## Benefits of Annual Hearing Aid Exams to Patients and Practice

By Dennis Colucci, AuD, MA

est practices in adult health care across most disciplines call for annual examinations. According to Michelle H. Charap, MD,1 the call for annual examinations started in the late 1800s with physicians in the early 1900s promoting periodic examination to insurance companies. By the 1920s, the American Medical Association adopted this position. In the 1970s, a formalized and customized view of annual visits was developed. The purpose was clear: to identify disease and reduce mortality. The mantra continues today with an emphasis on risk assessment, delivering preventative care and screenings, counseling, and fostering the patient-doctor relationship.



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## WHAT IT MEANS TO OLDER ADULTS

Patients need providers to help them manage their health care, and periodic examinations fulfill that expectation while reducing worry. What many adults don't know is that hearing loss increases their risk for a greater reduction in brain size, a commensurate degree of cognitive processing beyond normal aging. It may also adversely impact their overall health.<sup>2</sup> Moreover, the effects of hearing loss on engagement and isolation can be daunting. Isolation and depression are primary issues for seniors, with about one-third of older adults living alone. Furthermore, widowers over 75 years old have the highest rate of alcoholism in the United States, often using alcohol consumption as a coping mechanism.3 Hearing loss, vision loss, and physical ailments are known to increase isolation and loneliness, which may lead to poorer cognitive ability, depression, and a higher risk of mortality. For these reasons, periodic examinations should be designed to foster hearing aid acceptance and daily use, while promoting benefits such as improved social engagement, environmental awareness, and reduced isolation.



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## WHAT IT MEANS TO PRACTICES

Annual examinations are not only beneficial to patients but also to the bottom line of audiology practices, both for financial and branding purposes. Annual contacts should be part of any business or marketing plan. From the financial perspective, a modest fee for services can be collected from insurance companies or private payers. In-house or factory repair fees can be assessed during the hearing aid cleaning and checking stage of the examination. Most importantly, because the average life of a hearing aid is five years, up to 20 percent of patients will be candidates for newer technology. To a practice that has been in business for over five years with consistent clients and 500 hearing aid patients, this means having up to 100 new fittings. If marketing spends \$500 to obtain and fit a new patient, recalls are a bargain. Annual recalls also support branding because it is the clinic's name and reputation that patients remember when they are asked about their hearing aids and/or for a referral.

For practices that are newly acquired by a manufacturer or network provider, recalls ensure continuity of care and patient confidence in the new company's ability to deliver services. Failure to maintain recalls may cause financial hardships and force patients to seek other providers.

Setting up a recall system is easy. Many electronic health record systems (EHR) generate annual recall reminders that can be attached to emails or snail mails as labels. If your practice does not use an EHR system, you can set up an Excel spreadsheet to manage recalls by the month (Fig. 1). An office staff member can enter the patient information (e.g., name,

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Last Name	First Name	Address	Contact Info	Purchase Date		Recall	Purpose	Hearing Aids
				Year	Month	Date		Brand & Model

Figure 1. Sample format of an Annual Recall Spreadsheet

contact details, email, year of hearing aid purchase, recall date, purpose, hearing aid information, etc.) on the Excel sheet after each sale or visit. Each month, the spreadsheet can be checked for recall information, and corresponding patients can be contacted via email, phone call, or snail mail that a year has passed since their last examination. Provide patients with a list of services for their next visit, including a review of their functional complaints and medical history, physical examination of the ears and removal of cerumen, cleaning and checking of the hearing aids, a hearing test, prescription or fitting update, real ear measurement (as needed), firmware upgrade by the manufacturer, and setting of outcome measures.

Annual examinations have a long-standing history of being effective medical tools and are a standard part of comprehensive on-going health care. In audiology, best practices embrace the proper management of patients with hearing loss and hearing aids. Periodic scheduling of patient care beyond the life of their hearing aids enables patients to be involved in their hearing care and receive maximum benefit from hearing technology, reduces the adverse impact of hearing loss, and greatly improves their overall health and quality of life. And from the business perspective, if you don't take care of your customers, someone else will. Repeat business is cost-effective and a basic building block for success.

References for this article can be found online at http://www.thehearingjournal.com

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