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The Next Generation of Osia: Introducing Osia® 3 Sound Processor

Presenters: Channing Hughes, Bailey Harmon, AuD, CCC-A, Hannah Lynott

Okay, well, thank you everyone so much for joining today's course. We'll be going through the introduction to the next generation of our OSIA system and we will be introducing the OSIA3 sound processor. During today's course, you will meet a few team members from Cochlear and your outcomes will include understanding more about the features and benefits of the OSIA 3 system and be able to counsel patients about its use, whether that be a new candidate or a recipient. And then we will be having BaileyHarmon, one of our research audiologists here at Cochlear, going through the SONUS study to demonstrate the clinical and patient reported benefits of the sound processor. And at the conclusion of this course, we will be going through how to support our recipients who might be Transitioning from the Asia 2 to OSIA 3 sound processor with their replacement orders.

Shown here are the limitations and risks. I believe as well this will be a copy provided following the webinar.

And okay, I will now like to introduce Channing Hughes, our acoustics product manager here at Cochlear, and she will be going through the OSIA system and then as well introducing to you about the OSIA 3 sound processor. Take it away, Channing.

But thank you so much, Anna. Thank you everyone. I appreciate this opportunity to be able to share with you regarding the OSIA 3 sound processor that we have developed for the OSIA system.

So with this OSIA system, we have a unique and innovative solution designed for patients who may benefit from a bone conduction hearing system. At the foundation of the system is the OSI 300 implant, which utilizes piezo power technology to convert sound into vibration through piezoelectric material. One of the unique advantages of piezoelectric technology is that it does not rely on traditional mechanical moving parts. Instead, it leverages specialized piezoelectric material to transmit sound effects efficiently and effectively, particularly in the high frequencies, helping to deliver powerful hearing performance. So as sound is received by the OSIA 3 sound processor, it is transmitted through a

secure digital link to the OSI 300 implant.

The implant then converts the signal into vibration using that piezo power technology, which is ultimately then transmitted through the BI300 implant to stimulate hearing.

Building on this platform, the OSIA 3 sound processor delivers even greater performance and convenience for recipients. As you can see on the screen. We are excited to introduce six new bright color covers. This has been a particularly exciting topic among both clinicians and current recipients, as well as candidates considering the OSIA system. In addition to the five standard hair color covers that are already included with every Asia 2 and 3 sound processor recipients will now be able to choose from lavender, arctic blue, light pink, teal mint and petrol, as you can see from left to right on your screen.

With the development of the OSIA 3 sound processor, I will be highlighting several key advancements including the new Zapium chip for improved sound quality, the expanded fitting range that is available with that more powerful performance that is enabled by the system forward focus technology for the OSIA system, the rechargeability and on the go charging case, and the broadest range of streaming options that we have now available with the OSIA system.

So as mentioned earlier, the OSIA 3 sound processor continues to build upon the foundation of the Piezo power technology provided with the OSI 300 implant. Now, with the addition of the Zapium chip, recipients benefit from improved signal processing and that industry leading connectivity that we've been able to develop for this. When you combine that with the lithium ion battery that is rechargeable, we are now able to Deliver up to 65 decibels of fitting range and we are able to provide up to 30 hours of hearing on a single charge.

Now on this chart here you will see the yellow line which depicts the osia3 sound processor and the dotted line which depicts the osia2 sound processor. And what I want to highlight is that you have an additional 4 decibels of maximum power output available in that mid to high frequency range, as well as an additional 2.5 kilohertz of wider bandwidth which also provides for a really improved hearing experience for your patients.

Now I want to share with you a little bit about some advancements we've made in terms of helping to support your patients in those noisier environments.

So within the everyday program, auto directionality is a feature within this design. This will provide for that automatic ability to adapt to your patient's environment to assist with noise reduction. It will fluctuate between a reduction of 3, 6 or 9 decibels. Now with forward focus, this is built into a new noise program that is designed for challenging listening environments that your patients might find themselves within. It has a fixed noise reduction of 11 decibels that points the patient's microphones forward.

This gives patients an extra boost when the auto directionality in the everyday program isn't quite giving them enough of that noise reduction that they need.

Now, one of my favorite topics is of course the rechargeability that has been introduced with the OSIA 3 sound processor and I'm thrilled to share with you some of those details.

So with this, it is the first fully rechargeable system.

It provides for up to 30 hours of hearing on a single charge and has that on the go charging case. So with that, from a single charge of the OSIA 3 sound processors charger, you will be able to achieve up to two full cycles of of charging from that one single charge. In addition to that, in case your patients find

themselves in a situation where, you know, maybe accidentally forgot to charge overnight and find themselves in a situation where they need to achieve hearing, well, from just 15 minutes of charging, they will be able to achieve two hours of hearing.

Now you may be wondering, how do you achieve that full charge? Well, you simply place the OSIA 3 sound processor within the OSIA charger. By just charging those together for three hours, you will be able to achieve that full charging and have that patient set up for up to 30 hours of hearing. They'll be set up for success. So our recommendation would be of course to complete that full charging whenever you are preparing for a fitting appointment.

But of course, as I previously mentioned, if you find yourself in a pinch, you really need to ensure that your patient is able to complete their fitting appointment. You can achieve that with just 15 minutes of charging of that sound processor and charger.

Some additional enhancements that I would love to share with you are about some making the design a little bit more robust, being able to ensure that they have that durability that they're looking for for their everyday life.

So with the OSIA 3 sound processor, it has an inherent IP68 rating. This is the highest rating that you can achieve for a device of this type. So when your patients find themselves in, you know, their typical day to day settings, if they happen to encounter dust, if they're out and about, and you know, let's say they want to go to a splash pad or catch themselves in the rain, they will be set up for success. They will be able to continue to use their sound processor and simply wipe it off when they have that opportunity. Now, let's say your patient really wants to dive all the way in.

They want to get underwater. They want to be in say, a construction environment where there's increased diversity chest and the like. Well, then we also provide still that Aqua plus accessory for the

OSIA 3 sound processor. With that you do have options for different programs available. So that way you can ensure that your patient has the type of sound that they need.

So an outdoor program as well as an underwater program, we also do have the ability for retention accessories to be positioned with that Aqua plus accessory. So both in the terms of being able to use things like the retention clips and the like, we also have the option for a goggle clip that will help them to keep that secure as well.

Now, the last topic I'm going to share with you before handing it over to Bailey to get into some of the really exciting information will be around the connectivity features that we have provided with this and the enhancements that we've made there, as well as with the wireless technologies available. So with this, it is the first active system to be able to also include direct Android streaming. We already had the iOS devices covered with our previous model, but now we are able to also provide that direct streaming to Android. On top of that, we do have the ability to achieve that Bluetooth LD audio accessibility and that of course includes within it the AURACAST capability. So we really look forward to when that continues to develop and be an option for more patients in more settings.

We do have new wireless devices with that as well, which I will go into more detail on the next slide. But the one that I'm really thrilled to share with you is that now with the OSIA system we do have that remote remote care capability through the OSIA Smart app. And so for patients where you want to be able to provide additional options, whether that just be accessibility, being able to get physically to your location or what have you, you will have this option available now within the OSIA system offering for the OSIA 3 sound processor.

So those accessories that I mentioned, these new devices that we introduced with the Baha 7 sound processor we now have available. So this is the TV Streamer plus and the Multi Mic Plus. These are compatible with the Osia 3 sound processor. And this is really going to provide that improved hearing in

challenging environments, especially thinking for classroom settings and the like, that Multimic plus will really help your patients out. It also includes features like one touch pairing and auto streaming and of course does support the AURACAST broadcasting capabilities.

So we are thrilled to be able to introduce that. Now, without further ado, I am thrilled to shift it over to Bailey who will share even more information with you regarding a recent study that was completed. Thank you.

Wonderful Channing and Hannah. I'm so excited to be here. This was an incredibly fun study to be conducting in the Cochlear office in the Denver Research and Technology Lab along with a couple sites in Australia. So what I'm going to talk to you about today is the OSIA study that took place for FDA approval.

And this study was a lengthy title, a Pivotal interventional open label prospective multi center clinical investigation. Again a mouthful that evaluated hearing outcomes with the OSIA 3 and compared them to the hearing outcomes in the OSIA 2. This was done in all adult OSIA implant recipients. We had a total n of 29 and they had mixed hearing loss, conductive hearing loss or single sided deafness. That does include most of the inclusion criteria for the study. However, we did require our participants to have at least one month of experience with their OSIA2 before participating.

So again there were three sites that took part in this study. One of those was here in the cochlear office located in Lone Tree, Colorado run by me. We did have a site in Sydney that was run by SDNL and then another site in Melbourne run by Karen Galvin.

So this was a three visit study design. The first visit was a screening and baseline assessment to make sure that all of our participants were eligible to participate in the study. At that visit they were randomized into one of two groups. Group one took home an OSIA two first they took it home for a take

home trial period, they came back and we tested them with it and then they took home an Osseo 3 had another one to two week take home trial period. Gave them lots of experience with different environments.

We encouraged them to go out to restaurants, concerts, the whole works and they came back and we did the same test battery with them. Now group two was pretty much the exact same thing. They just took home the Osia 3 first before taking home the Osteo 2.

So our participant demographics we did have quite a variety of participants here in this study. So we saw 11 people here in the United States and 18 people in Australia. Split between those two sites mentioned earlier, 62% of our participants had their implant in the left ear and 38% of our participants had the implant in the right ear. We also saw a wide variety of implant generations which was very fun. So we had two people with the OSI 115 people or 48% with the OSI 200 hardware version one, two people with OSI 200 hardware version two and 10 people with the OSI 300.

We did have more male participants in this study than female with 23 of them being male and 6 of them being female and our mean age was 61 and a half with the range being 34 all the way to 79 years.

Our participant hearing history we had 24 people with mixed hearing loss, which is not unsurprising given this population. We had three people with conductive hearing loss and Two people with sensorineural. And we see a very wide range of primary causes of hearing loss, which again is not uncommon given this population. So we had nine people with atresia, four people with cholesteatomas, ranging all the way from tumors to idiopathic sudden hearing losses, and so on and so forth.

To get into the meat of the study, this audiogram here shows the bone conduction thresholds of our participants. So that dark black line running right through the middle is the mean bone conduction thresholds of our participants. And those gray lines behind it are the individual bone conduction

thresholds. Now the gold line running through 55dB HL there is just a reference point because this was the fitting range of our OSIA 2. However, for the study, we had a study inclusion criteria of up to 65dB HL.

So some fun stuff. We saw significant improvement of high frequency aided thresholds due to the increased bandwidth in the OSIA 3. Now the audiogram off to the left there, that dashed line are the mean unaided thresholds of our participants. The gold line are the mean aided thresholds of the osia 2. And the black line are the mean aided thresholds of the OSIA3.

Now if we take that 4,000 to 8,000 Hertz, we've put it in a nice bar graph off to the right there for you to see a little bit easier. What we see is an 11dB average of improvement across 4000, 6000 and 8000 Hertz. So a lot more high frequency audibility for our recipients. The OSIA 2 is that gold bar graph and then the OSSEO 3 is the green. And that's going to be the color coding for the rest of the study results that I'll go through as we get into more of the results of the study.

We evaluated speech perception and quiet using CNC words at 50dB and 65dB SPL. And what we saw is that speech perception and quiet was significantly better with the OSIA 3 when compared to the OSIA 2 in that standard everyday program. So off to the left, that box plot there shows a mean pair difference of of 6.2% at the 50dB SPL category. And we see a 5.9% mean paired difference off to the right there in that 65dB SPL category.

We also evaluated speech and noise, and we did this in a couple of different ways. This slide is going to show the speech and noise testing using the AZBio. And what we see is that speech and noise improved between the Asia2 Noise program and the OSIA3 in a new noise program. Given this was done with an AZ bio. It was done at a fixed speech to noise ratio with speech coming from the front and noise coming from behind.

We see a mean pair difference of 7.3% favoring the OSIA 3.

We also evaluated speech and noise with the BKBC. So it was an adaptive speech test. And what we saw was that adaptive noise was better with the OSIA 3 when compared to the Asia 2. We had a clinically meaningful average improvement of 1.1 dB.

Now, speech and noise testing, and speech testing in general is very important for this population and for recipients in general. However, we know that it doesn't totally cover the entire patient experience. So it's really important for us when doing these studies to gather patient reported outcomes. They're also some of my most favorite results to present on. So we did this using the SSQ12.

And what we see is that our participants reported significantly improved functional hearing with the OSIA 3 when compared to the OSIA 2. So the bar graph down there off to the left shows all the different categories of the SSQ12. So speech and hearing spatial and quality. And what we see is that the OSIA3 hearing ability ranked higher than the OSIA2 hearing ability in all three of those categories. And when we conglomerate those scores to look at the SSQ12 global score, we see a significantly, statistically significantly improved functional hearing global score for a mean pair difference of 0.74.

This is probably my favorite slide to present on. I've presented these results a few times and it never gets old. So after each participant took home the Osia 2, they were given a questionnaire where they had to rank their satisfaction with the device in all of these different categories. They did the same thing with the Osia 3 and they just filled out that questionnaire depending on which group they were allocated in. And what we see is that the OSIA 3 satisfaction ratings are higher in every single category listed off there to the left.

Now it's very encouraging to see that the hearing performance in the OSIA 2 was also ranked really highly, 86%. But we see a 3% boost in the satisfaction with the OSIA 3 and that overall hearing

performance category, as you go down in each of the categories, you see that that satisfaction rating gap gets even greater. So hearing and background noise was ranked at a 64% satisfaction rating for the OSIA 2, but for the OSIA 3 it was ranked at an 86%. The overall sound quality for the OSIA 2 was ranked at 71%. And we see a 25% increase in satisfaction with the OSIA3 at 96, which is pretty crazy.

Hearing and wind was at 32% in the OSIA 2 and 61% in the OSIA 3. And the largest jump that we see is in the listening to music category, which was ranked at 32% in the OSIA 2 and 93% in the OSIA 3. Now 93% for listening to music is a crazy satisfaction rating no matter what type of implant you have. So it was one of my favorite things to talk about the participants talk to the participants about. I had several wonderful testimonials from participants, especially in this category.

I had one person tell me that it helped him listen to music in a whole new way. He felt he heard instruments very uniquely. And then I had another participant tell me that he felt he hadn't been able to hear music that way in a long time. And it was way more similar to how he remembered it when compared to the ossia 2 to the ossia 3, which is a wonderful quality of life aspect that I felt very confident in hearing and helping give back to our recipients. And the other thing that we did was gave them a questionnaire to see if they would recommend the osia3 to other OSIAusers.

And all of the study participants recommended the OSIA3 to other OSIAusers.

So our key study findings Speech perception improved in quiet and in noise, which is very important for any new device. We saw significant improvements in those patient reported outcomes using the SSQ12. 90% of our participants were satisfied or very satisfied with the overall hearing performance with the OSIA 3 sound processor, and 100% of our participants would recommend it.

So thank you very much. I'm going to pass it back off to Hannah who will talk about guiding our recipients through their replacement sound processor journey.

Thanks so much, Bailey. And thank you, Melissa. So with the learnings from Bailey and Channing regarding the benefits of the OSIA 3 sound processor, I hope that not only that, we can use that information to counsel patients who may already have an OSIA 2 into what the OSIA 3 sound processor system would look like for them, but also to support the clinical documentation that will be required when writing a chart note for that replacement request. So I will be going through the replacement sound processor journey with you and I'm our concluding presenter today. So with that, we're going to start off with what the coverage and criteria looks like when considering a replacement sound processor for our patients.

Over the past few years, we have noticed that coverage has been increasingly driven by medical necessity. So Medicare still has the end of useful life around that five year marker. And then commercial and Medicare Advantage plans are increasingly requiring that the medical necessity is due to evidence provided back to them. And Medicaid is state by state criteria. So what you'll notice is that five year marker of useful life is no longer the standard across the industry.

But the insurance payers really are starting to require more measurable and specific evidence that the replacement is necessary rather than just an upgrade request. So we'll be going through what the documentation will do and that would be bridging the clinical need and the payer approval across all three coverage types.

So using this as our kind of blanket standard approach to all of our recipients who may be considering moving into new technology, we're first going to be looking for when the current device is out of warranty. So that's the first step. And then the second would be including one of the three bulleted items of criteria. So first is that the sound processor is no longer meeting the patient's need. So if you know the ADL's or activities of daily living, the patient's reporting back that they're still experiencing issues with sound quality and noisy environments, they're not able to do their normal tasks, they're

declining in performance.

That would indicate that there would be some medical necessity behind replacing to the next generation. The second would be if their device is broken or no longer supported by cochlear. And when it comes to a damage to a sound processor, we really need to describe how it is broken and cannot meet the functional needs of supporting the recipient any longer. Lastly would be if the device is also lost or stolen.

So in order to first find out if you have recipients who are out of warranty, we can use that NOAA database to use the advanced search functionality under devices. You would look for the fitting end date and let's say, you know, you're very interested in starting this today. You would probably put a date of five years from today's date or five years earlier from today's date. So that would be 9/23, 2021 and selecting Cochlear as your manufacturer. From there, NOAA will populate a list of recipients that you're able to export and look through to determine if any of those patients might be ready for the next generation.

And okay documentation. I don't know why my computer keeps going back to annotating, so apologies if you're seeing my squiggles on the slides, but documentation requirements so we discussed how there may be some need to document the activities of daily living as part part of that medical necessity. So we will be diving into, if you don't mind for me, the documentation best practices. So when it comes to the medical necessity there has been a shift in. Thank you Melissa.

There has been a shift in the best practice of using the term replacement sound processor with our payers. So so transitioning from the word upgrade to replacement. The payer claim systems use keyword based rules and they use the term upgrade which signals more of an elective improvement rather than medical necessity. So it can trigger more scrutiny or automatic denial. So using the term replacement sound processor deems it a medically necessary choice for the patient to advance in their

hearing journey.

And here at Cochlear and still with your patients in a counseling, I think using the term upgrade is very appropriate because that will help them know that there is functional improvement to switching out their sound processor within your note as well specifying as their audiologist that you are ordering recommending the next generation technology as their replacement that is helpful for the insurance payers to know that they need to move forward. The third thing is enforcing the benefits to the patient's daily life activities. We'll go into more detail surrounding the activities of daily living, but what that will entail is that the current device is no longer supporting them and that next generation technology we need to bring that back on why the current device is not and the next generation will aid them in having improvements to meet that need. And lastly, within our documentation we would want to include anything such as audiograms, the product claims that Bailey just relayed or boost testing imaging to justify that the replacement is necessary with the activities of daily living. The documentation foundation is really to relay that the current sound processor affects their essential daily activities and creating a strong justification for that replacement approval.

So the three key themes that we can think of are safety and quality of life, social and entertainment and functional impact with the safety and quality of life. If let's say for example the patient is still experiencing issues in everyday listening environments and they're no longer able to hear announcement announcements, they're no longer able to drive in the car with safety, that would be a medical need in which a new sound processor may support them in that situation. Social and entertainment having difficulty, let's say listening at school, listening in noisy environments, if they are often at work and in a large conference room, that would be more of everyday life in which they're no longer feeling supported by their device and then functional impact. So an example of that would be if the patient works long hours and the new rechargeability of the device would give them confidence to move forward in their job without having to keep on disposable batteries in order to support them. We

have some examples of what documentation our insurance payers are really looking for.

So this first example is if, let's say for example, a patient were coming in to talk to you about an OSIA3 sound processor, maybe they're at the four year mark and they're coming up on their warranty. So. So they came in to maybe get something napped because it wasn't functioning properly and then you decided we're going to move forward with placing an order for a replacement. This would be a great example. So the patient is still reporting significant background noise and challenge with that environment.

They report poor sound quality and difficulty hearing in noise that's not improved by cleaning or reprogramming of their device and it's no longer meeting the needs of their daily life. Here is the call out that you discussed a replacement with their current device of the OSIA 3 sound processor. And then the note saying the OSIA 3 sound processor demonstrates a 7% improvement in speech understanding and noise compared to the current device. And then it is medically necessary for reliable access. So this one encompasses the patient reported difficulty calling out that you are recommending moving forward with a new technology, having a product claim which is wonderful and making sure that they have access to sound.

So calling it back to the new technology will support their ability for daily communication and safety.

Our second example recipients are able to place upgrade orders. We'll call them. And so this would be to make sure that you have an addendum of note to make sure that on the patient reported reason for moving into an OSIA 3 sound processor is what you have charted in your note. So this would be more of an addendum phone interaction. So Cochlear notified you that the patient placed an order and we're asking for an updated chart note on their left processor.

The patient was last seen in October of 2025. So mom called and you talked about the child's current functionality. The device is cutting in and out and without consistent access to sound, impacting her ability to focus at school and understand the content. We're recommending again the replacement to an OSIA 3 for better sound quality and battery performance. On the better.

Significantly better. The patient is a senior in high school and has high listening demands and this new technology would ensure she has that highest Quality of sound. Again, this calls out those really best practices of using the term replacement sound processor, specifying that you're ordering the device and then calling in and enforcing the benefit that the patient would have of this next generation sound processor technology.

So if you are new to replacement orders with cochlear, this is the first technology for our Osteo patients to get a new external sound processor which is so exciting. And if you are new to this, I wanted to go through how to submit an order and then also know a little bit more about what we will be asking of you throughout the process. So the documentation process, you are welcome to initiate an order on behalf of a patient. We ask that you submit your order to upgradecochlear.com and in that you can include the chart notes to support the replacement need as well the patient contact details. Recipients are welcome to initiate their orders and there's many ways in which our recipients place their upgrade orders.

But following a recipient initiated order, cochlear will reach out to you to request that supportive documentation as well. Cochlear will request a prescription through DocuSign of their medical doctor, their PCP, ENT, and then Cochlear will work the order through insurance. We manage the approvals, we collect the coinsurance, and once all of that is said and done, we will notify you and the recipient when the processor is shipping. So this would give all notification if you wanted to schedule an in person programming session or if you wanted to use the remote assist tool to program them via telehealth, which is an exciting opportunity. And please note that if Channing mentioned it earlier.

But when it comes to charging of the device, you'll want to maybe charge the device for 15 minutes if you're going to program them. Talk about a couple things. Charge it for 15 minutes. That will give you enough time to program the device and the patient walk away from the appointment with the device on their head and they're able to use it. But that two to three hours of charging is really going to give them all day battery life.

So in conclusion, preparing for a sound processor replacement order, the materials should be included and submitted to upgrades cochlear.com we're looking for that. We're looking for those chart notes to really justify the medical need for the replacement, making sure that it is documented that replacement technology was discussed and deemed appropriate. And then lastly with the chart notes, I did not mention this earlier, but within the chart notes we would like to have a signature provided whether it's handwritten or Electronic with the date and time stamped to have those submitted from you. So with that, we are at the conclusion of our webinar and I would like to open it up for questions and I think there are a few in the chat. So I'm going to welcome any additional questions.

But the first question that I see in Bailey and Channing, I might need you to step in. Depending on the questions that we have, can we please revisit how much overall high frequency improvement the study found for the OSIA 3 over the OSIA 2 sound processor? Great question. Yes. So I'm happy to take this one, Channing.

We saw an 11dB average improvement across 4000, 6000 and 8000 Hz, with the largest jump being at that 8000 Hz range due to the extended bandwidth of the OSIA3, so giving them more access to those higher frequencies. Thank you, Bailey. I see a message that for additional mapping process and programming additional lectures to learn, we can send those independently to you for additional learning opportunities both through AO and then cochlear has specific cochlear learning modules in which we can send you those as well.

Marissa, what would your recommendation be for patients who received an osteo 2 in January of 2026 and in OSIA 2 in July of only 20 in July of 2026 and only one is eligible for the FTC upgrade in osia 3, it's a pediatric patient.

Yes, I can assist with that. So for that patient we would definitely encourage consideration of the advancements that are available with the OSSIA 3, so that way your patient could have that on one side. With that, there are some additional considerations that our teammates would be happy to help you navigate in terms of compatibility with the OSIA Smart app, as they would need to choose one for that streaming capability. But within that, the patient would experience the benefits as had previously been outlined by Bailey within that. And so it is definitely worth consideration for that.

And if there are additional things that we should be aware of for evaluation of what else might be able to be done to support that patient, we are always open to discussing that and we would be happy to work with your cochlear representative to assist in that conversation.

And along those same lines, Channing, I wonder if you could talk a little bit about the warranty on the OSIA system. Absolutely. Thank you very much. So with the OSIA 3 sound processor for the overall implant that comes with the OSIA system, that does include a 10 year manufacturer warranty for new system orders, we have a 5 year warranty on the following and then for upgrade or replacement system orders, we have a two year warranty on the following that would include the OSIA sound processor, the magnets and those color covers for the BI300 implant that is part of that implant technology. That does include a two year manufacturer warranty.

And we do have a one year on the charger as well as the Bluetooth LE audio accessory and all of our other Accessories have a 90 day manufacturer warranty.

Thanks Channing.

So sorry, did I cut you off? Channing Nope, that's okay. I was going to acknowledge the other questions that I saw coming through the chat, but I think that's what you're doing so I will hand it over to you. Yeah, great minds to click. Okay.

So Brianna asks, you mentioned there's a needed provider signature. Does this need to complete be completed by the ENT provider as well? So, so within the process, Cochlear will be reaching out to a medical doctor that could be the ENT or it could be a PCP that would. That's where the prescription will be asked for using DocuSign. So yes, but it's dependent on what the patient or yourself lists as the medical doctor to reach out to for that prescription.

That answered that. Brianna. Can I add one thing to that? Hannah? Yes, absolutely.

In most states, I think the only exception that I'm aware of is Ohio, that signature can also be provided by a physician's assistant. So just want to make sure people are aware of that because that sometimes is helpful in speeding that process up.

Thank you, Melanie. Bonnie asked this question which I'm hoping, Bailey, maybe you could speak to. What is the main difference between O3 that would lead to such a jump in music listening performance? I can imagine that being a good talking point with patients. Also, were the participants that were asked about their music Satisfaction all previously OSIA 2 users?

Yes. Happy to answer that question. So I totally agree. I think this is an excellent talking point with patients. You know, it was something that came up during the study that just came up I wasn't necessarily anticipating and it's very exciting.

So I think in order to say exactly what a main difference is, specifically with music listening performance, we would have to do a whole music study, which unfortunately we haven't done yet. Maybe in the future. But I do think that there are several new things with the OSIA 3 that could have potentially contributed the signal processing is different. It's got that new chip that Channing mentioned. There's also the extended bandwidth which gave them more access to higher frequencies.

So again in order to make us any sort of a specific claim, we would have to investigate it further. But I think with the roundabout differences that are different from the OSIA 3 to the OSIA 2, any one of them could have contributed. All of the participants were previously Asia2 users, or still are, as they wait for their new sound processors. But again, the music listening performance was a massive jump and a very exciting one. So I think probably the roundabout, the overall differences with the OSIA 3, and then I think Melissa put a different question that I'm happy to answer to.

What is the difference? What is the percentage difference in speech perception and noise with the osia 3 when compared to the osia 2? And can I go into what this benefits? Absolutely. So the difference was 7.3% with the AZBIO, which is that obviously the fixed signal to noise ratio test.

And you know, speech and noise is always tricky with OSIA recipients. Any sort of a recipient of an implantable device, because we're not working with our acoustic auditory pathway, the brain has to decipher quite a bit of different things. And then there's also a localization aspect that comes into play with Osteo recipients too. So showing a mean pair difference of 7.3% of improvement. And I think when you look at actual numbers, you know, that's the difference between, you know, 60 and 67%.

That's given them 7% more understanding than they would have previously had in the OSIA 2 to help them overcome some of those challenges that come with localization, having a hearing loss in a noisy environment in general and things like that. So very exciting results to be able to see a good chunk of improvement in speech and noise with these folks.

Thank you. Bailey Channing, this one I'm going to pass to you from Julie. Could you tell me more about the chargers warranty for the device? Yes, absolutely. And what I do want to acknowledge with this is that while we do have a shorter warranty on the charger, we have conducted testing demonstrating that it would continue to function for well over five years with nearly full battery capacity still remaining at that five year mark.

So we are expecting great performance out of that charger. What we have done is really tried to focus on, on where the patient's going to see the primary benefit. And so that is with that sound processor. So it's always possible that we will reevaluate what we can do for extending the warranty within the charger. But as of current state today, we do have that one year warranty on that.

And yeah, we do though expect all those to continue to function well past that five year. Mark Channing, I hope you don't mind staying on. The next question's for you. Thank you for answering that one. Kami, an educational audiologist has a patient undergoing surgery in October.

How exciting for them. I hope all goes well. And when using the Mini Mic Multi Mic plus in school all day, how likely is it that the rechargeable battery will last the entire day for him? And can schools order the recharger? Does the mini mic plus also work with the Osia 3?

Tell us more. I love these questions. This is fabulous. Thank you so much. So with this for the streaming with the Multi Mic plus, we actually do not expect this to have much impact at all on the length or battery performance of that sound processor during the day.

The driving factor that actually is the leading contributor to how quickly the battery will be drained by just day to day use. And of course by that I mean just your typical, you know, life of that charge. You can expect that to have the greatest impact from the skin flap thickness or the coil to coil distance. And

so with that we have not changed our recommendation for the coil to coil distance. That is still a 9 millimeter maximum recommended distance.

And for that we also are recommending that or sorry, we also are introducing new magnets with this. So we are introducing a fifth magnet strength. And so we have also seen improved retention so we will expect that to improve as well. For the question about the school's ability to order a charger, yes, that is definitely an option available. I will look up that price because I did see that that was also a question.

So I'm double checking that right now. And as far as the Mini Mic plus, yes, all of the current wireless devices that we have available and compatible with the OSIA 2 sound processor will continue to be compatible with the OSIA 3 so they will be backwards compatible to those current devices.

Jenny, I have an additional question I think because we've had two back to back asking on additional accessories, I'm wondering is the standard protocol for educational audiologists who are ordering on behalf of schools still to email procare.com with order requests for multi mics or chargers for the school. Do you know you're on mute? Chani, thank you very much. Yes, absolutely. We would love for the educational audiologists and anyone else who is in need of any assistance with ordering to reach out to our ProCare team.

I would just email. If you know your field representative, email them as well or copy them to that that request Just to make sure that they can provide you with any additional questions that you have. Outstanding specific to it. I did get one additional question about retention and the question was this. They may have some additional not previous knowledge, but have there been any changes made to the retention or magnets compared to the OSIA to Bailey or Channing?

Did you mind taking that one? Yeah, absolutely. So we do again have that fifth magnet strength. So we have for the OSIA 3 sound processor that is compatible with the OSI 200 implants and OSI 100 for the

OSSIA 3i sound processor being compatible with the OSI 300 implants. We do have five magnet strengths available for both models and we do have feedback that we have seen improvement in the retention.

And then of course, I am happy to hand it over to you, Bailey as well to provide your insight from your clinical experience. Experience with those magnets. Yeah. Now keep in mind this is just my testimonial experience from the study, but having that added 5 strength gave patients a little bit of an extra boost for those who did have retention problems or, you know, slipping in windy environments or when doing any sort of physical activity, things like that. Now, there isn't a direct correlation between the osteo 3 to the osteo 2.

There's a little bit of a difference. So what I personally found is folks within the 3 to 4 magnet size range kind of stuck in there. But then for people who needed that extra boost, the 5 really helped retention quite a bit. And then those who did have some of those retention problems, it seemed to be eliminated with that extra strength.

Thank you, Bailey and Channing. I think that will be. Since it's quiet on the chat, that will be our concluding question for today. I will leave you with the note that the resources following this webinar will be going through the magnet matrix in case you do have curiosities about specific patients. That is something that will be provided upon completion of today.

So thank you for spending the past hour with us. I'm excited for all of you to experience the OSSIA 3 sound processor alongside your patients. So thank you again and please reach out to our team if you have any additional questions.