Hearing aids provide important benefit for the majority of people with hearing loss. Cochlear implants provide meaningful access to sound for those with more severe hearing loss. Only 5% of US adults who could benefit from CIs have them. The average primary care medical practice includes 8 adult patients who would benefit from a cochlear implant.

**Background**
- Adults who could benefit from CIs typically do not know they are candidates nor what the expected outcomes are
- Age is not a contraindication for CI in otherwise healthy people
- Hearing loss is often progressive
- Hearing acuity declines may be due to noise exposure, genetics, disease, trauma, or ototoxic medications

**Impacts of Under-treated Hearing Loss**
- Impairs communication at work, in social settings, and with family
- Interferes with medical treatment and in carrying out activities of daily living
- Associated with social isolation, depression, all-cause dementia, and declines in mental flexibility in older adults

Cochlear Implantation involves the surgical placement of an electrode array into the cochlea of the inner ear to provide direct electrical stimulation of the auditory nerve. Cochlear implants are different from hearing aids. While hearing aids amplify sounds to facilitate sound detection by impaired ear structures, cochlear implants bypass damaged portions of the ear and directly stimulate the auditory nerve. This type of stimulation improves clarity and speech understanding. Advances in the technology, including combining hearing aids with CIs, have expanded candidacy to include individuals with usable residual hearing.

- Surgery is performed by an otolaryngologist specializing in hearing implants
- Evaluation and follow-up is carried out by a multidisciplinary team that includes an ENT surgeon and an audiologist
- Since initial approval by the FDA in 1985, CIs have evolved to provide sound that allows clear speech. Most recipients can converse on the phone (without seeing the speaker)
- Dramatically improves quality of life, even beyond that of many typically performed medical procedures such as knee or hip replacement
- 100,000 Americans have received cochlear implants, a utilization rate among adults who may benefit of 5 percent
- Low utilization is due to a lack of awareness about candidacy and outcomes
Insurance Coverage
Unlike hearing aids, which are typically not covered by health insurance, cochlear implantation is covered for appropriate candidates by most private health insurance plans, Medicare and Medicaid.

Referrals for a cochlear implant evaluation should be made to a CI center or clinic. Such specialized centers may be found on the website of the American Cochlear Implant Alliance (www.acialliance.org) under “Find ACI Alliance Organizations” or on the websites of the three FDA-approved manufacturers (www.advancedbionics.com, www.cochlear.com, www.medel.com).

More Information on cochlear implantation is available from the American Cochlear Implant Alliance, a not-for-profit organization of cochlear implant clinicians, scientists and consumer advocates. A more detailed and referenced version of this Clinical Guidance is available on the ACI Alliance website.

An electronic version of this document is available: http://www.acialliance.org/page/AdultCandidacy

A more detailed version of the document with references is available: http://www.acialliance.org/page/AdultCandidacyRef

Approved by the Board of Directors, American Cochlear Implant Alliance, February 3, 2017.