



Statement for the Record from the American Academy of Audiology, the American Speech-Language-Hearing Association, and the Academy of Doctors of Audiology for the

**House Energy and Commerce Committee: Health Subcommittee Hearing on
“The Long Haul: Forging a Path through the Lingering Effects of COVID-19”**

April 28, 2021

Chairwoman Eshoo and Ranking Member Guthrie:

The three national organizations representing the profession of audiology—the American Academy of Audiology, the American Speech-Language-Hearing Association, and the Academy of Doctors of Audiology—are pleased to provide comments to the House Energy and Commerce Committee Health Subcommittee as it seeks to gather information on how best to address the lingering effects of Coronavirus Disease 2019 (COVID-19), particularly for those patients categorized as “long haulers” who continue to suffer from a myriad of ailments associated with a prior COVID-19 infection.

Strong Correlation Between COVID-19 and Hearing Loss and Vestibular Problems

Emerging research suggests a strong link between COVID-19 and hearing loss and vestibular problems. A recent study conducted by The University of Manchester and Manchester Biomedical Research Centre, published in the *International Journal of Audiology*, reviewed evidence from 24 different studies on the link between COVID-19 and hearing problems. Based on this systematic review, scientists estimate that 7.6% of people infected with COVID-19 experience hearing loss, 14.8% suffer tinnitus, and 7.2% report vertigo.¹ The authors of the study also identified “an urgent need” for more study of the long-term effects of COVID-19 on the auditory system.

Many highly publicized media reports have also highlighted COVID-linked struggles with hearing loss, tinnitus, and balance issues. Kent Taylor, the founder and CEO of a national restaurant chain, recently took his own life after suffering from post-COVID related severe tinnitus (ringing in the ears). A statement issued by his family stated that Mr. Taylor fought the condition, but “the suffering that greatly intensified in recent days became unbearable.” It added that Mr. Taylor had recently committed to funding “a clinical study to help members of the military who also suffer with tinnitus”.

Untreated Hearing Loss and Balance Disorders Contribute to Poor Health Outcomes and Impose Financial Burdens on the Health Care System

Untreated hearing loss has profound implications to overall health and can impose significant financial burdens to the health care system. Individuals with even mild hearing loss are three times more likely to experience a fall, and falls are the leading cause of fatal injury for Americans over age 65.² In addition, research is emerging indicating that seniors with hearing loss are more likely to develop cognitive decline up to 40% faster than those without hearing loss.³

The Role of the Audiologist in the Identification and Treatment of Hearing and Balance Disorders

Audiologists are the primary health care professionals who evaluate, diagnose, treat, and manage hearing loss and balance disorders in patients of all ages.⁴ The entry-level degree to become an audiologist is a clinical doctorate degree (AuD), and audiologists work in a variety of settings such as hospitals, clinics, private practice, U.S. military, and Veterans Health Administration (VHA) hospitals.

Audiologists diagnose and treat hearing loss, auditory processing disorders, tinnitus, and other auditory disorders. They dispense and custom fit hearing aids and other forms of hearing technology, such as cochlear implants, osseointegrated implants, and other hearing assistance technologies—as part of a comprehensive hearing treatment plan—and are critical members of the multidisciplinary care team heavily involved in the design and implementation of hearing conservation strategies. Audiologists also provide key diagnostic information necessary for the timely identification and appropriate management of patients with dizziness and balance disorders.

Outdated Medicare Rules Serve as a Barrier to Hearing and Balance Care

Medicare rules pertaining to the audiology benefit fail to recognize the clinical expertise and scope of practice of audiologists. Medicare does not reimburse audiologists for hearing related treatment services and will only reimburse for a narrow set of tests to diagnose a hearing or balance disorder—after first requiring a patient to obtain an order from a physician.

Audiologists are licensed by states to provide hearing related treatment services that Medicare already covers, and many non-Medicare beneficiaries can access treatment through other private and public payers. Medicare coverage of audiology services is significantly less than other federal health care programs including Medicare Advantage, Medicaid, VA health coverage, and the Federal Employees Health Benefit Plan. This unfair limitation restricts beneficiaries' access to care and increases health care costs.

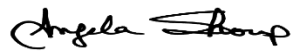
The Medicare Audiologist Access and Services Act (H.R. 1587) Would Improve Beneficiary Access to Hearing and Balance Care Services

Representatives Tom Rice (R-SC) and Matt Cartwright (D-PA) have introduced H.R. 1587, the Medicare Audiologist Access and Services Act, which will address these shortcomings by providing beneficiaries with direct access to both diagnostic and therapeutic services provided by audiologists. The legislation would also reclassify audiologists from “suppliers” to “practitioners”, enabling seniors to access hearing related services through telehealth when clinically appropriate. This legislation, which already has 31 bipartisan cosponsors (including 7 members of the Committee), would not add any new services to Medicare and would have a very nominal impact on federal spending. Most importantly, it would ensure Americans have timely access to hearing health care during the pandemic and beyond.

Conclusion

The World Health Organization has highlighted that social isolation resulting from COVID-19 lockdowns has heightened the importance of ear and hearing care, emphasizing that rehabilitation can help ensure that those affected, and society at large, avoid the adverse consequences.⁵ This is critical for Medicare beneficiaries suffering from COVID-related hearing conditions. Given the established link between COVID-19 and hearing loss, vestibular, and

balance issues, it is now more important than ever to make sure that vulnerable seniors have access to the services of audiologists, the primary health care professionals trained to diagnose and treat these conditions. H.R. 1587 is a cost-effective approach to address hearing related conditions currently experienced by COVID-19 survivors and should be included in any legislative response to this problem.



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¹ Taylor and Francis Online. (2021). *One year on: an updated systematic review of SARS-CoV-2, COVID-19 and audio-vestibular symptoms*. <https://www.tandfonline.com/doi/full/10.1080/14992027.2021.1896793>.

² Centers for Disease Control and Prevention. (May 2018) *Deaths from Falls Among Persons Aged ≥65 Years — United States, 2007–2016*. <https://www.cdc.gov/mmwr/volumes/67/wr/mm6718a1.htm>.

³ Lin, Frank and Yaffe, Kristine. (February 2013). *Journal of the American Medical Association. Hearing Loss and Cognitive Decline in Older Adults*. <https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/1558452>

⁴ <https://www.audiology.org/sites/default/files/publications/resources/WhatsAnAuD.pdf>.

⁵ World Health Organization. (2021). *World Report on Hearing: Executive Summary*. <https://www.who.int/health-topics/hearing-loss>.