

## SoundBites Podcast Transcript

### Episode: Listen Carefully - Why Access to Hearing Healthcare Matters

Dave Fabry: Welcome to a very special edition of Starkey SoundBites! I'm your host, Dave Fabry, Starkey's Chief Innovation Officer. In celebration of World Hearing Day, I wanted to bring you a conversation that I had with Dr. Sara Burdak, Starkey's Chief Audiology Officer, and Michael Scholl, our Chief Compliance Officer. The interview was recorded in our studio and first streamed online, with the goal of highlighting the importance of bringing ear and hearing care into primary care. We covered a lot of ground, and we had a lot of fun, and I hope you'll enjoy it because we wanted to bring it to you, our loyal podcast listeners. I hope you enjoy!

Dave Fabry: Hello, everybody. Today is the day we've all been waiting for, World Hearing Day. I'm Dave Fabry, Starkey's Chief Innovation Officer, and I'm here with two special guests for a discussion on the theme of the day. Dr. Sara Burdak is Starkey's Chief Audiology Officer. Michael Scholl is the Executive Vice President of Corporate Relations. Welcome, to both of you.

Sara Burdak: Thanks so much for having us here. I'm really excited about this topic.

Dave Fabry: Yeah, me too. The issue, and I know I'm preaching to the choir for many of you who are listening today, but hearing is a sense that is often under-appreciated until it's lost. In many cases, people don't fully understand how important it is that hearing connects us to other individuals. The theme this year for the World Hearing Day is, "Ear and Hearing Care For All. Let's Make It A Reality." I think that raising awareness and then the accessibility, access, and things that we'll talk about in the next 45 minutes or so are all related to really raising awareness for the importance of healthy hearing.

That statistics that the World Health Organization provides us with suggests that today there's about 466 million people worldwide with what they consider to be a disabling degree of hearing loss. That number is projected to go up substantially in the coming years. They estimate that upwards of 700 million people by 2050 will have a disabling degree of hearing loss, and over one billion people will have some measure of hearing loss. I think this year's theme is so important first for you and your team, Sara, because as our Chief Audiology Officer, you and your team are focused on providing global hearing healthcare.

Do you want to talk a little bit about your role and how it is that your team is working so hard to bring better hearing around the world?

Sara Burdak:

Yeah, I'd love to because it's something I'm certainly passionate about, as you know. I've been in this profession for many, many years. As our global audiology strategy continues to evolve, specifically we look at what we're doing from the global education and training space how we're completing that circle with our clinical team because we need to make sure that we're always delivering the best products, the best services. But importantly, the work that the team does is with the Department of Veteran's Affairs. The reason that that's also so impactful is because when you look at the veterans today, the number one and two top service-related injuries are tinnitus and hearing loss.

When we look at that scale of veterans being fit, there's 3.6 million that are wearing hearing technology. One of the great privileges that I think in working with the VA is that we're able to then collaborate with their audiologists and make sure veterans always get our top technology. In my roles too, you know I'm passionate about students and audiology, making sure that again they're equipped with all of the tools, everything that they need to be prepared to step out from the crowd to help educate on this very, very important topic.

That leads into what we do in our product development. We have the luxury, you and I both, of continuing to work with patients regularly, work with hearing healthcare professionals regularly. That helps us always be connected to what we want to be doing in the future as well, so that we can continue to pave the way for groundbreaking technology because we do absolutely know hearing is essential. Everybody here at Starkey fully believes that to hear better means you're living a better and more meaningful life.

Dave Fabry:

Indeed. I think it goes without saying that while we're a US-based company, we do business in over 100 countries around the world on six continents. I think, to my knowledge, we don't have any representation in Antarctica yet. That global focus really requires a global team. You and your team, as you allude, have trainers and representatives, audiologists who are providing that training initiative around the world. That effort I think can't simply be a US company then distributing to the world, but rather with the focus in each of those areas because hearing loss around the world has different initiatives in different parts of the world where there are healthcare contracts that provide hearing aids in their healthcare system. And then in other markets, and we'll do this a little bit with you, Michael, with some of the changes that we've seen in US policy for the creation of over-the-counter hearing aids.

It really is a global effort, and one that can't be underestimated in terms of the enormity of the responsibility to deliver outstanding outcomes around the world.

Sara Burdak:

Yeah, I agree. We train thousands of hearing healthcare professionals on an annual basis so that they can go out and do their job effectively. One of those is again to make sure that they're reaching out in the communities that they serve because education is a massive piece of what it is that we're trying to do.

Dave Fabry: Mm-hmm, indeed. I think, Michael, let's bring you into the conversation here. This year's theme for World Hearing Day holds a special place in your heart, I know, as working with Special Olympics.

Michael Scholl: Sure.

Dave Fabry: Talk a little bit about some of the exciting things that have happened in the past year, and some of the goals moving forward for this partnership that Starkey has with Special Olympics International.

Michael Scholl: Yes, thank you David. That's a great question. When we think about who Starkey is, who we are at the core, it's about giving back. This year's theme for World Hearing Day, "Ear and Hearing Care For All. Let's Make It A Reality," our partnership with Special Olympics International is a perfect example of what that means to us at Starkey. Dave and Sara, as you both know, the partnership that we've entered into with Special Olympics over the last 12 months has allowed us to travel to their games in the United States. We're going to Berlin for the International, the World Games, later this year.

At these games, we have an opportunity to help those individuals, those Special Olympians with intellectual disabilities. We have the opportunity to bring hearing health, to bring our technology to them. Dave, as we've talked about, there are tens of thousands of Olympians across the globe. 88% of those Olympians have never had a hearing test.

Dave Fabry: That statistic is just staggering to me. I think the number is 30,000-

Michael Scholl: Right.

Dave Fabry: ... Special Olympians say that they have some difficulty with hearing. When we talk about "for all", raising awareness for the importance of getting those individuals who have hearing loss regardless of where they live in the world, it's important.

Michael Scholl: That's what's so great about our partnership with Special Olympics. As part of our Starkey Cares program, which is our corporate social responsibility program, one of those initiatives is to support what we call our "neighbors in need", whether those people are here in Minnesota, whether they're somewhere else across the US, or whether they're in another country across the globe. If you're somebody who needs the help, our Starkey Cares program is there to support you. One of those partnerships is with Special Olympians.

Not only are we helping Special Olympians at their events, at their games, but the great thing about this partnership, if there is a Special Olympian anywhere in the world, Special Olympics identifies that they might have a hearing loss, they let us know, and then we find our partners globally to support that athlete. When Special Olympics talks about an inclusion revolution, when World Hearing

Day is about ear and care for all, we are making that a reality as part of our partnership with Special Olympics, and as part of who we are with our Starkey Cares program.

Dave Fabry: Yeah, I think the issue that you raise, and I can't say how much I have gotten back from the partnership... I mean, you put in effort to go and participate in Orlando or Michigan as we've done, and I'm really excited about Berlin. What I've gotten back from the experience far exceeded what I've put in for me personally. As an audiologist, it's something that still really makes me smile when I think about some of the memories we've created...

Michael Scholl: The stories that you see from these games, we help them maybe on the first day of the games and they're their event is on day four and they're catching a touchdown pass. And for the first time, they're hearing the congratulatory remarks from the coach, or the applause from the crowd. That makes a mark on all of us. That's truly why we're here to help people hear better and live better.

Dave Fabry: I want to park this for a minute, because now I want to go back to Sara with a question. The point you raised is so important is that when we go to the Special Olympics events, it's not just the distribution of the product, but that connection with the community worker who lives near their home regardless of where they are in the world because it is that combination of the technology and the professional who's going to ensure optimal outcomes occur. We'll come back to that because I think it has an impact on over-the-counter hearing aids as well.

Michael Scholl: Sure.

Dave Fabry: We'll come back to that in a minute.

Sara, as you mentioned, the World Hearing Day theme this year highlights the importance of integrating hearing care into overall healthcare, and specifically within primary care as we know it in the US, as an essential component as you mentioned, of healthcare coverage in general. What can hearing care providers do to educate their local primary care physicians and nurse practitioners who are seeing individuals, aging individuals, as they begin to experience some hearing loss? What can the professionals listening to this session do to interface with those primary care physicians?

Sara Burdak: Yeah, thank you. I think that's another question, and also is community-based.

Dave Fabry: For sure.

Sara Burdak: Because I think it's broader than even the local healthcare community, but I strongly feel hearing healthcare professionals need to be a part of that medical profile.

Dave Fabry: For sure.

Sara Burdak: Sometimes that means they have to work their way into it. One of the things that I look at from raising awareness is what are the community events in your area? It starts at the professional level, but it also starts at the patient and family level. There are things even from doing Lunch and Learn events. That's something that Starkey has a starter kit for, to do Lunch and Learns, to again education on the impact of untreated hearing loss, which can be significant, what you can do about it. A lot of times, we're in situations when we're out and about and people ask me, "I wouldn't even know where to go for that service."

Dave Fabry: Right, they go to Google.

Sara Burdak: Google it. How many times though then are you talking about hearing technology and people having old stigma, and they're apprehensive to take action? All of that education, whether you're going to a community center, I strongly encourage professionals to be at health fairs, at senior centers, and really work their way into that primary healthcare community so that again they're raising awareness of what the impacts of untreated hearing loss are, what somebody can do about, and where to go to take action. People are waiting far too long to do that, and there's no reason that we continue to have this dated perception of stigma of hearing technology. It doesn't exist today.

Michael Scholl: Sara, you're exactly right, from the ground up in the community, and having those conversations. The other thing that we are actually doing from the top down, and Dave you've participated in some of these conversations, but within government and HHS, there's the US Preventative Services Task Force. This is an organization that they encourage physicians to talk about certain things with their patients. We're having conversations that these primary care physicians should be talking about hearing loss and hearing health more than they're currently doing. If we get some of these government agencies continue to educate them and encourage primary care physicians to talk about this, not only do you get it at the community level but the physicians are better educated and better trained to deal with individuals who might have a hearing loss.

Dave Fabry: That's such a great point, and I want to dive a little deeper with both of you into that. First of all, according to the World Health Organization, ear and hearing problems are among the most common ones encountered in the community by people of all ages, and certainly with that aging population. Over 60% of these can be identified and addressed at the primary care level. The primary care physician still serves as that gatekeeper, that trusted provider, for many people as they're going through these gates. Despite the fact that we've seen stigma go away in the emerging generation of Boomers, it's still somewhat there. In many cases, they're weary that the primary care physician is met with the response that is my least favorite one in healthcare, and that is, "Your hearing is normal for your age."

Michael, you raised the issue of the US Preventative Services Task Force. They updated their guidelines for screening for hearing in 2021. The last time they had addressed this was in 2012. Disappointingly, for those of us in this space, they didn't recommend that individuals age 50 and above have hearing screening. Of course, like I said, that was a disappointment to those of us who want to see raised awareness, getting that baseline screening. I think the difference from 10 years ago was they did acknowledge the impact of untreated hearing loss on social isolation, depression, possibly even cognitive decline.

We need to get in those discussions because the primary care physicians do listen to what that preventative...

Michael Scholl: As both of you know, the research continues to evolve. We get studies daily that show the importance of getting the screening at an earlier age. Even though they did update it, they may not have updated it to where we wanted them to go, we are making progress. We are having conversations. We will get to a point where screening will be a routine part of that exam at 50, 55, 60, at those ages.

Sara Burdak: If you look at that expectation, and the more we can talk about this and have these discussions, we want even at the level of the patient for them to be asking for these screenings. It should become standard protocol, similar to vision, similar to what we're doing from a dental plan where this becomes an annual part of healthcare.

Dave Fabry: That issue is I think magnified by also more reports coming out of the World Health Organization, with the National Institutes of Health, and WHO have reported that nearly 80% of people with insufficient or poor hearing experience at least one additional chronic health condition. So, hearing is not an isolated condition that people simply have a little bit of hearing loss, and isn't connected into their overall health. That statistic alone is staggering, and I think the comorbidity piece... Certainly one we've heard about a lot is cognition, but there are also many other health conditions that have comorbidity with hearing loss.

Sara, maybe you can talk a little bit about that.

Sara Burdak: Yeah, I think from many years ago, this was all speculation. And now, we're seeing annually more and more studies coming out confirming the comorbidities that occur with untreated hearing loss. One of those that I think people tend to really gravitate towards though, as you mentioned, is the impact of cognitive decline. I think this is really an area that sort of then creates the snowball effect of use it or lose it. With cognitive decline, with dementia, associations with hearing loss, there are, because of your vascular changes with hearing, there can also be cardiovascular concerns, diabetes.

One of the things that we're focusing on as well is certainly fall detection and prevention. There are a number of things there, but I sometimes think we don't want to be all the doom and gloom because the best message is the studies also

show, and with the... They've been updating the studies, even in 2020, were saying that hearing loss is really the single most modifiable trait that will help prevent dementia. That's significant because if you can get treated for hearing loss with hearing aids, we are showing that anybody who has a hearing loss that is treated effectively within three years time of that loss performs at normal levels.

I think that's pretty incredible. We can say that, yes untreated hearing loss is associated with a 50% increase in dementia. We know that mild cases are about double. Moderate cases are triple. But if you have a severe hearing loss up to five times, you're up to five times more likely to have an impact with dementia. I can't stress enough, we hear too often people are waiting seven to 10 years to do something about it. I have people in my own life who have waited that amount of time. We have to take action. We have to get people to get the hearing help they need as quickly as they possibly can.

Michael Scholl: I'm fortunate enough to serve on the Board of Directors for the Alzheimer's Association. Again, Starkey taking a leadership role. The caregiver is so important. How do we educate the caregiver that there is this support and connection to this comorbidity with hearing loss? We're having conversations on how do we educate our hearing professionals across the country so they know what to look for when they're seeing patients in their clinic? The Alzheimer's Association, they certainly understand and see the connection between hearing loss, dementia, cognitive decline, Alzheimer's. At Starkey, we're trying to partner with them so we can better educate the whole ecosystem of folks, caregivers, individuals, et cetera. This is certainly another topic that's near and dear to my heart, and I think there's a lot of opportunity over the next couple of years with the studies that come out for us to make tremendous inroads into that population.

Sara Burdak: It's a medical condition, and I think so often people think, "Oh, I'll just turn up the volume. Everyone else is mumbling." I love that you brought up the caregiver because you see that oftentimes they're the ones who are the most significantly impacted by someone's hearing loss and their life. With them understanding all of these comorbidities as well, they're likely to help get somebody to take action too.

Michael Scholl: The two of you know better than I do that our technology, when we think about overall health and wellness, we have the best technology to deal with some of those comorbidities. I think we're in a fabulous spot to help folks with our technology.

Dave Fabry: Yeah, and Sara you raised the important point, we've used the stick for many years at highlighting the threat of untreated hearing loss. We'd been on a five-year journey now to try to change attitudes about hearing aids as a single purpose device, importantly, to provide better hearing but also to enable that backing of health and wellness, and connection to other features that make it a cool factor. We've seen that impact in the market. Michael, you're right,

audiologists will often say that hearing is the best indication of overall cardiovascular health in the aging population because up to 80% of people with cardiovascular disease have hearing loss. There's a really high comorbidity there.

My parents were concerned about cardiovascular disease and cancer. Boomers are concerned about cognitive decline. One of the issues is the timing of this year's World Hearing Day theme I think is so important because we expect to see the early results from the ACHEE study, the Aging and Cognitive Health Evaluation in Elders study, multinational longitudinal study of over 1000 people studied over five years of time see in a randomized population people that were treated with amplification in hearing solutions versus those who were merely educated... not merely, but those who were provided with other materials to age in place, but without the benefit of amplification.

We expect to see those results this year, and we may see moving from correlation to causation. No one knows yet what the results are going to show. We've certainly seen inklings of that in studies that have been coming out, but I think this comorbidity piece and relating that to primary care physicians is such an important one consistent with the overall theme of World Hearing Day for this year.

Let's go to Michael.

Michael Scholl:

Okay.

Dave Fabry:

Back to you on this. I appreciate both of you discussing. Sara, jump in on this one because I know you have opinions on this. In 2022, the FDA released its final regulations regarding OTC hearing aids, and one of the goals with OTC in this new category was to create greater accessibility and affordability to hearing healthcare. Share some of that behind the scenes work that you've been doing for five, six years on this topic as we've seen this go from the National Academies of Medicine, and ECAS committee, the President's Council on Science and Technology, into reality.

Michael Scholl:

Dave, we have... How much do we have?

Dave Fabry:

Hours. Yeah, yeah.

Michael Scholl:

You know, I think we've talked a lot up through 2022 when the rule became final. It started back with the ECAS report a decade or so ago. Then obviously in 2017, there was OTC legislation that moved through both the House and the Senate. The President signed it into law. Then in 2022-

Dave Fabry:

Three administrations.



Michael Scholl:

Yeah. In November 2022, the OTC regulation finally went into effect. I'm not going to go through every step along the line, but what we did, we took the lead as a manufacturer since 2015, 2016, 2017. Really what we were focused on was educating lawmakers, educating policymakers in Washington about our industry because quite frankly, prior to that, there hadn't been a lot of that going on. We've had hundreds of meetings with members, their staff, folks in different agencies just to educate them about what our industry does, what our professionals do, what is hearing healthcare, what does our technology do?

We made a lot of great impactful progress during those years, and the OTC regulation, obviously it was finalized. It went into effect in November of last year. Look, we said all along from the very first conversation that I had with a member of Congress on this, we're not opposed to greater access. We're not opposed to greater affordability. We want to ensure that the individual with hearing loss is protected and that hearing professionals can still continue to help these people, because we believe hearing healthcare is best served through the hearing professional.

That was our focus. I think we really did instruct the FDA and help the FDA discern a policy that we're all following now. Yes, we've got a few months. OTC hearing aids have been on the market for a few months. I don't know that there's this tremendous uplift in sales of OTC hearing aids. What I think is important, whenever you have the President of the United States... He did this on Tuesday, President Biden stood up before the Joint Chamber. He's talking about hearing health. He's talking about hearing aids. Whenever we can talk about hearing health and hearing aids, and our technology, and how we can help people, that's a step in the right direction.

What we've tried to do is we've tried to really focus our conversation with elected officials on here's the best way. We still believe it's through the hearing professional, but if we're going to have OTC hearing aids let's make sure the patient is protected. We're seeing a handful of OTC hearing aids on the market. There are a couple of bad actors who are maybe making some products available that they should not. We've seen some state attorneys general back down on them. At the end of the day, more access, better affordability I think is what we all stand for.

If an OTC hearing aid gets an individual into a product that they start to see a difference and it starts to make a difference for them, and then that gets them into seeing a professional and maybe into a different technology, or as they continue to age, the more we can help people the better. I'm proud of the work that we've done. I know there was this idea that OTC is going to hit the market and it's just going to burn the industry upside down. But we're three, four months into it and that clearly isn't the case.

I think that's because a lot of the great work that you, and Sara, and all of us at Starkey have done.

Dave Fabry: I think you raise such an important point, and consistent with World Hearing Day's theme today is, "Ear and Hearing Care For All."

Michael Scholl: Absolutely.

Dave Fabry: Anything that closes that gap... In the US, only about 37-40% of people with hearing loss do something about it. If we can see that lift because of this new category, then great. But with the hearing care, I think we've seen a lot of continued attention last month with the President's State of the Union Address, talking still about the technology and lowering the cost to improve accessibility and affordability, but that shouldn't come at the price of accessibility to a professional if they need it, and also to ensure that the best outcomes, which as you say, we have seen year over year are with our technology in the professional's hands to deliver patient delight.

Sara, I know you've got-

Sara Burdak: That's what I hear so often, Dave, is I'm out in the community a lot and my friends and people that I'm surrounded by know what I do for a living. So often they will say, "Gosh, how is that going? Because it seems like something that would be really hard to do over the counter." I think that the general public even realizes that, so they feel they would need the support of a professional or they would want to have that option, as both of you said. The individuals who we've worked with and fit with technology, they going through that experience, who they've already worn hearing aids or have been wearing hearing aids for many years, generally they have said, "I don't know how I would have gotten to this level of hearing how I do without the support of a professional to do it."

I'm still having a lot of those conversations, so it's been interesting. While I agree all of this helps raise awareness, I generally think people still think hearing is healthcare and a medical concern, and they're interested in getting a professional recommendation.

Dave Fabry: Indeed. This new category creates more competition, and that is good. What was the word that President Biden used last month? Exploitation. I think that was the thing that managed to unite professionals and those working in industry because I don't feel like we're exploiting anybody. We're out there trying to do best for the patient, best for the end user, and seeing the best outcomes is technology plus a professional's understanding of the unique aspect that people bring with any degree of hearing loss. It's not limited by a mild or moderate hearing loss, in my opinion.

Michael Scholl: Yeah, that's exactly right. Look, as Sara said, as you said, the fact that people are talking about this... When I talk to hearing care professionals across the country, I ask them, "Are people coming in and asking for OTC hearing aids?" People are coming in. Generally, they've heard of them or they know of them. It's a conversation starter, and it allows the professional to have the conversation to

determine what is the best solution for you and your lifestyle? I think that's a positive for all of us.

Dave Fabry: Totally agree. Let's segue into the next question, and that is really related to something that you and Starkey's President and CEO, Brandon Sawalich, developed during the OTC discussions, Listen Carefully. But now, talk a little bit about okay we're through that, but does that mean Listen Carefully is no more?

Michael Scholl: No. No, no that's a great... I'm glad you bring that up. Listen Carefully, we created over the last year as really a one stop shop for individuals with hearing loss, for hearing professionals to learn about what's happening across the country that might be impacting our industry, that might be impacting their profession. Some of you may recall that Medicare, there was a lot of discussion about Medicare. There was a lot of discussion about hearing protection, obviously OTC, and insurance coverage, et cetera. So, we created a repository of anything dealing with that. It's still up and running.

Dave, I might say it's as important now... As we've turned the calendar and we're looking at 2023, the amount of legislation that's happening at the state level that impacts our industry is staggering. I have seen in 10 or 11 states, Minnesota just in the last few weeks, where legislation has been introduced requiring the private insurance to cover hearing aid, and there's some licensing legislation that's happening across the country. With the OTC regulation, as many of our listeners may know, the definition of "prescription hearing aid" versus a "non-prescription hearing aid", some states are dealing with that.

We had a perfect example in Ohio. One of the hearing professionals that we work with reached out and said, "Starkey, we're seeing legislation that's going to no longer allow hearing dispensers to fit prescription hearing aids." What did we do? Well within 48 hours, we were on the phone. We were talking to the authors of the bill. We got it changed. That's exactly how Listen Carefully is supposed to work. We can't be everywhere all the time. We can't monitor what's happening. But with a super local issue like that, when our hearing professional found about it they reached out, we went to work.

We've got folks on the ground who are keeping their ear to the ground, trying to identify things that might impact our industry. And then, we're doing the same thing, trying to communicate with them about what's happening. At the end of the day, I think we all know with OTC and other regulations, regulators, elected officials, they impact the work that we do. They impact our industry. Again, this trajectory that we've built over the last seven years of trying to work with folks at the federal level, at the state level to educate them, it's only that much more powerful when hearing professionals and patients in their local communities are listening and we work together to really make sure that we're educating and we're directing this legislation so it's best for the person with hearing loss, so it's best for the hearing professional. At the end of the day, that's what matters most.

Dave Fabry: Today's World Hearing Day.

Michael Scholl: Yes.

Dave Fabry: This is a US initiative only-

Michael Scholl: It is. It is, yes.

Dave Fabry: ... at the moment.

Michael Scholl: Correct.

Dave Fabry: Are there any plans in the future to consider going global with?

Michael Scholl: Not really. We've really been focused on this as a US initiative. When you start thinking about individual countries, individual municipalities, it starts to become... What we have done, and I'm again proud of the work that we've done, is we have a network globally of contacts and individuals that we work with as things do come up. There's changes, as both of you know, to the regulatory framework quite frequently in some of these countries, in some of these areas. We have individuals, we have folks that we work with on the ground, but not to the same specificity as we do with Listen Carefully.

Dave Fabry: Perfect. Those in the US listening to this, who want to go to the Listen Carefully website, that's ListenCarefully.com. How does someone who's a professional whose listening to this become an ambassador?

Michael Scholl: Our Listen Carefully ambassador program, Blaise Delfino, who all of us work with, he's kind of leading that program and we're trying to identify a handful of ambassadors in all 50 states. Those are our go-to people. If something happens, we go to you to lead the charge of whatever's happening in your state. I think we're through maybe about 25 states of identifying those ambassadors. If you're listening and if you're interested, you can go to ListenCarefully.com and you can sign up to be a Listen Carefully ambassador.

Again, I can't stress how important it is. Number one, policymakers impact what we do. We are the manufacturer. We work across the country. Those of you who live in the state, live in your district, you represent your community. At the end of the day, that's who elected officials and policymakers want to hear from. They want to hear from their constituents. They want to hear from small business owners and patients in their community, but we need ambassadors from all 50 states to achieve the success that we can with Listen Carefully.

Sara Burdak: I think you've done a remarkable job, and that's something that people are recognizing Starkey for, is being a great partner, but providing the tools that they need to be those ambassadors in advocacy. Because not everybody knows

how to do that or where to go. We're becoming that organization where people do feel like they have someone that they can reach out to for help.

Dave Fabry: I've been to the Hill with both of you, and both of you are very strong ambassadors, maybe lobbyists, on behalf of the industry.

Michael Scholl: Thanks?

Sara Burdak: We do what we can.

Dave Fabry: We've talked about how individuals can be involved with Listen Carefully as an ambassador. I want to go back to primary care physicians and hearing care providers. How should audiologists and hearing instrument specialists engage with primary care physicians in the care and treatment of their patients? Do you think that's a worthwhile endeavor? If so, how should they go about doing that?

Sara Burdak: It's absolutely worthwhile. I think again, back to getting out in the community but also being part of the overall healthcare system, and being viewed as a critical component for that. My recommendation is to always make sure that you're providing a primary care provider with information of the treatment plan you've provided, how it's going, what the status is, because that's their patient as well.

Dave Fabry: In fact, in many cases the primary care physician considers this their patient this is on loan-

Sara Burdak: Absolutely.

Dave Fabry: ... for the hearing care provider because they're talking care of the entire ecosystem that is the patient, and getting that feedback is so critical.

Sara Burdak: Yeah, we shouldn't just leave it there. What I always think is anytime you have that capability, it keeps that front and center from an overall hearing healthcare, from the technology. It gives you again a foot in the door. It allows you to ask if you can do a Lunch and Learn. Physicians need to be as impressed with the new technology because it's pretty incredible what we're able to do today. I think sometimes it's really the basics of writing your reports, seeing they're staying connected, as well as continuing to increase your referral base because that gets to when patients are saying, "I don't know what to do or where to go," the primary care physicians in their area should know they need to go to you. "Go to this hearing center and you'll get the care that you need."

The other piece that I'm a huge advocate for, as you know Dave, is this education, even at the level of ear, nose and throat physicians, about the importance of new hearing aids, about getting fit quickly, about you already mentioned that "Oh, you've got normal hearing for your age," those are all

things that we have to get around, that bias, as well, and make sure at the ground level they're getting the right recommendations to seek treatment.

Dave Fabry: There's no better way for a primary care physician to become aware of the improved technology and services that can be available to their patients than to see the results in a use case that is their patient, and to see the impact on their life. That's an important feedback loop, as you say, in addition to being an access point to maybe Lunch and Learns, or conversations about what hearing imbalance treatment can look like, and the referral to a hearing care professional. That feedback loop to say, "Look, how well they're doing-"

Sara Burdak: Yeah, it's real proof. Yeah, it's real proof.

Dave Fabry: Is the best way I think to make an impact and to build those relationships, and to focus on hearing as an essential component of overall healthcare.

Our time is nearly up here. We just launched a new product, Genesis AI. We've talked about, Michael raised earlier for five years we've been on this journey to use embedded sensors so that we can monitor physical activity, social engagement, fall detection, which you talked about, Sara. How can, number one, hearing care providers maybe cherish some of those data with primary care physicians? And then, what does Genesis AI do to better involve healthcare providers outside of our little discipline to be aware of what sorts of things that simply wearing devices can do to benefit overall health?

Sara Burdak: You can see, I can hardly keep it contained.

Michael Scholl: Now we have to go back to again, Dave, what... Yeah.

Sara Burdak: It's hard to prioritize all of that. We do again have a lot of the information on comorbidities, relations to untreated hearing loss. So, certainly anybody can visit [Starkey.com](http://Starkey.com) and get a lot of that information and brochures, and information that can go back out again into the community. One of the things that I'm really excited about, there's many, in Genesis AI is that we have really built this technology from the ground up. It is all new everything. When people come in for better hearing, that really is what they want. When I think about how we're pushing the boundaries and what we're doing with our neural processing, which is really the industry's best technology, we are able to automate our systems using AI, the most advanced DNN, which Deep Neural Network, to have processing that really mimics that of the human brain.

If you think about the Holy Grail, as I'll say is, always how do we mimic processing as if you had normal hearing? We're as close to that in industry-leading and setting the standard there. The other piece that I tend to get from patients is they really just want things automatic. People don't want to have to be pushing buttons. We have an amazing app, but that should be something they can use if they want to. With this technology, we have 80 million

adjustments that are automatic every hour, and that translates to this hearing aid is working for you all the time to the tune of 22,000 adjustments every second.

When we look at what our product mission is, it is to provide caring technology that connects people to people. That's really what we accomplish all day every day here, but that's what's meaningful about Genesis AI.

Dave Fabry: Yeah, that's a mouthful.

Sara Burdak: It is.

Dave Fabry: For those who haven't experienced it yet, I'd encourage you to reach out to your rep or to look at the website and learn more about this.

Sara Burdak: Yes.

Dave Fabry: Then more importantly, see the impact it has on your patient.

Now one more thing, we do have some, in addition to the user app that a patient may use to control their devices, HearShare is a way that with the patient's permission they can share data about physical activity, social engagement, whether they're wearing the devices, even with the connection between their devices and their phone. For those patients who have a deep relationship with their primary care physician, it's not unheard of, and I know of several examples where patients have shared those types of data with their primary care physician or at least the practice that they're affiliated with so that they can monitor them on this overall health and wellness journey beyond the hearing benefit alone.

Sara Burdak: Yeah, I agree. I love that you mentioned the caregiver space. I think it's an amazing suggestion. Even again, we've talked about the aging population, however that could be in a senior living, assisted living, all of those areas could be where an app like HearShare could be very, very beneficial.

Dave Fabry: We are out of time. Dr. Burdak, Michael Scholl, thank you for sharing your expertise, and in this conversation today. To our listeners and viewers, I hope that you enjoyed this World Hearing Day broadcast. Obviously, we're quite passionate about this. Alone, we can't do much, but together we truly can change the world and make a small impact on this World Hearing Day. We tried to meet the objective of this year's theme as well as the ongoing theme, to raise awareness for the importance of hearing.

So, thank you both for being here today for this special broadcast.

Michael Scholl: Thank you, Dave.

Sara Burdak: Thank you.

Dave Fabry: Well podcast listeners... I hope that you enjoyed this conversation between Dr. Sara Burdak, Michael Scholl, and myself. And as we wrap up this episode, a friendly nudge to have you please rate and review us on your preferred podcast platform. And if you enjoyed this session, I would also suggest you share it with your friends, colleagues, and network. While you're at it, why don't you "follow" us or hit "subscribe" so that you don't miss a single episode in the future. Also, we'd love to know what's on your mind. What issues concern you? What questions do you have for our experts? Future episodes will be devoted to answering some of your questions or issues, and all you need to do in order to submit them is send us an email at [SoundBites-AT-Starkey-DOT-COM](mailto:SoundBites-AT-Starkey-DOT-COM). That's [SoundBites-AT-Starkey-DOT-COM](mailto:SoundBites-AT-Starkey-DOT-COM). Thank you so much for listening and we hope to see and hear you again really soon!