The Benefits of Using Audiology Assistants in a Cochlear Implant Program

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Disclosures

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INTRODUCTION

• Demands are increasing for clinicians to be financially productive. Greater emphasis is being placed on
  • Audiology productivity and provision of billable services
  • Patient access
  • Patient satisfaction
  • Quality of care

• The University of Michigan Cochlear Implant program initiated a Cochlear Implant Audiology Assistant position in 2016. In this presentation we will review the benefits of such a position.
Many programs are looking for ways to improve the bottom line

- Dispense/sell hearing aids for CI patients’ contralateral ears
- Increase the number of patients seen in an average day
  - Decrease the average amount of time spent with patients
  - Decrease the amount of time allotted for non-billable procedures
  - Offload the non-billable or non-expertise components of the audiologist’s day, which facilitates both of the above
Medicare Fee Schedule Common CI CPTs

- CPT 92604 – Subsequent programming >7 years
  - Non-facility $92.52, Facility $69.84
- CPT 92626 – Evaluation of Auditory Rehabilitation Status, 1st hour
  - Non-facility $91.80, Facility $77.76
Medicare Fee Schedule Common CI CPT Codes

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• If an audiologist costs ~ $50/hour, this does not leave that much room for profit
Test Assist for young pediatric patients

- In our program, we typically utilize 2 professionals when testing or programming patients less than 4 years of age
  - Improves reliability of test responses
  - Improves efficiency of audiometric testing and sound processor programming
    - Expedites pre-operative testing
    - Enhances patient care
    - Minimizes number of appointments needed for assessment or mapping
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• If an audiologist costs ~ $50/hour X 2 = $100/hour, this leaves no room for profit
We all spend time providing non-billable services

- CI Smart (2009) initiative determined that clinicians spent ~ 44% of their time performing other non-billable services (ONB)
- Dunn (2018) reported that audiologists continue to spend ~1/3 of their time providing ONB
- Counseling, troubleshooting, scheduling, responding to emails and phone calls are NOT billable services
- All of these are ESSENTIAL components of a CI Program

- Our bottom line can improve if we offload some of these services to an audiology assistant
Audiology Assistants make $ense

• According to ZipRecruiter.com, audiology assistants typically make about $34,305 annually (range = $20-60K)
  – Plus benefits at 31.7% = $45,179 annual, $21.72/hour

• Average annual salary for audiologists = $75,000
  (https://www.asha.org/uploadedFiles/2016-Audiology-Survey-Annual-Salaries.pdf)
  – Plus benefits (31.7%) = $98,775 annual, $47.48/hour

• In an “average” scenario, audiologists cost about $25/hour more than a typical audiology assistant
Potential Job Responsibilities of a CI Audiology Assistant

• Management of processor upgrade requests, completion of order forms
• Insurance preauthorization for hearing aids and processor upgrades
• Daily Maintenance of
  – Test equipment/calibration - Test Forms and materials
  – Loaner HAs/SPs - Toy cleaning
• Programming and Hearing test assistance for young children, difficult to test
• Hearing aid and sound processor troubleshooting and assistance for telephone requests or “walk-ins”
What’s the Value of reducing ONB?
Reducing Other Non-Billable Activities

31% of 1 FTE = 12.4 hrs/wk

Reduce ONB by 25% (3.1 hrs) = 161 Patient Contact Hours per Year = 1 FTE Audiologist for 1 MONTH
From July 1, 2017 – July 1, 2019, our CI technician served as a test assistant for 662 appointments, opening the schedule for 662 additional one hour appointments.

- 662 x $69.84 = ~ $46,340 in additional billing
  - CPT 92604 – Subsequent programming >7 years
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Salary savings of $25/hour X 662 = $16,550.00

Improvements in audiology productivity (less time spent on ONB)

Improved access for new patients
• Develop a Return on Investment proposal that outlines
  – **Savings** possible with the addition of an audiology assistant
    • Track ONB in your clinic and include this in your report
  – **Indicate** that such a position will facilitate: **-improvements in patient access, patient satisfaction, employee engagement, and quality of care**
ASHA and AAA Guidelines

• ASHA (Audiology assistant certification program coming in 2020)
  • [https://www.asha.org/Practice-Portal/Professional-Issues/Audiology-Assistants/](https://www.asha.org/Practice-Portal/Professional-Issues/Audiology-Assistants/)

• AAA
  • [https://www.audiology.org/publications-resources/document-library/audiologists-assistant](https://www.audiology.org/publications-resources/document-library/audiologists-assistant)
What Programs Are Available?

Depending on your state's regulations, you can pursue educational programs at multiple levels. Training and certificate program opportunities in areas like audiology assistance or speech-language pathology may take as little as six months to complete. Associate and bachelor's degree programs are also available in subjects like communication sciences and disorders, audiology and speech-language pathology.

Some schools that offer degree and non-degree programs in audiology or speech pathology assistant include:

- Metropolitan State University of Denver
- University of Northern Colorado
- Mitchell Community College
- Kent State University
- Cerritos College
- Fayetteville Technical Community College
Online training programs

• Online:
  https://hearinghealthmatters.org/hearingnewswatch/2017/new-audiology-assistant-training-program-online-0223/

• Nova Southeastern:
  https://healthsciences.nova.edu/audiology/aud_assistant/index.html

• Audiology Academy sponsored by ADA
  https://www.audiologyacademy.com/
  – Prices for training and content: $595/user - $1,500/clinic

• In our experience, on-site training of an existing administrative staff has been beneficial
Summary

• In our experience, the addition of an audiology assistant has resulted in numerous improvements in our program:
  – Enhanced availability for troubleshooting
    • Improved patient satisfaction
  – Improvements in employee engagement
  – Improvement in clinic efficiency and quality of care
    • Test forms, equipment maintenance
  – Improvements in clinic appearance
  – Enhanced productivity
Thank you

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