

“Adopted” Patient Hearing Device Policy

Obtained/Purchased Devices Elsewhere

- We will welcome seeing patients who have purchased hearing aids elsewhere.
- We are unable to adjust programming/prescription of Costco, Sam’s, Miracle Ear, Audibel, and Audigy devices because their devices are “locked” to outside adjustments; but are happy to perform routine clean & check, parts or supplies dispensing, or verification measures of existing prescription settings.
- Patients can assist us in obtaining their previous hearing tests and hearing aid programming information.
- All “adopted patients” will read and sign our “statement of understanding”
- Charges are coded as a HA consultation or HA check on the superbill/charge slip; insurances consider these services non-covered, so payment for service/appointment time will be due at time of appointment.

From Local Competitors

- We will see patients who have obtained devices from our local competitors. This can include VA patients.
- First visit will have a discounted “adoption” charge of \$200 for up to 1 hour (usual visit fee \$300 1-hour), AND includes 1 Complementary follow-up visit within 1 year.
- Subsequent visits will be charged at \$150 per ½ hour. Drop-off repairs without in-person provider visit, subject to \$50 fee.
- Additional ear mold, repair/parts, and diagnostic or ear cleaning service fees will apply.
- The audiologist retains the right to turn away the patient if aspects of the case seem untenable or problematic.

Moved Here from Outside the Area

- First visit will have a discounted “adoption” charge of \$75 per ½ hour or \$150 per 1 hour (usual visit fee \$300 per 1-hour), AND includes 1 Complementary follow-up within 1 year.
- Additional repairs and S&H costs, warranties to be claimed, diagnostics performed, parts, and other services (ex: ear cleaning) incur usual & customary fees per service.
- Subsequent visits will be charged at \$150 per ½ hour. Drop-off repairs without in-person provider visit, subject to \$50 fee.

Hearing Aid Services Agreement Statement of Understanding

I, _____, agree that I am asking _____, a LTHAA audiologist to evaluate and review my hearing aid amplification system (monaural or binaural) which was fit and purchased elsewhere at _____. I will pay for the initial “adoption” appointment and consultation for up to 60 minutes in duration, including one complimentary follow-up. I will be charged separately (and in addition to the adoption fee) for hearing tests, repairs, warranty, services, etc. I will also pay for any and all return or follow-up appointments after included adoption visit + 1 follow-up.

I understand _____ will apply his/her expertise and best efforts in order to evaluate or improve my current devices as best as practicable in the audiologist's opinion. I recognize that the LTHAA audiologist did not select the hearing aid technology, ear coupling design, or device shape and style, and is perhaps dealing with choices made by a previous dispenser that may not be the preference of your LTHAA audiologist. I will not hold LTHAA responsible for my satisfaction of the outcome arising from their efforts to evaluate and/or improve my existing hearing aid status. I understand that I am paying for their time and their services in an attempt to help me with my hearing aids that were designed, programmed, and purchased elsewhere.

Patient signature: _____ Date: _____

Audiologist: _____ Date: _____