

IHP AUDIOLOGY

Appointment Types / Fee Schedule /
Invoicing / Documentation
Requirements

Appointment Types and Fee Schedule:

ABR - 2 hours (maximum** of three visits per assessment)

- This test is typically for infants under six months corrected age.
- The initial assessment is targeted to be completed by eight weeks corrected age. Some infants may also qualify for a follow-up ABR assessment based on the presence of specific risk factors.
- Typically, these infants will have referred on their hearing screen but may also have bypassed the hearing screen due to a Group 3 risk factor OR as a follow-up assessment for these children.
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- Those that screen positive on the risk factor screen may require an earlier appointment. If CMV is detected, testing should be arranged before four weeks of age wherever possible.

Diagnostic or Surveillance VRAIPLA Y - 1 hour (maximum** of two visits per assessment)

- This test is targeted for infants over 6 months corrected age.
- Assessments are considered surveillance if previous results have suggested normal hearing (i.e. "Pass" on screen or normal hearing on previous diagnostic or surveillance assessment) and diagnostic if previous results have suggested hearing loss may be present (i.e. "Refer" on screen, hearing loss on surveillance visit)

Habilitation/Counselling - 1 hour

- This appointment allows for time in excess of that usually spent reviewing results with families and is targeted towards those families who are having a hard time understanding or accepting the assessment results and their implications on the child's communication development.
- Note: a) Communication Development Plan and b) Service Coordination meeting attendance time to be included in this appointment type category.

Hearing Aid Evaluation - 1 hour

- This appointment should include a discussion of amplification options, completion of RECDs with foam tip and baseline Outcome Measures and may include the completion of the actual prescription in some cases.

Hearing Aid Prescription - 1 hour

- This is additional time for the audiologist to complete the appropriate prescriptive process including completing the prescription paperwork/ADP application/ACSD letter, as necessary, and determination of preferred initial settings for the hearing aids. The parent/child need not be present during this time.

Initial Hearing Aid Verification - 1 hour

- This appointment involves the fitting of the hearing aid to the child's ear for the first time. This should include the completion of RECDs with custom earmolds, verification of hearing aid settings and baseline Outcome Measures, if not previously completed.

Trial Period Hearing Aid Check - 1 hour

- This appointment should address any amplification concerns and include the completion of RECDs with custom earmolds, verification of hearing aid settings and baseline Outcome Measures, if not previously completed.

*Unaided Follow-up - 1 hour

- Requires the completion of Diagnostic VRA/PLAY and Outcome Measures

*Aided Follow-up- 1 ½ hours

- Requires the completion of Diagnostic VRA/PLAY, completion of RECDs with custom earmolds, verification of hearing aid settings and Outcome Measures

* These appointments are funded every three months for the first year following identification/fitting, every six months for the second year and annually thereafter until the child ages out of IHP on their 6th birthday).

If a child is not cooperative for testing:

1. A surveillance (ABR or VRA) appointment can be rescheduled if results are inconclusive (maximum two visits). Please attempt to obtain enough information to determine whether, in your professional opinion, a permanent hearing loss is likely to be present even if the child has not provided ear-specific threshold information. If there are no concerns, please provide milestone information to the family and discharge OR if under Intensive Surveillance, move the child on to the next surveillance visit.
2. 2Diagnostic appointments should be rescheduled as necessary to rule out hearing loss. Should an ABR not be substantially completed after three visits, a consultation with your OTC is recommended. The result of this may be a recommendation for a sedated assessment.

**Please contact the Manager, Early Years (IHP) at infanthearing@surreyplace.ca to authorize additional visits maximum. Rate per hour is \$125.

Invoicing:

The Service Provider will be responsible for sending monthly invoices to IHP for every audiology service, compensated as per above descriptions, within 10 days of the last day of each month.

Each invoice must contain services only for one month. (I.e. January 1st - January 31st) and must be accompanied by Audiology Services Monthly Invoice Summary

The invoice will be generated by the Hospital, based upon the cost arising from the combined number of Cost Tracking Forms submitted each month. The invoice and summary form for each installment will be sent to:

Surrey Place – Accounts Payable
accounts.payable@surreyplace.ca