

May 2016

## Public Funding for Cochlear Implant Services in the Southern Region – Adult Patients

### Background

This information sheet introduces changes to the way in which the SCIP will manage adult patients referred to the programme, and in particular the way in which patients are prioritized and wait-listed after assessment.

In November 2015 we undertook a survey of patients and referral agents. It was commented that we do not properly advise people of the likelihood of them receiving a funded implant. It is intended that the changes outlined here will give patients clarity about their ability to benefit from a cochlear implant and, more importantly, whether this will be government funded. Patients unlikely to receive Ministry of Health funding may then review other management options.

This information sheet is for health professionals who may be involved in the care of these patients, either before, during, or after referral. This includes Audiologists and ENT surgeons as the primary referral agents, as well as any other health provider involved in their care.

This information sheet will be distributed electronically to the relevant professional bodies. A copy will be made available on our web-site [www.scip.co.nz](http://www.scip.co.nz). A separate information sheet designed for patients is also available.

### Caseload Sizes and Referral Patterns

With improvements in technology, outcomes, and patient awareness, the number of referrals we receive each year has grown considerably, to the point where these exceed by some margin our ability to provide treatment. We receive over 100 new adult referrals each year with funding for 20. We currently have more than 110 patients assessed and recommended as candidates, with 55-60 patients added each year.

### CPAC Prioritization and the Waiting List

Until recently all patients assessed for a cochlear implant have been placed on a waiting list with a reasonable expectation that they could be seen for surgery, with average waiting times in the order of 20-25 months. Based on the length of our current waiting list and in combination with a recent pattern of referrals, we can no longer offer all patients the prospect of a place on the waiting list after assessment and candidacy recommendation.

The cochlear implant programme operates a national system of prioritization in much the same way that other elective surgical services prioritize services.

Patients are prioritized using this national “CPAC” tool (Clinical Priority Access Criteria) that takes into account:-

- The onset, progression, and prior treatment of the underlying hearing loss
- The presence of a vision loss in addition to hearing loss
- Work, education, and care-giver responsibilities
- The effect of the hearing loss on a person's quality of life and mental health

Once CPAC priority has been determined, patients will need to achieve a threshold score to be placed on a waiting list. The threshold score will vary at any point in time according to demand and the urgency of other referrals.

Once on the waiting list, the waiting time may still be up to 18 months. This waiting time may vary depending on the availability of funding. The CPAC score can be reviewed if circumstances change. The CPAC score can only be determined by the assessing clinicians at the programme.

### **Referral Back to the Local Provider**

If a patient is deemed a candidate for a cochlear implant, but does not meet the threshold for public funding, they will be referred back to their local service provider with advice for management of their hearing loss. This may include a review of hearing aids, referral to a Hearing Therapist, the provision of assistive devices such as FM systems, and other community supports.

Patients may request a review of their CPAC score if their circumstances change, including those who initially do not meet the eligibility threshold for a funded implant. A change in circumstances may include a significant change in hearing, greater difficulty at work, in education, or at home, or a significant deterioration in their ability to cope, quality of life, or mental health status.

A request for a review of a patient's CPAC score should be supported by information from their hearing care specialist, or other health professional.

### **Private Options**

Patients who are not prioritized on to the waiting list, or who wish to avoid public waiting times, may consider privately funded treatment at any time. Some people consider this once they have been assessed and recommended as likely to benefit from a cochlear implant, and are waiting for publicly funded treatment, while others do not want to wait until they become eligible.

### **Should I continue to refer patients?**

Yes. Patients who are referred for assessment still have the opportunity to understand if a cochlear implant is suitable for them. Depending on their circumstances they may warrant sufficient priority as to be wait-listed. Alternatively, patients may elect to proceed with a procedure privately.

Patients who are initially assessed and not prioritized on to a waiting list can have their CPAC score reviewed if their circumstances change. With sufficient priority there is still the possibility that they may be wait-listed at some point.

If you feel your patient may be a candidate but are concerned that they may not meet the threshold for funding, you are welcome to discuss this with us.

### **Referrals and enquiries should be sent to:**

The Clinical Coordinator  
Southern Cochlear Implant Programme

249 Papanui Road  
Christchurch 8014  
Fax: 03 355 3045  
Email: [gillian.nicolle@scip.co.nz](mailto:gillian.nicolle@scip.co.nz)