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## **ACDHH Position Paper**

### Issue: Internet Sale of Hearing Aids

We have become aware of the UnitedHealth Group and hi HealthInnovations service delivery model for hearing testing and hearing aids. We have reviewed the description and are opposed to the model for a variety of reasons. First, it allows for utilization of an uncalibrated online test to estimate air conduction hearing that is insufficient as a means of defining hearing loss for the purpose of implementing a treatment. The information gathered is inadequate by audiologic and medical standards and as the basis for hearing aid candidacy. Such an approach may put people at risk by delaying appropriate care. In particular, it does not include otoscopy, bone conduction, immittance procedures, or speech recognition testing. For the person with possible hearing loss, conductive hearing loss, ear canal obstruction, retrocochlear hearing loss, and auditory processing disorders would all remain undetected.

We are also opposed to the current hi HealthInnovations hearing aid delivery model. Best practice guidelines (ASHA and AAA) require the verification of hearing aid performance, a step that cannot be included without personal, side by side involvement of a professional and adequate instrumentation. Numerous investigators have concluded that omission of verification results in poor hearing aid fittings in a majority of people. Most importantly, we are strongly opposed to any hearing aid delivery model that takes a device-centered rather than person-centered approach. There is strong evidence that people with hearing loss experience a range of psychosocial, emotional, and quality of life consequences that are rarely resolved by simply putting on a hearing aid.

Increasing the accessibility and affordability of hearing aids in America should not have to happen by making compromises in the quality of hearing healthcare. Critically, this approach has not had its safety and efficacy as a means of service-delivery evaluated before implementation, disregarding the public's outcry for evidence-based practices in healthcare. We strongly encourage efforts to find a safe, effective and affordable methods of delivering hearing health care. This model, however, is not the answer.

*This position paper was unanimously adopted by the ACDHH Board of Commissioners as ACDHH's formal opinion on this issue at the Board of Commissioners meeting on Thursday, May 17, 2012.*

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*To ensure, in partnership with the public and private sectors, accessibility for the Deaf, Hard of Hearing, Deaf Blind and persons with speech difficulties to improve their quality of life*