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June 24, 2011

The Honorable Chris Christie  
Office of the Governor  
PO Box 001  
Trenton, NJ 08625

Dear Governor Christie:

As president of the New Jersey Association of Hearing Health Professionals (NJAHHP)-- the largest statewide association representing audiologists and hearing aid dispensers in New Jersey--I am writing to express our members' concerns with the Administration's Medicaid proposal that will eliminate access for nearly 23,000 low-income New Jerseyans to quality healthcare and transfer more than 200,000 Medicaid participants from the program's fee-for-service plans to restrictive health maintenance organization (HMO's) plans.

While the Association understands that the state continues to face a severe budget shortfall, NJAHHP believes shifting the burden to New Jersey's most vulnerable residents to bridge the budget gap is unfair and will end up costing the state more money. By reducing patient access to routine care, more residents will end up seeking expensive emergency treatment, further saddling our state's already stretched healthcare system.

In the field of hearing health, if permanent hearing loss of any severity is not identified early and treated correctly, studies show that long-term medical costs increase, special education expenditures for children rise, and long-term productivity is reduced. With significant hearing loss being one of the most common birth defects in the United States (note: American Academy of Pediatrics reports that 3 newborns per 1,000 are deaf or hard-of-hearing and approximately twice that acquire permanent hearing loss by school age), limiting access for families to receive critical hearing health services does not make sense from a societal and financial standpoint. Unfortunately, the Administration's proposed plan will do just that by severely reducing the eligibility threshold and requiring thousands of patients to utilize limited HMO plans instead of fee-for-service.

Reimbursement rates for NJAHHP members that serve the state's Medicaid population for hearing aid fitting and other related hearing health care services are already dismally low. Managed care companies traditionally offer even lower rates, which will likely drive more providers out of the scarce market. Compound this with the inadequate number of

hearing centers that currently exist in the state to serve HMO Medicaid plans, and it becomes clear that patient access to acute hearing health services and ongoing care will be greatly compromised under the Administration's proposal.

Switching thousands of patients to Medicaid HMO's from fee-for-service plans may look good on paper from a budgetary standpoint, but its implementation threatens their ability to receive comprehensive hearing healthcare, as hearing instrument specialists will no longer be able to afford to treat these patients. Simply put, HMO's low reimbursement rates, coverage restrictions and limitations, and long history of failing to grant timely authorization and reimbursement make the plans uncompetitive for our members. Unfortunately, it will be the patients who will bear the cost in inadequate care.

We respectfully ask that you reconsider action on this proposal.

Sincerely,

A handwritten signature in blue ink, appearing to read "D. A. Weesner", with a long horizontal flourish extending to the right.

**David A. Weesner, AuD**  
**President**  
**New Jersey Association of Hearing Health Professionals**