



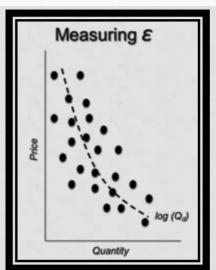
DEMAND AND HEARING AID MARKET

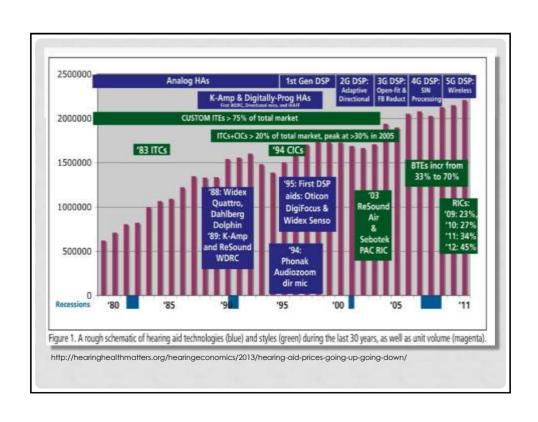
• Demand function (E) within the hearing aid market is inelastic (Agron, 1987; Lee & Lotz, 1998; Amlani

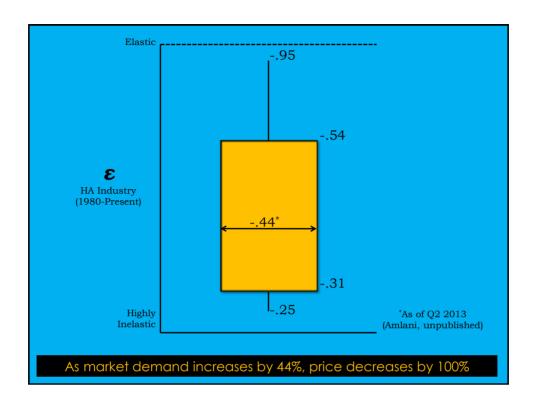
• An inelastic market means that consumers are <u>not</u> price sensitive (i.e., $\varepsilon < |1|$)

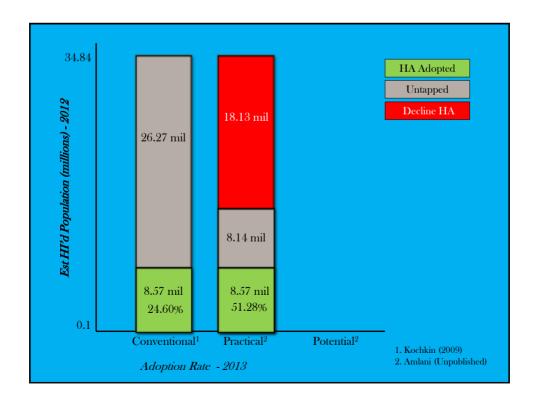
& De Silva, 2005; Amlani, 2010)

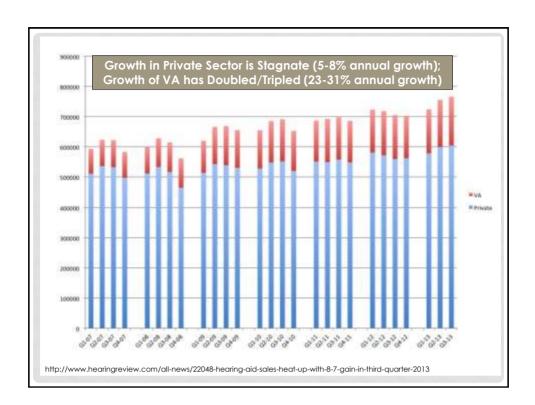
- No depreciable decline in quantity sold when price is increased
- No appreciable increase in quantity sold when price is decreased











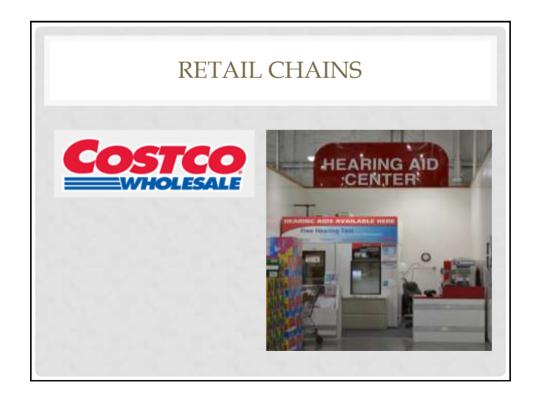
- Who is the bigger threat to the demand of hearing aids?
- A. "Big-box" retail chains (e.g., Costco)
- B. Hearing aid manufacturer-owned practices

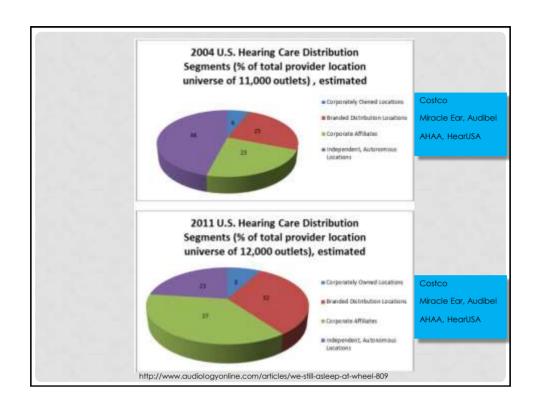
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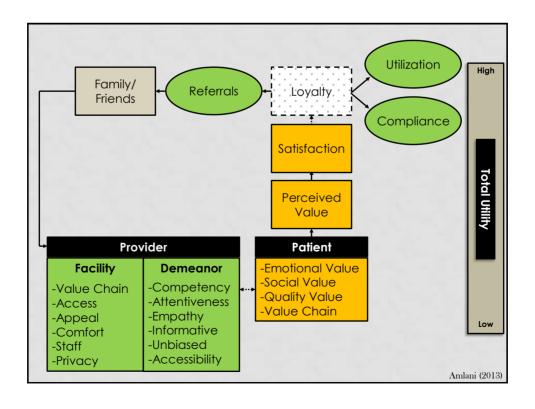
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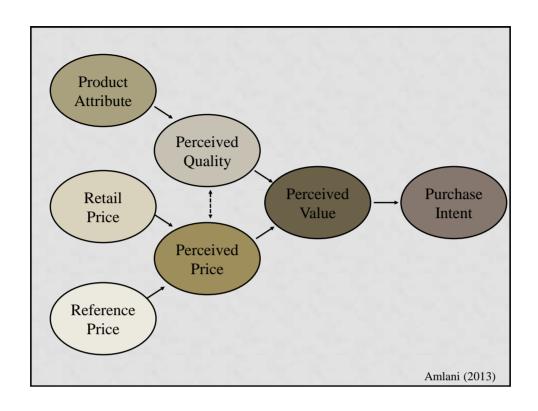


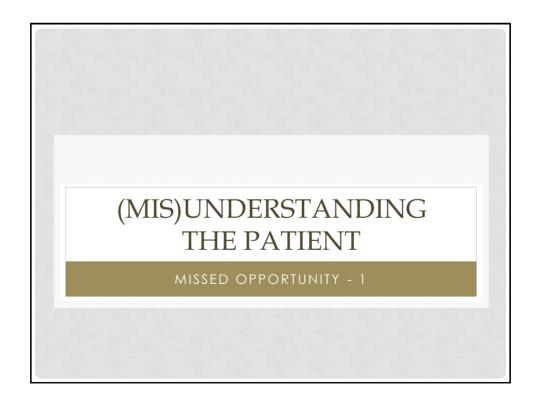


IT	S AUTONOM?	Y?
Ve	stibular Assessm	ent
1992*	1998*	2008**
51%	47%	37%
Vestibula	r Diagnosis/Inte	rpretation
1992*	1998*	2008**
	80%	56%
	CAP Assessmen	
1992*	1998*	2009***
64%		37%









PATIENT EXPECTATIONS

(AMLANI & D'ABREO, UNPUBLISHED)

- Pilot study (23 DFW Practices; 54 Patients)
 - Dispensers (AuD, HIS) expectations of hearing healthcare differ from those of patients
- Dispensers
 - Product-driven
 - Unwilling to assist if product is not purchased from that dispenser
 - Price
 - Physician Referrals
 - Advertising/Marketing
 - Device Brand

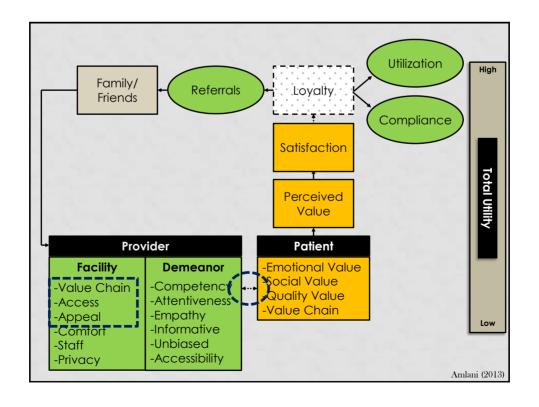
- Patients
 - Service-driven (Counseling, Rehab)
 - Practice Reputation
 - Lack Knowledge of Degree Differences of Providers
 - Family/Friend Recomm.
 - Dispenser Competency
 - Payment Options

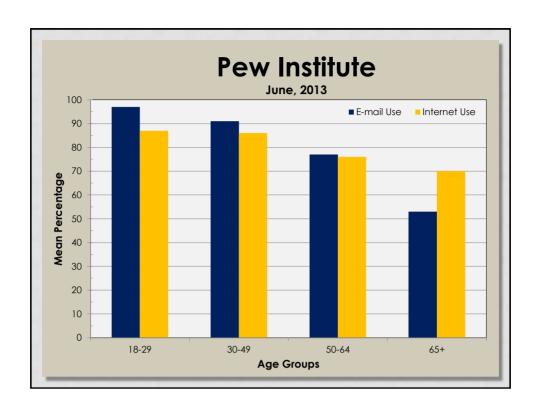
PATIENT EXPECTATIONS

(AMLANI & D'ABREO, UNPUBLISHED)

- Pilot study (23 DFW Practices; 54 Patients)
 - Dispensers (AuD, HIS) expectations of hearing healthcare differ from those of patients
 - Dispensers
 - Assume that aided audibility benefits listening in all situations
 - Assume that experienced and inexperienced listeners have the same needs
- Patients
 - Experience "significant" problems in at least >3 environments using the device
 - Experienced and inexperienced listeners have different needs



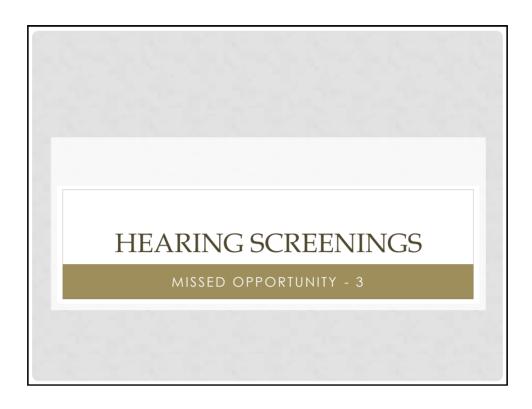






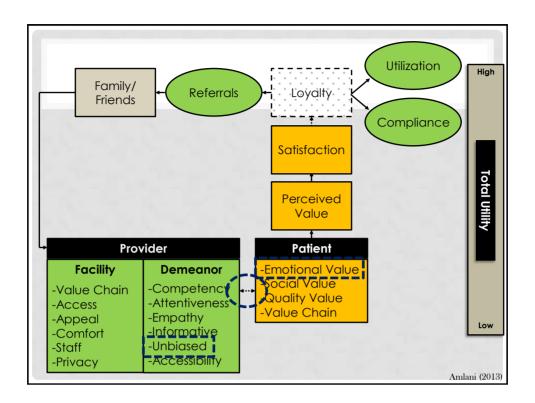






HEARING SCREENING

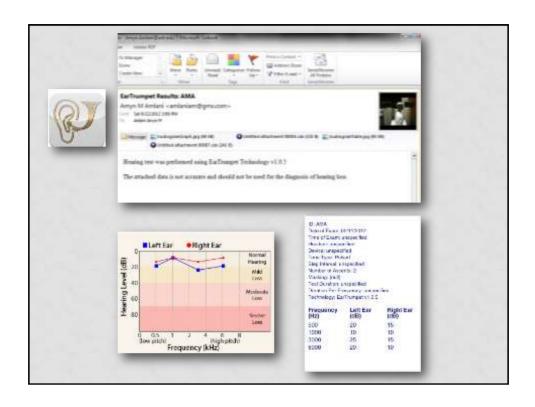
- ~18% of face-to-face adult hearing screenings result in provider compliance and recommendations
 - Increase in denial for hearing loss
 - Increase in perceived pressure for hearing aids,
 <u>NOT</u> audiological services



IMPROVING REFERRALS THROUGH SMARTPHONE HEARING SCREENINGS

(AMLANI & RUSSO, UNPUBLISHED)

- Group 1 (n = 104)
 - Traditional hearing screening
 - Otoscopy, tympanometry
 - 20 dB at 1000, 2000, 4000 Hz
 - 30 dB at 500 Hz (based on behavioral testing)
 - · Traditional counseling
- Group 2 (n = 104)
 - Smartphone Application on iPad 2 with Standard Apple Earbud Headphones
 - No counseling
 - Provided e-mail account for folks who wanted additional testing/counseling



IMPROVING REFERRALS THROUGH SMARTPHONE HEARING SCREENINGS

(AMLANI & RUSSO, UNPUBLISHED)

- Results
 - Group 1
 - 16 listeners, out of 104, made appointments for diagnostic testing (i.e., 15.4%)
 - 11 had sufficient hearing loss that required amplification
 - Group 2
 - 31 listeners, out 0f 104, e-mailed their results and made appointments for diagnostic (i.e., 29.8%)
 - 21 listeners had sufficient hearing loss that required amplification
 - False positives in 6 listeners
 - Not a bad thing opportunity to build relationship for the future

Odds of referral increase by 1.94 (i.e., 16/31) times using a smartphone compared to traditional methods

IMPROVING REFERRALS THROUGH SMARTPHONE HEARING SCREENINGS

(AMLANI & RUSSO, UNPUBLISHED)

- Results
 - Group 1
 - 11 candidates for amplification
 - 4 listeners underwent trial periods with amplification

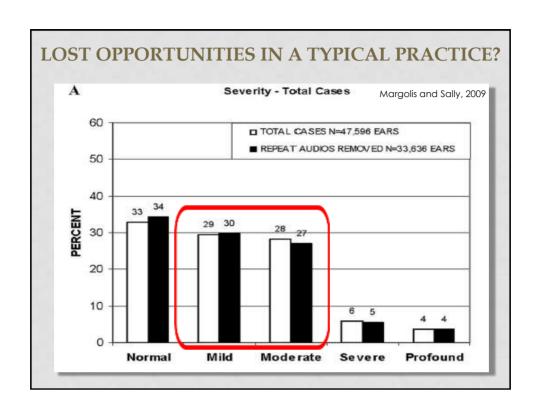
Closure Rate = 36%

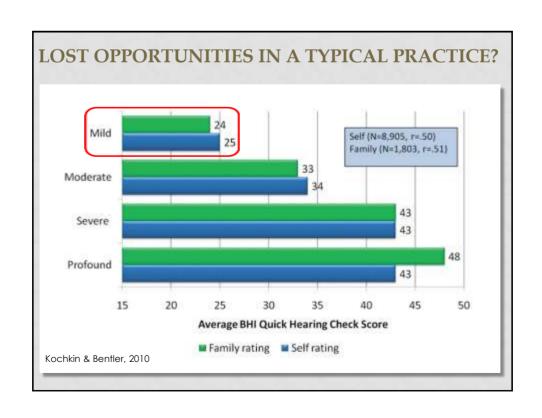
- Group 2
 - 21 candidates for amplification
 - 15 listeners underwent trial periods with amplification

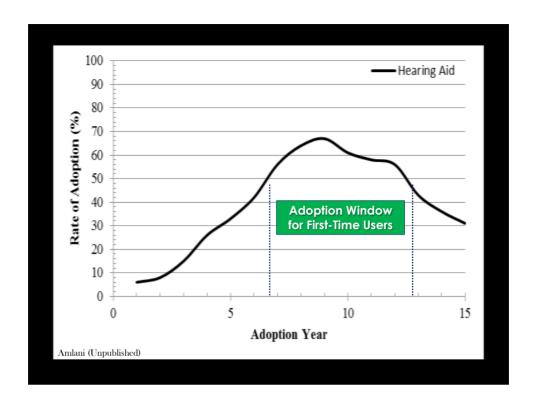
Closure Rate = 71%

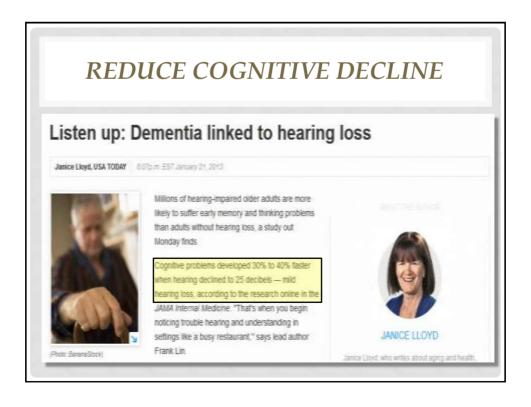
Is it possible that smartphone applications increases selfacceptance of hearing loss and need for amplification?

MILDER HEARING LOSSES MISSED OPPORTUNITY - 4









Waiting time and "price elasticity"

A multiple regression study of the demand for gasoline at individual Boston-area service stations found that the elasticity of demand with respect to the price of gasoline was -3.3.

Customers of service stations, however, pay two prices: one in money to the seller and another in the form of waiting time. Estimates of demand must take into account the customers' sensitivity to waiting. If a station raises its price by 1%, its customers must pay 1% more in money. But this tends to reduce customer purchases. Given the station's fueling capacity, the reduction in purchases will reduce waiting times, which tends to increase the quantity demanded.

Accordingly, the estimated "price elasticity" of -3.3 combines the responsiveness to an increase in price alone together with the responsiveness to a reduction in waiting time. After adjusting for the effect on waiting time, Png and Reitman estimated that the pure own-price elasticity ranged between -6.3 and -8.4.

Other businesses that serve randomly arriving customers from a fixed capacity include Internet service providers, banks, hospitals, and supermarkets. In estimating the ownprice elasticity of demand at any such business, an analyst must take care to adjust for the effect of price changes on waiting times.

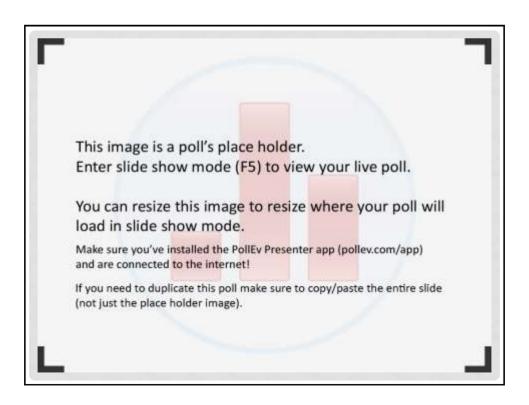
Source: I. P. L. Png and David Reitman, "Service Time Competition," RAND Journal of Economics 25, no. 4 (Winter, 1994), pp. 619–34.



 Are smartphone hearing aid applications a threat to your business?

A. Yes

B. No



FDA REGULATIONS

3. Personal Sound Amplification Products (PSAPs)

PSAPs are intended to amplify environmental sound for non-hearing impaired consumers. They are not intended to compensate for hearing impairment. Examples of situations in which PSAPs typically are used include hunting (listening for prey), bird watching, listening to lectures with a distant speaker, and listening to soft sounds that would be difficult for normal hearing individuals to hear (e.g., distant conversations,

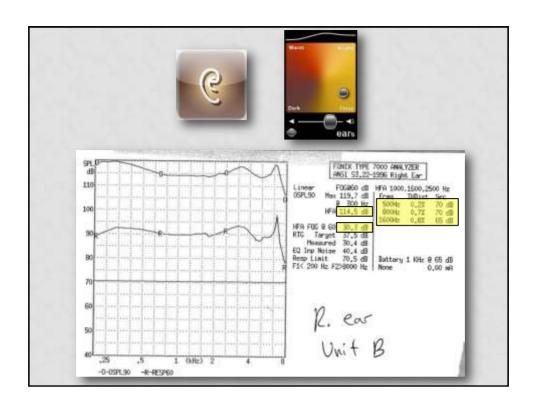
performances). Because PSAPs are not intended to diagnose, treat, cure or mitigate disease and do not alte the structure or function of the body, they are not devices as defined in the Food, Drug and Cosmetic Act. As such, there is no regulatory classification, product code, or definition for these products. Furthermore, there are no requirements for registration of manufacturers and listing of these products with FDA.

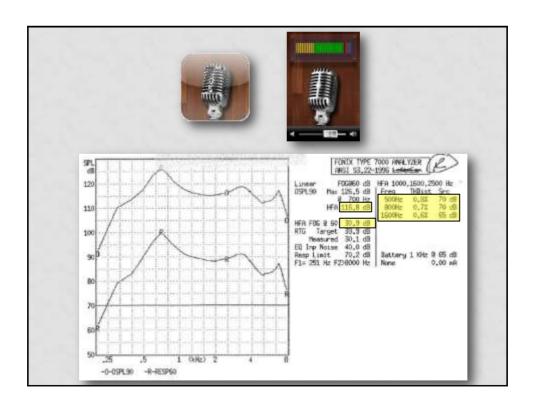
However, PSAPs are subject to applicable provisions of the Radiation Control for Health and Safety Act of 1968, under which FDA regulates electronic products that emit sonic vibrations, such as sound amplification equipment. (See also 21 CFR 1000.15.) Manufacturers of PSAPs must report defects and adverse events and take other measures described in 21 CFR Part 1003. Manufacturers of PSAPs must also comply with the requirements to repurchase, repair, or replace electronic products required under 21 CFR Part 1004.

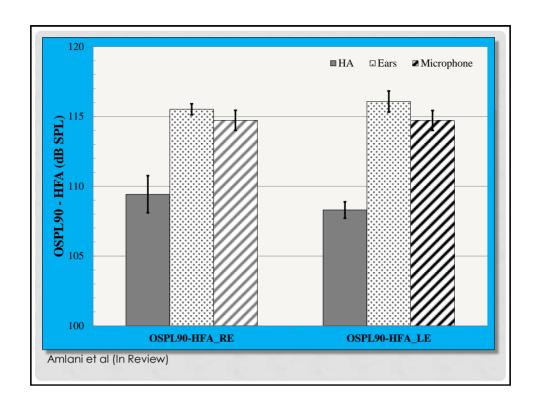
For questions regarding the requirements for PSAPs, please contact the Branch Chief for the Electronic Products Branch at 240-276-3291.

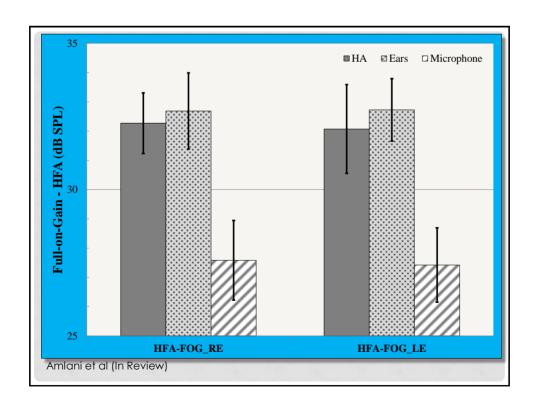
http://www.fda.gov/MedicalDevices/DeviceRegulation and Guidance/GuidanceDocuments/ucm127086.htm

UNITRON SHINE+ MO 312 BTE SLIM TUBE Shine+ Mode II ANSI 3.22 1996/ANSI 3.22 2003/IEC 118-7 2CC COUPLER TECHNICAL DATA Reference Test Frequency ANSI IEC 118-7 OSPL90 Maximum HEA at RTF Full on Gain (input so dB) at RTF Basic Frequency Response < 100-7800 Frequency Range (Hz) Reference Test Gain (AANSI 1996/ANSI 2003)

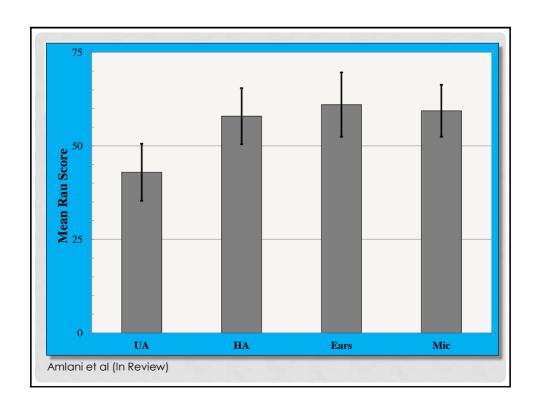


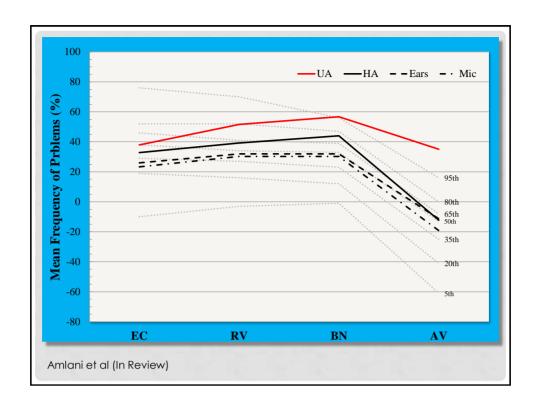


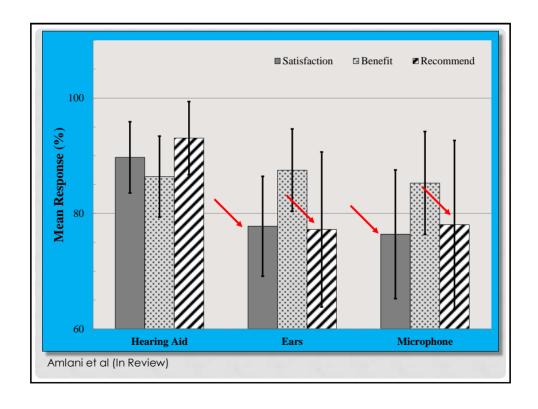








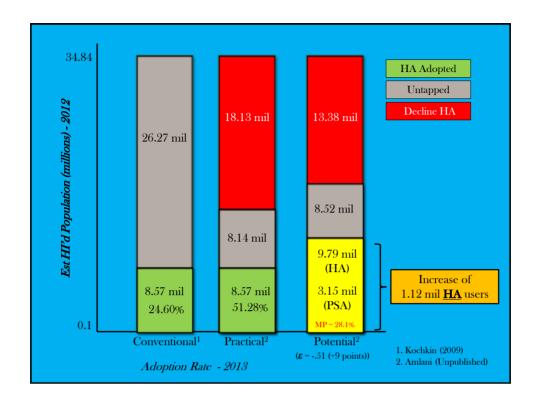




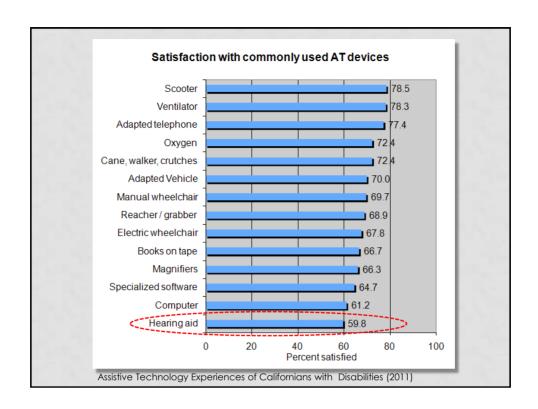
ADVANTAGES OF SMARTPHONE HEARING AID APPLICATIONS

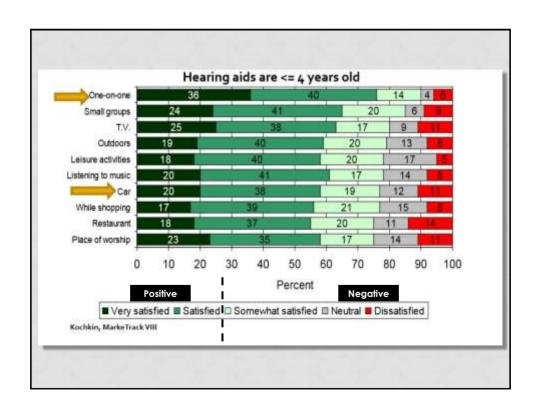
- Allow relationship to be built between patient and practitioner
- Increase revenue stream by providing out-ofpocket services
 - These services separate audiology from
 - Dispensers/Otolaryngologists
 - "Big-Box" Retailers
- Improve acclimatization
- · Reduce cognitive decline
- And...

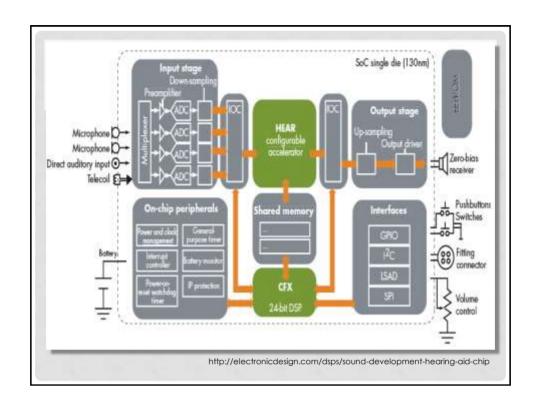
Substitutes: By far the most important generalization to make about the determinants of demand elasticity is that the more and the better substitutes there are for a commodity, the higher the elasticity of demand will be. Lipsey & Harbury (2004) Microeconomics (2" Edition) http://12milcbr.wordpress.com/2010/09/

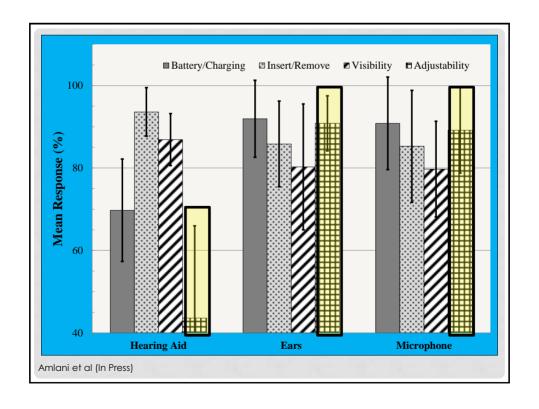




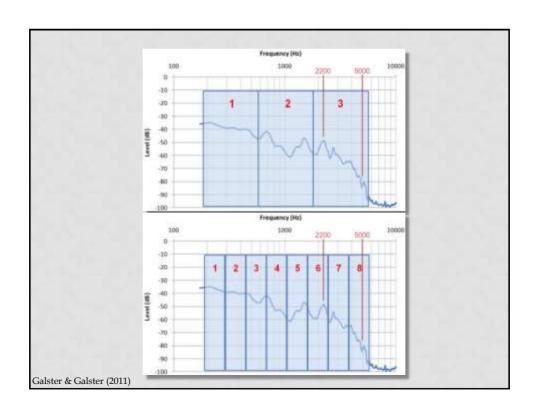


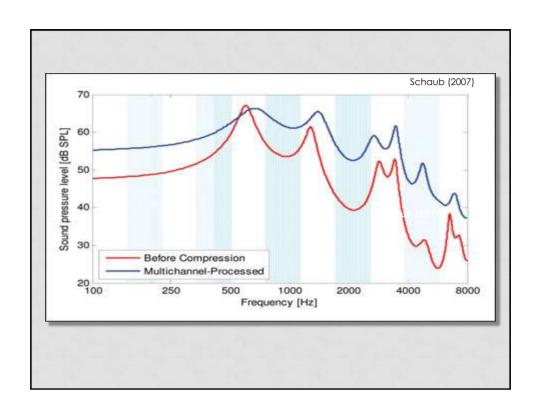






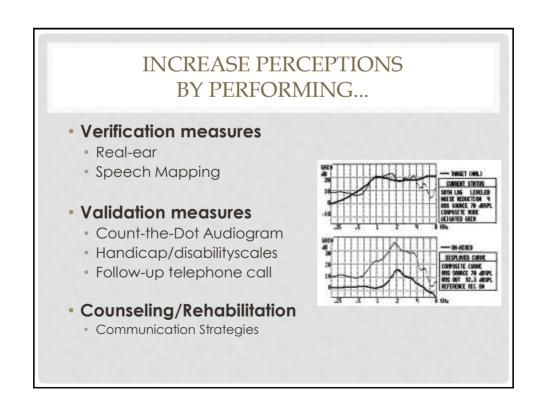


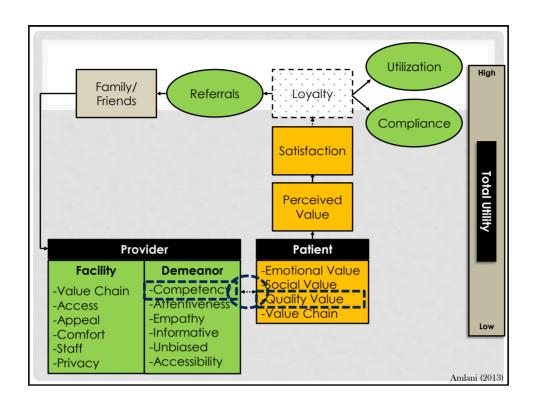






 Commercially available MCWDRC devices are often Linear designed with fast-acting compression Slow $T_{a} = T_{r} = 10T_{s}$ · Some manufacturers' design hearing aids such that the Medium attack (T_a) and release (T_r) $T_{cr} = T_{r} = T_{s}$ times in all channels are symmetrical $T_{c} = 0.1T_{s}$ $T_{r} = 0.3 T_{s}$ Dillon (2001)







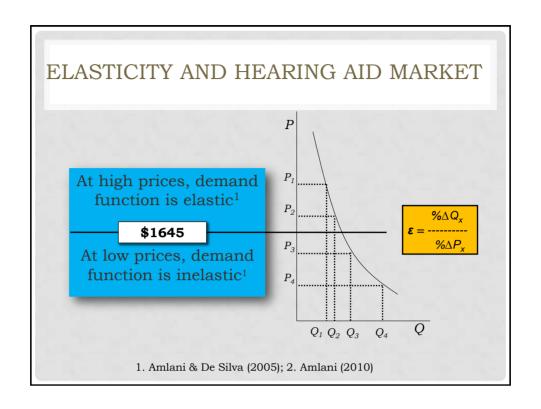
- Select a product below that you would purchase for the retail price of \$1.00.
- A. Pencil
- B. Thee-course meal at a five star restaurant
- C. Computer tablet

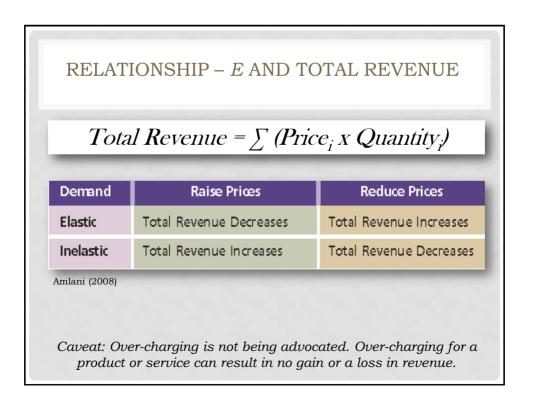
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Hypothe Data		Data – A Fiscal '			O
Q	$\%\Delta Q$	P	$\%\Delta P$	ε	R
20		\$ 1,000.00			\$ 20,000.00
17	-0.16	\$ 1,700.00	0.52	-0.31	\$ 28,900.00
14	-0.19	\$ 2,500.00	0.38	-0.51	\$ 35,000.00
11	-0.24	\$ 3,300.00	0.28	-0.87	\$ 36,300.00
8	-0.32	\$ 4,000.00	0.19	-1.65	\$ 32,000.00
5	-0.46	\$ 4,800.00	0.18	-2.54	\$ 24,000.00
<u>75</u>					<u>\$ 176,200.00</u>

		rio #1 – ce (-\$200			<i>50 '</i>
Q	$\%\Delta Q$	P	$\%\Delta P$	ε	R
21 (+1)		\$ 800.00			\$ 16,800.00
18 (+1)	-0.15	\$ 1,500.00	0.61	-0.25	\$ 27,000.00
15 (+1)	-0.18	\$ 2,300.00	0.42	-0.43	\$ 34,500.00
12 (+1)	-0.22	\$ 3,100.00	0.30	-0.75	\$ 37,200.00
9 (+1)	-0.29	\$ 3,800.00	0.20	-1.41	\$ 34,200.00
6 (+1)	-0.40	\$ 4,600.00	0.19	-2.10	\$ 27,600.00
<u>81</u>					\$ 177,300.00
					+\$1100.00

		ario #2 – ce (+\$20			<i>33 '</i>
Q	$\%\Delta Q$	P	$\%\Delta P$	ε	R
19 (-1)		\$ 1,200.00			\$ 22,800.00
16 (-1)	-0.17	\$ 1,900.00	0.45	-0.38	\$ 30,400.00
13 (-1)	-0.21	\$ 2,700.00	0.35	-0.59	\$ 35,100.00
11 (-1)	-0.26	\$ 3,500.00	0.26	-1.01	\$ 35,000.00
7 (-1)	-0.35	\$ 4,200.00	0.18	-1.94	\$ 29,400.00
4 (-1)	-0.55	\$ 5,000.00	0.17	-3.14	\$ 20,000.00
<u>69</u>					\$ 172,700.00
					-\$3500.00

Forecas	Forecast Scenario #3 – ABC Audiology, LLC Following Revenue Table				
Q	$\%\Delta Q$	P	$\%\Delta P$	ε	R
19 (-1)		\$ 1,200.00•			\$ 22,800.00
16 (-1)	-0.17	\$ 1,900.00•	0.45	-0.38	\$ 30,400.00
13 (-1)	-0.21	\$ 2,700.00•	0.35	-0.59	\$ 35,100.00
10 (-1)	-0.25	\$ 3,500.00•	0.26	-0.97	\$ 35,000.00
9 (+1)	-0.11	\$ 3,800.00	0.08	-1.28	\$ 34,200.00
6 (+1)	-0.40	\$ 4,600.00	0.19	-2.10	\$ 27,600.00
<u>73</u>					<u>\$ 185,100.00</u>
• = Increase Price	(+\$200) ♦ = I	Decrease Price (-	\$200)		+\$8900.00



Feature	Pure Price Bundling	Partial Price Bundling	Price Unbundlin
Hearing Aid	\$2200.00	\$2000.00	\$500.00
3 Memories	Included	Included	\$200.00
12 Channels, 8 Bands	Included	Included	\$200.00
Independent WDRC	Included	Included	\$200.00
Adaptive Directionality	Included	Included	\$250.00
Adaptive Noise Reduction	Included	Included	\$250.00
Adaptive Feedback Control	Included	Included	\$250.00
Professional Fee	Included	\$200.00	\$200.00
2-Year Mft Warranty	Included	included	\$150.00
Total	\$2200.00	\$2200.00	\$2200.00

- Which pricing strategy is employed in your practice?
- A. Price Bundling
- B. Partial Price Unbundling
- C. Price Unbundling

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