



■ NHIA's conference aims to 'reconnect everyone' during the pandemic, says Jennifer Charron. **See page 12.**



■ **Product Spotlight:** Check out the latest in diabetes technology like the InPen Smart Insulin Pen System from Medtronic. **See page 14.**



■ What's a major business practice that you have changed during the pandemic? **See results on page 19.**

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HME News

THE BUSINESS NEWSPAPER FOR HOME MEDICAL EQUIPMENT PROVIDERS

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CHALLENGES MOUNT

Providers deliver despite stressed infrastructure

BY THERESA FLAHERTY, Managing Editor

HOUSTON - Already taxed by the COVID-19 pandemic and equipment shortages, HME providers went to great lengths to continue servicing patients during a devastating storm in Texas in February.

The storm, which brought

snow, ice and single-digit temperatures to a state ill equipped for such conditions, knocked power plants offline for lengthy stretch-



L. Bachorek

es. In some cases, providers were forced to tell vulnerable patients to dial 911.

"We only had seven tanks of oxygen, and we dispensed those the first day, Monday, and then were telling oxygen patients to call 911," said Laurie Bachorek, COO of Grand Prairie-based

PROVIDERS DELIVER SEE PAGE 18

'Hard-won parts are sitting for weeks'

BY LIZ BEAULIEU, Editor

THERE WAS a huge government push to help manufacturers ramp up production of ventilators at the start of the pandemic, but that hasn't been the case for oxygen concentrators, even as they have become increasingly in demand.

Major manufacturers of oxygen concentrators say they're ramping up production as best as they can. Ball Ground, Ga.-based CAIRE has added shifts



Biola Okunola

at its manufacturing facilities and boosted its staff by 30%, helping the company to double its output during the pandemic.

"Our output has more than doubled, but the significant demand for oxygen concentrators, primarily for stationary oxygen concentrators, is still

MANUFACTURING SEE PAGE 17

Vaccines ease biz, poll finds

BY LIZ BEAULIEU, Editor

YARMOUTH, Maine - The majority of respondents to a recent HME Newspoll say they're eligible for COVID-19 vaccines, but they're not immune to the difficulties securing access to them.

Nearly 80% of respondents to the poll say they are eligible for vaccines in their states.



"We have made it mandatory in our office," wrote one respondent. "It makes a huge difference to have my delivery technicians and supporting staff vaccinated, especially due to our delivery area, which is greater than the safer-at-home borders."

Nearly 70% of respondents say they themselves have been vaccinated and another nearly 80% say someone at their company has been vaccinated.

But being eligible for the vaccine and securing access to the vaccine are not one and the same for a number of respondents.

"I added our employee names to every list possible and I was able to get the vaccine from the local pharmacy from where I live and have a relationship with the pharmacist," wrote Jodi Clark of Walnut Medical Services in Johnstown, Pa. "I am saddened that we had such a difficult time obtaining the vaccine. The employees who wanted the vaccine do feel a sense of relief knowing that they have protection."

Securing access to the vaccine has been markedly easier for respondents that are part of health systems.

VACCINES SEE PAGE 15

NCART: 'No Cuts'

BY LIZ BEAULIEU, Editor

YARMOUTH, Maine - NCART has posted a "No Cuts to CRT Toolkit" to its website that stakeholders can use when discussing budgets with state government officials and legislators.



Mickae Lee

The toolkit includes a position paper that details the importance of excluding complex rehab from cuts, infographics highlighting

NO CUTS TO CRT SEE PAGE 11



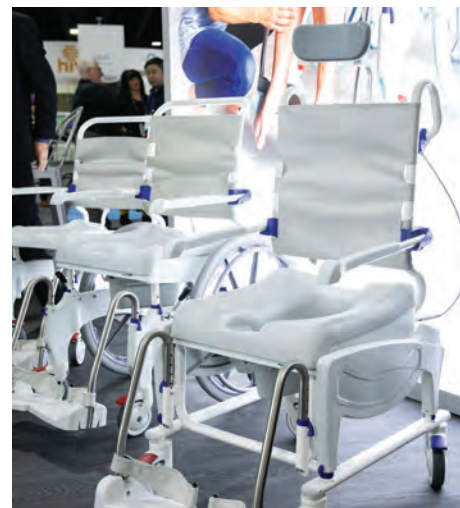
Telehealth: 'A perfect fit'

rtNOW's COO, Bryan Wattier, recently set up the Our Lady of Guadalupe Free Clinic on the company's tele-respiratory solution through a grant from the Worthington Regional HealthCare Foundation. "This technology will enhance patient evaluations by introducing the expertise from practitioners in their own home or office," said Dr. Dave Plevak, medical director of the clinic. "This is a perfect fit." Wattier is also a volunteer at the clinic.

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■ MCOs are sending providers new contracts with new rates and no discussion, says AAHomecare's Laura Williard. See story this page.

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BRIEFS

VGM reschedules Heartland Conference

WATERLOO, Iowa - VGM's annual Heartland Conference will take place Sept 13-15, instead of June 14-16. The company says the conference will return to its normal summer schedule next year. "We have a responsibility to keep everyone safe, while they learn and network with their peers from around the country," said Clint Geffert, president of VGM & Associates. "By shifting to the fall, attendees will have more time to take the precautions they need to join us in person." VGM has also decided to continue its "Heartland at Home" virtual event this year, with sessions offered for free to attendees of the Heartland Conference and \$199 to members who don't attend the in-person event. Registration opens May 1.

Medicare spending for physician services drops

CHICAGO - Medicare spending for physician services dropped as much as 57% below expected pre-pandemic levels in April of 2020, according to a new report from the American Medical Association. During the first half of 2020, the cumulative estimated reduction in Medicare physician spending associated with the pandemic was \$9.4 billion, the report says. Medicare spending partially recovered from the April low but was still 12% less than expected by the end of June 2020, according to the report.

Estrella joins NEMEP

CARY, N.C. - Lauryn Estrella has joined the NEMEP team as executive assistant. Lauryn has nearly 10 years of experience in the HME industry, working at HOMES, where she assisted with database management, organizing congressional meetings and event planning. "It will be terrific to have her on our team to assist with communications, membership growth and other projects as the board continues to increase committee work, member engagement and advocating on state and federal issues," said Beth Bowen, NEMEP executive director.

MCOs and Medicaid: Call for support in NY

ALBANY, N.Y. - AAHomecare is calling on providers in New York to help build support for two new bills in the state legislature that would require Medicaid managed care organizations to reimburse for DME and complex rehab at no less than 100% of the published Medicaid fee schedule for the same services and supplies. A.5368 was introduced in the State Assembly on Feb. 16 and S.5118 was introduced in the State Senate on Feb. 24. "This legislation is critically needed to ensure that New York Medicaid beneficiaries who rely on home medical equipment will maintain strong access to quality products and related services," the association stated in a bulletin. Providers can message their representatives through AAHomecare's Action Center. The Northeast Medical Equipment Providers Association has also created a one-pager on the need for rate stability.

Stakeholders put rule, potential cut in focus

BY THERESA FLAHERTY, Managing Editor

WASHINGTON - The recently passed \$1.9 trillion stimulus package could mean both good news and bad news for HME providers, stakeholders say.

The good news: Industry stakeholders are hopeful that now that the package is passed they can make some headway on an assortment of issues, including a yet-to-be-released DMEPOS final rule.

The bad news: Because of a federal requirement that any spending increases be offset by spending cuts the following year, the package also means Medicare providers could face a 4% cut in 2022.

"That would be devastating," said Tom Ryan, AAHomecare president and CEO. "We're looking to see if they can waive the requirement."

Stakeholders believe a new bill will be introduced soon to not only extend the moratorium on the 2% Medicare sequester cuts through the end of 2021 but also waive further Medicare cuts starting in fiscal year 2022, including the 4% cut.



Hello from Texas: From left, John Gallagher of VGM; Laurie Bachorek of MetroCare Home Medical Equipment; a staff member from Rep. Beth Van Duyne's office; and Ted Metcalf of VGM.

AAHomecare is readying providers to push for the new bill, while it also redoubles efforts to get CMS to release the DMEPOS final rule. The association recently partnered with the Council for Quality Respiratory Care and VGM on a letter pressuring the agency to act, with a proposal to make permanent a 50-50

IN FOCUS SEE PAGE 5

Providers push back against cuts by MCOs

BY THERESA FLAHERTY, Managing Editor

COLUMBIA, S.C. - HME providers are fighting large managed care organizations that are increasingly pushing into more states and offering reduced reimbursement rates, say industry stakeholders.

The straw that's breaking the camel's back: The COVID-19 pandemic pushing the cost of doing business even higher, says Craig Douglas, vice president of payer and member relations for VGM.

"Acquisition costs are going up; surcharges are being levied," he said. "The tim-



Craig Douglas

ing of these contracts is bad because the market is in so much turmoil right now. To agree to something as long term as these contracts, when all these costs are fluctuating - it's hard to know what you can and can't do if you agree to something today."

HME providers in South Carolina are the latest to face steep cuts to Medicaid and Medicare fee schedules, with

INDUSTRY PUSHES BACK SEE PAGE 4

Interoperability becomes more than buzz word

'There's real value and (health care providers) understand that now'

BY LIZ BEAULIEU, Editor

BOSTON - CommonWell Health Alliance recently marked 1 billion document retrievals passing through its network, a milestone that was sped up by the COVID-19 pandemic, says Nick Knowlton, chairman of the organization and a Brightree exec.

"We're running more transactions in a week than we did in an entire year in the beginning - we've seen a hockey stick uptake in interoperability," said Knowlton, vice president, business development, for Brightree, in February. "The pandemic took some trends that were already emerging and turned those into rapidly accelerating trends."



Nick Knowlton

Hear what Knowlton had to say about how the pandemic has highlighted the ability of interoperability to eliminate "blind spots" in patient care.

HME NEWS: Why are health care providers hitting the gas pedal on interoperability and why aren't they turning back?

Knowlton: There's real value in participating in interoperability and they understand that now (due to the pandemic). Now that they've run things electronically versus the phone or the fax, they're not going back.

HME: Is there research to support that, or is it still too early?

Knowlton: Even a year and a half ago, when we surveyed referral sources on their view on being able to send electronic referrals to their post-acute care providers, 60% said they'd be willing to switch who they work with if they were

KNOWLTON SEE PAGE 5

REMOTE MONITORING

Separate payment may be 'more viable' now

BY LIZ BEAULIEU, Editor

HME PROVIDERS should use CMS's openness to telehealth during the public health emergency as an opportunity to highlight the remote patient monitoring they're doing and to lobby for separate reimbursement, Andrea Stark and Jeff Baird say.

"That may have more viabil-

ity as an area we can get traction on, with the evolution of telehealth and remote patient monitoring," said Stark, a reimbursement consultant at MiraVista, during a webcast in February.



Jeff Baird



Andrea Stark

CMS has significantly expanded the use of telehealth during the COVID-19 pandemic, waiving numerous restrictions

for reimbursement, including that it must be conducted at an

originating site and that it must be conducted using video and audio.

During the webcast, an attendee asked Stark and Baird, chairman of the Health Care Group at Brown & Fortunato, why HME providers don't get paid for remotely monitoring patients using "connected" ventilators.

REMOTE MONITORING SEE PAGE 4

CMS makes corrections to 2021 fee schedule

WASHINGTON - CMS published a revised January 2021 DMEPOS fee schedule with adjustments to 919 codes, AAHomecare reported in February.

The agency says it identified errors in the original fee schedule published on Dec. 11, 2020, prompting it to make the adjustments.

On average, non-rural areas will receive 0.9% more and rural areas will receive 0.5% more than the original fee schedule, according to an analysis by AAHomecare.

A small portion of the fee schedule (8%) has more significant adjustments ranging between a 30% decrease to a 57% increase, mostly for codes with KE modifiers, the association says.

AAHomecare previously expressed its concerns to CMS that the 2021 fee schedule included rates in rural and non-rural areas that were, on average, slightly lower than the rates in the 2020 fee schedule.

Providers that submitted claims prior to Jan. 26, 2021, who were paid an incorrect amount may request the DME MAC

to reprocess their claims, the association says.

50-50 BLEND

The Council for Quality Respiratory Care has partnered with AAHomecare and the VGM Group to send a one-page letter to CMS urging the agency to publish the DMEPOS final rule as quickly as possible.

A proposed rule published in October outlined the agency's plans to make permanent the 50-50 blended reimbursement rates in rural areas.

"In light of the pandemic, it is more important than ever that the Medicare payment system provides stability to suppliers to ensure that patients who require medically necessary care and treatments in the home have access to equipment and services," the groups write in the letter to CMS Acting Administrator Elizabeth Richter. "Our organizations support the flexibilities CMS has provided during the pandemic. As important as the flexibilities are, it is also important to provide certainty in the payment system." **HME**

INDUSTRY PUSHES BACK AGAINST CUTS

CONTINUED FROM PAGE 3

Centene moving in to manage many of those beneficiaries.

Providers in the state have reported average reductions of 65% for Medicare, Medicaid and health insurance exchange plans, says Laura Williard, vice president of payer relations for AAHomecare.

"There's a lot of new contracts being sent out and providers are just receiving emails with updated rates," she said. "They seem to be looking at overall payment structures and reducing rates."

AAHomecare has been putting together a game plan to try and roll back the cuts in South Carolina, including meeting with leadership at Absolute Total Care, the state's Medicaid MCO, which the industry has tra-

ditionally had a good relationship before Centene moved in, says Williard.

"It was concerning to them, as well," she said. "I anticipate they will come back and say this is something they have to do."

But the issue is bigger than South Carolina, stakeholders know. With its merger with WellCare Health Plans finalized in January 2020, Centene now provides health care to more than 25 million members in 50 states.

"As you get these companies that operate in multiple states like Centene, especially if they are just entering the market, they look at the Medicaid fee schedule and say, 'Providers are accepting lower rates everywhere else, why are we paying so much here,'" Douglas said. **HME**

REMOTE MONITOR

CONTINUED FROM PAGE 3

"I think the question is, why is this not separately reimbursable," said Baird. "The supplier is spending money on hardware and software to monitor and stay connected with patients. Why can't they get paid?"

The simple answer: There is no Medicare code to pay HME providers separately for remote patient monitoring. There is, however, coverage for these services when they're provided by physicians and clinicians.

"So I see this as a fair ask (for HME pro-

viders)," Baird said. "It's not something that's going to happen any time soon, but I'd sure put it (on the priority list)."

It behooves HME providers, Stark and Baird say, to advocate for themselves and the services they provide while the iron is hot.

"Telehealth is a game changer," Baird said. "We've seen over the years, health care, particularly the commercial insurance space, gravitate toward telehealth. Medicare not so much. But COVID has taken the slow process of conversion and shoved it forward 10 years over the course of nine months." **HME**



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CONTINUED FROM PAGE 3

able to accept electronic referrals. We're going to be releasing some updates to that survey soon. To be clear, this is not 100% specific to the HME world, but it gives you insight into the referral provider mindset. They're financially responsible through value-based care models, and they don't want to have any blind spots in a patient's care progression.

HME: How does this trend become specific to the HME world?

Knowlton: Regardless of the modality or the mechanism to accomplish interoperability, it's the expectation of the referral provider that they can communicate electronically with all of their care settings. We see this trend continuing to accelerate across post-acute care. They want to see status updates: Was the oxygen I prescribed delivered or not? This increases success for preventing readmissions. This is also not lost on payers. We're seeing more interest from payers and third-party administrators for more visibility in post-acute care, as well.

HME: What's the role of e-prescribing in interoperability?

Knowlton: A lot of e-prescribing modalities are designed with the idea that, if we can get the physician ordering

within the EHR or with the standalone platform and get the order pushed to the HME correctly, that's great. We have seen an uptick in electronic documentation completion pathways, but as an industry, we'd love to have more pathways to push documentation back to the physician for execution when applicable. **HME**

VGM: Delivery costs increase

WATERLOO, Iowa - The cost of delivering home medical equipment has increased during the COVID-19 pandemic, according to the results of new survey from VGM.

The survey of nearly 100 medical equipment providers in eight regions of the U.S. looked at vehicle cost per trip; PPE expense; labor

expense per hour; and time of travel, equipment set-up and instruction, and equipment pickup.

In the Great Lakes region, for example, the average delivery cost has hit \$160.26, an increase of 19%. While labor costs in most cases increased only marginally, other costs, such as vehicle cost per trip,

increased by a greater margin.

The cost of PPE wasn't a factor the last time VGM did the study in 2018, but it has added as much as \$10.71 per trip in 2020 in the Mid-east region, for example.

VGM will use the data to bolster efforts to preserve access to HME. **HME**



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IN FOCUS

CONTINUED FROM PAGE 3

blended reimbursement rate in rural areas hanging in the balance.

"We want to see what the agency is going to do when it comes to keeping that 50-50 rate permanent," said Ryan.

Still slowing stakeholders down: There is still no permanent CMS administrator, although stakeholders are optimistic that President Biden's nominee Chiquita Brooks-LaSure will move into the confirmation process quickly.

"We're hoping to go on the record (with her) talking about the need to move that rule forward and keep the 50-50 blend in place," said Ryan.

Stakeholders have also been busy building relationships with lawmakers. Recent visits in Texas, which is still reeling from a devastating storm, were eye-opening for four freshmen congressmen, says John Gallagher, vice president of government relations for VGM.

"There's a lot of discussion to be had, but we talked quite a bit about access and what is DME," he said. "They had a whole host of questions and we were able to establish local DME providers as a point of reference and as a resource." **HME**

Better messaging

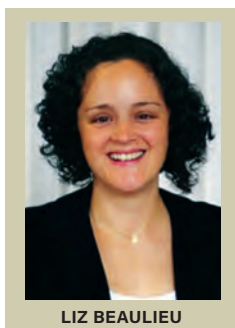
THE CARTOONS that appear on these pages come easier some months than others.

This wasn't one of those months.

Managing Editor Theresa Flaherty and I were nearly pulling out our hair after about two days of tossing around ideas, none of them sticking to our satisfaction.

(Among those that fell on the cutting room floor: My idea to have an HME provider in a home setting up a patient on, say, an oxygen concentrator and other health care providers trying to get into the home any which way they can – through the door and the windows, down the chimney. The point being, post-pandemic, more and more providers are looking at increasing care in the home – a certain new alliance between Amazon Care, Intermountain and Ascension for a hospital-at-home program comes to mind. But Theresa wasn't drinking my Kool-Aid, which is not uncommon.)

By the afternoon of the second day, we tentatively agreed on a cartoon inspired by Theresa's reporting on the Texas ice storm and the lengths to which HME providers went to continue serving patients (See story page 1). Two anecdotes from that story stick out: A tech's vehicle having to be pulled out of a ditch, and a tech walking tanks to a patient's home, because a road was impassable.



LIZ BEAULIEU

We decided on a cartoon depicting the latter. It's what we call a statement cartoon vs. a funny, haha cartoon.

In the midst of our hair pulling, we learned of the results of VGM's survey on delivery costs (See story page 5). The goal of the survey, which was completed by nearly 100 providers: determining "the real cost of providing equipment, such

as oxygen concentrators, hospital beds, mobility equipment and more, to patient homes before and during the public health

emergency."

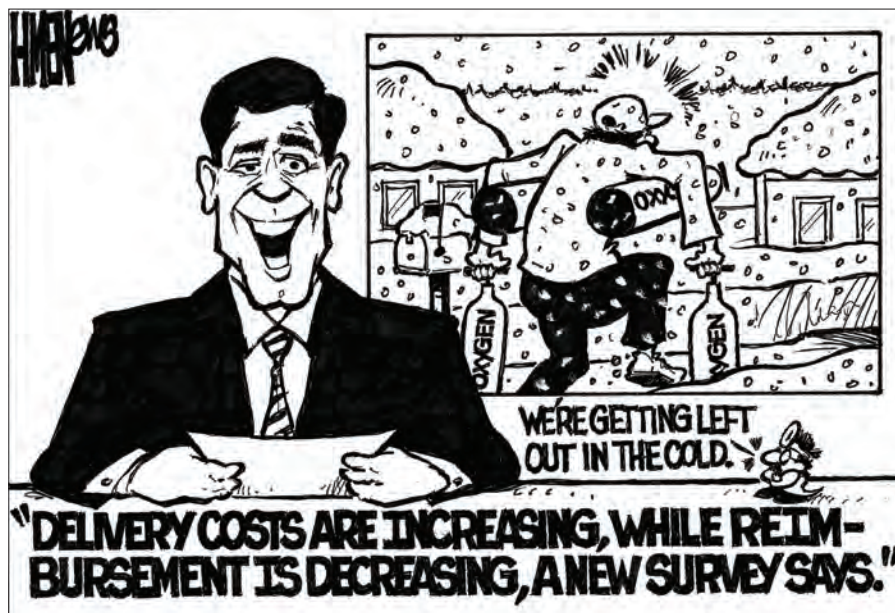
In the New England region, providers reported average total delivery costs were up 37%. In the Plains region, up 24%. In the Far West region, up 19%.

So here we have this image in our heads of providers going to great lengths to continue serving patients not only during a pandemic but also during a natural disaster, and their costs are increased and their reimbursement is decreased.

We decided to modify the initial cartoon to what you see below.

"It's better messaging," Theresa said.

It sure is. **HME**



Accreditation can drive business capacity

BY JOSÉ DOMINGOS

NOW, MORE than ever, health care provider organizations can benefit from leveraging the broad value of accreditation. Many people associate accreditation solely with compliance and the survey experience, but with the right partner, accreditation is the source of a business relationship that can help drive performance improvement, operating efficiencies and risk management—all aspects of a successful business growth strategy—while maintaining ongoing regulatory compliance.

ONGOING QUALITY IMPROVEMENT

For any health care organization, from a group practice to a corporate entity or hospital system, maintaining performance improvement should be the primary goal in seeking accreditation. Performance improvement is central to sustaining all other objectives—fulfilling legal requirements, attaining higher reimbursement and strengthening competitive advantage.

There is considerable evidence to show that accreditation programs improve outcomes across a wide spectrum of clinical conditions.

Quality improvement is a pervasive theme across accreditation standards, regardless of setting. The broad issues addressed may be rooted in patient safety and clinical care, but they are also building blocks of a high-performance organization. Elements include:

- ✓ Developing a broadly conceived program to touch every area of an organization through data collection activities. Whether employee-based or contracted service, there is very little operationally that cannot be covered by a comprehensive, effective quality improvement program.

- ✓ Attaching specific, measurable goals to each service area to establish data-driven, evidence-based protocols. Data for data's sake is not useful. Context makes the data actionable.

- ✓ Fully communicating results to ensure engagement and establish accountability spanning from front-line staff through the governing body. At the staff level, quality data are collected and compared with past performance. At the management level, patterns are identified and recommendations are made to maintain a positive trajectory or adjust to correct off-target trends. The executive level holds ultimate responsibility for the quality of services delivered, and as the quality reporting is communicated upward, there is continuing evaluation of whether performance is serving to advance the organization's mission and strategic goals.

In short, the more frequently organizations are thinking about accreditation, the easier it is to integrate the standards into daily, front-line activities and managerial

decision-making. For executive leaders who embrace a performance improvement process as the nexus of their operating plan, an accreditation focus brings added value to business operations. Continuous, small course corrections are easier and more sustainable than instituting major overhauls when a survey is approaching. This principle applies equally to standards compliance and management of the business.

OPTIMIZING EFFICIENCIES

With health care organizations operating on slim margins, operational efficiency is critical to success. Administrators and other leaders hold responsibility for compliance with complex federal and state laws, while simultaneously seeking to manage and reduce costs.

For an organization considering expansion, ensuring consistency in quality of care across all services and locations is essential. Whether a home health agency wants to expand into home infusion therapy or a physician group seeks a hospital partner for a joint venture in outpatient surgery, an accreditation resource offering comprehensive service solutions can support sustainable business growth. Taking an integrated approach promotes consistency of practice, optimizing efficiencies across service lines and locations.

ACCREDITATION SEE NEXT PAGE



JOSÉ DOMINGOS

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REPAIRS



Reduce hassles

BY DAN MEYER

Q. How can I reduce the hassle of CPAP repairs after a unit becomes patient-owned?

A. With a short capped-rental period and an often-long course of therapy, repair of patient-owned CPAP devices is a frequent frustration for HME dealers. In the past, manufacturers regularly replaced warranty CPAPs instead of repairing them, but in today's climate the practice is becoming less common. Here's some advice for handling repairs of patient-owned CPAP units both in- and out-of-warranty.

Reconsider status quo: A dealer's typical approach to a patient-owned warranty repair is to provide a loaner, send the device to the manufacturer, submit to insurance, facilitate the estimate and repair, and return the unit to the patient. That process often takes 60 days or longer, yet payers will only reimburse one month of a short-term CPAP rental, leaving dealers to eat the fees – or charge the patient – for the rest. By using an authorized warranty repair center instead, dealers can cut that turnaround time in half or more, alleviate some of the hassle and improve patient experience.

Know the codes: Short-term rentals are covered under Ko462, parts under Er399, and repair labor under Ko739 in 15-minute intervals. The first two require claim narratives, making submissions for each repair a time-consuming venture. To make the process quicker and easier for dealers, Repair Authority groups parts as kits (requiring fewer line items) and provides order notes that help dealers craft repair claim narratives.

An out-of-warranty alternative: Post-warranty, CPAP patients can find themselves waiting three, five or even more years before their insurer will cover a new unit. At Repair Authority, we saw demand for a retail repair option for such patients and created CPAP Medic, a direct-to-patient CPAP repair service with turnaround times of less than a week. **HME**

Dan Meyer is chief revenue officer at Repair Authority. Reach him at dmeyer@repairauthority.com or 440.334.2172.

RETAIL



Shift from selling to empowering

BY SUE CHEN

Q. My staff is afraid of "selling" to our customers. How do I get them over the stigma of selling HME products?

A. The answer is simple, because we are not "selling" anything - we are empowering. As HME retailers, our mission is my "Golden Rule of HME Retail": empower every customer with engagement and education.

This rule is also what customers want. In fact, 97% of consumers say that great engagement, education and service is what earns their business and loyalty.

This is especially essential to our customers, because unlike customers of other products, most of our customers, including health care providers, are not informed or educated on HME. People just are not proactive in learning about products they do not look forward to using.

Knowing that the customer wants and needs to be engaged and educated, so they are empowered to make the best product decisions to improve the quality and safety of their lives and those of their loved ones, we can get rid of that fear of "selling" and shift to empowerment.

To have an empowered staff, the investment needs to be made in providing your team with product and service training. Fear of selling will just shift to fear of engaging and educating if the commitment to training is not there. The good news is most HME vendors provide great videos and tools to train and educate your staff on their products. You can even create your own training sessions with role-playing exercises, presentations by senior staff and group-share sessions.

By embracing the "Golden Rule of HME Retail," you will shift the fear of selling to customer empowerment and grow your retail sales. **HME**

Sue Chen is CEO, NOVA Medical Products. Reach her at suec@novajoy.com.

TECHNOLOGY



Make integration a reality

BY MARK LUDWIG

Q. How can providers take advantage of changing patient pathways through new technology and partnerships?

A. I thought I would dig deeper into technology enabled solutions, coupled with access to clinically focused remote resources, allowing providers to help physicians navigate the patient continuum.

Traditionally, physician-led patient pathways were the norm. Unfortunately, in this model patients have been served poorly and COVID-19 has only highlighted how ineffective our health care system can be.

Fortunately, technology can be developed and used productively to enable increased choice and access to information for patients and has the potential to fix our broken system with more effective connectivity to medical providers. Patients with the right tools will begin more and more to effectively manage their own health care pathway.

Community based DME providers are in the best position to help patients and physicians build and adopt consequential solutions. Imagine an EHR system that goes beyond the awkwardness of MyChart and that is designed to work universally across the continuum of care. A single patient and physician sign-on that connects EHR, EMR, wearable devices, labs and imaging data, benefit data, billing systems, equipment delivery systems, ERP platforms, monitoring devices, physician notes, clinical therapist notes, specialized coach notes and patient use information.

Integrating disparate systems and resources can now streamline most clinical workflows and dramatically improve the patient's experience and outcomes. Accomplishing this requires a significant commitment of time and resources. I am personally dedicated to working with the most ambitious DME operators to help bring this total solution to fruition. **HME**

Mark Ludwig is president and CEO of Bonafide Medical Group. Reach him at mludwig@bonafide.com.

OUTSOURCING



Beat back turnover

BY TODD USHER

Q. How do I stop the revolving door?

A. An HME business has many things to worry about and turnover is one of them. A recent search online indicates the turnover rate is as high as 60% for medical assistants in health care. I would agree with this percentage, as we have experienced the same.

That's until we started hiring remote personnel five years ago and excessive turnover has decreased dramatically. Less than a 5% turnover rate is our new reality. In fact, we still have our first employee from 2016 working for us today! We found a work ethic and culture of professionalism that is often missing in the local talent pool. Dedication and a desire to learn also make remote personnel ideal.

Additionally, there is a constant flow of qualified candidates. We can fill positions in any department and move folks around as their performance justifies. Because of this cost savings, it also allows us to cross-train personnel and cover unplanned absences.

The hardest part of hiring remote personnel is getting started. There are many services to choose from. A decision must be made about what you want to accomplish. Does your company need a service to fulfill these needs or personnel to accomplish your specific goals? Front-end or back-end? Answer the phones or post payments? Remote personnel can address your specific needs.

After you get started and realize the benefit to your business and bank account, you may ask yourself: Where else can they be placed? We discovered multiple areas in our company we could assign remote personnel. We were able to use it as a method of scaling our growth and keeping our labor costs minimal, while expanding our geographical coverage.

Turnover must not be a burden in our industry. We have resources available today to eliminate the task of finding qualified personnel and keeping them. **HME**

Todd Usher is founder of Tactical Back Office, Inc. Reach him at todd@thetbo.com or 800.5589.7501.

ACCREDITATION

CONTINUED FROM PREVIOUS PAGE

Similarly, sharing best practices across service lines and/or facilities is a major benefit for an organization, regardless of size. For a system, a single accreditor facilitates internal benchmarking opportunities. For a smaller setting looking to expand service lines, it streamlines the launch process.

Using an already accredited facility as a template of quality care allows providers to adapt their model of success in other areas. With these best practices established, health care organizations also can demonstrate to investors the value of a new operation.

The documented benefits of accreditation are many and include enabling the establishment of better organizational structures and processes, promotion of quality and safety cultures and improve-

ments in patient care.ii survey of health departments that had been accredited for one year, more than 90% reported experiencing benefits such as stimulation of quality improvement and performance improvement opportunities, increased accountability and transparency, and improved management processes.iii

Accreditation standards offer a framework to help your organization develop improved structures and operational excellence. Health care leaders should use the accreditation process to inform strategic management and operational decisions.

DIFFERENTIATING FROM COMPETITORS Accreditation status can differentiate a health care organization within the community and offers significant competitive advantages. Achieving accreditation assures patients and potential partners that your organization provides the highest quality of

care, giving them the confidence to choose your facility over one that is not accredited. The ideal accreditor provides ongoing, comprehensive guidance and services to meet a range of needs, such as recognition for specialties that distinguish facilities from their competitors. .

While accreditation standards are designed to meet federal and state requirements, health care providers should consider an implementation strategy that is customized and tailored to their organization to ensure adequate differentiation and relevant risk management. Ongoing access to accreditation resources, experts and education helps organizations identify high-risk areas and adjust to regulatory changes more smoothly and efficiently.

By using best practices and data collected to meet accreditation requirements, a process is already in place to adjust for risk or

update methods and procedures to improve quality of care. This proactive approach to risk management should limit errors and lead to safer processes. As testament, many liability insurers recognize the benefits of accreditation and reduce premiums for accredited organizations.

Accreditation can be a vital tool to optimize and expand your health care business. Through ongoing support from an accreditation provider, an organization can realize the value of accreditation beyond the survey. Its optimal impact is achieved when an organization uses quality improvement and risk management to extend accreditation as a capacity building tool. **HME**

José Domingos is president and CEO of Accreditation Commission for Health Care (ACHC). To reach José, email jdomingos@achc.org or call 855.937.2242.



EARNINGS

AdaptHealth sits 'above high water'

BY THERESA FLAHERTY, Managing Editor

PLYMOUTH MEETING, Pa. - AdaptHealth posted a record-breaking year in 2020 and its acquisition of AeroCare in February sets up the company for accelerated growth in 2021, execs said on a recent earnings call.

AdaptHealth reported net revenue of \$348.4 million for the fourth quarter of 2020, a 133% increase compared to the same period in 2019, and \$1.06 billion for the full year, a 99% increase compared to 2019.

"Our patient's home health needs have only grown throughout the duration of 2020," said CEO Luke McGee, "and now that AdaptHealth and AeroCare have combined, we have amplified our ability to empower our patients to live their best lives out of the hospital and in their home."

AdaptHealth provided HME to more than 43,000 patients with COVID-19 in 2020, as well as respiratory equipment, including ventilators and "thousands" of oxygen concentrators, to its hospital partners.

The company's oxygen business was elevated

throughout 2020, with an increase in the second half of the fourth quarter and into 2021.

"We expect oxygen new starts to remain above pre-pandemic levels for at least the balance of the first quarter," said CFO Jason Clemens.



Luke McGee

Additionally, AdaptHealth's new start business rebounded in the fourth quarter from pandemic lows in the second quarter.

"Specifically, our PAP new start business, which declined more than 30% from pre-pandemic highs in Q2, has nearly reached those pre-pandemic highs," said Clemens said. "The uptake in COVID cases in December 2020 and so far in 2021 has slowed down some of that recovery, but we remain confident we will be above high water for new starts for PAP and other HME by the end of Q1 2021."

AdaptHealth's active M&A pipeline in 2020, which included 22 acquisitions, has continued

ADAPT HEALTH SEE NEXT PAGE

Protech Home Medical looks to make 'transformational' buys

BY THERESA FLAHERTY, Managing Editor

CINCINNATI - With a platform that it says is ready to scale, Protech Home Medical plans to "make the leap" from a regional to a national respiratory provider, said CEO and Chairman Greg Crawford on a recent earnings call.

Protech currently serves more than 120,000 patients through 49 locations in 11 states, including Florida, a market the company recently entered by way of its acquisition of

Jacksonville-based Mayhugh's Medical Equipment, which added 10,000 to its roster.

"We are also looking for what we consider to be transformational-type acquisitions that can include multi-state operators with substantial revenue and EBITDA generation, which would meaningfully move the needle for us across the board," Crawford said. "We have a platform that is ready to be scaled immediately and I am very optimistic we have the

ability to close impactful deals in the near to medium term in new and existing markets."

Protech reported revenue of \$22.8 million for the first quarter of fiscal year 2021, a 32% increase compared to the same period in 2020. The company completed 76,691 vs. 62,999 setups or deliveries, an increase of 22%; and completed 34,996 resupply setups or deliveries specific to respiratory, an increase of 160%, not factoring in any of its acquisitions.

PROTECH SEE PAGE 18

National HME on being a 'silent partner'

BY THERESA FLAHERTY, Managing Editor

IRVING, Texas - Andrew Ingram wasn't looking to make a change when he took the helm at National HME, a provider of DME to hospice agencies. But, after more than 25 years in health care services, including roles at McKesson, Apria and, most recently, at Encompass Health, where he was responsible for the organization's hospice service line, the new CEO saw an opportunity to take the company to a new level.



Andrew Ingram

"It's a combination of the value they brought to the table and I'm a strong believer in continuous improvement in our industry," Ingram said. "With hospice, the goal is to give that patient and family a great end-of-life experience. You only get once chance to do it right."

Ingram spoke with HME News recently about why the HME provider is the "silent partner" to the hospice agency.

HME NEWS: How do you see the role of a DME provider serving hospice agencies?

Andrew Ingram: We're a service provider and what we do really

'SILENT PARTNER' SEE NEXT PAGE

BRIEFS

Great Elm expands Midwestern footprint...

WALTHAM, Mass. - Focus Respiratory, a subsidiary of Great Elm Healthcare, has acquired Advanced Medical DME and PM Sleep Lab, adding a combined \$5 million in unaudited revenues and 2,500 patients to its roster. The acquisition of these companies expands Great Elm Healthcare's footprint in the Midwest, adding six locations in Kansas and three in Missouri, its first in the state. "The acquisitions of Advanced Medical DME, LLC and PM Sleep Lab, LLC fit our strategy of pursuing tuck-in acquisitions of respiratory focused companies that expand and enhance our geographic footprint, as we seek to gain scale and increase operating leverage in areas where we have an existing presence," said Peter Reed, CEO of Great Elm Group Inc., parent company of Great Elm Healthcare. "We were attracted to the companies' patient-centered philosophy and their talented managers and staff. We welcome these new patients and employees to the Great Elm Healthcare family and look forward to extending our offerings throughout Kansas and Missouri."

... reports revenues

WALTHAM, Mass. - Great Elm Group reported \$14.5 million in total revenue for DME for the three months ended Dec. 31, a 1% increase compared to the same period last year. It reported a net loss of \$2.9 million vs. \$700,000. "DME was able to grow revenue during the quarter despite the continued negative impact of COVID-19 on its business," said Peter Reed, CEO. "Profitability was depressed during the quarter primarily as a result of legacy revenue reserve issues as well as increased operating costs due to the pandemic. Our team remains focused on improving profitability and resuming a more active acquisition program." Great Elm says the increase in revenue was driven primarily by organic growth in CPAP resupply sales, offset by lower sleep studies revenue and lower rental revenues for new equipment set ups.

AZ MediQuip taps COO with retail resume

PHOENIX - AZ MediQuip has named Mark Belanger COO to oversee the company's operations and national development. "With a proven track record of exceeding business and financial objectives, Mark will be a valuable asset as we continue to grow and develop our business," said Mark Nicotera, CEO of AZ MediQuip. "We are pleased to welcome Mark to the team and look forward to his contributions in leading us into the next chapters of our brand's growth." Belanger has more than 30 years of experience in establishing and implementing strategic plans, introducing new products and services, and developing policies, operations systems and procedures for leading retail brands, including Barnes and Noble, Dunkin Brands and Starbucks.

Hart Medical: Ahead of curve with TeleHart

BY TRACY ORZEL, Contributing Writer

CHEBOYGAN, Mich. - While many businesses were left scrambling to develop safe business practices this time last year, Hart Medical Equipment was already rolling out its own secure telehealth platform, TeleHart.

The company began developing the platform, which educates customers remotely on CPAP/BiPAP, oxygen, glucometers, and nebulizers, in the fourth quarter of 2019 and launched it in March 2020.



Stef Tasca

"As an industry innovator, Hart utilizes a host of technologies," said Stef Tasca, director of marketing and communications. "We had already begun to lay the groundwork for virtual teaches. Then the pandemic came into play."

Once they have the equipment, patients can choose one-on-one or group training or as part of a group,

both in real time.

A virtual trainer will then show the patient how to set up and use their equipment via Zoom's health care platform and answer any questions they have. Patients can also request follow-up training.

"There are a lot of first time Zoomers and we have a professional team ready to help them," said Tasca. "We also have training videos they can watch before they meet with their actual trainer. That being said, if

TELEHART SEE NEXT PAGE

REPORTER'S NOTEBOOK

'This is where we shine'

THERESA FLAHERTY, Managing Editor

WHETHER IT'S a global pandemic, a natural disaster or a poorly thought-out government policy, independent HME providers say they will continue to show up for patients.

BritKare recently donated wheelchairs and oxygen tanks to help vaccination efforts at the Amarillo Civic Center in Amarillo, Texas, where large turnouts have meant lengthy waits in line for seniors, including owner Josh Britten's grandmother.

"She has COPD and when she had issues with the long line, we knew others like her would," said Britten, owner of the family-owned business, which his father launched in 1994. "We were happy to help the city in any way we could."

Several weeks later, a devastating winter storm knocked out much of the region's power, underscoring the importance of providers with community ties, said Britten.

"This is where we shine," he said. "(This shows) the importance of having good local and regional providers instead of just taking

the lowest bid. In Texas, they are having to bring in emergency relief for oxygen patients or they are ending up back in the hospital. We've been able to take care of our patients and provide for them."

But these days, providers with community ties are harder and harder to come by, whether it be due to Medicare's competitive bidding program or to acquisitions.

"We do feel very alone," said Laurie Bachorek, COO of Grand Prairie-based MetroCare Home Medical Equipment. "The acquisitions happening are pretty significant and we see our friendly competitors going one by one by one."

For those left standing, there's a strong sense of community, they say.

"We were calling on other DMEs, they were calling us – it's a joint effort," said one Houston-based provider, of its efforts in the storm's aftermath. "Everything we did, handing out batteries for vents, we did it for free. We will not be reimbursed for that. It's a shame that Medicare just looks down upon us. When situations like this happen, we come through every time." **HME**



Apria goes 'APR' on the NASDAQ

Apria Healthcare in February began trading on the Nasdaq Global Select Market under the symbol "APR." The provider launched 7.5 million shares of common stock and raised \$170 million. Apria was a public company before, prior to 2008, when Blackstone Group bought the company for \$1.6 billion. The provider served nearly 2 million patients, made nearly 2.4 million deliveries and conducted more than 744,000 clinician interactions with patients in 2019. It generated \$1.1 billion in net revenues.

TELEHART

CONTINUED FROM PAGE PREVIOUS PAGE

they don't want to (use the platform), they can still schedule an appointment at one of our locations. It's all about meeting patient needs."

Hart's investment in technology doesn't end with TeleHart. The company also has a robust e-commerce website, hartmedical.org, where patients can use their insurance

to order equipment and supplies. Hart also uses pulseM to track patient experience with secure two-way texting and a "chat now" software, as well as McKesson VerbalCare and ResMed ReSupply to increase patient compliance.

"Hart is always pushing the boundaries and even looking into conversational AI and other mechanisms to help grow the business, reduce cost and improve patient outcomes and satisfaction" Tasca said. **HME**

ADAPT HEALTH

CONTINUED FROM PAGE PREVIOUS PAGE

into 2021. Already, it has acquired Allina Health Home Oxygen & Medical Equipment in Minnesota in February and two more companies in the Midwest and southern California in early March. The company's organic growth also increased 5.7% in the fourth quarter and 8.6% in 2020.

"We remain confident in our organic growth prospects between 8% and 10% for 2021," Clemens said.

AEROCARE INTEGRATION ON TRACK

Efforts to integrate AdaptHealth and AeroCare are well underway, with an initial focus on their sleep businesses, where they will combine best practices for patient setup procedures and align resources across sleep coaches and compliance teams.

"We remain on track to deliver \$50 million in annual run rate synergies," said co-CEO Steve Griggs. "Prior to closing, we expected to achieve revenue synergy in a few key areas focused on helping patients stay adherent to their prescribed protocols, ensuring patients get the resupplies they need when they need it and streamlining the revenue cycle."

AdaptHealth has already begun leveraging its enhanced scale to negotiate new purchasing terms with manufacturers, says Josh Parnes, president.

"We expect these new purchasing terms to combine to contribute significantly to our \$50 million cost synergy target with the majority of these savings already being realized in Q1," he said.

Other savings will be realized through consolidation of back-office operations, locations, vehicles and other resources across the country.

"We are pleased by progress this far and are running ahead of plan, but we will remain focused on completing the plan," said McGee. **HME**

'SILENT PARTNER'

CONTINUED FROM PAGE PREVIOUS PAGE

needs to be an extension of the hospice provider. The DME is a silent partner – the transactions happen in the background seamlessly. The hospice doesn't have time to be looking at the job of the DME company. They need to 110% focused on people and clinical delivery.

HME: What role has technology played in that partnership?

Ingram: I've been around long enough to see technology advance, whether it's how we communicate, or how dispatch interacts with customers – it's made it move much quicker. It's also about how the technology interfaces with other technology. Whether it's their EMR and our customer software, I see we've got to be really about a true partnership.

HME: National HME partnered with New Mountain Finance Corp., a New York-based investment firm, in 2018. Do you see a lot of consolidation in the DME-to-hospice market driven by outside investors?

Ingram: Some of the bigger providers have equity partners. They believe in the industry and are always looking to grow their footprint. The resources allow us to invest more in technology, upgrade infrastructure and put more back to the employees in the way of training and developing. That's hard when you are a smaller local DME.

HME: How has the COVID-19 pandemic impacted the DME-hospice partnership?

Ingram: There have been challenges with delivery protocols, where we had to work collaboratively to keep everyone safe. On top of that, cleaning the equipment when it comes back to make sure it's safe. There's been additional costs that we've been absorbing. There's something to be learned with just basic cleanliness around hand washing, mask wearing – those are things that after the pandemic passes will stay with us for a long time. **HME**

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ANNUAL SYMPOSIUM

NSM sees year of renewal ahead

BY LIZ BEAULIEU, Editor

NASHVILLE, Tenn. - Even as the COVID-19 pandemic surged in 2020, National Seating & Mobility completed two of its biggest milestones: It signed an exclusive national partnership with The Home Depot and it closed its largest acquisition to date of Travis Medical.



Bill Mixon

AT HOME AT THE HOME DEPOT

NSM currently offers "Independent Living Services" from 250 Home Depot stores and plans to offer them from 1,300 stores by the end of 2021, says Bill Mixon, CEO.

"We're their provider of home access solutions through their platform, both through their stores and on their website," he said. "It's a great partnership. They obviously have a super brand - people look to The Home Depot for solutions in their home."

Company names Nori to lead Canadian biz

BY TRACY ORZEL, Contributing Writer

NASHVILLE, Tenn. - With more than 32 years of experience in the Canadian complex rehab and HME markets, Rick Nori knows a thing or two about each province's funding programs. And as NSM's new regional area director of Canada, that's going to come in handy for identifying expansion opportunities. HME News spoke with Nori and John Bertone, NSM's executive vice president of field operations, about why the company wants to be a player up north.



Rick Nori



John Bertone

HME News: NSM entered Canada in 2019 - how's it going?
John Bertone: We've been doing

fairly well in British Columbia; I was actually quite surprised about 2020. We met our expectations. We combined

strong, organic growth with a couple of well-positioned acquisitions (Active Mobility and PG Surg Med). We also do retail, and our wide array of product lines have proven quite effective. We'll look to continue to build on that foundation for years to come, but so far so good.

HME: NSM has been rebranding acquisitions under the NSM name in Canada - why is that?

Rick Nori: Because our brand story is such a significant

CANADA SEE NEXT PAGE

In February, NSM announced that it added home access options at its Las Vegas branch and that it planned to bring its partnership with The Home Depot to the area this spring.

MEGA MERGER

When NSM bought Austin, Texas-based Travis Medical, it bought the self-described "third largest" complex rehab company in the industry, with 27 locations in 23 markets in the Texas, Oklahoma, Florida and the Pacific Northwest.

"It was a mutual thing," said Mixon of how the deal was something both NSM and Travis Medical pursued. "We just felt our culture aligned, and we had the same values and mission orientation in the marketplace. We knew we had the ability to come together in Texas."

Chris Yule, formerly CEO of Travis Medical, is now senior vice president of payer relations and government affairs for NSM.

THE YEAR FOR RENEWAL

With nearly a year under its belt of continuing to serve

RENEWAL SEE NEXT PAGE

BRIEFS

US Rehab publishes white paper on telehealth

WATERLOO, Iowa - U.S. Rehab has posted a white paper called "Telehealth for Complex Rehab: Is it Effective?" to its website. "Telehealth has been a great tool for complex rehab technology professionals throughout the COVID-19 pandemic," said Greg Packer, president of U.S. Rehab. "But what we have seen is that telehealth should be available to use outside of the public health emergency." Packer predicts that using telehealth will increase over the next few years and that providers should prepare now to provide this service and understand the situations where telehealth is best suited. The white paper includes commentary from Packer; Dr. Mark Schmeler, associate professor and director of the continuing education program in the Department of Rehabilitation Science and Technology at the University of Pittsburgh; and Kyle Walker, director of operations of assistive technology at VGM Homelink.

NSM takes more 'holistic' approach to Las Vegas

NASHVILLE, Tenn. - National Seating & Mobility is adding full-service home access options at its Las Vegas branch. Kevin McManus will join the branch to oversee home access services throughout the region. McManus, who has been working in the complex rehab industry since 2012, is the former owner of Nevada Mobility. To further expand the Las Vegas branch's home access services, NSM will also bring its exclusive program to The Home Depot to the area this spring.

ISS to hold series of webinars

PITTSBURGH - The 37th International Seating Symposium in March launched a webinar series, "Prelude to Pittsburgh," to offer education ahead of its in-person event scheduled to take place Oct. 28-30. The first webinar, "Pandemic Recovery: Lessons Learned and Future Strategies," was held Friday, March 19, with a virtual happy hour immediately following the session. Three additional webinars will follow in April, May and September. CEUs will be available.

People news: Daniel Curling

National Seating & Mobility has named Daniel Curling as its new CIO. Curling has more than 20 years of experience in technology related positions. He most recently served as senior vice president, CIO for Asurion, a Nashville-based provider of insurance, warranty and support services for mobile devices, consumer electronics and home appliances. "Daniel is an innovative leader with a track record of success in driving transformational technology solutions for international businesses," said Bill Mixon, NSM CEO. "His experience will be invaluable to our team as we continue to lead the future of technology driven care for our industry."



Rehab Medical supports disability rights org

Rehab Medical in February donated \$5,000 to accessABILITY, a disability rights organization serving Indianapolis and the seven surrounding counties. The organization provides individual consumers, government agencies, corporations and other nonprofits with the tools necessary to ensure the acceptance, respect and inclusion of everyone, according to its website. No fewer than 51% of the staff and governing board of accessABILITY are people with disabilities.

Numotion is stronger than ever, CEO says

BY LIZ BEAULIEU, Editor

BRENTWOOD, Tenn. - Numotion Strong, the theme for the company's National Leadership Conference this year, has a double meaning, applying not only to the business but also to its employees, says CEO Mike Swinford.

"In a world where we couldn't feel further apart (due to the COVID-19 pandemic), we've never felt closer as a team," he said. "I don't think that's ever been more true."

Numotion streamed the three-day conference to all employees in late January, mixing business updates with inspirational panel sessions on disability inclusion, a virtual expo and fundraising activities.



Mike Swinford

BUSINESS STRONG

Numotion hit "record low cycle times" in 2020, Swinford said, with help from bots that automate the insurance verification and prior authorization processes.

"We took out weeks," he said. "We're faster from evaluation to delivery than ever, by a country mile. We're shooting for 30 days as a median. We'll have outliers, but we have to continue to drive efficiency."

Another highlight in 2020 was Numotion's medical supplies business, which has tripled organically in the past four years. The company also added an inorganic boost to the business in January when it announced it had acquired Wheeler's Medical Supply, a provider of intermittent catheters and incontinence supplies with a presence in Florida and Georgia.

"That's just become a

NUMOTION SEE NEXT PAGE

Accessible Systems prizes experience, as competition heats up in home access

‘The private equity market is also getting involved,’ says Nathan Colburn

BY TRACY ORZEL, Contributing Writer

DENVER - Accessible Systems and Ascent Mobility have been friendly competitors for more than a decade, but now they play for the same team after merging in February.

“We’ve known and respected each other for years,” said Nathan Colburn, partner, Accessible Systems. “I think Greg and his team have learned this business just like Accessible Systems from years of experience.”

Greg Shepherd, the owner of Ascent Mobility, will join the leadership team of Accessible Systems, and his staff will continue in their current roles.

Accessible Systems, based here, has five locations in Colorado, Utah and Texas, and 46 employees. Lakewood, Colo.-based Ascent Mobility offers



G. Shepherd



N. Colburn

stairlifts, wheelchair ramps and lifts, private elevators, overhead ceiling lifts and safety railings, and has five employees.

“We do have similar territories and similar product lines, but slightly different models and different brands, so we’re trying to figure out how to put all those together,” Shepherd said. “But the exciting thing is we can pick and choose which ones we feel are the best ones.”

For now, the two companies will retain their names, phone numbers and websites, but the goal is to

make a smooth transition eventually.

“We don’t have ‘on this day, we’ll do business under this name or that,’” said Colburn. “We want to serve the customer and when the customers are taken care of, that’s when we’ll be ready for it.”

While the two companies have joined forces, competitors are piling in, says Colburn. The Home Depot, Lowes, Internet businesses and even gutter companies are trying to cash in by adding home accessibility to their product lines.

“The private equity market is also getting involved in our industry,” he said. “They see that market and they can see that seniors are inclined to stay in their homes and they’re willing to invest in products that will help them do that.” **HME**

CANADA

CONTINUED FROM PREVIOUS PAGE

part of our company, it’s important to integrate our new companies’ employees into a unified mission, vision and core values that are the foundation of our client-centric culture.

HME: What’s attractive about the Canada market?

Nori: We feel the Canadian market presents a strong opportunity in retail, as well as in HME and soft goods, which is probably a little different than you would find in the U.S. The pandemic has also taught us many things. For example, we have an opportunity to do better with aging in place.

HME: What’s your strategy in Canada, going forward?

Nori: We’ll focus on leveraging people, processes and technology to create efficiencies—that’ll be paramount for our success—and continuing to advance technology solutions, which will help greatly with investing in and training the people of NSM. As a business, we need to continually challenge assumptions and not accept the status quo. **HME**

NO CUTS TO CRT

CONTINUED FROM PAGE 1

state data on complex rehab, information on the “service-intensive nature” of complex rehab and other supporting information, says Mickae Lee, associate director of NCART.

“One of our priorities in the first quarter is to actively monitor the development of state budgets,” she said during a recent webcast. “We’re also taking the time to attend public hearings, to request the most updated Medicaid utilization and spend data available for states, and to review notices sent to providers.”

At the time of the webcast in February, the National Association of State Budget Officers reported 44 states had proposed

“One of our priorities in the first quarter is to actively monitor the development of state budgets.”

new or revised budgets for fiscal year 2022, which begins for most states on July 1; and NCART had identified “a small number of states who are considering cuts,” though the organization is still trying to determine the full impact of those cuts on complex rehab, Lee says.

Because of the revenue shortfalls in state budgets due to the COVID-19 pandemic and because Medicaid services tend to be costly, many states have instructed Medicaid officials to identify any possible cost-saving measures to help balance their budgets, Lee says.

“We know that could result in provider rate cuts in the Medicaid programs,” she said.

NCART encourages stakeholders not only to use the toolkit in their discussions with state government officials and legislators but also to report any cuts to complex rehab to the organization, Lee says.

“We want to keep our fingers on the pulse of potential cuts that could impact CRT,” she said. **HME**

NUMOTION

CONTINUED FROM PREVIOUS PAGE

tremendous business,” Swinford said.

EMPLOYEE STRONG

Numotion has acknowledged the strain of the pandemic on employees by, among other things, not extending the conference into the weekend this year and giving employees two floating holidays in 2020.

“We’ve been through a lot, and we’ve been concerned with the mental well-being of employees and keeping them energized,” Swinford said. “With 2,000 employees working from home, it’s a different environment. People get video conference fatigue. People aren’t moving around as much. We’re encouraging people to find that time to re-charge.”

The conference’s keynote session by Justin Skeesuck and Patrick Gray, who traveled the 500-mile Camino de Santiago through Spain, with Skeesuck in a wheelchair, helped to hit home that “we’re stronger when we work together,” Swinford said.

“We’ve seen what can be accomplished,” he said. “That’s never been more powerful than in 2020. They rallied around one another through hurricanes and fires, on top of the pandemic.” **HME**

RENEWAL

CONTINUED FROM PREVIOUS PAGE

patients during a pandemic – the company performed 25% of evaluations remotely in 2020 – NSM feels “optimistic” about 2021, Mixon says.

“We’re hopeful that as we approach springtime, we’re going to enter a period of renewal, not only in our business but also in our country,” he said. “We believe, as we get vaccinated and as we begin to return to normal, we’re very confident about our ability to thrive. We’ve had, since March of 2020, this monkey on our back and as that goes away, things are going to feel easy, and we’re proud of that.” **HME**

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Viamed's data starts to pay off

BY THERESA FLAHERTY, Managing Editor

LAFAYETTE, La. - Viamed Healthcare grew its core business by 21% in 2020 and rolled out several new programs in the fourth quarter that will enhance and diversify the company's overall business in 2021, says CEO Casey Hoyt.



Casey Hoyt

For one, the company has moved from pilots to national rollouts of both its "Engage" and "View" platforms, which gather data from home respiratory equipment, activity watches, blood pressure cuffs and more in the home. The platforms will eventually merge into one, says Hoyt.

"The results of our pilot showed that we were able to improve RT workflow and efficiencies, while improving our 90-day attrition numbers," he

said.

Viamed Healthcare reported total revenues of \$31.2 million for the fourth quarter of 2020, with \$5.1 million in sales related to the COVID-19 pandemic and \$26.1 million related to its core business. Net revenues for the year were \$131.3 million, with \$96.9 million from the core business.

Viamed also launched Viamed Clinical Services, a behavioral health division that seeks to reduce ER visits; and inked a deal with Commonwealth ACO, which manages 10,000 patients.

"A partnership with an ACO has been a longtime goal of the company," Hoyt said. "It would not have been possible to fulfill had we not had the quality data metrics to present to them."

Looking at the first quarter of 2021, the company provided net revenue guidance of \$25.5 million to \$26.5 million related

VIAMED EARNINGS SEE NEXT PAGE

NHIA amplifies virtual conference

Association hires production crew, adds Global Congress

BY THERESA FLAHERTY, Managing Editor

ALEXANDRIA, Va. - After canceling its annual conference last year, the National Home Infusion Association is back with a virtual event to "reconnect everyone," says COO Jennifer Charron.

With virtual events increasing in frequency due to the pandemic, the association hired a production crew to produce the event and take it to the next level, she says.

"We wanted to ensure people are getting the value and that (we put) fun into our program," she said. "One thing that always struck me at these conferences was the close-knit community we have. We worked long and hard to make sure our conference creates that community and gets people back together again."

The NHIA 2021 Annual Conference takes place April 19-22,

2021.

While much of the format is familiar, with about educational 50 sessions across several tracks, an exhibit hall and networking sessions, this year's event will feature its first-ever Global Congress on Home Infusion Therapy to encourage discussion and collaboration about the growing demand for access to that therapy, says Charron.

"We had a number of other



Jennifer Charron

countries reach out to us this year about incorporating home infusion and for COVID treatments," she said. "Six different companies are going to present a bit about what home infusion looks like in their country."

In a sign of the times, the session topics include NHIA's COVID-19 antibody therapy

NHIA EVENT SEE NEXT PAGE

Ascensia Diabetes seeks connection

'One trend (in diabetes management) is more partnerships between different companies that will come together to connect solutions'

BY THERESA FLAHERTY, Managing Editor

IT'S BEEN five years since Ascensia Diabetes Care was spun out of Bayer. In that time, the company has achieved several key milestones, including the launch of the Contour Next One meter and the Contour Plus One app, and its entry into the growing CGM space through a partnership with Senseonics to distribute the implantable Eversense system. Today, the company estimates it provides diabetes testing supplies to 10 million people every day, and its app has been downloaded more than 1.3 million times.

"As an independent company, (we've been able to) invest in things that make a difference to people with diabetes," said Joe Delahunty, global head of communications, Ascensia Diabetes Care. "Focusing our efforts and resources on innovation was exactly where we wanted to be."

Delahunty spoke with HME News recently about Ascensia's



Joe Delahunty

HME NEWS: The diabetes market has seen rapid changes in recent years. How has Ascensia evolved alongside those changes?

Joe Delahunty: Over the last five years, we've seen an increase in

ASCENSIA SEE NEXT PAGE

success so far and how being part of the community it serves helps it improve the lives of people with diabetes.



NorthShore expands

NorthShore Care Supply, the company behind NorthShore high absorbency adult diaper and incontinence supplies, has expanded into Canada. The company has served customers in the U.S. for nearly two decades, focused on providing product to people of all ages managing moderate to heavy incontinence. "The availability of NorthShore brand supplies means individuals managing incontinence can now buy these products domestically in Canada," said Adam Greenberg, president and founder. Direct-to-home retailers Healthwick Canada and AgeComfort, both based in Canada, have started offering a selection of NorthShore products. Pictured is Sean Neville, CEO, Healthwick.

BRIEFS

PromptCare acquires NBN Infusions

NEW PROVIDENCE, N.J. - PromptCare Companies, a regional provider of complex respiratory and specialty home infusion services, has acquired the assets of NBN Infusions, expanding its footprint in the Northeast. Founded in 1990 by Linda Begley, NBN is a Cherry Hill, N.J.-based provider of home infusion and respiratory therapy services with a primary focus on managing specialty infusion therapies for patients with complex and chronic conditions. "Linda has built an impressive business in South Jersey, which is a core geography for us," said PromptCare CEO Tom Voorhees. "NBN's patient-first approach to providing care is well-aligned with our values and its focus on specialty infusion therapies is an excellent fit with our strategy." Terms of the deal were not disclosed.

OIG: Part B drugs exceed AMP threshold

WASHINGTON - Seven codes for Medicare Part B drugs met CMS's price substitution criteria by exceeding the 5% threshold for two consecutive quarters or three of the four previous quarters, according to a new report from the Office of Inspector General. To conduct the study, the OIG calculated the volume-weighted average manufacturer's price for each drug, consistent with CMS's methodology for calculating volume-weighted average sales prices. The OIG is providing the seven drug codes to CMS for review. CMS should review this information to determine whether to pursue price substitutions that would limit excessive payments for Part B drugs.

Tandem names medical director

SAN DIEGO - Tandem Diabetes Care has appointed Jordan Pinsker, MD, vice president and medical director effective April 26. Dr. Pinsker joins Tandem Diabetes Care from the Sansum Diabetes Research Institute in Santa Barbara, where he has served as director of artificial pancreas technology since 2018. "Dr. Pinsker brings extensive knowledge in patient care, diabetes epidemiology and physician practice efficiency, in addition to sharing our passion for improving the lives of people with diabetes," said John Sheridan, president and CEO of Tandem Diabetes Care.

NCPA: Increase vax supply to community pharmacists

ALEXANDRIA, Va. - More COVID-19 vaccine needs to be made available to local pharmacies to speed up the rate of vaccinations, says the National Community Pharmacists Association. Lack of vaccine supply has been an ongoing issue during the rollout. When given access, community pharmacies are able to quickly and efficiently vaccinate their patients, including those who are overlooked or hard to reach, the association says. "Independent pharmacists are located in communities of all population sizes, including rural communities, urban neighborhoods and immigrant communities," said B. Douglas Hoey, CEO and pharmacist.

EYE ON INVESTMENTS

Dexcom launches venture capital arm

SAN DIEGO - Dexcom has launched Dexcom Ventures to identify and invest in opportunities to supplement growth in its core business of continuous glucose monitoring and advance the development of adjacent technologies.

Dexcom Ventures, led by Dexcom veteran Steve Pacelli, will be focused on investment opportunities in sensing technology, data analytics, remote patient monitoring and population health, broadening the company's commitment to advancing better outcomes in health care.

"Driven by core technologies that our teams have developed internally, Dexcom continues to achieve strong growth and expand our future markets," said Kevin Sayer, chairman, president and CEO. "By establishing Dexcom Ventures, we believe we can advance innovative technologies that enable better health outcomes and complement our growth opportunity. I have full confi-

dence in Steve and his team as they lead this exciting new effort."

Pacelli has been executive vice president of strategy and corporate development at Dexcom since 2012.

The fund will support independent initiatives in glucose testing technologies and in adjacent fields of metabolic monitoring, with a "start-up" mentality, Pacelli says.

"We strive to be value-add strategic investors by leveraging access to Dexcom's unique industry experience and technology leadership," he said. "While we have matured as a company over the years, we still consider ourselves to be a 'start up' of sorts. We feel well positioned to invest early and support our portfolio companies as they pioneer markets."

INFUSYSTEM SECURES \$75M

ROCHESTER HILLS, Mich. - InfuSystem Holdings has secured a \$75 million revolving credit facility, working with JPMorgan Chase Bank, N.A., acting as the lead

arranger with a syndicate of financial banking institutions that include Wells Fargo Bank, PNC Financial Services Group and Comerica Bank. The company now says it is better positioned to capitalize on strategic opportunities to grow and scale up two operation platforms: integrated therapy services and DME services. "We are pleased to be announcing our new credit facility which is designed to give us additional liquidity and enhanced financial flexibility and align with our growth-oriented capital allocation strategies," said Richard Dilorio, CEO. The new revolving credit facility replaced the company's existing \$49 million credit facility. Terms of the new senior secured revolving credit facility include a five-year term, no amortization and an adjusted LIBOR rate, plus an interest rate range of 1.9% to 3% based on the company's total leverage ratio. **HME**

ASCENSIA

CONTINUED FROM PREVIOUS PAGE

the use of CGMs and the importance of CGM as a diabetes management tool, which is becoming the standard of care. That's definitely a trend we've reacted to by entering into our agreement with Senseonics. Digital health over the last five years is also a rapidly developing area. (We launched) our Contour Diabetes app and enhanced it by adding new features that allow more sophisticated analysis of data and personalized recommendations.

HME: Ascensia participates in fundraising and awareness for diabetes, like the annual Spare a Rose Campaign. How important is it for the company to be a part of the diabetes community?

Delahunty: It's a big deal for us. Our employees are passionate about helping people with diabetes. It's an important part of our culture and the advocacy and fundraising we do provide opportunities for employees to give back. Advocacy, in our view, is more than just fundraising. It's about making sure that we help the community and have opportunities to interact with the community. That impacts product development and education initiatives, and helps us find common goals.

HME: How do you see Ascensia and diabetes technology evolving in the next five years?

Delahunty: There are more consultations being done remotely with COVID being the catalyst for people using technology to manage diabetes. We see an ongoing trend of more holistic solutions that are bringing together different parts of technologies for different parts of diabetes care. It is now much more understood you can't treat diabetes as a standalone disease. There's a number of factors that need to be managed. The future of diabetes management and technology is going to come by trying to bring together different parts of the puzzle. One trend is more partnerships between different companies in the industry that will come together to connect solutions, so people with diabetes see the benefit. **HME**

NHIA'S NEXT LEVEL VIRTUAL EVENT

CONTINUED FROM PREVIOUS PAGE

pilot, and virtual solutions for home infusion and specialty pharmacy operations. Other sessions cover business operations, nursing essentials and leadership.

"We're really just advancing the practice of home infusion," said Charron. "We have been doing home infusion for a long time, but it became so much more important when COVID started, and we really saw this large support for medical care at home."

The association is also bringing back its popular sterile compounding clinic, but this year it will be an add-on, rather than

"We have been doing home infusion for a long time, but it became so much more important when COVID started."

"We don't care if you run, walk or crawl," she said. "It's about getting outside and taking a break from screen time." **HME**

a separate registration, says Charron. Additionally, it will host the first Foundation Trek virtual 5K, a fundraiser for the National Home Infusion Foundation. Participants can sign up as teams or individually, says Charron.

BRIEFS

CPAP therapy increases physical activity

DARIEN, Ill. - A new study has found that CPAP therapy leads to increased physical activity in adults with sleep apnea and heart disease. "We were pleased to find that our CPAP users reported that they were better able to maintain their levels of activity over the four years of the study, and that they reported fewer limitations in moderate and vigorous activities, including those that are important for independent aging, like walking up the stairs," said study co-author Kelly Loffler, who has a doctorate in biochemistry and molecular biology and is a research fellow at the Adelaide Institute for Sleep Health at Flinders University in Adelaide, South Australia. In the study, published in the February issue of the Journal of Clinical Sleep Medicine, participants were assigned to one of two groups: one treated with CPAP and usual cardiovascular care, and a second received usual care. While there was no specific exercise intervention, participants reported physical activity using the Leisure-Time Exercise Questionnaire at the start of the study and over six, 24 and 48 months. During a mean follow-up period of 3.7 years, the group treated with CPAP therapy reported approximately 20% higher levels of moderate physical activity compared to the control group.

VIEMED EARNINGS

CONTINUED FROM PREVIOUS PAGE

to its core business.

"We have continued to see new patient setups run at a slower pace, as the virus has picked up again," said COO Todd Zehnder. "We fully believe that we will get back to more traditional growth levels as the system begins to normalize." **HME**

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Technology reshaping diabetes market

BY JOHN ANDREWS, Contributing Editor

DIABETES CARE is surpassing other HME segments like complex rehab and respiratory in technology deployment. With developments like digital glucose monitoring and other tools, the market has made great strides in automating and reshaping disease management for diabetes patients, specialists in the field say.

"The technology available to support people living with Type 1 diabetes has changed dramatically – specifically, automated technology helps reduce some of the decision-making patients previously had to manage on their own,"

CATEGORY

Diabetes

GOING DIGITAL

■ **Rapid adoption:** Because the pandemic has nurtured utilization of digital technology, the diabetes market has benefited from surging interest in automated glucose monitoring and similar tools.

HOLISTIC HEALING

■ **Beyond technology:** While continuous glucose monitors can give diabetic patients a better perspective of their blood sugar levels, holistic elements, such as sleep, diet and mental health, also play key roles in overall wellness.

SIZING UP SHOES

■ **Footwear and more:** Due to sporadic reimbursement, specialty shoes have become less available for patients. Even so, carrying a wide assortment of footwear, compression hosiery and skin care products can give diabetic providers a competitive edge.

said Julie Foster, vice president of customer experience at Northridge, Calif.-based Medtronic Diabetes.

Citing a 2014 article by Stanford Medicine, Foster described how Type 1 diabetes requires "an astonishing number of health-related decisions – about 180 per day." But she adds that patients' vigilant monitoring of their daytime blood sugar, food intake, insulin and activity levels is perhaps less exhausting than the worries they face about getting a safe night's sleep.

"During sleep, diabetics often fail to sense when their blood glucose veers too low, [which] can cause seizures and even, in rare cases, death," the article stated. Therefore, technological advancement assists in reducing the mental burden that comes along with the disease, Foster said.

To address the issue, Medtronic developed the MiniMed 770G insulin pump system, which automatically adjusts background insulin every five minutes. Using real-time glucose readings, the system calculates a personalized amount of insulin to deliver based on the user's needs. The system connects directly with a compatible smartphone, allowing sugar trends and insulin delivery to

be viewed on the go.

"The rapid evolution of technology has been reshaping patient care for some time but COVID-19 in particular has accelerated this evolution," said Mary Puncoschar, head of Parsippany, N.J.-based Ascensia Diabetes Care's US Region. "It has forced many to rethink how we manage chronic conditions such as diabetes, particularly with the use of telemedicine."

Puncoschar called the industry's rapid adoption of new technologies and digital initiatives "astounding" and said "it is likely to have a lasting positive impact on treatment plans for people with diabetes, as we continue to learn how technology can improve and simplify care."

To be sure, digital technologies for diabetes have arrived in leaps and bounds, and patients worldwide are now equipped with the digital tools to record key measurements, such as continuous glucose monitoring and blood glucose monitoring, and share them with health-care professionals, Puncoschar said.

"In response, companies have been adapting these tools to increase functionality and make this process as seamless as possible," she said. "Furthermore, these digital tools are starting to facilitate the personalization of management and helping to understand the tailored needs of patients is critical. However, glucose monitoring is just one aspect of diabetes management, and it is important to bring together other elements such as sleep, diet, and mental health as part of a holistic monitoring approach in order to improve all areas of diabetes management."

IF THE SHOE FITS

Diabetic footwear continues to be a critical product for people with diabetes, even though reimbursement is sporadic, causing some HME providers to drop the business, thereby limiting patient access, said Stephen O'Hare, president of Marietta, Ga.-based Pedors Shoes.

"However, for those providers that can navigate the reimbursement minefield, there exists a pent-up demand for this service," he said. "Those providers that market their services to their referral network will see that shoes are in fact a viable revenue stream."

Demand for specialty shoes isn't limited to diabetics, O'Hare said, citing patients with lymphedema and venous insufficiency as prospective customers as well. In fact, he said when approaching referral sources, a provider's context on the various conditions requiring clinical footwear and compression hosiery will offer a competitive advantage from wide range of referrals.

To facilitate patient referrals, Pedors offers a free product reference guide for providers to send practitioners about their scope of footwear lines and services.

Beyond the professional community as a source of business, diabetic patients themselves have become much

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more proactive in searching for specialty shoes, socks, insoles, orthotics, and lotions and creams, said Christopher Case, "marketing guy" for Brewster, N.Y.-based Pedifix.

The key to attracting these clients, Case said, is to carry a wide range of diabetes products.

"Many providers do so now to some extent," he said. "Others haven't yet discovered the potential profitability of offering a broader assortment, beyond traditional supplies like test strips. With the right assortment, HME retailers can grow their sales, profits and customer loyalty with diabetic product accessories." **HME**

CGMs

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VACCINES

CONTINUED FROM PAGE 1

"We have an advantage because we are hospital-owned, so any employee that wants the vaccine could get it in January," wrote one respondent.

How many employees want the vaccine? At Walnut Medical Services, 24 of 30 employees signed up for the vaccine. Other respondents report staff

acceptance rates of 90%, 66% and 50%.

"We are at 50% of patient-direct staff vaccinated," wrote one respondent. "Many are still hesitant and want to wait."

Respondents report staff that have been vaccinated feel safer and less stressed, but it's too early to modify business practices, they say.

"Once most of our employees receive our second shots,

we'll all breathe a little easier, but nothing will change in the short term," wrote one respondent. "We will continue to keep the in-office staff small; continue with many working from home; continue with our lobby closed, etc. We are hoping to begin transitioning folks back to the office and opening our lobby this summer. But from a peace of mind perspective, this certainly helps immediately." **HME**

"Once most of our employees receive our second shots, we'll all breathe a little easier, but nothing will change in the short term. We will continue to keep the in-office staff small!"



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FINANCIAL RESULTS

Inogen sees ‘pull through’ demand

BY LIZ BEAULIEU, Editor

GOLETA, Calif. - Inogen reported a 17.9% increase in sales of portable oxygen concentrators to HME providers in the fourth quarter of 2020, a sign of just how much the pandemic is straining the supply of stationary oxygen concentrators, a more common therapy for COVID-19 patients.

That's compared to a 25.2% decrease in direct-to-consumer sales for the quarter.

"Traditionally, these patients are treated with stationary oxygen concentrators, because if they're still recovering from COVID, ambulation is not their biggest priority and it typically would be a higher flow unit," said Ali Bauerlein, co-founder and CFO, during a conference call to discuss the company's financial results. "But as that supply got constrained in the fourth quarter, we did see a pull through in POC demand for that use, since they couldn't get access to more traditional therapy."

Inogen reported total revenue of \$74 million for the fourth quarter, a 6.3% decrease compared to the same quarter in 2019, and a net loss of \$5.1 million vs. \$1.38 million. The company reported revenue of \$308.5 million for 2020 compared to \$361.9 million for 2019, and a net loss of \$5.8 million vs. a net income of \$20.95 million.

The increase in sales to providers is

Shabshab takes over

BY LIZ BEAULIEU, Editor

INOGEN'S NEW CEO, Nabil Shabshab, says the company may be "placing its bets a little differently" in 2021.

During a recent conference call to discuss the company's latest financial results, Shabshab's first, an analyst asked how he planned to balance Inogen's various business segments - direct to consumer, business to business and rental.

"Of course, (the business-to-business segment) remains a focus, but we need to balance it with the direct-to-consumer (segment), as well as the rental market," he said. "The rental market that we have started focusing on again recently has shown some positive signs. We will continue to double-down on that because we are seeing good growth rates there, as well as continue to refine our model

SHABSHAB SEE NEXT PAGE

continuing into the first quarter of 2021, with continued pressure on the supply of stationary oxygen concentrators, Bauerlein said.

"But it's really hard to tell any long-term impacts at this point," she said.

Another highlight in the fourth quarter - and a segment of Inogen's business that will be an area of focus in 2021 - was rentals, company officials say. The company reported rental revenue was \$9.4 million for the quarter, a 71.7% increase compared to the same period in 2019.

"While we expect the COVID-19 pandemic and any potential for further prolonged lockdowns would have a negative impact on our sales revenue in the period, we believe it is prudent to continue to make investments to build the necessary infrastructure to support our strategy to focus on rentals at the onset of care," said Bauerlein. "As part of this strategic initiative, we plan to expand our physician sales force and to build out the infrastructure to enable us to offer our physicians the necessary solutions to better serve their patient's needs."

Hand in hand with expanding Inogen's physician sales force will be expanding the clinical evidence for their POCs, says Nabil Shabshab, CEO.

"We'd like to be able to do some clinical

INOGEN SEE PAGE 18

BRIEFS

Össur upgrades Empower..

REYKJAVIK - Össur has updated its proprietary Empower program to help physician practices and DMEPOS providers comply with new competitive bidding requirements for knee and back braces that went into effect Jan. 1. Empower now has built-in prompts for new reimbursement coding and document capture requirements, and automatic mapping to designated contract providers based on a patient's address.

...goes green

REYKJAVIK - Össur has announced that it will be carbon neutral in 2021, its 50th anniversary. The company will be carbon neutral for energy and fuel consumption, waste generation, business travel, transportation of goods, and electricity consumption of finished goods suppliers. Össur has partnered with First Climate, a provider of carbon emissions management, to achieve carbon neutrality in 2021.

Quality Biomedical launches three programs

BOULDER, Colo. - Quality Biomedical has introduced has introduced a "OEM Rental Management Program" to help manufacturers of respiratory equipment to improve profit margins and gain market share; a "Refurb Management Program" to help manufacturers of respiratory equipment generate new revenue streams and control the sale of refurbished equipment; and an "OEM Demo Management Program" to help manufacturers of biomedical equipment better manage their flow of demo and evaluation equipment.

Oventus reports growth

BRISBANE, Australia - Oventus Medical has booked revenues of \$550,232 for the six-month period ended Dec. 31, a 192% increase over the prior period. The company credits growth driven by lab-in-lab sites that remained operational during the pandemic, continuing to scan patients; an expansion of the telehealth extension of the lab-in-lab program; and an increase in direct sales to dentists who delivered treatments in their own practices, as well as through lab-in-lab programs. Cash receipts for the period were \$415,560, up 109% over the prior period.

Rx Redefined draws funding

OAKLAND, Calif. - Rx Redefined has completed its \$2 million seed funding round, led by Silverton Partners, with participation from Saturn Five. Rx Redefined says it offers physicians an integrative platform that leverages technology to streamline various health care processes, enabling them to directly order, disseminate and bill for DME.

Prochant launches website

CHARLOTTE, N.C. - Prochant has launched a new website that features a modern design to help customers quickly learn about the company's outsourcing solutions and technology, and easily access the company's webinars, articles and white papers - all right from the homepage. The new website organizes Prochant's solutions by service, industry and role, allowing customer to quickly access relevant content.



Repair Authority responds to surge

Repair Authority in February expanded its headquarters and repair facility in Strongsville, Ohio, as part of its response to the current surge in demand for oxygen concentrators. The company added an additional 10,000 square feet to the facility, bringing it to a total of 35,000 square feet, and installed several new production lines. It's also hiring additional repair techs. Repair Authority uses the facility to repair oxygen concentrators - portable and stationary - as well as CPAP devices, ventilators, liquid oxygen systems, Homefill units and other respiratory equipment for HME dealers nationwide. It also provides direct-to-patient CPAP repair through its CPAP Medic service. The company is an authorized warranty repair center for Philips Respironics, ResMed, Invacare and Drive DeVilbiss.

Invacare reports 'high demand'

BY LIZ BEAULIEU, Editor

ELYRIA, Ohio - Invacare saw a 72.2% increase in respiratory sales for the fourth quarter in North America and a 40.1% increase for 2020 due to increased demand for oxygen concentrators during the COVID-19 pandemic.

Invacare reported \$18.7 million in net sales for respiratory products in the fourth quarter and \$72.3 million for 2020.

"We see high demand for all modalities of oxygen increasing," said Matthew Monaghan, chairman, president and CEO during a Feb. 11 conference call to discuss the company's fourth quarter and year-end financial results*. "We even see increases in portable now because, at the margins, there are some people who only need a little bit of oxygen. We see an uplift in all modalities

that we have, but most strongly in stationary."

Invacare also saw an 84.9% increase in respiratory sales for the fourth quarter in Europe and a 28.7% increase for 2020.

The increase in respiratory sales helped to lift Invacare's North America business unit to \$86.7 million in net sales for the fourth quarter, a 1.7% increase compared to the same period in 2019.



M. Monaghan

"After years of improvements, North America returned to profitability with a more than \$17 million increase in operating income and modest growth in constant currency net sales," Monaghan said.

Respiratory sales in North America were offset by a 15.1% decrease in mobility

INVACARE SEE NEXT PAGE



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3B Medical launches AerX POC giveaway

3B Medical will give away one Aer X portable oxygen concentrator every month for the next six months to a deserving patient that is struggling, has a valid oxygen prescription and would be ambulatory if they had a POC. The company is looking to partner with DME providers to identify patients in most need. "For patients without insurance or with coverage that will not cover a POC, getting a free Aer X may be life changing," the company says. "Getting to the grocery store, church or spending time with a grandchild at the park, are all made easier for patients with oxygen with a portable oxygen concentrator." To enter the contest, patients only have to tell their story and how the Aer X might improve their life.

ABM bets on connectivity

Company aims to have 'roadmap for the complete lung care of the patient'

BY LIZ BEAULIEU, Editor

EAGEN, Minn. - ABM Respiratory Care has made its debut in the U.S. respiratory market with the limited launch of its biWaze airway clearance system.

The company began shipping biWaze, which received clearance from the U.S. Food and Drug Administration last year, to customers in March, says Leah Noaeill, vice president of marketing.

"We're meeting with physicians and respiratory therapists and showing them the device, and they're excited," she said.

ABM might be new to the market, but its management team and board of directors have years of experience in health care, including CEO Vinay Joshi, who previously held several roles with GE Healthcare and Hill-Rom, and board director Doug Harper, who previously held roles with NDC Homecare and Invacare.

biWaze, which helps people cough and mobilize mucus from the upper airways, aims to differentiate itself in the market with a



Leah Noaeill



Vinay Joshi

dual-channel design that separates inhale and exhale air flow, as well as connected capabilities, which include remote control with a mobile app, company officials say.

"To see how the device is doing and how the therapy is going, the device comes with connectivity that ties into our portal," Joshi said. "It doesn't require a download or taking the device to the clinician."

biWaze is only the first product in ABM's "roadmap for the complete lung care of the patient," Joshi says. It's a roadmap that will also eventually include another airway clearance system (this one to help people expand their lower airways and provide oscillations to

mobilize retained secretions from the lower to upper airways, where they can be coughed out) and a ventilator, which will again emphasize connectivity, he says.

"We want the vent and the airway clearance system to work intelligently together," he said. "Our vision is, for example, that a caregiver doesn't have to wake up in the middle of the night to do auto-suctioning of the patient. Our vision is that we can alleviate that and make the life of the patient and caregiver easier with an intelligent platform."

To help solidify its position in the market, ABM in February was also conducting a study with a hospital to examine the advanced programming capabilities of the biWaze. Those capabilities allow 10 therapy profiles to be saved for patients to select when/where they need it.

"We would like to understand how different pressures and oscillation frequencies can help open airways and breakup mucus for people with different diseases states like ALS and muscular dystrophy," Noaeill said. **HME**

SHABSHAB

CONTINUED FROM PREVIOUS PAGE

for the direct-to-consumer (segment) and see how we can leverage some of our strengths and optimize our performance and spend in that space. We're not going to take our eye off any of them, but we are going to be placing bets a little bit differently after I have a little bit more time with the team to look at the return in terms of the investment in one of the three channels, as well as what tweaks are required in each one of them."

Shabshab was named as Scott Wilkinson's replacement earlier this year.

Shabshab told investors that two things drew him to Inogen, the first being a POC market that's only 18% penetrated based on their review of Medicare data.

"The market itself is not penetrated

that much and leaves a lot of room for growth for us, as well as our partners in the channel," he said. "So, we'll be looking, as part of that, into what areas can we strengthen (our) investments, including some of the capabilities we have and some of the underlying technology that we need to look at, and looking at the business model to get to that aspired growth rate."

The second draw for Shabshab was Inogen's purpose.

"Inogen is a company with a focus really on improving respiratory therapy around the world," he said. "The commitment of the team that I saw during the discussions we were having provides for a unique opportunity to serve patients' needs and deliver on their expectations, as well as the expectations of shareholders." **HME**

INVACARE

CONTINUED FROM PREVIOUS PAGE

and seating sales for the fourth quarter and 9.8% decrease for 2020. Mobility and seating sales, however, grew sequentially by 3.3% from the third to fourth quarter.

"The fourth quarter wasn't as strong a pandemic relief as we had maybe thought it could be, but we were pleased with the strong sales through the end of the year and continued strong demand into this year," Monaghan said.

Other highlights from the call:

Invacare is in final pre-market launch for a new concentrator. "We think the pandemic demand will continue for some time and this new system provides great customer benefits, including total cost of ownership benefits, and great

consumer benefits, (which) will make this an exciting segment for us for a long time," Monaghan said.

The company has completed its IT infrastructure improvements, and it expects to benefit from lower cost of transactions and more adept inventory management.

Monaghan noted the company is shifting to growth mode. "It is a shift as our organization shifts away from focusing on the transformation or the turnaround that we've been talking about for five or eight years and talking about growth," he said. "We have a phenomenal portfolio of products that should give our sales team a lot of confidence to engage with customers and give customers a lot of curiosity to engage with us." **HME**

MANUFACTURING

CONTINUED FROM PAGE 1

there," said Barry Hassett, vice president of global marketing for the company. "It's a challenge for everybody."

Eighty-six percent of providers who responded to a recent HME Newspan say they're running low on oxygen concentrators, with 71% reporting wait times of more than six weeks for orders from manufacturers.

The challenges that manufacturers and their downstream suppliers face in ramping up production are significant, even a year-plus into the pandemic. Challenges have included labor shortages due to COVID-19, facility shutdowns due to not being deemed essential, and lack of raw materials due to exponential demand across competing industries. The latest: delays at ports, says Elyria, Ohio-based Invacare.

"With a lot of creativity, determination and extraordinary costs, some manufacturers were able to work through and create a new semblance of normal, delivering higher than historical output of concentrators, (but) just as this recently established cadence of procuring parts approached normal, excruciating delays at ports have become rampant," said Biola Okunola, a product director at the company. "To build and ship a concentrator, manufacturers require every part to be delivered on time from their suppliers. Hard-won parts are sitting for weeks and months at ports and on docks, just waiting to be unloaded and transported."

Manufacturers like Cambridge, Mass.-based Philips are trying to work closely

with U.S. and global market regulators to minimize supply chain disruptions, and they're taking actions like dividing orders for respiratory equipment into batches and delivering them in phases, so it can serve multiple countries and regions in need.

"Since the onset of COVID-19, Philips



Eric Pauls

has made significant investments to increase the supply of the respiratory products that are in the highest demand," said Eric Pauls, business sales leader, Sleep and Respiratory Care, North America.

"While this has led to an improved supply of ventilators and oxygen concentrators, demand for oxygen concentrators from the second wave of COVID-19 has outpaced the increased supply from many manufacturers, including Philips. We believe this scarce medical equipment should be made available across the world using a fair and ethical approach to allocate supply to acute patient demands based on data, such as the COVID-19 statistics per country or region and the available critical care capacity."

Despite continuous challenges, manufacturers hope production, like our lives in general, will "return to normal as the year progresses," Okunola says.

"These solutions come at extraordinary costs, but the alternative of not producing oxygen concentrators is not an option," he said. **HME**

Ride Designs

Ride Custom Back for Wheelchairs

The Ride Custom Back now offers an ultra-breathable option. This new liner option, made from 3D mesh, performs as well as the original composite liner — yet it's even more breathable. While allowing increased air flow, the ultra-breathable liner retains less moisture than the original, making it easier to wash and quicker to dry. In-field modifications are a breeze. There is no additional charge associated with selecting this liner option.

WWW.RIDEDESIGNS.COM



Sunrise Medical

Quickie Q300 M Mini

The Quickie Q300 M Mini is Sunrise Medical's narrowest power wheelchair and allows users to easily maneuver anywhere they want to go. Mid-wheel drive technology offers a 17-inch turning radius. With a base weight of 111 pounds, it is light enough to be used with most lifts. Ultra-low, seat-to-floor height starts at 16.5 inches. Seating options include adjustable SEDEO Lite and SEDEO Pro.

WWW.SUNRISEMEDICAL.COM



Di Blasi

Di Blasi R30 Folding Mobility Scooter

Di Blasi has been manufacturing folding vehicles since 1974 in Italy. Di Blasi is pleased to offer the R30 folding mobility scooter and the newly re-designed R30 vehicle hoist for sale in North America. The IATA certified R30 folding mobility scooter folds in five seconds with the push of one button. The distributor is Sunpire Enterprises Inc.: sunpire@gmail.com, (250) 701-2551.

WWW.DI-BLASI.COM



Breas Medical Inc.

Vivo 45 LS

The Vivo 45 LS is a small, full-featured life support ventilator that provides invasive and non-invasive continuous or intermittent ventilatory support in home, post-acute, hospital and portable applications for pediatric through adult patients weighing more than 5 kg (11 pounds). Designed to maximize patient independence and mobility with an ultra-small footprint, it also provides the comfortable eSync trigger technology, along with ultra-quiet operation. Also, etCO2, SpO2, FiO2 and PtCO2 monitoring and connection to EveryWare by Breas, a securely hosted cloud-based application.

HTTPS://BREAS.US/VIVO45LS/



Amoena

Balance Adapt Air

Available in two different shapes, Balance Adapt Air can be used as a full-coverage shell, fitting over the entire breast area, or in a versatile partial shape to replace missing tissue on a section of the breast. The air chamber creates a lightweight feeling, and the shapers include Amoena's patented Comfort+ temperature-equalizing material so that heat won't build up between the shaper and the skin. With air chamber technology, the fitter or the wearer can adjust the volume of the shaper any time, making it the easy-to-fit solution, especially when the chest wall is scarred or significantly uneven on the surface.

WWW.AMOENA.COM/US-EN/



Responsive Respiratory

Purify O3 Elite

The Purify O3 Elite features user-friendly touch-to-activate controls. Lightweight and easy to use, the sleek design with visual feedback for users includes an illuminated disinfection progress ring and lighted battery life indicator. Purify O3 Elite kills 99.99% of germs and bacteria in a single cleaning cycle, is third-party tested for efficacy and is FDA registered. The device's compact design makes Purify O3 Elite ideal for use when traveling or for those who are short on space.

WWW.PURIFYO3.COM



PROVIDERS DELIVER AMID CHALLENGES

CONTINUED FROM PAGE 1

MetroCare Home Medical Equipment, whose territory includes the Dallas-Fort Worth area. "That was horrible."

Bachorek said she felt like she'd won the lottery when MetroCare managed to procure an additional 33 tanks in the face of shortages that have the company waiting 16 weeks to get concentrators.

"We were able to go back to oxygen tank deliveries," she said. "We kept our guys off the road as much as possible, but (after procuring the additional tanks), we didn't turn down any referrals. One of our techs had to be dug out of the ditch (while making a delivery)."

Also in short supply: batteries used to provide back-up power, says one Houston-based provider, which focuses on pediatric vent patients.

"We only carry so many batteries," he said. "We delivered every spare battery we had. Those batteries only last four to six hours. After days of no power, some after just 24 hours, we were telling patients to call 911."

Provider RJ Poonawala told customers to make sure they placed their orders and pick them up ahead of time, a lesson learned from Hurricane Katrina.

"As a retail store, we don't a high-volume of oxygen patients, but some customers are self-pay," said Poonawala, owner of Spring Branch Medical Supply in Houston. "That was the No. 1 thing we were getting calls about. We closed

Monday to Thursday – we had no way to get anybody to the store. We can sense frustration from case managers."

With icy conditions and road closures making it difficult to deliver equipment, another provider was also the target of frustration.

"We can't get there – they shut down the freeways, overpasses and roads. One of our drivers actually parked his truck and walked to deliver a couple of tanks."

ing it difficult to deliver equipment, another provider was also the target of frustration.

"We got screamed at – that we were

negligent in not delivering tanks," he said. "But we can't get there – they shut down the freeways, overpasses and roads. One of our drivers actually parked his truck and walked to deliver a couple of tanks."

Pediatric Home Services found itself stepping in when large distributors of supplies, including enteral nutrition and incontinence supplies, shut down.

"We had a lot of people on the ground delivering inventory from our locations in Dallas and Houston and San Antonio," said Howk Bethel, general manager. "It was kind of a math game – is it something we could take six of to get them through. I call that a win – we were there for them and that made me proud." HME

PROTECH SEEKS 'TRANSFORMATION'

CONTINUED FROM PAGE 8

Protech reported revenue of \$22.8 million for the first quarter of fiscal year 2021, a 32% increase compared to the same period in 2020. The company completed 76,691 vs. 62,999 setups or deliveries, an increase of 22%; and completed 34,996 resupply setups or deliveries specific to respiratory, an increase of 160%, not factoring in any of its acquisitions.

Of note, Protech's recurring revenue for the trailing twelve months at the end of the first quarter of fiscal year 2021 was 75% of total revenue.

"Our same store resupply orders have grown more than 85% period-over-period,

which showcases the results of our investments in a resupply program," said CFO Hardik Mehta. "We see similar trends into the second quarter."

With plans to become a national player and to list its common shares on the NASDAQ in the first half of 2021, Protech is also working on its branding, says Crawford.

"Our company is transforming into a national home respiratory care provider in the U.S. and we must ensure our brand matches this transformation," he said. "We look forward to sharing our vision with investors in the near-term." HME

INOGEN SEES 'PULL THROUGH' DEMAND

CONTINUED FROM PAGE 16

studies to prove the value of POCs and their superiority over other modalities of therapy," he said. "It's established that oxygen therapy is definitely very helpful and beneficial. We believe that there is an added plus to adherence and compliance, which I think is at the core of the offering that we have."

Much like Inogen's push in consumer sales increased awareness of POCs and, therefore, increased business for providers, so will its push in physician sales, Bauerlein says.

"We think driving more physician awareness of POCs and the options that

Driving more physician awareness of POCs and the options that patients have, will supplement the work that the provider community is doing on physician education.

patients have, and why the technology really does work for the mass majority of the ambulatory, long-term oxygen therapy patients – that's something that we think will help supplement the work that the provider community is already doing on physician education," she said. HME

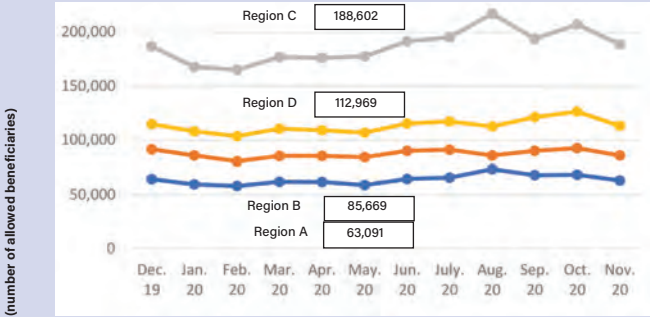
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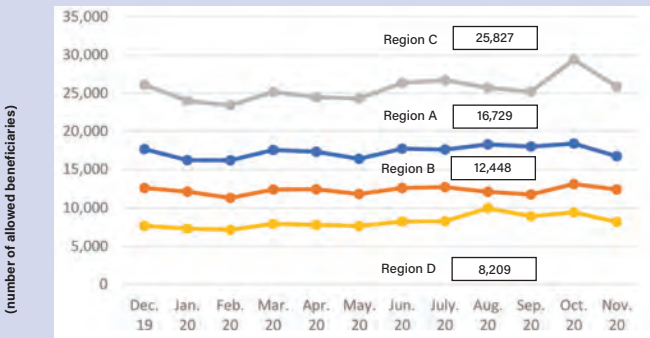
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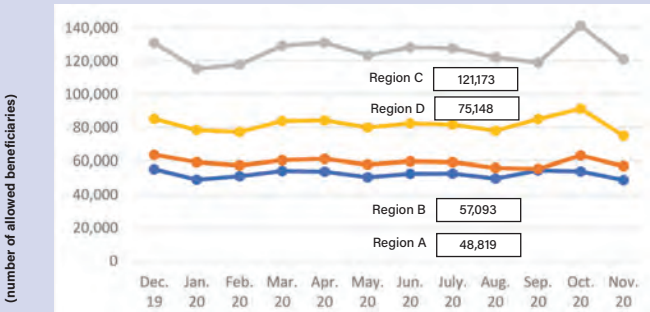
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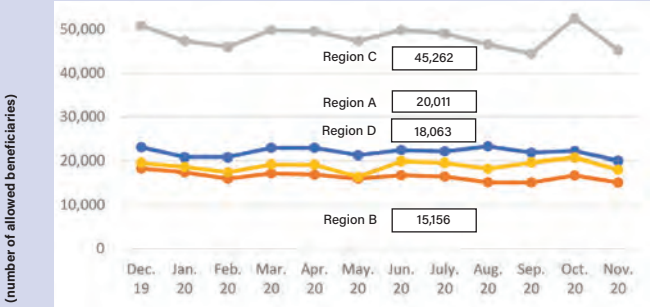
E0260: SEMI-ELECTRIC HOSPITAL BED



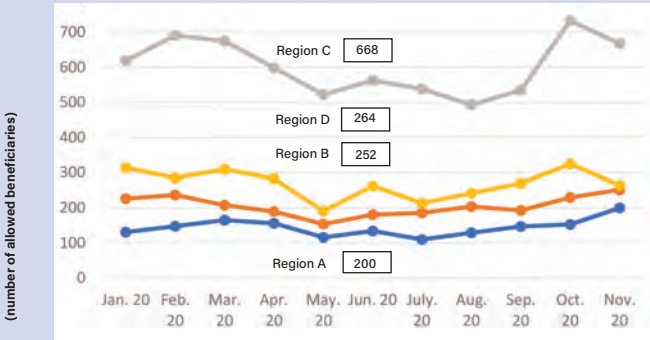
E0601: CPAP



K0001: STANDARD WHEELCHAIR



K0823: POWER WHEELCHAIR**



**We are now tracking K0823 claims with certain modifiers (NU, UE or RR/KH) to better reflect the actual number of new allowed beneficiaries under the 13-month capped rental.
*The Medicare Market Marker provides a monthly look at the number of Medicare beneficiaries for whom the four MACs have allowed a claims payment.

HMEDATABANK.COM

The HME DataBank has the latest Medicare reimbursement data for the top 1,000 HME providers nationally in 261 key product categories, as well as for all of the products in the NCB program. You can determine your market share, look for new product opportunities and check out your competition using the latest available Medicare data. Go to hmedatabank.com to learn more.



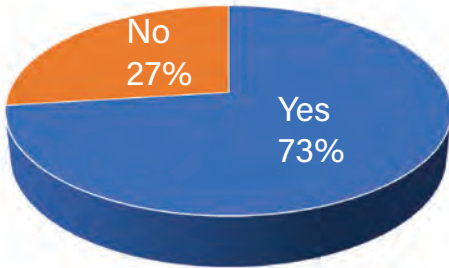
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- 5. Henry Schein follows health care 'migration'

HME NEWS POLL

Will a change you have made to your business during the pandemic become permanent?



"Based on a fear of the unknown and in the interest of protecting gray-headed customers, I can't see a time we won't wear masks/gloves going forward when entering a facility."
-Brian Keith, Access, Mobility, Repair & Rental

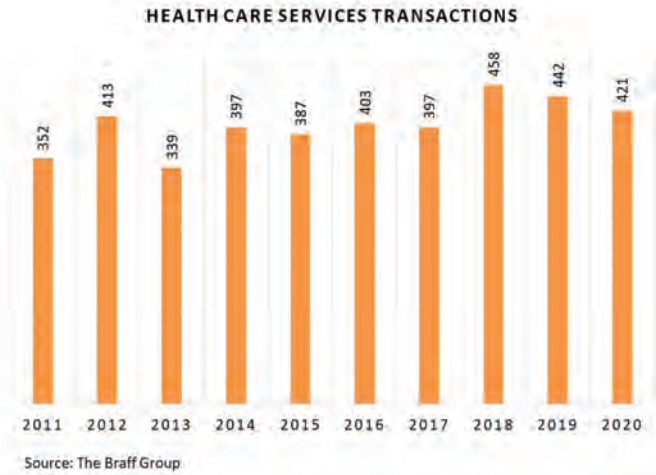
"We have decreased contact with patients and have implemented Sleep Coaches to remotely address issues with PAP and interfaces. We plan on expanding to other categories."
-Anonymous

What is a change you have made?

- Implemented work from home
- Implemented drop shipping/curbside pick up
- Implemented communication changes to employees and patients

Newspoll based on 11 respondents.

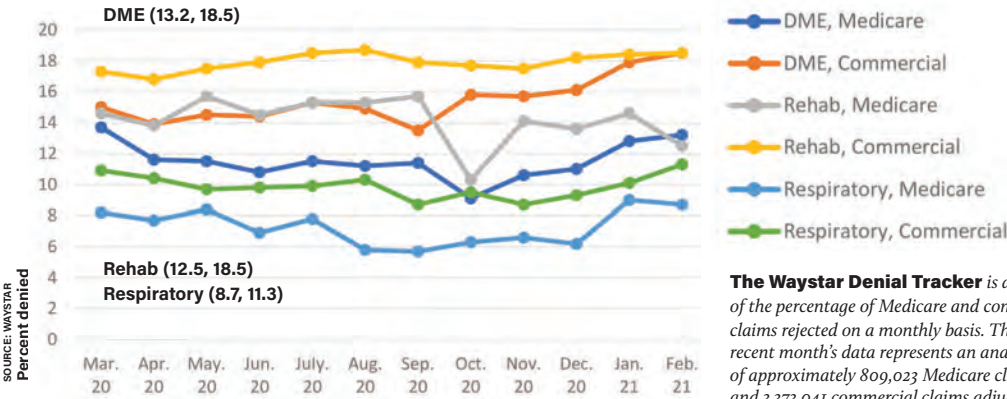
The Braff Group M&A Insider



Last month, we reported final numbers for 2020 for the home medical equipment sector. This month, we examine health services M&A overall. Notably, despite the pandemic and the uncertainty it created, aggregate health care service transaction activity fell less than 5% in 2020 vs.2019. More importantly, we could very well see record deal flow in 2021 with renewed optimism as we emerge from the pandemic, a stimulus package ready to supercharge the economy, heightened demand from private equity, and extra motivation for sellers to come to market this year to potentially avert a substantial increase in capital gains tax.

Source: The Braff Group, 412-833-5733.

The Waystar Denial Tracker







The Waystar Denial Tracker is an index of the percentage of Medicare and commercial claims rejected on a monthly basis. The most recent month's data represents an analysis of approximately 809,023 Medicare claims and 3,373,041 commercial claims adjudicated between February 1, 2021, and February 28, 2021. The index is a categorized and weighted analysis of claims filed by Waystar customers.



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Maximum User Weight	286 lbs.	 330 lbs. +15% STRONGER
Maximum Speed	3.7 mph	 5.2 mph +41% FASTER
Weight (per wheel) With stainless steel push rim & batteries	23 lbs.	 17 lbs. -35% LIGHTER

**Data comparing the e-motion M15 to the e-motion M25 from Alber Germany.*

Contact Your Invacare or Alber Rep Today

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