area to facilitate and enhance access to your services?
- Do you employ established best practices (verification, counseling, etc.) to ensure and improve patient outcomes? Do you measure patient satisfaction?
- Are you aware of your professional code of ethics, state licensure rules, and legal and regulatory guidelines that impact your specific practice setting (e.g., anti-trust policy, correct coding and billing practices)?

The following resources are available to help you navigate this paradigm shift:

- [Practice Considerations for Dispensing Audiologists](#)
- [Resources for Practitioners](#)
- [Guide to Itemizing Your Professional Services](#)

The Academy of Doctors of Audiology, the American Academy of Audiology, and the American Speech-Language-Hearing Association continue to work collaboratively on additional materials to help audiologists navigate the new era of hearing health care delivery. If you have specific questions or have information you would like to share, we urge you to reach out to your respective organizations:

- Academy of Doctors of Audiology  
Contact: [Stephanie Czuhajewski](#)
- American Academy of Audiology  
Contact: [Melissa Sinden](#)
- American Speech-Language-Hearing Association  
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Sincerely, Academy of Doctors of Audiology, American Academy of Audiology, American Speech-Language-Hearing Association