

CHILDREN'S HEARING AID PILOT PROGRAM ADVISORY COMMITTEE

APPROVED ~ MINUTES

**CHILDREN'S HEARING AID PILOT PROGRAM ADVISORY COMMITTEE
MARCH 3, 2014**

COMMITTEE MEMBERS

PRESENT:

**JEREMY MEIER,
LAURI NELSON
MIKE PAGE**

STAFF PRESENT:

**REBECCA GILES
STEPHANIE MCVICAR
JENNY PEDERSEN**

ABSENT:

AMY PARKS, CARRIE PEREYRA

NOTE TAKER:

JENNIFER BRYANT

Agenda Item	Discussion	Action Needed
Welcome – Review and approve minutes	<ul style="list-style-type: none"> Minutes from January 29 reviewed. Motion to approve minutes by Jeremy. Motion seconded by Lauri. Approved by Mike. 	
Public Comment	<ul style="list-style-type: none"> No public comment 	
Application Update - revisit reimbursable amount - look over forms	<ul style="list-style-type: none"> The Audiologist Application and Payment Request cover sheet were revised to reflect the changes that were suggested at the last meeting. These changes were approved by the committee and will now be updated on the website. As a follow up - Jenny spoke to the audiologist who initially submitted in the \$1500 fee reimbursement request and he is happy to bring it down to \$700. He thinks CHAPP is a great program and is willing to work with us. He posed a question of what is being included in these fitting fees. He bundled his fitting fee with the 2 visits that are required by the CHAPP program. Is that fee just for a year? This would be good to find out. To date 7 organizations have submitted in applications: ENT Specialists, Primary Children's Hospital, Utah State University, Peak ENT, Logan Regional Hospital, Optimum Audiology, and Mountain West ENT. Average fitting fee that is being submitted \$350-700. Looking over the spreadsheet - there was an increase of 25% of price even when child was 	Mike will look into this and respond

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	<p>seen on the same day at PCH.</p> <ul style="list-style-type: none"> • Lauri suggests they we address the issue of what is included in the fitting fee. The obligation is for the audiologist to provide the care laid out in the audiologist application. On the fitting fee sheet that we ask to be submitted should be a good determination of what their care is. At minimum we ask them to see the child 2 times for follow-up and report back to us. The concern is if the audiologist is getting paid upfront for 3 years and then someone else is only getting payment for 1 year is this fair? • Lauri suggests we could possibly solve this by adding a period of time on the application (1 year, 2 year, 3 years). Stephanie suggests we say the time period is 1 year to even out the playing field to avoid increase of fees. • Clarify on Payment Request cover sheet and the Audiology Application to reflect the 1 year requirement of follow-up services. If their plan is longer, they will need to adjust accordingly to meet the 1 year requirement of CHAPP. Jenny asks to change the word monthly income to annual income on the PFR (Patient Financial Responsibility) form. The committee approved both of these requests. 	<p>Stephanie/Jenny will update forms.</p>
<p>Questions that have been posed - Is Amy continuing with CHAPP</p>	<ul style="list-style-type: none"> • Mike emailed Amy but had no response from her yet. He will give her a call as one last attempt. If no response, we will need to think about someone else to be the family representative. • Jenny asks about a situation where an audiologist, would supervise someone else who is not one but does the fitting? We need clarification if a person who dispenses hearing aids are qualified to do a fitting, are they exempt from the law? Does a school audiologist need to be licensed by State of Utah? School personal thru DOPL. • We should require a licensed audiologist for children birth to 3 to do the fitting. This means that • EI cannot purchase they can only fit. So USDB is not able to participate in the CHAPP. 	<p>Jennifer to give Mike her number</p>

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	<ul style="list-style-type: none"> • Response must be dispensed by licensed audiologist. • Lauri - EI person asked child with Downs with hearing loss but is needed for only a short period of time - Q about a loaner aid? Answer would be yes they would qualify but is not a good use of CHAPP program. 	
<p>CHAPP Evaluation Process</p> <p>- Jenny to show compiled data</p> <p>- Discuss measuring success of this pilot program</p>	<ul style="list-style-type: none"> • Mike asks Jenny to present the data with a PowerPoint to show the averages and ranges of the fitting fee, and anything that stands out. Things we might want to present to legislature. Are we covering state wide? What are the counties? Maybe we could imitate the regions like EI (Early Intervention) has since we have to report on EI referrals. Looking over the spreadsheet are there data points we should be looking at such as the nature of hearing loss we could look at mild and moderate. Where are we getting the referrals from? • Jeremy asks why 2 kids did not qualify according to the data. Since the insurance covered a percentage the family didn't qualify. • Jeremy suggests we compile how many failed their 1st and how many completed their 2nd failed NBHS (New Born Hearing Screening). Of those, how many XIX (Medicaid) covered for hearing aids, how many CHAPP covered, and what percentage families covered themselves. The state can get data on how many hearing aids were covered by xix for 2013. This helps to build the picture. • In 2012, out of 106 newborns with a permanent hearing loss, 78% were not covered by Medicaid. • These families have insurance but it was not covered under it so we are getting a great population • Mike suggests that we can start the power point that we can build on to help us create more questions and to show the data every time as a mock presentation to legislature. This will help us to understand better. Maybe an outside source could come and see our presentation. 	<p>Jenny to present data at next meeting with pp</p> <p>Jenny to add county and EI region on data</p> <p>Stephanie will get data for 2013</p>

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	<p>Timeline - committee, 1st CHAPP application, etc...</p> <ul style="list-style-type: none"> • 2011 Early fit 18 fittings, we have fitted 7 and 7 are in process with CHAPP. Operations and accomplishments - name these slides • Lauri asks that we compile data and think about the report to the legislature to address child outcomes. We could survey Early Interventionists, audiologists and then to parents to measure this outcome. We can ask if they have a standardized checklist where they document number of visits and what measure they use to document progress. Rebecca suggests we look at the children who are required to enroll because of these program vs children that were already enrolled and then applied for CHAPP. • Goal of program is to get hearing aids to kids who wouldn't otherwise get them so they can go through the correct channel of care that they would have normally. If a child has a hearing loss, audiologists are required by law to refer to EI. • Outcomes will be hard to measure so we need to pin down what the legislature want to know. Better data would be how CHAPP helped serve the parents. Jeremy will come up with survey questions for the parents and audiologists and then we can decided what the next step is. 	<p>Jeremy to write surveys to discuss at next meeting</p>
Future meetings	April 29 th at 1:30	
Adjourn	3:00 pm	