

## AMPLIFICATION AND TECHNOLOGY

Your child's needs for amplification and assistive technologies will depend on his/her type and degree of hearing loss, and the communication approach(es) your family will use. This section will begin with a discussion of hearing aids and cochlear implants. While we are not promoting the use of these amplification devices over any other communication approach, we include this discussion because many parents have questions about what these technologies do and how they might benefit their child. Following this discussion, we will present examples of other assistive technologies that might be appropriate for assisting your child's communication needs.

The first carbon-type hearing aid was produced in 1898, and the first wearable digital signal processing hearing aid became available in 1988. A hearing aid is a small amplifier cased in molded plastic. A microphone picks up sound from the environment and converts it into an electric signal. This sound is filtered, electronically processed, and amplified. A loudspeaker converts the electrical signal back into an audible signal and delivers it to the ear canal. Most hearing aids that are fitted to children are digitally programmed and adjusted by an audiologist to meet the child's hearing needs. An audiologist will set the hearing aid for a child's specific hearing loss, as determined by an audiogram or ABR test. A hearing aid enhances the child's residual hearing and the benefit received from a hearing aid will depend on the type and degree of hearing loss and any other medical or developmental challenges the child may have.

Children are typically fitted with a behind-the-ear (BTE) hearing aid(s) because they are safe, versatile and compatible with other devices. They also can be easily found if they should fall off the child. With a BTE device, an earmold is molded to fit snugly into the child's ear, and the processing device sits behind the ear, connected to the ear mold tubing. When placing the earmold in the child's ear, you should place the longest part of the mold in the ear canal first, and then twist the mold back until it slides gently into the ear. If the earmold sticks out (which can give feedback as sound is escaping between the ear and mold), you should gently pull the back of the ear forward to allow the mold to slide into the ear. Behind-the-ear hearing aids must have a custom earmold that fits properly into the child's ear. This means that as a child grows, they must be frequently fitted for new earmolds by an audiologist. A four-month old child might return to the audiologist every 6-8 weeks for new earmolds, but this need for new molds will slow down as the baby grows.

## **Arizona Parent Resource Guide for Children who are Deaf or Hard of Hearing**

There are several different hearing aid manufacturers and hearing aid models made for children, all with a unique set of features. For example, some hearing aids have a volume control for a child to adapt the volume to each unique listening situation. Some have different programs for use in different situations, usually triggered by pushing a button on the hearing aid to change programs, while others have the capability to recognize different hearing environments and automatically select the most appropriate hearing program. Many audiologists recommend a hearing aid that has frequency modulated (FM) technology, so that the child can use an FM system in a classroom setting. Some hearing aids require a boot or special battery door to attach an FM to the unit. Other features that might be considered for older children include: a telecoil function for talking on the phone without feedback and compatibility with inductive loop systems, EasyPhone/AutoPhone that automatically selects a telephone program when a handset is close to the ear, and Bluetooth capability for connecting to mobile devices and enabled devices like MP3 players, computers and televisions. Some hearing aids are also water resistant or waterproof. Additional things to consider when purchasing a hearing aid for your child are as follows.

- Does the hearing aid have most current technologies available?
- Is the hearing aid manufacturer reputable?
- Is the hearing aid durable?
- How often does the audiologist have to send that model in for repair?
- Is the hearing aid FM compatible?
- Does the hearing aid have a telecoil?
- What hearing aid does the audiologist recommend for my child?
- Have others been satisfied with its performance?
- What is the total cost of the hearing aid?
- Will the cost of the aid be covered by insurance?
- Is there a trial period to test and return the hearing aids if not satisfied?
- What is the cost to return hearing aids during the trial period?
- How long is the warranty, and can it be extended?
- Does the warranty cover loss and damage?
- How long will this particular aid last my child?
- What happens if the hearing aid needs to be repaired?

An audiologist who specializes in pediatrics is the best person to consult with when making a decision about what type of hearing aid to purchase for your child. The audiologist will be able to assess your child's needs and help you select the most appropriate hearing aid.

Once a child is fitted with hearing aids, he or she will not be able to hear everything immediately. Children who have not had normal hearing may not be able to hear all sounds clearly, and may continue to hear fragments of sounds until they become accustomed to the hearing aid and "learn" to hear sounds. However, some children with a significant degree of hearing loss may show little or no benefit from using the hearing aids. This is why early intervention, as discussed in the next section, is essential for helping the child to adapt to this new technology. Even with the best intervention and experience using hearing aids, some children may continue to have difficulty hearing under certain circumstances. To make sure your child is getting the maximum benefit from his or her hearing aids, you should continue to have his or her hearing checked regularly. The audiologist can make adjustments to the hearing aid programs if necessary. For a child with a non-progressive hearing loss, evaluations by an audiologist should occur every 3 months for a child under two years of age, every 6 months until age 5, and once a year after that. An audiologist may recommend more frequent visits for children with a progressive hearing loss.

For information about paying for hearing aids for your child, please see the following document provided by the Arizona Early Hearing Detection and Intervention (EHDI) program. Please note:

**This list was compiled to assist families in obtaining funding to cover the costs of hearing aids. The information should be verified before decisions are made as programs, funding and eligibility may change over time. Talk with your audiologist about other options.**

**If you have questions or would like to update the information you can contact:**

**Arizona Early Hearing Detection and Intervention  
State Coordinator:**

**Lylis E Olsen, MS, MPH  
602-690-3975  
[lylisolsen@msn.com](mailto:lylisolsen@msn.com)**

## Hearing Aids - Resources for Parents

Hearing aids as well as other audiological services can be quite expensive and unaffordable for many families. Fortunately there are programs in Arizona that can help families and children that are in need of assistance.

### Loaners:

Your first option would be to check with your audiologist about loaner hearing aids. Loaner hearing aids are also available to any Arizona family, through the HEAR for Kids Program with the EAR Foundation of Arizona. Loaners are usually available for up to six months. Longer loan periods are possible for special circumstances such as assessment for cochlear implantation. The program is funded by grants and donations.

### Purchasing Equipment:

Research on how to purchase and pay for permanent hearing aids should begin as soon as possible. It may take several months to determine eligibility for some programs. The answers to some of the questions listed below may help you find the assistance that is right for your family.

### **Q. Is your child enrolled in an AHCCCS or KidsCare health plan?**

NO ► You may be eligible for other programs as described below.

YES► Your child may be eligible for hearing services through Children's Rehabilitative Services (CRS). Information about CRS services and how to apply are on the next page.

### **Q. Does your health plan cover hearing aids?**

NO ► There may be an appeals process to challenge limits or restrictions on coverage. You may be eligible for other programs described below.

YES► Call your health plan Member Services and ask for information about your hearing service benefits.

### **Q. Are your financial resources limited?**

NO ► Ask your audiologist if the office or facility where you receive audiological services can arrange a payment plan.

YES► There are several programs available to those with financial needs.

Your audiologist may participate in some of the following programs, which are described in more detail on the next few pages. Your audiologist may be helpful in deciding which program/s best suit your needs. Please note that some programs may require you to change providers.

- HEAR for Kids
- UnitedHealthCare Foundation for Children (higher income levels)
- Starkey Foundation's HEAR Now Program
- Lions Affordable Hearing Aid Program
- Sertoma Clubs

## Children's Rehabilitative Services (CRS)

CRS provides medical care and support services to children and youth who have certain chronic or disabling conditions. CRS recipients can get hearing related services in one of four Multi-Specialty Interdisciplinary Clinics (MSICs) located in Flagstaff, Tucson, Yuma and Phoenix.

The Arizona Health Care Cost Containment System has contracted with Arizona Physicians IPA (APIPA) to administer the CRS program, as APIPA-CRS.

### **Eligibility:**

To be eligible for APIPA-CRS services you must:

- Have an eligible medical condition (Most hearing impairments are eligible conditions)
- Live in Arizona
- Be under age 21
- Be a U.S. citizen or qualified alien.

APIPA-CRS recipients must also be enrolled in an AHCCCS acute health plan or ALTCS (Arizona Long Term Care System) plan. You may call Member Services toll-free at 1-866-275-5776 for more information.

### **Hearing Aids and Cost to the Family**

APIPA-CRS covered services are provided at no cost to recipients. Hearing services, including hearing aids, earmolds and fitting are covered for qualified APIPA-CRS recipients. Hearing aids may be replaced every three years or more often if there is a significant change in hearing. Hearing aids are covered for loss or damage by a two year replacement warranty. If the original hearing aid(s) are lost or damaged, families are encouraged to purchase insurance for the replacement aid(s).

For some types of hearing aids, prior authorization may be needed before APIPA-CRS can provide them. Your APIPA-CRS hearing services provider will take care of this for you.



### **For families who have ALTCS, APIPA-CRS and private insurance**

APIPA-CRS will coordinate benefits with your private insurance and you will not be billed for any remaining cost, when you get hearing services at an MSIC or APIPA-CRS provider.

### **Additional Services**

APIPA-CRS recipients who receive hearing services may also be eligible for additional medical specialty services like ENT, Genetics, Ophthalmology, among others at their MSIC.

### **Apply by Filling Out an Application:**

To get an application or information:

- Call Member Services toll-free at: 1-866-275-5776.
- Visit the APIPA-CRS web site at [www.myapiapacs.com](http://www.myapiapacs.com).
- Call the Office for Children with Special Health Care Needs (OCSHCN) at 602-542-1860,
- Call 1-800-232-1676 and ask for the CRS Program, or
- Download an application from the OCSHCN web site at [www.azdhs.gov/phs/ocshcn/crs/crs\\_az.htm](http://www.azdhs.gov/phs/ocshcn/crs/crs_az.htm).

## HEAR for Kids

HEAR for Kids is a program of the EAR Foundation of Arizona. Most of the funding is provided by St. Luke's Health Initiatives and private donations as well as grants from Arizona Community Foundation, Nina Mason Pulliam Charitable Trust and others. Authorization is generally available within 48 hours of the application.

### **Eligibility:**

Eligibility is based on family income, household size/dependent care, and expenses. If the child is covered by AHCCCS or KidsCare or other insurance that covers hearing aids, they are not eligible for HEAR for Kids. Children must be currently living in Arizona to be eligible.

- **Income:** Total Household income for the past 12 months: Wages/Salary, Pension, Social Security, Child Support and any other income.
- **Expenses:** Total Allowed Deductions for the past 12 months include medical/dental not paid for by health insurance or third party, annual rent or mortgage payments, annual payments for primary vehicle.
- **Dependent Care:** Use the following calculations:
  - Number of children in childcare \_\_\_\_\_ x \$200 x number of months \_\_\_\_\_ = \$ \_\_\_\_\_
  - Number of incapacitated adults receiving care \_\_\_\_\_ x \$100 x number of months \_\_\_\_\_ = \$ \_\_\_\_\_

Using the amounts you calculated above, find **Annual Income**. Take **Income** minus **Expenses** minus **Dependent Care** = **Annual Income**. Using the chart below, find the number of people in your family and the corresponding maximum **Annual Income** to be eligible. (current as of 3/2010).

Number in Family	Annual Income
1	\$16,245
2	21,855
3	27,465
4	33,075
5	38,685
6	44,295

### **Cost to the Family:**

As long as the family qualifies under the financial criteria above, there are no costs. Earmolds are covered for the first year as many times as needed. Earmolds maybe covered after the first year if the family continues to meet the financial criteria. Repairs or new aids are covered as needed if the family qualifies.

### **Hearing Aids:**

Any aid selected by the audiologist will have a 1 or 2 year warranty. There is no restriction on type of hearing aid although the least expensive aid available with the features needed is generally purchased to ensure that the funding is available for all in need. Some repairs and replacement of cochlear implant parts may also be available.

Applications can be downloaded on the EAR Foundation website at [www.earfoundationaz.com](http://www.earfoundationaz.com) but must be submitted by the audiologist who will be helping select and fit the hearing aid(s).

The Ear Foundation can be contacted directly by calling 602-690-3975, or e-mail to: [lylolsen@msn.com](mailto:lylolsen@msn.com)



## UnitedHealthCare Children's Foundation

The UnitedHealthCare Children's Foundation is a 501(c)(3)non-profit charity dedicated to facilitating access to medical-related services that are not fully covered by the available commercial health benefit plan. This "support" is in the form of a medical grant to be used for medical services not covered or not completely covered by commercial health benefit plans.

The applicant must be covered by a commercial health benefit plan and limits for the requested service are either exceeded, or no coverage is available and/or the copayments are a serious financial burden on the family. The UnitedHealthCare Children's Foundation requires a commercial health benefit plan. If your health plan is an AHCCCS, ALTCS or KidsCare plan, you will not be eligible for this grant, but you may be eligible for CRS. Read more about CRS on page 2.

### Eligibility:

The applicant must be 16 years old or younger and live in the United States and receive and pay for care/items in the United States.

Financial need of the child's family will be evaluated and documented through information provided on the application and by submission of a photocopy of the most recently filed Federal tax return (Internal Revenue Service 1040, 1040-A, or 1040-EZ). The following scale will be used to determine financial eligibility:

Your Family Size As reported on your IRS 1040	Adjusted Gross Income As reported on your IRS 1040
2	\$40,000 or less
3	\$60,000 or less
4	\$80,000 or less
5 or more	\$100,000 or less

**NOTE:** Awards will NOT be granted to individuals in families whose Adjusted Gross Income (AGI) exceeds the scale.

An application must be submitted to the Foundation prior to the receipt of services. The Foundation does not pay for past medical expenses

### Exclusions:

The UnitedHealthcare Children's Foundation has a specific set of items that are excluded from grant consideration. For a complete list of exclusions see [www.uhccf.org](http://www.uhccf.org).

### Hearing Aids:

There does not appear to be any restriction on types of hearing aids other than a limit of \$5,000 or 85% of the fund balance, whichever amount is less per year. Awards to any one individual are limited to a lifetime maximum of \$7,500.

If a grant is approved by the Regional Board of Directors for your child, the grant will help pay for approved medical services/items after your commercial health benefit plan submits payment, if any. The grant funds are not paid to you or the child outright - you work with the Foundation on submitting invoices/bills for approved medical services/items after your commercial health benefit plan submits initial payment (if any) to the health care provider



### Applications:

Applications and further information on criteria and services can be found at the link below or by calling (952) 992-4459.  
[www.uhccf.org](http://www.uhccf.org)

## Starkey Foundation's HEAR Now Program

HEAR Now is a national non-profit program committed to assisting those permanently residing in the U.S. who are deaf or hard of hearing, who qualify under the National Poverty Guidelines for assistance and have no other resources to acquire hearing aids.

**Eligibility:**

All applicants are asked to call HEAR Now to discuss eligibility for the program. Please call 800-648-4327.

**Income Guidelines:** All income figures are based on take-home wages (net income) from all members of the household

Size of Family Unit	HEAR NOW Income Guideline s	Size of Family Unit	HEAR NOW Income Guideline s
1	\$17,867	4	\$36,137
2	\$23,957	5	\$42,227
3	\$30,047	6	\$48,317

**NOTE:** For family units with more than 6 members, add \$6,090 for each additional member.

HEAR Now also considers family assets such as savings, retirement funds, life insurance and annuities.

**Cost to the Family**

The family is responsible for finding a hearing health care professional willing to work with them and the HEAR Now Program. HEAR Now does not provide a list of hearing health care professionals or make referrals to practitioners. Check the listings in your local phone book under "Audiologists" and/or "Hearing Aids" and call to ask if they are a HEAR Now provider. If they are a provider, ask if they can take you on as a new client. Most Pediatric Audiologists in Arizona are not participating providers and you may be responsible for the cost of the fitting and programming of the hearing aids.

The family is responsible for the cost of the evaluation/assessment and the non-refundable processing fee to HEAR Now. Once the aids are provided, the family is responsible for the purchase of batteries and extended warranty coverage for the aids.

The Hearing Aids are selected by the Foundation and will be Starkey products. Starkey makes behind-the-ear, in-the-ear and bone conduction hearing aids. A one year warranty is provided. Check with the audiologist to make sure that these hearing aids will meet your child's needs before pursuing this option.

**Additional Information and Application:**

This information is current as of March 2010. You can access the website link below for more current information and to access the application process or call 1(800) 328-9602.

[www.sotheworldmayhear.org](http://www.sotheworldmayhear.org)



<b>Lions Affordable Hearing Aid Program (AHAP)</b>	<b>Sertoma Clubs</b>
<p>The Lions AHAP is rooted in a continuum of care model involving hearing care professionals and focuses on low-income beneficiaries. The hearing aid is one part of the solution to hearing impairment.</p> <p>Also needed are the services of hearing care professionals to conduct tests, order ear molds, program the hearing aids and do follow-up care.</p> <p>Currently Lions AHAP is distributing two hearing aids through a partnership with Rexton, Inc. in cooperation with participating Lions foundations, districts and clubs, and hearing care professionals. Lions clubs, districts and hearing programs are able to order one or both aids from Lions AHAP.</p> <p><b><u>How does the Lions AHAP program work?</u></b></p> <p>A Lions club decides the eligibility of a person, and the person is tested by a hearing care professional. The Lions club sends the order to Lions AHAP, who notifies the manufacturer. The hearing aid is shipped to the hearing care professional listed on the order form. The hearing care professional fits the hearing aid for the person. Individuals cannot apply directly to Lions Club International Foundation; he/she must work through his/her local Lions club.</p> <p><b><u>Eligibility</u></b></p> <p>The criteria for eligibility are income-based. This includes using the federal government's poverty guidelines and adjusting it to the local economy. The hearing aids are for the segment of the population who would never be able to purchase hearing aids.</p> <p>Each club has their own criteria and application process. For further information on the program, contact the Lions AHAP office at (630) 468-6771 or e-mail <a href="mailto:LionsAHAP@lionsclubs.org">LionsAHAP@lionsclubs.org</a></p> <p>You can also contact a club near you by going to the Lions International website: <a href="http://www.lionsclubs.org">www.lionsclubs.org</a></p>	<p>Sertoma stands for SERvice TO MAnkind. Sertoma's primary focus is on assisting the more than 50 million people with hearing health issues and educating the public on the issues surrounding hearing health. In order to achieve these goals Sertoma has undertaken a multi-faceted approach by launching programs that address both the treatment and prevention aspects of hearing health.</p> <p><b><u>Communicative Disorders Scholarships</u></b></p> <p>There is a \$1,000 <a href="#">Scholarship</a> for hard of hearing or deaf students that have clinically significant bilateral hearing loss. Graduating high school seniors or undergraduate students must be pursuing a four year degree.</p> <p>There is also a \$1,000 <a href="#">Scholarship</a> for graduate students who have been accepted into a graduate level program in audiology or speech-language pathology at institutions in the United States. Sertoma provides more funds nationally for graduate level study in communicative disorders than any other single organization.</p> <p><b><u>Other Services:</u></b></p> <p>Sertoma Affiliates are non-profit hearing and speech facilities that have established a relationship with a Sertoma Club or have an independent relationship with Sertoma. This relationship results in greater service to people with communicative disorders by supporting the professional staff and programs of the affiliate.</p> <p>There are 7 Sertoma clubs in Arizona. Locations and contact information can be found on their website or by calling 1 (816) 333-8300.</p> <p><a href="http://www.sertoma.org">www.sertoma.org</a></p>

If over time and through audiological evaluations it is discovered that your child is not receiving adequate benefit for the development of spoken language from the use of hearing aids, he or she might be a candidate for a cochlear implant. A cochlear implant is a surgically implanted device that transmits coded electrical impulses to stimulate the hearing nerve within the inner ear, providing a sense of sound to a person who is profoundly deaf or hard of hearing. A microphone picks up sound from the environment and sends it through the speech processor that arranges those sounds and sends them to a transmitter. The transmitter converts these sounds into electric impulses, and an electrode array collects these impulses and sends them to different regions of the auditory nerve.

A cochlear implant does not amplify sound like a hearing aid does, but rather it bypasses the non-functioning parts of the ear to produce the sensation of sound. According to the Food and Drug Administration (FDA), as of April 2009 more than 180,000 people worldwide have received cochlear implants, including approximately 41,500 adults and 25,500 children in the United States.

The decision to implant a child is not taken lightly, as the implant is a surgical procedure under general anesthesia, and has some risks including the possibility that any residual hearing a child has may be lost. Implant design and surgical techniques are evolving in an effort to preserve residual hearing; however, it is by no means an exact science and preservation of hearing cannot be guaranteed. Also, a patient must have a hearing nerve and a cochlea that will permit successful implantation of the device's electrodes.

An audiologist can help provide information about whether a cochlear implant might be an option for the child, and an otologist (an ENT who has obtained additional training to perform cochlear implants and other specialized surgeries to the ear) should also be consulted. Typically, cochlear implant candidacy is determined by a team that includes the ENT, audiologist, speech therapist, early interventionist, social worker, and the child's parents. Further, in order to be considered a viable candidate for a cochlear implant, the child typically must meet the following FDA-approved criteria:

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- Age 12 months and up (although exceptions are sometimes made for younger children)
- Severe-to-profound sensorineural hearing loss (exceptions are made in cases of auditory neuropathy where audiogram thresholds have minimal bearing on auditory performance)
- Reception of little or no benefit from amplification devices (or a lack of progress made with hearing aids)
- No medical contraindications
- Strong patient motivation and family support
- Appropriate expectations
- Educational and home environments must be supportive of facilitating maintenance and care of the device and committed to the development and use of spoken language.

The perceived benefits from receiving a cochlear implant also vary from one individual to another. Factors that contribute to the degree of benefit a person receives from an implant include, but are not limited to: chronological age, duration of hearing loss, cognitive abilities, the number of surviving auditory nerve fibers, access to oral/auditory verbal speech/language therapists, other health or developmental disabilities, and the patient's motivation to learn to hear. You may wish to consult other parents who have a child who has been implanted prior to making this decision for your child.

If it is determined that your child is a viable candidate for a cochlear implant, you will want to look into whether the procedure is covered by your health insurance. You will then want to investigate which cochlear implant might best serve the needs of your child. One consideration is the device's Cumulative Survival Rate (CSR). This indicates the likelihood that a device will function properly during a given period of time. You should review the track record of each company's products, as the device you choose must be designed to last a lifetime. Some other considerations when selecting a cochlear implant include:

- Speech understanding performance in everyday situations
- Durability and versatility for everyday activities (ie. water-resistance)
- Batteries for the sound processor (rechargeable or disposable, or both)

## **Arizona Parent Resource Guide for Children who are Deaf or Hard of Hearing**

- Access to future technology upgrades without future surgery
- Manufacturer's commitment to investment in new and improved technologies
- Reputation of company
- Warranties available

More and more cochlear implant surgeons are recommending (and families are choosing) binaural cochlear implants as two implants are considered better than one, just as two ears are considered better than one. Some surgeons prefer to do both implants at the same time (simultaneous implant surgery) while other surgeons and families opt to do one implant at a time (sequential implant surgery). There are perceived advantages and disadvantages to both procedures, so you will need to discuss this with your implant team.

There are three major manufacturers of cochlear implants commonly used in the United States. They are listed below in alphabetical order.

### **Advanced Bionics Corporation**

[www.advancedbionics.com](http://www.advancedbionics.com)

**877-829-0026**

### **Cochlear Corporation**

[www.cochlearamericas.com](http://www.cochlearamericas.com)

**800-523-5798**

### **Med-EL Corporation**

[www.medel.com](http://www.medel.com)

**919-572-2222**

After your child receives a cochlear implant, the external processor will typically be activated within 2-4 weeks of the surgery. The audiologist will then begin mapping the cochlear implant. Mapping is the process of programming the settings of the electrical stimulation limits necessary for the user to comfortably hear loud and soft sounds. This process varies by manufacturer and

may include determining the threshold levels (T levels), comfort levels (C or M levels) and managing electrodes that may be causing problems. The audiologist will also make changes over time as the child becomes more comfortable with electrical stimulation. It could take six months or more for a child to fully adapt to using a cochlear implant, but the experience of listening with a cochlear implant improves over time. The younger the child, the more quickly they seem to adjust. With appropriate mappings, intentional listening practice and support from a speech therapist or listening and spoken language specialist, the child can quickly learn to maximize benefit from the cochlear implant.

There are many other assistive technologies to help those who are deaf or hard of hearing. For children who use hearing aids or have cochlear implants, FM systems are now being used in some birth to three-year old programs to help maximize the benefit the child receives from their hearing device(s) by closing the distance between the parent or caregiver and the child. With this system, one speaker (typically the parent or caregiver) wears a microphone connected to a small transmitter that can be clipped to their clothes. The sound from the microphone is transmitted by FM radio frequency to a receiver worn by the child either at the end of the child's hearing aid or around the neck. The virtual distance between the speaker and child is equal to the distance between the speaker's mouth and the microphone, allowing the child with hearing loss to hear the speaker's voice directly in his or her ear. Furthermore, FM systems are being used in many school systems to provide for communication needs beyond what the hearing aids can offer in crowded and loud classrooms. To find out about the capability requirements and/or inquire about use of an FM system for your child, you can either talk to your child's audiologist or contact the hearing aid or cochlear implant manufacturer. Once your child is in school, the school district will usually handle the process of procuring the device.

For children who use sign language, the Arizona Commission for the Deaf and the Hard of Hearing (ACDHH) offers services including a telecommunications relay service that allows a user to place text-based calls from their personal computer or mobile device to any standard telephone in the United States. The messages are sent via instant messaging to the relay service that contacts the telephone user and voices the text message in real time. This service is available 24 hours a day by calling 7-1-1 in Arizona. The ACDHH also offers a telecommunications equipment distribution program (AzTEDP) that provides amplified telephones, captioned telephones, and telecommunication devices for the deaf (TTY).

**Arizona Commission for the Deaf and the Hard of Hearing, ACDHH**

**www.acdhh.org**

**602-542-3323**

Video relay, a service that allows calls to be placed through a videophone appliance connected to a TV or personal computer and webcam, is also available through certain companies. The user signs to an interpreter who contacts the telephone user and voices the messages back to them.

**Purple Communication**

**www.purple.us**

**877-885-3172**

**Sorenson Video Relay Service**

**www.sorensonvrs.com**

**866-756-6729**

**ZVRS**

**www.zvrs.com**

**727-254-5600**

Described and captioned media is available to persons who are deaf/HH through the Described and Captioned Media Program, funded by the U.S. Department of Education and administered by the National Association of the Deaf. This program is dedicated to promoting and providing equal access to communication, and includes a free-loan media library available to those who are deaf, blind, hard of hearing or visually impaired.

**Described and Captioned Media Program**

**www.dcmp.org**

**800-237-6213**