

Healthcare *Insights*

an interactive resource from HOMELINK



THE COST OF HEARING AIDS FOR WORKERS' COMPENSATION

3 SIMPLE QUESTIONS



HOMELINK
www.vgmhomelink.com

When it comes to hearing health care claims, claims professionals have a tightrope to walk trying to find the best way to balance the hearing needs of injured workers with the constant requests for new hearing aids.



HEARING HEALTH CARE CLAIM

THE COST OF HEARING AIDS FOR WORKERS' COMPENSATION: 3 SIMPLE QUESTIONS

When it comes to hearing health care claims, **claims professionals have a tightrope to walk trying to find the best way to balance the hearing needs of injured workers with the constant requests for new hearing aids.** Hearing health care claims are costly,

often requiring lifetime provision of services and the replacement of worn hearing aids with new devices. However, it is difficult to put a price on a worker's hearing.

To help you understand the best clinical practices and simplify your workload, HOMELINK has developed a process consisting of three simple questions:

- 1 Can the current hearing aids be repaired?
- 2 Do the hearing aids meet medical necessity?
- 3 Are all of the hearing aid accessories needed?

1 Can the current hearing aids be repaired?

One of the best ways to manage costs is to start by challenging common misconceptions, and few misconceptions are as stubborn as those relating to the manufacturer warranty period. **Most manufacturers bundle a one-, two- or three-year warranty in the selling price of their products. However, manufacturers stock original parts for a minimum of five years. This means there is no need to replace hearing aids every three years.**

Rather than replacing the hearing aids, a less costly option is to repair and reprogram. **Hearing aids can be repaired for less than \$350 each.** What's more, the repair cost includes an extended one-year manufacturer warranty.

Today's hearing aids utilize digital technology and have a wide-fitting range. For normal changes in hearing due to aging, reprogramming hearing aids is a common means of adjustment. If you receive a request to replace hearing aids due to a change in hearing, the best practice is to have a professional review the request and evaluate for possible ongoing noise exposure or refer to rule out a medical problem.



2 Do the hearing aids meet medical necessity?

Medicare defines medical necessity as a “service that is reasonable and necessary for the diagnosis or treatment of an illness or injury or to improve the functioning of a malformed body member.” The key in selecting hearing aids to meet medical necessity is to measure functional improvement.

HOMELINK can help by:

First, the provider must document the age and condition of the current hearing aids. Provided the hearing aid is less than five years old, all hearing aid manufacturers can repair it with original parts, restoring it to normal function, and providing a one-year extended warranty.

Second, comparison is made of the recommended hearing aid model to the list of all products offered by the hearing aid manufacturer.

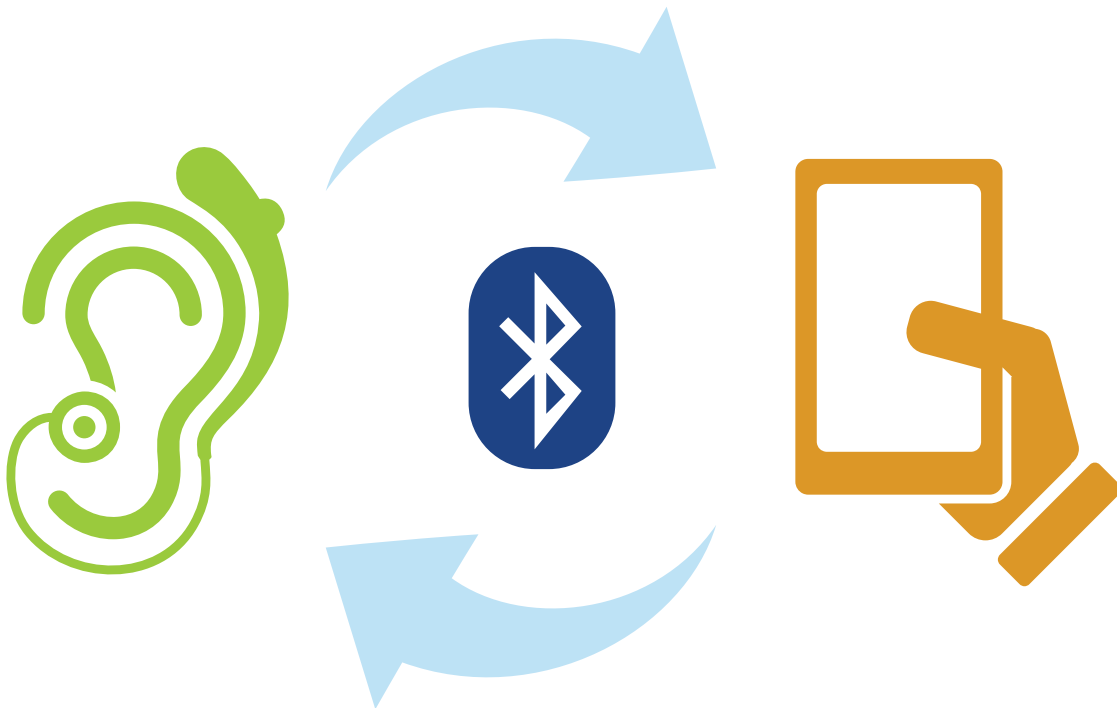
To better understand how differing levels of hearing aid technology impact hearing aid functionality, consider how a stereo equalizer works. The sliders or dials on the equalizer adjust the sound quality. More sliders are only helpful for those with no damage to their hearing. For those with damage, the additional sliders offer no additional benefit. Mid-level or basic standard hearing aids most often meet medical necessity according to extensive university research.

3

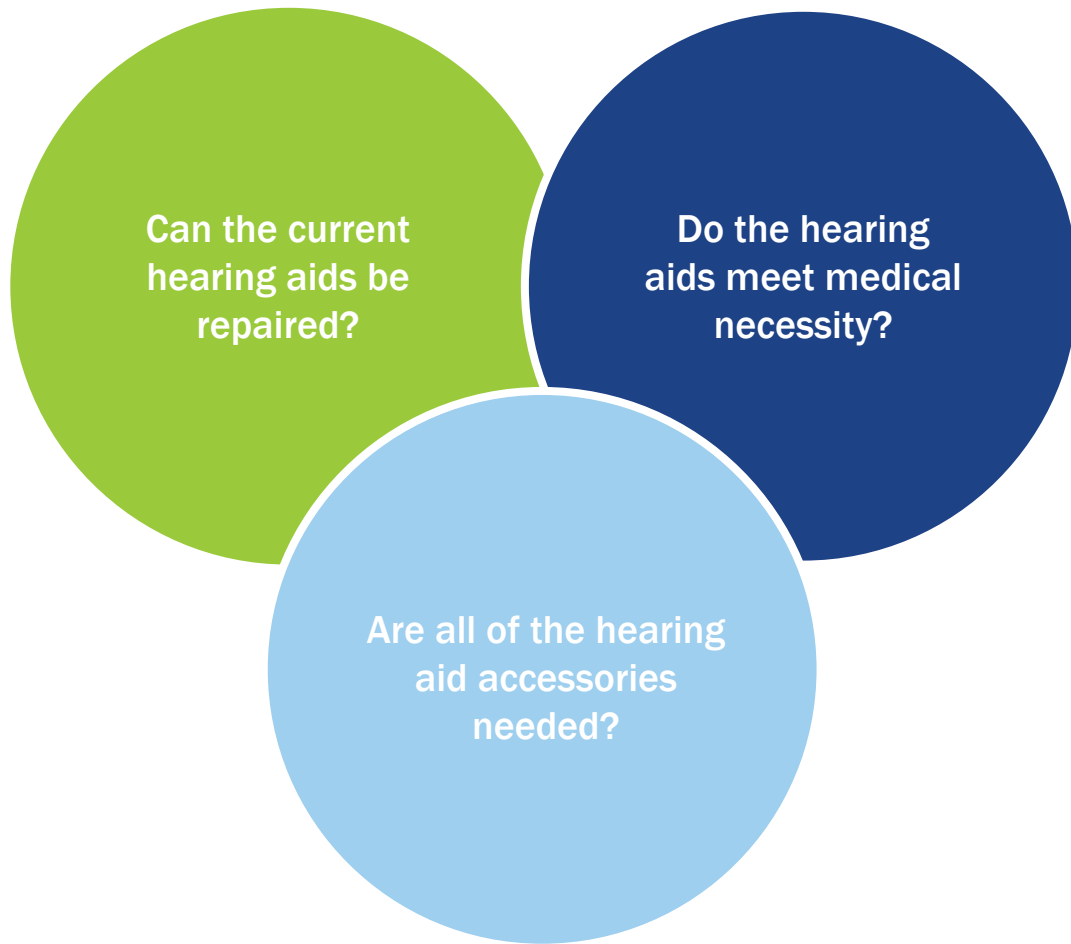
Are all of the hearing aid accessories needed?

To help determine the answer, request additional information that directly links the needs of the work environment to the function of the requested accessories. For example, an electrician may request a Bluetooth accessory to link a remote radio directly to the hearing aids. This is an essential work function.

Today, the expansion of technology and Bluetooth is built directly in the hearing aids. Smartphones are equipped with Bluetooth and link directly to many hearing aids. Calls go directly from the cell phone to the hearing aids.



Many hearing aids have free apps that replace the need for outside remote controls to adjust the volume or reduce background noise—**there is no need to purchase and maintain stand-alone accessories.**



When can I start?

Balancing the right hearing health care for injured workers with the cost of constantly replacing devices is a difficult task to achieve, and this process can help. No matter how many hearing aid claims you receive each year, you should consider incorporating these three simple questions into your practices. Not only will the process save time and money, it's the most efficient way of finding the best and most convenient solutions for injured workers' hearing needs.

***Experience the difference with your next hearing claim
by calling HOMELINK at 800.482.1993.***

References

<http://www.fda.gov/MedicalDevices/ProductsandMedicalProcedures/HomeHealthandConsumer/ConsumerProducts/HearingAids/default.htm>. Downloaded 1/22/2017

Mueller, H. Gustav, Ricketts T., Bentler, R. (2013). Modern Hearing Aids: Pre-Fitting Testing and Selection Considerations. Plural Publishing Inc.; 1 edition

Killion, Mead C., Niquette, P., Gudmundsen, G. (2004). Development of a quick speech-in-noise test for measuring signal-to-noise ratio loss in normal hearing and hearing-impaired listeners. J. Acousti. Soc. Am. 116 (4), Pt. 1.

Jenstaf, Lorient M., Souze, Pamela E. (2005). Quantifying the effect of compression hearing aid release time on speech acoustics and intelligibility. Journal of Speech, Language, and Hearing Research 5: 651-667.

Plyler, Patrick N., Fleck, Erica L. (2006). The effects of high-frequency amplification on the objective and subjective performance of hearing instrument users with varying degrees of high-frequency hearing loss.



HOMELINK

1111 W. San Marnan Drive
Waterloo, IA 50701

800-482-1993

homelinkreferrals@vgm.com

www.VGMHOMELINK.com

