

Policy Brief

May 2023

LISTEN UP: EXPANDING MEDICARE OUTREACH FOR HEARING AIDS AMONG BLACK OLDER ADULTS



Executive Summary

Black older adults have disproportionately lower usage of hearing aids compared to the general population. Black adults do not perceive themselves as susceptible to hearing loss and lack the knowledge that

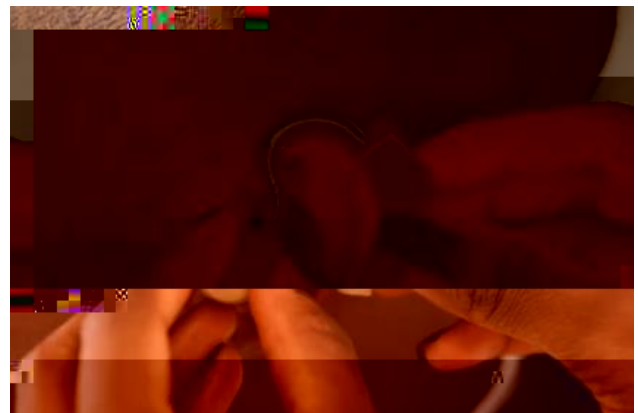
INTRODUCTION

While regulatory changes to Medicare, such as the annual wellness visit, have led to improved access to hearing aids by more older adults¹, Black Americans have been left behind in hearing aid adoption and utilization at the same rates as White counterparts.²

Older Black adults' usage of hearing aids is influenced by a variety of factors³. Black adults' perception of hearing loss and lack of knowledge about the risks associated with untreated hearing loss is the community's greatest barrier to hearing aid use.⁴

The lack of hearing aid ownership among Black older adults is associated negative health

outcomes and a myriad of costs – to people, families and Medicare.^{5, 6}

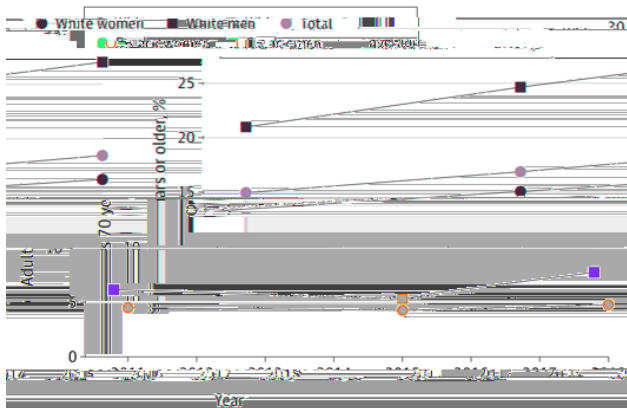


COMPELLING RESEARCH

Black Older Adults Left Behind in Hearing Aid Ownership²

While overall hearing aid ownership amongst U.S. older adults rose from 15.0% in 2011 to 18.5% in 2018, Blacks did not experience similar gains. While hearing ownership among Whites increased by 4.3%, Blacks only realized a 0.8% increase in hearing aid usage. When stratified by gender White men's hearing aid ownership increased by nearly 30% compared to Black women, who saw the smallest increase at 6%.²

Figure 1. Trends in Hearing Aid Use in U.S. Older Adults from 2011-2018²

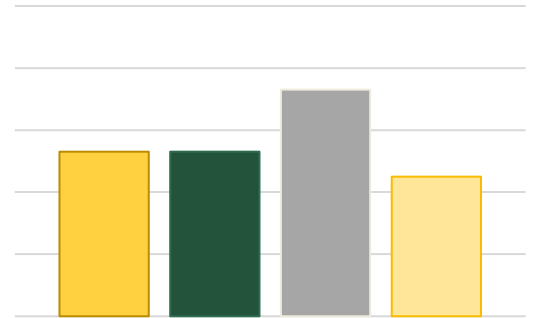


The cause of this disparity is not related to hearing healthcare access, as Black adults have been found to be 58% less likely to use hearing aids than White counterparts, despite being 68% more likely to have a recent hearing test.⁷

Black Older Adults' Perceptions Drive Hearing Aid Usage⁴

Hearing loss is not deemed as serious among Black adults. In one study, Black adults rated the seriousness of hearing loss to be a 5.5 on a scale of 1-10⁴. Respondents also did not view themselves at risk of acquiring hearing loss in the future, rating 4.5 in perceived susceptibility of hearing loss. Among those recognizing perceived severity of hearing loss, they were willing to pay more out of pocket for a hearing aid.

Figure 2. Willingness to by a hearing aid and perceived seriousness of hearing loss³



Blacks with Hearing Loss Have Greater Risk of Cognitive Decline⁴

A multiethnic sample of older adults with hearing loss indicated a 70% increased risk of dementia.⁴

While Black older adults have a lower prevalence of hearing loss than Whites, they have greater adverse cognitive health outcomes.

Black adults living with hearing loss have a 162% greater risk of developing dementia compared to a 61% risk amongst Whites.

Hearing aid use has been found to be one of the greatest protective factors against cognitive decline and dementia.⁸

Figure 3. Race, hearing loss, and risk of dementia.

POLICY CONTEXT

Medicare coverage, Title XVIII of the Social Security Act, is managed by the Federal Department of Health and Human Services and administered through the Center for Medicare and Medicaid Services. It is under the legislative jurisdiction of the Committee on Energy and Commerce and the Committee on Ways and Means in the House of Representatives and the Senate Finance Committee.

Blacks account for 33% of dementia healthcare costs while only being 13% of the U.S. population.

Increased Costs of Dementia for Black Older Adults⁵

Research suggests increased economic and familial costs of dementia associated with hearing loss. The combined medical and caregiving costs associated with the care of all persons in the U.S. with dementia were estimated to exceed \$500 billion in 2020.

Black older adults make up 33% of these costs, despite being only 13% of the U.S. population.

Figure 3. U.S. Costs for Alzheimer's and related dementia.⁵

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