



■ CHME fast tracks support for Racing for ALS. See page 8.



■ **Product Spotlight:**
Check out the latest in bariatric products like this rollator from Invacare. See page 14.



■ With the ongoing COVID-19 pandemic, are you having trouble ordering oxygen concentrators? See results on page 19.

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HME News

THE BUSINESS NEWSPAPER FOR HOME MEDICAL EQUIPMENT PROVIDERS

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COMMENTARY



■ Despite the challenges brought by 2020, for those with an eye for opportunity, it also brought many lessons that can help grow and improve businesses for the future, writes Bill Wilson of VGM Insurance Services. **PAGE 6**

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COVID-19 PANDEMIC

Providers battle surge, worry about inventory

BY T. FLAHERTY, Managing Editor

YARMOUTH, Maine - As COVID-19 cases spike across the country, HME providers are seeing a spike in demand for home oxygen therapy, so much so that they're worrying about their supply of concentrators.

Provider Woody O'Neal has seen a threefold increase in oxygen and services since December and says he's concerned the health care system hasn't seen the worst of it.

"My concern is that this post-holiday surge could outstrip capacity," said O'Neal, vice president of Pelham, Ala.-based O2 Neal Medical. "I would hate



Jason Jones

to tell a hospital to keep the patient. That's the worst thing - it's counterproductive."

Provider Jason Jones had a 24-hour period during which his company set up a record number of new patients on oxygen.

"It's completely nuts," said Jones, president of Jones Medical Supply in Troy, Ala. "That got us in a bind on equipment and we're on the verge of needing to hire."

Providers looking to stock up on concentrators to meet the increased demand are having to wait. Provider Todd Usher in January was waiting on an order of 50 concentrators expected to be

PROVIDERS & COVID-19 SEE PAGE 4

New pilot mobilizes home infusion

BY THERESA FLAHERTY, Managing Editor

SYRACUSE, N.Y. - Upstate HomeCare is among the providers that recently began participating in a pilot program to get monoclonal antibody therapy to patients in skilled nursing and long-term care facilities, where the disease is spreading quickly.

The pilot, part of Operation Warp Speed, is a partnership

ANTIBODY SEE PAGE 13



RESMED introduced the Mobi in 2018.

ResMed exits POC market

BY LIZ BEAULIEU, Editor

SAN DIEGO - ResMed has ended its three-year foray into the portable oxygen concentrator market due to "market conditions."

The company says payers and HME providers are relying less on POCs for Stage 2 and Stage 3 COPD patients, dampening demand for the devices.

"ResMed has determined that it can successfully execute its respiratory care strategy and provide the most benefits to patients, HMEs, clinicians and all other stakeholders by reinvesting its POC resources in developing our existing portfolio of digital health solutions and high-value connected devices for patients across the COPD continuum, as well as those with sleep apnea and

RESMED SEE PAGE 17

The case for relief in former bid areas

Stakeholders appeal to CMS, Congress for 90/10 blended reimbursement rate

BY LIZ BEAULIEU, Editor

IN RECENT comments to CMS's DMEPOS proposed rule, AAHomecare introduced the idea of a 90/10 blended reimbursement rate in the former competitive bidding areas. Here's what Kim Brummett, vice president of regulatory affairs for the association, had to say about what stakeholders hope will be a

"reasonable" ask - to base rates in those areas 90% on the current rates and 10% on the 2015 unadjusted fee schedule - and how the industry's strategy going forward hinges on what ends up in the final version of the rule.

HME NEWS: Why do former bid areas need relief?

Kim Brummett: The 50/50 blend-



Kim Brummett

ed rates are permanent in rural areas, which is fabulous, and the 75/25 rates are good through the end of the public health emergency for non-rural, non-bid areas, but the former bid areas essentially got nothing. CMS said, we didn't get savings (in Round 2021), we're

BID RELIEF SEE PAGE 5

CRT priorities: Telehealth, accessories, separate benefit

BY LIZ BEAULIEU, Editor

YARMOUTH, Maine - NCART expects legislation to be introduced early this year that would include physical therapists and occupational therapists

as authorized practitioners of telehealth.

PTs and OTs are currently authorized practitioners of telehealth, helping to continue assessments for complex rehab during the pan-

demic, but only through the public health emergency.

"Congress needs to pass legislation to make things permanent," said Don Clayback, executive director of NCART. "The good news is

the Senate and House committees - the task force working on this - have asked for input on what information and provisions they should be including in legislation for

COMPLEX REHAB SEE PAGE 17

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■ Wayne van Halem and Kelly Grahovac have joined the boards of GAMES, SCMESA. See brief page 5.

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BRIEFS

AAHomecare roundup: CareCentrix, OIG

WASHINGTON - CareCentrix has notified providers servicing Florida Blue beneficiaries that they will be adding ambulatory aids, such as canes and walkers, to the list of non-life-sustaining products subject to suspension for patient balances that are 180 days past due, starting Feb. 1, AAHomecare reports. CareCentrix first implemented this policy for CPAP and PAP supplies in June...The Office of Inspector General will conduct a report on supplier acquisition costs for urinary supplies to support its recommendation that these supplies should be included in the competitive bidding program, AAHomecare reports. Medicare Part B payments for urinary catheter tips and intermittent urinary catheters with insertion supplies increased by \$173 million from 2010-19, according to the OIG.

United Healthcare extends suspension of prior auths

MINNEAPOLIS - United Healthcare extended the temporary suspension of certain prior authorization requirements for in-network hospitals and skilled nursing facilities through Jan. 31, according to AAHomecare. They were originally set to expire Jan. 8. The suspensions include COVID-19 oxygen-related requests. In those cases, oxygen can be delivered without a prior auth and does not need to meet current clinical criteria. UCH also noted that it may perform retrospective reviews for services provided during this time period. Providers should visit UHCprovider.com/covid19 for up-to-date information.

PHE extended through April

WASHINGTON - The U.S. Department of Health and Human Services has extended the public health emergency for another three months. On Jan. 7, HHS Secretary Alex Azar announced the extension of the PHE, which was set to expire Jan. 21. HHS extended the PHE, originally declared on Jan. 31, 2020, multiple times last year. There are several HME-related provisions tied to the PHE, including Medicare's 75/25 blended reimbursement rates in non-rural, non-competitive bidding areas; and waivers of certain telehealth restrictions and other waivers and policy changes.

CMS approves block grant waiver in Tennessee

NASHVILLE, Tenn. - CMS has approved Tennessee's request for a block grant waiver for its state Medicaid program, TennCare, AAHomecare reports. The new program will allow TennCare to administer Medicaid with less oversight from the federal government, increasing its flexibility. The new block grant waiver - known as TennCare III - came after the General Assembly passed a law in 2019 directing Gov. Bill Lee's administration to negotiate with CMS. TennCare must maintain current levels of service and populations served, but it now has increased flexibility to add new benefits without prior approval from CMS.

Reimbursement remains an issue

'There's no extra money' to make investments in 2021

BY LIZ BEAULIEU, Editor

THE NOTION that reimbursement rates have stabilized due to the pause in Round 2021 for most products is a "misconception," say numerous respondents to a recent HME Newspoll.

CMS announced in October that it would not move forward with new single payment amounts for 13 product categories, instead continuing the current rates in bid areas.

"(Rates) have not stabilized and will con-

tinue to be an issue going forward," wrote one respondent. "The competitive bidding program is broken and unsustainable. There needs to be a topline strategy on the direction of reimbursement rates and the lack of access or poor access in these areas and especially in the rural/non-rural areas due to low reimbursement rates and a flawed bidding process."

CMS has proposed continuing to pay 50/50 blended rates in rural and non-contiguous bid areas, but it doesn't plan to continue paying the 75/25 blended rates in non-rural, non-bid areas that are in effect through April 1, 2020, or whenever the public health emergency ends.



AAHomecare submits comments on rates

WASHINGTON - Rates in former competitive bidding areas should be based on a 90/10 blended payment formula, AAHomecare argues in its comments to CMS's recent DMEPOS Proposed Rule.

"The 90% should be based on the current payment rates in former CBAs, and the 10% should be based on the 2015 unadjusted fee schedule," the association says.

Non-rural, non-CBAs should be based on a 75/25 blended payment formula, with the 75% based on the current rates in the former CBAs and the 25% based on the unadjusted fee schedule, AAHomecare also argues.

Other recommendations in the association's comments:

- CMS should eliminate its

proposed limit on the number of times an applicant can resubmit applications for new or revised Level II HCPCS codes, as long as the applicant includes new data/information to support the request.

• CMS should add to its HCPCS code panel representatives from state Medicaid programs, and/or representatives from the National Association of Medicaid Directors, and representatives of commercial payers.

• CMS should incorporate into its HCPCS code application process a public notice and comment for its gap-filling and compatibility analyses after a positive preliminary HCPCS

COMMENTS SEE PAGE 5

COVID-19 package passes with 02, sequester relief

WASHINGTON - A COVID-19 relief package passed by Congress and signed by the president on Dec. 27 removes the budget neutrality requirement for oxygen products in rural areas. "We're gratified to see that Congress has finally fixed the oxygen budget neutrality issue unfairly impacting rural suppliers," said Tom Ryan, AAHomecare president and CEO. "HME stakeholders have been asking Congress and CMS to address this problem since 2016, and those sustained grassroots advocacy efforts have paid off with a long-term



Tom Ryan

win for our industry."

Previously, in September, the House Energy and Commerce Committee approved H.R. 8158, a bill that would eliminate the budget neutrality requirement for oxygen products in rural areas.

The COVID-19 relief package also provides a three-month extension of the

COVID RELIEF SEE PAGE 4

ROUND UP OF STATE NEWS

Minnesota suspends payment recoupments

ST. PAUL, Minn. - The Minnesota Department of Human Services has temporarily suspended its plans to recoup payments where the state Medicaid program paid more for DME than Medicare did in 2018 per the 21st Century Cures Act, MAMES reports. In December, the state association received a letter from the state saying, "DHS has temporarily suspended our processes for these recoveries." MAMES believes the pause is due to the current public health emergency. "There is not a clear date as to when DHS will

move forward," the association stated in a bulletin. "(But) what this suspension does is allow MAMES the time to continue the work being done to stop recoupment from happening." MAMES emailed DHS on Nov. 25, asking for an immediate response to its request that the recoupments not go forward. The email was followed by two meetings in December, one with governor's staff and one with DHS staff. MAMES highlighted



Eric Ecker

the work of its lobbyist, Nick Zerwas, for getting the governor involved and for getting DHS to respond to MAMES.

BIG SKY ANNOUNCES NEW BOARD

HELENA, Mont. - Big Sky AMES has named its 2021 board of directors. The officers are Eric Ecker, St. Vincent Medical Supply & Mobility, president; Adam Pople, Bozeman Health, vice president;

STATE NEWS SEE PAGE 4

VGM survey digs into provider costs

WATERLOO, Iowa - VGM has launched the 2021 cost of delivery survey to provide data points for the industry's efforts to preserve patient access to HME.

The data points from a similar survey in 2018 were provided to elected officials, payers and regulatory entities, and helped to secure reimbursement relief.

"We were successful in obtaining some reimbursement relief via a 50/50 blend in our rural areas, and CMS and other payers seemed to acknowledge there would be access issues if HMEs were unable to service patients due to insufficient payment relative to the cost of delivery," says VGM.

VGM will not identify or save company

information, only service areas. Providers who complete the survey will receive a compilation of responses, as well as an email estimating their total delivery costs.

The new survey includes a section on the pandemic to indicate additional costs and other burdens brought on by the public health emergency.

"As the pandemic continues, HMEs play a critical, frontline role in patient care and minimizing hospitalizations," says VGM.

The timing of the survey is important, VGM says, with CMS reviewing comments to a recent proposed rule, and a new administration and newly elected officials taking their place in Washington, D.C. [HME](#)

COVID RELIEF PASSES CONGRESS

CONTINUED FROM PAGE 3

moratorium on 2% Medicare sequester cuts beyond their current Dec. 31 expiration date.

"While I believe a longer extension is

warranted, this measure of relief will support the entire healthcare continuum's work to bring the pandemic under control," said Ryan. [HME](#)

STATE NEWS

CONTINUED FROM PAGE 3

Dedra Haworth, Harrington Surgical, secretary/treasurer; and Alesha Rate, Norco, past president. Board members are Gary Rench, Sandcreek Medical; Jenn Morrisroe, Dillon Medical; Lori Arnold, Cody Regional Health; Mike Calcaterra, Norco Inc., and honorary member Dan Harrington, retired from Harrington Surgical.

GOV. CUOMO EXPANDS COVID VACCINE PRIORITY TO INCLUDE DME PROVIDERS

ALBANY, N.Y. - DME providers in New York who are providing direct, in-person patient care are eligible to receive the COVID-19 vaccine, according to an announcement this week from Gov. Andrew Cuomo, according to a bulletin from NYMEP. "While we're trying to control COVID with one hand, we're trying to defeat it with the other, and the vaccine is the weapon."

COVID with one hand, we're trying to defeat it with the other, and the vaccine is the weapon that will win this war," said Cuomo. Industry stakeholders have urged government officials to include DME providers in phase 1 distribution of the vaccine.

SAVE THE DATE

ATHOMES Meeting: March 18-19, 2021 (virtual/hybrid in Nashville). More information coming soon. [HME](#)

COVID-19

CONTINUED FROM PAGE 1

shipped in mid-February.

"Where we are now is, we're ordering a bunch," said Usher, co-founder of Home Oxygen Co. in Modesto, Calif. "We haven't run out of anything yet."

Some providers report back orders of up to three months.

"We're really struggling with the volume because of the delays in shipping from manufacturers," said Irene

Magee, vice president and director of Green Island, N.Y.-based Northeast Home Medical Equipment. Providers are also juggling a wide range of patient therapy needs for a disease with a lot of unknowns. Some patients only need oxygen for a day or two, while others are longer term or have higher-flow needs.

"They are not your garden variety oxygen patients," said O'Neal. "These are patients with elevated needs - 5 to 7 liters is not uncommon. The higher liter flow requirements require us to have more advanced equipment in the home."

One bright spot: the majority of COVID patients they are seeing do recover, says Jones. "It's good to be on this side of it and see we are doing something that helps in the end," he said. [HME](#)

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BID RELIEF

CONTINUED FROM PAGE 1

pulling everything out of the next round (except for braces), and we're leaving you with the same rates, except for a miniscule 0.6% CPI-U adjustment. When we sat back and thought about that, it didn't make sense.

HME: How did AAHomecare land on 90/10?

Brummett: When non-invasive ventilators were removed (from Round 2021), they reverted back to the 2015 fee schedule, but we felt like that wasn't realistic. They say bid areas are more highly populated and, therefore, there's the potential for increased business, so we thought 90/10 would be reasonable. That would get the rates up a little bit, but it wouldn't be asking too much or wouldn't be rejected out of hand. The message is, you have the 50/50 and the 75/25 – let's do something in the former bid areas, instead of nothing, which makes no sense.

HME: Do we have any idea when CMS will publish the final rule?

Brummett: The rule came out so late and, at first, we thought they might try to push it through before the change in administration, but now that's unlikely. They could not release a final rule at all and start over. We're hopeful the rule will be released in March, April or May, which would allow the industry to see where we're at and what we might have to do legislatively. If it's not released in April, I'd be concerned.

HME: Since CMS said it didn't see savings for the majority of product categories for Round 2021, do you think they'll move forward with a Round 2024?

Brummett: That's the crystal ball question. Why would you do the exact same thing and expect a different result? We've submitted a FOIA request, asking for all the single payment amounts by bid area for the lead items (for Round 2021). We could easily take those, plug them into our calculators and see what happened with all of the non-lead items in the product categories. They expected to pay more for lead items, but less for non-lead items. It's hard to imagine there was no savings for the whole product categories. I struggle with that. **HME**

COMMENTS

CONTINUED FROM PAGE 3

code decision.

- CMS should permanently exempt accessories used with complex manual wheelchairs from competitive bid-derived pricing.

- CMS should address a number of outstanding implications related to its proposal to expand coverage for adjunctive continuous glucose monitors and should allow for public comment on those issues. **HME**

The van Halem Group joins two state boards

'I am looking forward to working with the board to help build membership'

ATLANTA- Wayne van Halem and Kelly Grahovac of The van Halem Group, have joined state association boards. van

Halem, president, was named to the board of the Georgia Association of Medical Equipment Suppliers; Grahovac, general manager, was named to the board of directors for the South Carolina Medical Equipment Services Association. van

Halem and Grahovac have both been speakers at their association meetings. "I have worked with GAMES for many years, and I am looking forward to working with the board



W. van Halem

to help build membership by illustrating the value GAMES brings to HME suppliers in the state of Georgia," said van Halem. The van Halem Group is a division of VGM. **HME**

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2019: Not a bad place to be

WE SPENT a lot of time in 2020 writing about the negative impact of the COVID-19 pandemic on new setups, particularly for “non-essential” products like CPAP devices. It will be interesting to see how that impact is reflected in the Medicare utilization data for 2020. Will there be decreases in new

setups for sleep therapy, but increases for respiratory therapy like oxygen concentrators and ventilators, which were used to treat COVID-19 patients?

For the answers to those questions, we’ll have to wait.

Because, while it’s hard to think about the “before times,” when business wasn’t consumed by the pandemic, that’s exactly what we did in our recent State of the Industry Report, which features Medicare utilization data for 2019. (Download the report at www.hmenews.com/whitepapers.)

And apparently, 2019 is not a bad place to be, with increases in utilization across nearly all product categories.

Take the BETOS bucket, which shows year-over-year increases for every “bucket,” including oxygen and supplies, which rose from \$750 million in allowed charges in 2018 to \$770 million in allowed charges in 2019. Overall, allowed charges for DME increased to \$6.3 billion, tying 2015 for the most allowed charges in the past six years.

If you break down utilization by code, there are some outliers that saw decreases in 2019, but the majority of codes saw increases.

Of note for decreases were the stationary liquid product category (concentrators



LIZ BEAULIEU

were down 28%, contents were down 33%) and semi-electric hospital beds with mattresses (down 23%).

With the emphasis on resupply for sleep therapy, one decrease that surprised me: replacement nasal pillow combination masks (down almost 16%). But other resupply items for sleep therapy saw healthy increases, including replace-

ment nasal cushions (up 19%), tubing with heating element (up 28%), replacement nasal pillows (up 12%), replacement water chamber (up 17%) and positive airway pressure filters (up 47%).

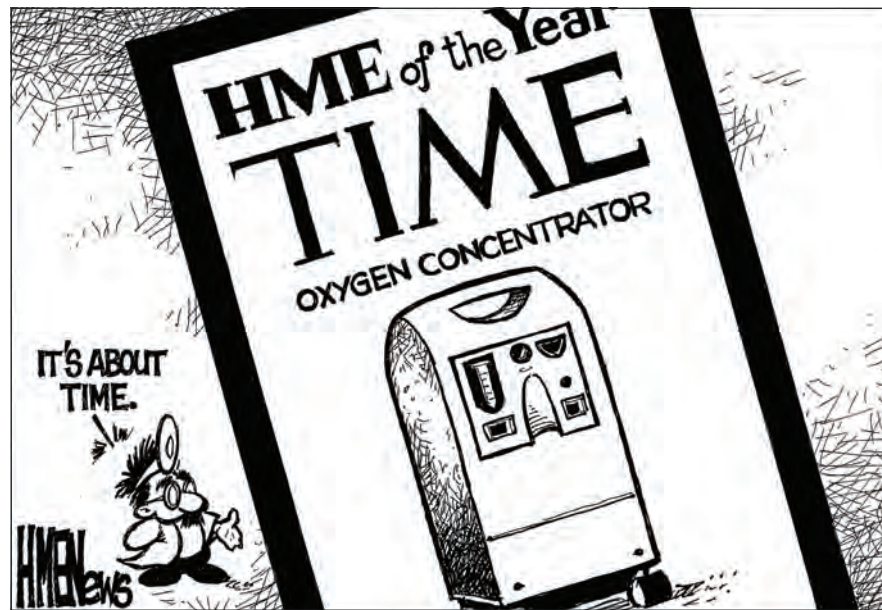
Also of note for increases were patient transfer systems (up 28%), ultralight wheelchairs (up 19%), infusion pumps (up 19%)

and folding wheeled walkers (up 12%).

With overall increased utilization, it’s no surprise then that the larger providers also saw bumps in their allowed charges for 2019. Take Lincare, which saw roughly \$715 million in allowed charges in 2019, up from roughly \$645 million in 2018, about an 11% increase.

Speaking of those larger providers, there was barely any movement among the top 10 billers of Medicare, with Lincare, Accredo, Lincare Pharmacy, Walgreen and Apria still the top 5 billers in 2019, as they were in 2018. There was some movement in the 6-10 spots, with the biggest jump by Byram, which moved from 10 to 7 in 2019, with \$124 million in allowed charges.

With that, let’s enjoy this last bit of 2019, while we’ll brace ourselves for the Medicare utilization data for 2020. **HME**



LESSONS IN RISK MANAGEMENT

2020 taught us as much as it challenged us

BY BILL WILSON

2020 MAY well go down in history as one of the most challenging years of the modern era. From the COVID-19 pandemic to civil unrest and a contentious political climate, this year required more flexibility and resilience from individuals and businesses than any in recent memory. Yet, these challenges also shed light on issues both old and new. And for those with an eye for opportunity, 2020 brought many lessons that can help grow and improve their businesses for the future.

Here’s what we learned about managing risk that we’ll carry into 2021.

CRISIS MANAGEMENT AND BUSINESS CONTINUITY PLANNING

The disruption businesses in nearly every industry saw this year made one thing abundantly clear – you need a business continuity plan. It’s essential if you want to be truly prepared for the future and safeguard your business.

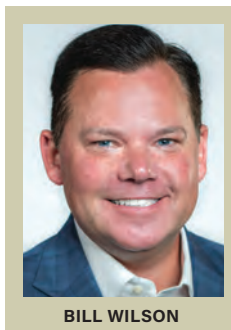
If you don’t already have a business con-

tinuity plan, make it a priority to create one as soon as possible. If you do have a plan in place, be sure to review and update it to include risks that emerged in 2020, including a global pandemic, civil unrest, rioting and vandalism.

When creating a business continuity plan, it’s also a good idea to reach out to your insurance agent or broker. They can help you through the process, highlight additional risks you may not have considered, and ensure you have the proper coverage in place.

SOCIAL INFLATION IS REAL

Social inflation (i.e., when the price of insurance coverage increases because of what’s going on in the world) can seem a little intangible as a concept. However, 2020 has shown that it is very real. Social factors over the last decade have resulted in not only harsher judgments, but also higher payouts in the court of law. This is driven primarily by three factors:



BILL WILSON

1. People distrust big business – From issues of privacy to economic inequality, jurors are more likely to side against companies in a suit. The result is an environment where it’s easier to sue companies and win large settlements, in turn driving up the costs of insurance claims and coverage.

2. It’s easier to fund lawsuits – In the past, many plaintiffs were deterred from going to trial by the high cost of attorney fees. Now, third parties will cover the costs of litigation in exchange for a cut of the settlement. This leads to more lawsuits that go further, last longer and, ultimately, cost more.

3. Massive verdicts are the new norm – Along with the cultural shift toward distrust for large companies, there’s a growing perception that companies can afford anything. This is why it’s now common to see multimillion (or even multibillion)

RISK MANAGEMENT SEE NEXT PAGE

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REPAIRS



Get the full picture

BY DAN MEYER

Q. What are the pros and cons of outsourcing my respiratory equipment repair versus doing it in-house?

A. When that invoice arrives from your equipment repair center, it's understandable to ask yourself: "Should we keep outsourcing repairs or fix our equipment in-house?" That's a business decision that dealers must make for their unique circumstances, but here are some factors to consider.

DIVERSITY OF YOUR FLEET

If you are a full-service respiratory provider, the cost and complexity of a repair operation compounds with every make and model in your fleet. Each requires different diagnostic and repair tools, as well as its own inventory of needed parts. Installing a single ventilator repair station, for instance, can cost more than \$20,000. For dealers with multiple branches and a large and diverse fleet, the investment would be significant. However, for a small dealer focused on PAP only, in-house repairs may be manageable.

MANPOWER AND TRAINING

When weighing the human capital that in-house repair requires, think about more than just salary. Each type of equipment requires time-consuming training that is continually updated with new manufacturer guidance. Calculate the productivity rate you'll need your repair technicians to achieve, then do a dry run.

LOGISTICAL READINESS

Make sure you have space available in your warehouse not only for repair, but also for parts inventory, quality control stations and staging areas for equipment headed in and out of your repair lines. Also consider how movement of broken equipment will impact your current vehicle routes.

THE BOTTOM LINE

What are your repair-related KPIs? Reducing costs? Controlling quality? Increasing turnaround time? Be sure to get a full picture of the costs and benefits to determine whether in-house or outsourced repair is the best choice for your business. **HME**

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

RETAIL



Ensure safety, communication

BY SUE CHEN

Q. As an HME retail store, what are the three most important things I need to do in this COVID retail reality?

A. No retailer could have planned for 2020. It was crazy and unprecedented.

When stay-at-home and lockdown orders rolled out in March and April, the HME industry, including retailers and providers, were deemed essential businesses and able to stay open.

Even so, there were limitations that required continuous shifting and pivoting to keep the HME store open, surviving and thriving.

Here are the three most important to-do's for HME retailers:

SAFETY FIRST

Have protocols in place to ensure the safety of staff and customers, and be sure this is well communicated.

Be willing to provide curbside delivery, parking lot consultations and even Zoom calls to make everyone feel safe, while providing your valued products and services.

HAVE CLEAR AND**ACCURATE STORE HOURS**

It is very frustrating to drive to a store or restaurant only to find them closed, but their websites stated they were open.

Be sure to have clear and accurate hours of operation on your actual store, website, Facebook page, and on Google and map searches.

If your physical store hours are limited, but you are open by phone, email or text, be sure to communicate that, as well.

DON'T USE COVID-19 PANDEMIC AS AN EXCUSE

We are all living through COVID together, so making excuses because of COVID is annoying to the customer in need.

Instead, make it clear to your customers and community that, "We are here for you and ready to help."

Make your marketing and messaging positive and proactive with how you and your staff are ready to help your customers. **HME**

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

TECHNOLOGY



Make it work for you

BY MARK LUDWIG

Q. How can providers use technology to provide more services and, ultimately, more revenue?

A. Surviving the turbulence of COVID-19 makes thinking about new software and integration strategies impossible for even the most strategic and successful DME operators.

It is in these challenging times, however, that we have to count on technology focused innovators and problem solvers to help DME operators improve operating efficiencies and find new sources of revenue. Fortunately, great work is being done collaboratively between various solution providers and industry stakeholders. Here are just a few areas where new work is being done:

Seamless resupply workflow and augmented patient outreach services

Fully integrated remote patient monitoring (RPM) solutions

Digital health coaching, wellness and engagement solutions

Integrated chronic care management (CCM) and transitional care management (TCM) solutions

Healthcare facility portal technology for DME equipment and infection prevention services (B2B solutions)

Integrated inventory management solutions (real-time RFID) for facility based partnerships

Recent technology advancements and lower costs have allowed data to be dynamically transferred and analyzed more easily than ever before. COVID-19 has also brought a new virtualization model to a more patient-centered continuum of care, and DME operators are critical to filling the gaps that threaten effective management of this continuum. Although these are very challenging times, it is a perfect time to begin talking to and partnering with leading technology companies serving the HME industry.

A constant focus on optimizing the continuum of care will not only provide substantially improved health outcomes for families, but also maximize the success and operating profits of DME operators that are the glue in health care systems. **HME**

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

OUTSOURCING



Don't rely on point person

BY TODD USHER

Q. Why don't I just "farm it out"?

A. Intake and billing are critical functions that directly affect cash flow and your reputation as a provider. These functions are vital to your success.

When these functions are "farmed out," you have little to no control over who is working your accounts, and what kind of in-depth knowledge and dedication they have. Assigned to your account is a "point person" who, in our experience, does not know what team member is working your accounts, and what their strengths and weaknesses and prior experiences are. They may skim over your accounts performing the bare minimum but, on the surface, it looks like they are working or "touching" all accounts. Are they really digging? Are they concerned about the health of your company? Water doesn't boil at 210 degrees.

Instead, why not hire qualified and fully trained remote personnel to work in-house full time. Hiring remote personnel is not considered "farming out." Remote personnel can be a team that meets your exact standards, working alongside your existing local team. They adopt your culture and your KPI expectations, and share in the daily responsibility of taking care of your referrals and patients. They are not anonymous behind a "point person." They report directly to your leadership team. Under these conditions, you have the same control as you always had, but at a much lower cost.

The cost to hire remote personnel can be lower than the 6% you pay for the other service. Remote personnel are familiar with HME billing practices, LCD requirements and operating systems. They work for you. They are concerned about doing a good job and want to achieve your company goals. You have saved more money and achieved better KPIs and, therefore, have no need to "farm it out" to a service. **HME**

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

RISK MANAGEMENT

CONTINUED FROM PREVIOUS PAGE

dollar settlements.

Fortunately, there are ways to prepare your business for the impacts of social inflation. Purchasing commercial excess insurance is a great start, as it provides coverage beyond the limits of your other policies. In addition, because employment practices are especially susceptible to social inflation trends, it's a good idea to purchase standalone employment practices liability coverage. It's also vital to ensure your company has sound policies in place relating to sexual harassment, workplace violence, etc.

ONGOING CHALLENGES OF THE REMOTE WORK ENVIRONMENT

It's becoming almost cliché to say, but the truth is—business will never be the same. One of the biggest shifts resulting from the pandemic was moving employees to a work-from-home environment.

When employees began working outside the security of an in-office network, cyberattacks immediately became more prevalent. According to one report, ransomware attacks jumped by 148% in March of 2020. It makes sense – the easiest way for a hacker to infiltrate your company is through your people – yet many businesses still do not have adequate protections in place.

As businesses continue to operate in remote environments to varying degrees, it's vital to ensure that you have the necessary network protections in place, train

employees on security best practices, and ensure you have adequate cyber liability coverage.

In addition to technological hurdles, the ongoing and often complex challenges for employers are more people centric. Between social isolation and distractions at home, employers must find ways to keep employees feeling engaged, motivated and valued, while continuing to serve customers and maintain productivity. To address these challenges, it's essential to communicate regularly to employees about the business and plans for the future. Ensure expectations for work are clearly defined, celebrate wins often, and ensure employees are supported to maintain a healthy work-life balance.

IN CONCLUSION

When so few things are certain, it's essential to prepare for the risks you can. Many businesses added incremental products, diversified their offerings, and changed the way they serve their customers and patients.

These changes have helped many businesses stay afloat, or even thrive, during the pandemic.

But new opportunities can bring new risks.

Talk to your insurance provider about any changes in your business model to ensure you have the coverage you need. **HME**

Bill Wilson is senior vice president for VGM Insurance Services. For more information, call 800-362-3363 or email info@vgminsurance.com.



2021 OUTLOOK

M&A forecast: Look for respiratory to dominate

BY THERESA FLAHERTY, Managing Editor

THE THEME for buyers and sellers in 2021 is “respiratory, respiratory, respiratory,” said Don Davis, president of Duckridge Advisors.

Helping to drive that trend: AdaptHealth, which capped off a busy 2020 by announcing in December that it would acquire AeroCare, which specializes in CPAP, nebulizers, oxygen and ventilators, for nearly \$2 billion in cash and shares.

“It’s perfect iteming – the demographics are there, but with COVID and sleep issues being discussed, I see vents, CPAP and even oxygen companies having a lot of momentum behind them,” Davis said.

While AdaptHealth may have captured the headlines in 2020, other compa-



Don Davis



Pat Clifford

nies have also been making buys and securing investments to position themselves for further growth. National player Rotech Healthcare announced it had obtained \$425 million in financing, and regional players Great Elm Capital and Protech Home Medical announced \$37.7 million in financing and several acquisitions, respectively. All four companies have a strong respiratory core.

In fact, it’s the regional companies that might drive a good chunk of the M&A activity this year, says Brad Smith, managing director/partner at Vertess.

FORECAST SEE NEXT PAGE

Group provides collective power

Members also have access to numerous associations

BY TRACY ORZEL, Contributing Writer

TORONTO - The Ability Members Group, a national network of



Jamie Church

HME providers in Canada, is within striking distance of its goal of 100 member locations.

Launched in

CANADA SEE NEXT PAGE

At CHME, parallel tracks converge in ‘crazy coincidence’

BY THERESA FLAHERTY, Managing Editor

CHARLOTTE, N.C. - Provider Andrew Trammell didn’t know all that much about ALS when he met Dave Lloyd at a racing event in 2019 to raise money for the incurable disease, also known as Lou Gehrig’s disease, but he has since helped to raise more than \$25,000 for Lloyd’s nonprofit, Racing for ALS, and forged a lifechanging friendship.

“I was admiring their race car, and I did notice they had



A. Trammell

Lloyd and his brother, Scott. “I later found out that Dave was the one they were racing for to find a cure. That hit me hard. Over time, I’ve watched his decline in real time. It’s ugly to

Racing for ALS on their car and trailer,” said Trammell, president and CEO of Carolinas Home Medical Equipment, of meeting Dave



CAROLINAS HOME MEDICAL EQUIPMENT was named honorary sponsor by Racing for ALS in recognition of President and CEO Andrew Trammell’s support of the organization.

see what the disease does, and I wanted to do whatever I could to help battle for the cure.”

In November, Racing for ALS surprised Trammell when it made Carolinas Home Medical

Equipment an honorary sponsor, prominently displaying the provider’s name and logo on its 2019 Hendrick Motorsports Track Attack Camaro ZL1.

CAROLINAS SEE NEXT PAGE

FDA warns against self-prescribed oxygen

BY THERESA FLAHERTY, Managing editor

WASHINGTON - People are looking to protect themselves against COVID-19 in any way possible, including using oxygen concentrators, but the U.S. Food and Drug Administration has warned against using the devices without a prescription.

Portable Oxygen Solutions, an online provider of POCs and accessories, saw an uptick last March in people wanting to buy POCs for themselves or family members,

says Todd Flesch, co-founder of the Charlotte, N.C.-based company.

“On calls, when we explained that they needed an oxygen prescription from a doctor to purchase one from us, the majority of these folks were surprised to learn that,” he said. “They did not understand why they would need a prescription.”

In its warning, posted in late 2020, the FDA stated that giving yourself oxygen

could do more harm than good, such as getting too much or too little oxygen.

Provider Irene Magee hasn’t had people looking to buy POCs without a prescription, but since the advent of online marketplaces like Amazon and eBay, it’s not uncommon for people to buy equipment and then learn they need professional help with it, she says.

“What we see is people getting the

FDA WARNING SEE NEXT PAGE



BRIEFS

Rotech obtains financing to grow

ORLANDO, Fla. - Rotech Healthcare has obtained \$425 million in new financing via an amended and reinstated credit agreement with a diverse group of lenders. The provider used part of the proceeds to pay a \$100 million dividend to its holding company and will use the remainder to support growth through strategic acquisitions. “This new credit agreement provides Rotech with sufficient capital over the next five years to continue our growth strategies, as well as to provide a \$100 million special dividend to our holding company,” said CEO Tim Pigg. “2020 has been a very challenging and successful year for Rotech as we continue to focus on being part of the solution to the COVID-19 public health emergency.” The credit agreement is comprised of a \$335 million, five-year loan; a \$15 million revolving credit facility; and a \$75 million acquisition credit facility.

AARC appoints interim executive director

IRVING, Texas - The American Association of Respiratory Care has named Paul Davis as interim executive director. Davis, a former Army officer, has a background that includes finance, business and leadership, most recently as business development director at Pratt & Whitney. “We are confident with Paul’s leadership and drive that AARC will continue to obtain and exceed organizational goals and objectives with a commitment to transparency and forward thinking,” said Sheri Tooley, AARC president.

Hart Medical expands in Michigan

CHEBOYGAN, Mich. - Hart Medical Equipment has acquired McLaren Home Medical Equipment, formerly known as VitalCare, which has locations in Cheboygan, Gaylord and Petoskey in northern Michigan. “Hart concentrates on patient outcomes, integrative technologies, timely delivery and customer satisfaction, which has helped build trust within our communities,” said Allen Hunt, president of Hart Medical. The acquisition furthers Hart’s strategic plan to expand its geographical reach, while leveraging additional scale to benefit partners, referrals and customers. It also allows Hart to bring its TeleHart live streaming training service to northern Michigan.

Great Elm receives financing, rebrands

WALTHAM, Mass. - Great Elm Capital has received a preferred equity investment of \$37.7 million from an affiliate of JPMorgan Chase & Co. Proceeds will be used to refinance Great Elm’s DME business and to provide the business with growth capital, the company says. “This financing transaction enables the firm to accelerate the growth of our existing businesses and at the same time provides incremental capital to acquire additional businesses,” said Peter Reed, Great Elm’s CEO.

Apria settles for \$40.5M

NEW YORK - The acting U.S. Attorney for the Southern District of New York has announced a \$40.5 million settlement with Apria Healthcare for alleged fraudulent billing practices for non-invasive ventilators.

The lawsuit alleges, among other claims, that Apria submitted false claims to federal health programs, including Medicare and Medicaid, seeking reimbursement for the rental of non-invasive vents to beneficiaries who were not using the NIVs.

Other claims in the lawsuit: Apria improperly billed federal health programs for certain NIV rentals that were being used in a setting called PAC mode to provide bi-level pressure support therapy, which was available from a less expensive device called VPAP RAD and did not qualify for reimbursement at the NIV rate; and the company improperly waived co-pays for a number of Medicare and TRICARE beneficiaries.

Apria has also made "extensive factual admissions" regarding its conduct as part of the settlement, including:

Its RTs often did not conduct regular visits to NIV patients to confirm that patients were using their NIVs as directed by their physicians.

It continued to seek payments from federal health programs for NIV rentals each month even though its RTs frequently

failed to conduct in-home visits to verify that patients were still using their NIVs.

It often did not take steps to stop seeking payments from federal health programs or to determine if the NIV rentals were still medical necessary.

"We are pleased to have resolved this civil matter and fully cooperated throughout the review," an Apria spokesperson said in a statement. "This settlement relates primarily to whether patients made sufficient use of NIVs, prescribed by physicians for use in patients' homes, and was based largely on data from the early years of the company's NIV program. Prior to becoming aware of the government's interest in the matter in 2017, Apria had already made a number of changes to the NIV program's processes and procedures relating to patient usage in the home."

In addition to the settlement, Apria has entered into a Corporate Integrity Agreement requiring the company to implement board oversight, a claims review process by an independent review organization and other compliance steps designed to foster adherence to federal health care program requirements and, thereby, protect the programs.

The settlement stems from a whistleblower case filed by three former Apria employees under the qui tam provisions of the False Claims Act. **HME**

M&A FORECAST

CONTINUED FROM PREVIOUS PAGE

"A lot of people are looking to retire and sell," said Brad Smith, managing director/partner at Vertess. "Even though COVID has been good for our industry in certain ways, it's still created a lot of uncertainty and risk and it's a lot of work. A lot of these owners see security and safety in (regional) organizations."



Brad Smith

In addition to respiratory, analysts are also seeing demand for diabetes, hospice DME and other product categories that have recurring revenues or that treat conditions with co-morbidities, says Pat Clifford, managing director, home medical equipment for the Braff Group. But even in those cases, respiratory is still the primary driver, as buyers seek to offer a more well-rounded product mix once again.

"If you have a vent patient and they have incontinence, you are seeing folks try to take care of (both needs) for that patients," he said. "It cycles all the time, and we are entering a cycle where people are doing more." **HME**

FDA WARNING

CONTINUED FROM PREVIOUS PAGE

concentrator online and then they want us to be their 24/7 emergency service," said Magee, vice president and director of Green Island, N.Y.-based Northeast Home Medical Equipment. "We're not playing with someone else's equipment. Those scenarios have happened all along."

"When we explained they needed an oxygen prescription from a doctor, the majority of these folks were surprised to learn that."

Todd Flesch

With COVID-19 fears keeping people from visiting doctors offices and hospitals, it's not surprising people are seeking to take health care matters into their own hands, says provider Jason Jones.

"We are seeing with pulse oximeters and spirometers that everybody in town wants one," said Jones, president of Jones Medical Supply in Troy, Ala. "We'll sell those to whoever wants one. There's not a whole lot to learn and you can't hurt yourself like you can on oxygen concentrator." **HME**

CANADA

CONTINUED FROM PREVIOUS PAGE

2017, Ability Members Group currently has 75 locations across Canada – it added 34 new members in 2020 alone.

"We expect to be over 100 locations in Q2 of 2021," said Jamie Church, CEO.

What's the appeal for providers? The Ability Members Group leverages its collective buying power to provide long-term price and supply protection to members.

Members also have access to numerous associations and resources, including NRRTS through a partnership with the Canadian Assistive Devices Association.

"We expect to be over 100 locations in Q2 of 2021."

Fifty-nine of the Ability Members Group's rehabilitation technology specialists have already applied to obtain NRRT's rehabilitation technology supplier (RRTS) designation.

"One of our priorities is to have our members registered as aging-in-place specialists, so when someone is looking for home access products, they can trust and work with a provider that has taken the time to certify themselves," said Church.

What's next for the Ability Members Group? Extended relationships with physicians, pharmacies and health networks, as well more non-traditional entities, says Church.

"How do we work with financial planners and estate planners on the home access side of the business, specifically for aging in place," he said. "I think successful providers in the U.S. are doing that now. They're being very creative, and I think we need to continue to push that message." **HME**

CAROLINAS

CONTINUED FROM PREVIOUS PAGE

"They pulled up for a photo shoot and totally surprised me – it was just supposed to be a small decal on a quarter panel," he said.

Coincidentally, CHME was looking to diversify into new revenue streams as it transitioned out of the hospice market. While vents and other product categories were "saturated," the provider saw an opportunity in the rapidly consolidating complex rehab market, a space it had previously said it would never get into, says Trammell.

"CRT ended up being a natural extension of our business because of the relationships we already have established with referral sources," he said. "We started Oct. 1 and it's been incredible and growing at an exponential rate very quickly."

It's also an opportunity to help people like Dave Lloyd get the equipment they need to live their lives, said Trammell.

"It's a crazy coincidence of how it all came together and crossed paths," he said.

Racing for ALS has launched a new fundraising initiative to provide stipends to families living with ALS for home modifications and complex medical equipment. It gave out its first checks in December, says Lloyd.

"I went from walking and driving to a power chair in the past year," he said. "I began to realize how important and how costly home modifications and adaptive technology is to have any kind of normal life. Between the pandemic and people being out of work and the continued expense of ALS, survival there was an immediate need." **HME**

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NSM adjusts operations

Company sees expedited evaluation process, decreased delivery cycle times

BY LIZ BEAULIEU, Editor

NASHVILLE, Tenn. - National Seating & Mobility successfully leveraged remote services and telehealth for about 20% of its new equipment setups during the COVID-19 pandemic from April to December, says CEO Bill Mixon.

"From the early days of the pandemic, we worked hard to adjust from our pre-COVID operational model to leveraging smart alternate delivery methods, starting with no-contact and limited contact evaluation and delivery options focused on safe care for our clients," he said during a recent episode of

NSM SEE NEXT PAGE

NRRTS designation gets jumpstart in Canada

BY LIZ BEAULIEU, Editor

LUBBOCK, Texas - NRRTS has seen strong interest from providers in Canada for its registered rehabilitation technology supplier (RRTS) designation, with the organization seeing about 80 applications in less than two months.

NRRTS announced in October that it was offering the designation to providers in Canada and then in December that it was partnering with the Canadian Assistive Devices Association to promote it there.

"When people said how many applications they thought we were going to get, I didn't believe them," said Weesie Walker, executive director of NRRTS. "My experience is, people say it's a great idea but they don't do anything unless it's a requirement. The Canadians - they are so excited about this."

NRRTS has created a Canadian

Advisory Committee under its board of directors to help NRRTS better understand the needs of providers in Canada and to help providers in Canada to better understand the application process.

There might not be requirements to provide complex



Weesie Walker

rehab in Canada, but there's a thirst for education there - that's a big reason why the Ability Members Group, a network of providers operating 74 locations across country, has bought into the RRTS big time. Fifty nine of its rehab technology suppliers have applied for the designation so far.

"We're committed to continuing education and recognize the quality of education that NRRTS possesses and pres-

ents," said Jamie Church, CEO of the Ability Members Group.

In addition to the education requirements for the RRTS (1.0 CEU or 10 hours), the commitment to a code of ethics is appealing, especially in negotiations with payers, Church says.

"When you look at NRRTS, in terms of their registration process, and the underlying codes of ethics and consumer protection - third-party payers respect that," he said.

Even NRRT's registrants in the U.S. will benefit from the expansion across the border, Walker says, in that it will help to make the organization even more solvent.

"Our numbers have been consistent, hovering around the high 600s," she said. "We gain a few people then we lose a few people to retirement. The board kept saying, 'We need more people,' and this helps get us there." **HME**

BRIEFS

Motion expands to BC

TORONTO - Motion, a provider of mobility and home accessibility solutions, has acquired British Columbia-based North Coast Home Medical Equipment. The deal complements Motion's existing coverage of Vancouver Island, Lower Mainland and southern interior B.C. "This is only the beginning of our plan for aggressive growth in the coming year," said Thecla Sweeney, executive chair and CEO of Motion. "The expansion in British Columbia solidifies our market leadership and reiterates our commitment to clients across the province." NCHME originally operated as a MEDiChair franchise before transitioning in 2015 to independent ownership.

NSM taps Rick Nori to grow Canadian business



Rick Nori

NASHVILLE, Tenn. - National Seating & Mobility has selected Rick Nori as its regional area director of Canada. Nori is the former vice president and general manager of Ki Mobility Canada, a key vendor partner of NSM's. Nori has 32

years of experience in complex rehab and HME in sales and senior management positions. As regional area director, he will lead branch operations throughout Canada. He replaces Darryl Mackie, who is retiring at the end of January.

Reliable Medical Supply shifts leadership

BROOKLYN PARK, Minn. - Reliable Medical Supply's Debbie Kalk will be moving from CEO to culture and advocacy ambassador, and Katie Stevens will become the company's new CEO. Stevens has overseen operations at RMS and has led the company's integration efforts as it has expanded its geographic footprint into three new states over the past 18 months. Stevens joined RMS in January 2020, working closely with Kalk, the company's growing management team and strategic industry partners to develop growth plans, solve operational challenges stemming from COVID-19 and maintain a strong company culture as a Top Workplace in Minnesota for six consecutive years. Kalk will also continue advocacy efforts for complex rehab as an active member of NCART's board of directors.

MobilityWorks broadens assessment options

RICHFIELD, Ohio - MobilityWorks is offering private needs analysis at its locations, in addition to its virtual and home-based assessments. During an in-store analysis, the client will be the only one in the showroom and will have the benefit of seeing its large selection of accessible vehicles. MobilityWorks is also, for a limited time, deferring payments for up to 90 days on new or qualifying pre-owned vehicles when financed through the company.

Cara Masselink aims to maximize impact

BY LIZ BEAULIEU, Editor

THE PASSION that drove Dr. Cara Masselink to pursue a Ph.D. in interdisciplinary health sciences is the same passion that will drive her leadership of the Clinician Task Force, she says.

"After I was in a management position for a while, I was advocating for individual people and their needs a lot, and I wanted to make a greater impact," said Masselink, as assistant professor in the occupational therapy program at Western Michigan University. "That's when I started my Ph.D. and became a member of the CTF. That's what has led me here."

Here's what Masselink had to say about how she hopes to build on the foundation that Cathy Carver, the former executive director, built for the CTF; why she believes



Cara Masselink

clinicians and providers need to communicate better; and when policy needs to be a priority.

HME News: What do you

hope to accomplish?

Cara Masselink: I have some ideas and they're still in the beginning stages, but one of them is to monitor trends across states a little more by getting additional feedback from CTF members and to find more effective ways to collaborate with Medicaid programs on issues. I want to respond more specifically to individual public comment periods and my hope is that it won't be me or the CTF responding, but the members in those states making an impact in that way. We

MASSELINK SEE NEXT PAGE

Mike Barner's take on wins, fresh ideas, complex rehab's unicorn

BY LIZ BEAULIEU, Editor

ANN ARBOR, Mich. - Mike Barner says if Simon Margolis were still around, he'd be pleased with the complex rehab industry's continued development, but "challenged" that there's still no separate benefit.

"That's such a big haul and we've had some major interruptions that we've had to address immediately," said Barner, who was named a Simon Margolis Fellow during NRRTS's recent virtual Annual Open Meeting. "But other than that, I think he'd be really pleased with the work that has been done."

Barner, a past president of NRRTS and the administrative director of the University of Michigan Wheelchair Seating Service, highlighted some of his wins and the still elusive separate benefit.

WINS - BIG AND SMALL

Barner believes the industry has made great strides with getting state Medicaid programs to recognize complex rehab as a separate benefit, including in his home state of Michigan, where the state legislature has passed a bill to do just that. Looking back, Barner also notes that he and



Mike Barner

other stakeholders in the state were able to convince Blue Cross Blue Shield of Michigan to require CRTSs or ATPs, in combination with RRTS, for complex rehab, and initiated the formation of a complex rehab section under

BARNER SEE NEXT PAGE



Mickae Lee promoted by NCART

Mickae Lee has been promoted to associate director of NCART. She has served as director of advocacy and communication for the past five years. Her responsibilities have included a wide variety of projects, and her knowledge and experience in the complex rehab industry have supported multiple initiatives over the years.

NSM'S OPS

CONTINUED FROM PREVIOUS PAGE

the "HME News in 10" podcast. "We've been in communication with hundreds of thousands of our clients and referral sources."

NSM and its clients and referral sources have all benefitted from remote services and telehealth, Mixon says, in the form of expedited evaluation processes, decreased delivery cycle times, increased cost efficiencies, and mitigated exposures.

The challenge, Mixon says, has been maintaining the same level of quality and compliance with remote services.

"We're maintaining a real focus there," he said. "We want to make sure that we're doing this in an appropriate and compliant way, and that we're doing this in conjunction with all appropriate rules and regulations. We want to make sure the quality and outcomes are sustained."

NSM will use the data it's collecting to buttress the complex rehab industry's argument that there need to be permanent policy and reimbursement changes to reflect this new way of providing care, Mixon says.

"The goals there are to connect where we see data trends around the clear medical need of individuals who receive health care to provide payers and rulemakers with a full picture," he said. [HME](#)

MASSELINK

CONTINUED FROM PREVIOUS PAGE

have to be broader. It's not enough to just touch Medicare. Most (of our clients) aren't on Medicare.

HME: As a Ph.D. and professor, where have you focused your research?

Masselink: There really isn't enough research to make an impact on policy, so I'm always trying to shed light on the service and delivery process. It's complex, but there are things that can make it better.

HME: What's an example?

Masselink: Communication among therapists and suppliers. I recently completed a study and submitted it for review that looks at the difference between what the therapist recommended and what the supplier delivered. Somewhere along the timeline, things are being changed. I believe we need to make things more transparent.

HME: Since you're at a university, I'd love your thoughts on building the next generation of professionals specializing in seating and mobility.

Masselink: I teach in the OT department and I'm very focused on assistive technology. I'm teaching both AT as concept and as advocacy. I'm definitely making a stronger connection to policy and integrating that into the coursework. OT students are focusing on the practitioner knowledge, but the policy piece is really important. [HME](#)

BARNER

CONTINUED FROM PREVIOUS PAGE

the Michigan HomeCare & Hospice Association. "We've done so much work locally," he said.

Barner also left his mark on NRRTS when he was president by initiating the organization's move to online renewal for registration. "Nowadays that doesn't seem like a big deal, but when you don't have it and you're slinging paper back and forth, it drives you crazy," he said.

FRESH IDEAS

Barner, as a past president on NRRTS's Advisory Board, still consults the organization's board, and the most exciting thing for him recently has been seeing more widespread participation.

"We're seeing the younger folks get more involved," he said. "To get those fresh ideas has been great."

CRT'S UNICORN

Nationally, the industry has succeeded in getting a number of bills introduced to create a separate benefit for complex rehab, but for the past few years, it has been consumed with putting out more immediate fires, like CMS applying bid pricing for accessories for complex rehab manual wheelchairs.

"The separate benefit is the kind of thing that you're like to see happen before your retirement," Barner said. [HME](#)


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Medtronic 'bridges' gaps for diabetes technology

BY THERESA FLAHERTY, Managing Editor

DUBLIN - The biggest barrier to CGMs and other innovative diabetes technology is cost, says Medtronic, and that's why the company recently launched a CGM Access Discount Program for certain users.

"Our goal is to make therapy available to everyone and we hear cost is one of the top reasons they can't go on CGMs or fall off (using CGMs)," says Krista Sugerman, vice president of global customer engagement for Medtronic. "We try to dive into what the customers are telling us. It's also supplies and everything that goes along with it."

The discount program allows users with a valid prescription but who don't have insurance coverage or who have switched insurance or have lost coverage to access dis-

counted out-of-pocket costs for a Medtronic CGM. The discount enables eligible patients to pay \$180 for a Medtronic CGM (with a 12-month warranty) and \$60/month for sensors.



K. Sugerman

Earlier this year, Medtronic also expanded its Medtronic Assurance program for U.S. customers who lost jobs and health insurance due to the COVID-19 pandemic.

"Our goal is to provide a bridge until we get there from a complete payer solution," says Sugerman. "We are excited to do everything we can from an awareness and advocacy and support (perspective)."

That payer solution got a little more complete when CMS

in October released a proposed rule that, if finalized, would expand coverage for CGMs for Medicare beneficiaries, a growing base of users of the technology.

"We have a lot of our own patients aging into Medicare who were faced with the challenge of having to go off therapy," she said. "We think CMS's proposal is a great initial step to put patients first and empower them."

That's an important step, Sugerman says, because while coverage for the devices by many private insurers has "come a long way," some will always wait to follow Medicare's lead.

"The trend toward more CGM adoption and the importance within the diabetes communities of wearing CGMs and the data behind that is (creating) even more of a loud voice, which is great," she said. **HME**

VACCINE 'It will take a village'

BY THERESA FLAHERTY, Managing Editor

SPRINGDALE, Ark. - On a recent Saturday, Community Pharmacy of Springdale partnered with two other community pharmacies to administer COVID-19 vaccines to 609 health care workers - about 18 patients every 10 minutes, says pharmacist/owner Victoria Hennessey.

The federal government announced in November that it would make the COVID-19 vaccine available through community pharmacies, in addition

COVID VACCINE SEE NEXT PAGE

BRIEFS

DarioHealth provides RPM to health system

NEW YORK - DarioHealth has entered into an agreement to provide its remote patient monitoring solution to Presbyterian Medical Services, an integrated health care system in New Mexico, starting Jan. 1. The partnership will provide patients living with chronic conditions, such as diabetes and hypertension, to access Dario's AI-powered digital therapeutic tools and care.

Soleo Health adds new drug

FRISCO, Texas - Soleo Health, a provider of complex specialty pharmacy and infusion services, is now offering SEVENFACT, a newly released drug by HEMA Biologics for the treatment and control of bleeding disorders in adolescent and adult patients with Hemophilia A or B with inhibitors. Soleo Health is among the first to offer the drug, which was approved by the U.S. Food and Drug Administration in April and which was made available to the marketplace on Dec. 10. Soleo Health operates 20 locations throughout the U.S. with national nursing coverage and pharmacy licensure in 50 states.

MHA sponsors infusion benchmarking program

ALEXANDRIA, Va. - Managed Health Care Associates, an alternate site group purchasing organization, will serve as the 2021 sponsor of The National Home Infusion Foundation's benchmarking program. The goal of the program: to establish national standards for patient satisfaction and clinical outcomes for home and specialty infusion. NHIF is currently in pilot testing for two new program metrics: status at discharge and 30-day hospital readmission. These metrics will help the industry to better understand the reason patients are discharged from service, as well as the rates of readmission within 30 days of the start of care for patients receiving parenteral nutrition and inotrope therapies, offering a first look at how clinical characteristics impact therapy success rates.

Option Care Health, Amedisys to offer antibody therapy

BATON ROUGE, La., and BANNOCKBURN, Ill. - Option Care Health has partnered with Amedisys, a provider of home health, hospice and personal care, to provide COVID antibody infusion therapy in skilled nursing and assisted living facilities. In December, the National Home Infusion Association announced a pilot program with Operation Warp Speed and the Department of Health and Human Services to expand access to Bamlanivimab, which is being used to treat mild to moderate COVID-19 in adults and pediatrics who are at high risk for progress. "Combining the extraordinary capabilities of two industry leaders to solve a critical health care challenge is truly humbling," said John Rademacher, CEO.

Caucus prioritizes 'sleep health' on Hill

BY THERESA FLAHERTY, Managing Editor

DARIEN, Ill. - The Congressional Sleep Health Caucus will, among other things, help to raise awareness of obstructive sleep apnea and the effectiveness of CPAP therapy, says Dr. Kanna Ramar, president of the American Academy of Sleep Medicine.

The AASM launched the caucus in December to highlight the importance of sleep health on helping to control cardiovascular diseases, diabetes and obesity.

"The Sleep Caucus is a major movement in the right direction to drive that awareness, not just for the public but



Dr. Ramar

also to emphasize that sleep is associated with improved quality of life," he said.

Ramar spoke with HME News recently about the Caucus—co-chaired by Reps. Zoe Lofgren, D-Calif., and Rodney Davis, R-Ill.—and the

need to prioritize sleep as part of better patient-centered care.

HME NEWS: What are some of the immediate goals of the Sleep Health Caucus?

Dr. Kanna Ramar: The caucus is planning to hold briefings on various topics like the elimination of Daylight Savings Time

and sleep health disparities. We are hoping the caucus will focus on healthy sleep and overall wellbeing, which will lead to increased productivity and public safety. They will also focus on sleep disorders such as OSA and showing the effectiveness of treatment such as CPAP or BiPAP.

HME: Have you found that payers are willing to pay for treatment for OSA and other sleep disorders?

Ramar: If we look at it from the perspective of patient-centered care, there are a lot of hurdles. From a provider's perspective, there are paperwork and Stark law issues. CMS has made some changes to look at it from a value-based care

SLEEP CAUCUS SEE NEXT PAGE

MONEYLINE

Viemed acquires stake in Verustat

In other news: Kubat Pharmacy merges with Vital Care Pharmacy

LAFAYETTE, La. - Viemed Healthcare has acquired a 5% interest in Verustat for \$600,000, giving it a platform to enter the remote monitoring space.

Viemed will use Verustat's RPM solution in con-

junction with its own proprietary patient engagement platform (PEP), which has shown to improve patient compliance, along with labor and workflow efficiencies, according to preliminary data.

"The pandemic has revealed a great demand by physicians and patients to safely use technology to provide patient

care inside of the home," said Casey Hoyt, Viemed CEO. "We are excited to be partnering with Verustat in the RPM space, as their unique solution will fit well with our physician network."

Verustat, which recently became a vendor partner with VGM & Associates, pays providers management fees for

introducing their company and its RPM solution to physicians, and helping the company facilitate and manage those relationships.

Viemed expects the RPM platform to add incremental revenue in 2021, while driving new adjacencies, Hoyt says.

"While the RPM space is

VIEMED SEE NEXT PAGE

BRIEFS

Wound Pros seeks to develop new markets

LOS ANGELES - The Wound Pros, an accredited supplier of DMEPOS and a specialist in the treatment and management of chronic non-healing wounds, has named Daniel Yeager as its new senior vice president of market development. Yeager, who has nearly 10 years of experience, will focus on continuing to grow and refine the company's market expansion and business strategies. The announcement capped a busy 2020 for Wound Pros - the company expanded operations into 16 states; introduced RITA, an AI-enabled wound measurement app for assessing a patient's wounds at the bedside or remotely and generating relevant documentation; and developed a camera-based health and wellness monitoring app for tracking variations in vital signs.

BOC announces new leadership

OWINGS MILLS, Md. - The BOC board of directors has announced its 2021 executive committee and elected a new board member. The executive committee officers are L. Bradley Watson, president of Clarksville Limb + Brace + Rehab, as chairman; Abel Guevara, COO and corporate compliance officer at New Way Medical Supply as vice chairman; David Regier, consultant, as secretary; Cameron Stewart, co-founder of Alcam Medical Orthotics and Prosthetics, treasurer; Diana Klunk, certified mastectomy fitter at The Perfect Match Boutique, member at large; and Wayne Rosen, clinical consultant, as immediate past chairman.

Virtis Health expands into Illinois

WOODRIDGE, Ill. - Virtis Health, an alternate site of care company offering treatment, clinical management and administration of specialty infusion and injectable medications in an ambulatory infusion center (AIC) setting, has opened its first site in the Chicagoland area. The site, staffed with licensed infusion-specialist nurse practitioners, offers a range of therapy management services, including immunoglobulin treatments for primary immunodeficiencies and autoimmune disorders. Virtis Health currently operates six locations, with four AICs in Arizona (Glendale, Scottsdale, Tempe and Tucson), one in Dallas/Fort Worth and now one in Chicagoland.

NHIA to kick off event with keynote from Daniel Kraft

ALEXANDRIA, Va. - The National Home Infusion Association has announced Daniel Kraft, MD, a health technology expert, as the keynote speaker for its first-ever Global Congress on Home Infusion Therapy. Held as a pre-conference to its 2021 Annual Conference, April 19-22, the GCHIT will allow clinicians and providers from across the world to share experiences, ideas, accomplishments and challenges associated with the delivery of infused medications in the home. Kraft is a Stanford and Harvard-trained physician-scientist, inventor, entrepreneur and chairman of the XPRIZE Pandemic Alliance Task Force, an organization working to accelerate treatment breakthroughs for COVID-19 and future pandemics.

ANITBODY PILOT MOBILIZES HOME INFUSION PROVIDERS

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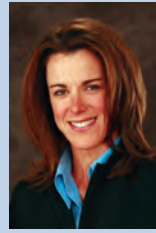
between the Department of Health and Human Services and the National Home Infusion Association. Option Care Health is also participating in the pilot.

"In essence, (the government said), 'Let's mobilize—private and public—to help get this into the hands of people likely to make this successful,'" said Greg LoPresti, CEO of Upstate HomeCare. "Hospitals are getting hit hard and we need to do our part, fast and furious."

Upstate HomeCare partnered



Greg LoPresti



Connie Sullivan

with Nascentia Health, a local health care services provider, to provide the therapy, a labor-intensive process that can take up to three hours. Upstate HomeCare does the intake, and mixes and delivers the drug; and then either Upstate HomeCare or Nascentia administers

it, depending on the facility, and observes the patient for an hour.

Providers can bill about \$310 per administration of the drug, which is donated by the government, but that must cover all costs, including pharmacy services to

receive and prepare the drug, supplies and PPE, says Connie Sullivan, president and CEO of NHIA.

"The challenge with home infusion remains the same: the reimbursement rates don't fully cover the costs," she said.

Despite inadequate reimbursement, LoPresti has no hesitation about offering the therapy, which gained attention when it was used to treat high profile patients, including President Trump.

"We don't make money on this," he said. "I give CMS credit, they acted fast, but the reimbursement needs to be higher. But we're a mission-based company and COVID is part of that mission. It's the right thing to do." **HME**

VIEMED

CONTINUED FROM PREVIOUS PAGE

new, it complements our mission of interacting more frequently with chronically ill patients across multiple disease states, even beyond respiratory illnesses," he said.

KUBAT PHARMACY MERGES WITH VITAL CARE PHARMACY

OMAHA, Neb. - Kubat Pharmacy has merged with Norfolk, Neb.-based Vital Care Pharmacy, according to local news reports. It's the second merger announced this month by Kubat, one of the largest independent pharmacies in Omaha. In addition to prescription drugs and compounding, Kubat offers home medical equipment, respiratory and mobility services. "Vital Care Pharmacy is a great partner with Kubat," Mitch Deines, vice

president of strategic business development at Kubat Health Care told the Norfolk Daily News. "This merger will benefit the residents of Northeast Nebraska already being served by Vital Care while offering some expanded services provided by Kubat." Vital Care will retain its name and current location. **HME**

"This merger will benefit the residents, while expanding services."

SLEEP CAUCUS

CONTINUED FROM PREVIOUS PAGE

perspective, but there's room for improvement. That's where we can use the caucus to drive patient-centered, value-based care and then address issues that are causing potential barriers.

HME: Why do so many Americans have trouble sleeping?

Ramar: I don't think people are looking at it as a priority. It's a lack of awareness and education. The average adult needs seven hours or more sleep to function well the next day. If people understood the importance of sleep as part of (their overall health), they would start looking into ways to prioritize it. **HME**

"If we look at it from the perspective of patient-centered care, there are a lot of hurdles."

COVID VACCINE WILL 'TAKE A VILLAGE'

CONTINUED FROM PREVIOUS PAGE

to chains like Walgreens and CVS, and health systems.

"It was highly efficient, but it took a village of volunteers," she said. "Student pharmacists played a critical role, (as did) the Office of Emergency Management, staff members and volunteers to help with logistics."

The U.S. Food and Drug Administration granted emergency approval to the first vaccine on Dec. 11 and the first shot was given Dec. 14.

Community Pharmacy of Springdale received its first shipment of the vaccine Jan. 5. Demand has been high in the small city of about 80,000, which has a large Hispanic and Pacific Islander population that has been hit hard by the pandemic, Hennessey says. To manage the influx of calls, the pharmacy has set up a dedicated voice mail to route vaccine-related ques-

ries and to allow staff to continue to manage routine business. It also plans to roll out a scheduling app.

"Our phones have been ringing off the hook, which is wonderful - it's a good thing that so many people want it," she said. "We're getting a lot of calls from patients and family members who want their mother or grandmother vaccinated."

Allowing community pharmacies to offer the COVID-19 vaccine is crucial to getting Americans vaccinated as quickly as possible, says Hennessey.

"People trust their independent community pharmacy," she said. "They come with all kinds of health care questions. This isn't independents vs. chains vs. hospitals. It's going to take every single one of us across all types of health care to provide this vaccine." **HME**

HME News



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Bariatrics: Steady revenue generator for providers

BY JOHN ANDREWS, Contributing Editor

DESPITE SOME disruptions caused by the COVID-19 pandemic, sales of bariatric products have remained steady during the past year, manufacturers say.

NAVIGATING DISRUPTIONS

The pandemic has impacted the supply chain for bariatric products in various ways, including limiting access to health care and long-term care facilities, restricting access to products and clinicians.

“COVID-19 has had an impact on all segments of the mobility industry, including the bariatric market,” said Jay Brislin, vice president of Exeter, Pa.-based Quantum Rehab. “With shutdowns, quarantines and decreased facility evaluation capacities, providers and clinicians had to adapt to new ways of seeing clients and delivering equipment. Mediums such as telehealth and video delivery setups have been crucial to get people the equipment they need.”

Manufacturers are also weathering the turbulence of lockdowns, social distancing and self-isolation, executives say, by leaning into increased demand.

CATEGORY

Bariatrics

STEADY DEMAND

■ **Weathering turbulence:** Despite supply chain disruption from COVID-19, the demand for bariatric products remains strong and steady.

STURDY CONSTRUCTION

■ **New & improved:** Manufacturers are focused on reinforcing bariatric versions of mobility products and upgrading the technology designed for them.

PRODUCT KNOWLEDGE

■ **Educate consumers:** Providers should work with manufacturers to teach consumers about how bariatric products can benefit them and foster independence.

“As a response to the pandemic, more patients are staying home rather than transitioning to the facility setting,” said Courtney Sankovich, director of marketing for post-acute and HME products, at Elyria, Ohio-based Invacare. “As a result, we are seeing growth for bariatric equip-

ment in the home setting – particularly through e-commerce platforms.”

On the power mobility side of Invacare’s bariatrics business, specifically, the company describes demand for bariatric products as “fairly steady and we have seen a similar trend for higher weight capacity products.”

LOOKING FOR QUALITY

High-quality and client-appropriate bariatric mobility products “continue to have a large demand throughout the industry,” Brislin said. As a result, Quantum is “highly focused on continued development of new and innovative products for this market segment, along with improving products in our current lineup.”

There are several products in the development pipeline, Brislin said, including a new Group 2 Standard Power HD selection and a new Group 2 Single Power HD product set to be launched in the second quarter of 2021. Quantum has also introduced new accessories and options for all its complex chairs “that allow clients to maximize their independence and increase overall functionality,” Brislin said.

EDUCATING CONSUMERS

At Old Forge, Pa.-based Golden Technologies, demand for bariatric products is “as strong as ever,” despite the pandemic, said C.J. Copley, executive vice president of sales and marketing.

“We see our retailers continuing to offer customer favorites in our long-standing line of extra-wide power lift recliners,” he said. “We’ve recently redesigned these models to add both comfort and value.”

To help HME providers educate consumers about bariatric equipment, Golden furnishes free marketing and merchandising kits, social media images and content, as well as webinars and personalized consultation on marketing the company’s line of products.

“Providers should continuously be looking for innovative products that will add to the quality of life of their customers,” Copley said. “We offer free sales and technical training both in-store and online so that our retailers have a team in place to educate patients on how a power lift recliner can help them recover from surgeries or get better rest or how a mobility aid can help them regain their independence.” **HME**

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Span-America Medical Systems, Inc.

ENCORE LOW BED

- 600-pound safe working load with ultra-low bed position.
- ReadyWide deck adjusts from 35 inches to 39 inches wide to 42 inches wide.
- Clinical position and safety features, including Smart Stop and Glide Align retractability.

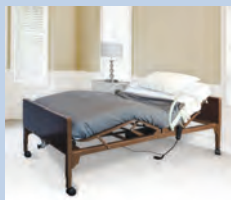


www.spanamerica.com

Stander

EZ CLICK LTC BED HANDLE (AVAILABLE SUMMER 2021)

- Overcomes all seven entrapment zones for bed rails.
- Attaches to most any adjustable, institutional bed.
- 500-pound weight capacity.



<https://stander.com/>

Invacare

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- Heavy-duty frame design ensures added strength for client support. Heavy-duty sleep surface is 17% larger than conventional beds.
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- Double-locking crossbrace and stabilizer bar minimize frame flex.



www.sunrisemedical.com

GF Health Products, Inc.

EVEREST & JENNINGS TRAVELER HD BARIATRIC WHEELCHAIR

- Available in 20-, 22- and 24-inch seat widths, with 18-inch seat depth.
- Durable carbon-steel reinforced frame; sturdy double-inner-lined upholstery.
- Meets Medicare code K0007; maximum weight capacity 500 pounds, evenly distributed.



www.grahamfield.com

PaceSaver by Leisure-Lift, Inc.

PACESAVER BOSS 6 TILT

- 300-pound to 675-pound weight capacity (with Medicare codes).
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www.pacesaver.com

Invacare

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- Low-maintenance, durable carbon steel frame.
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- Heavy-duty package option features 1000-pound weight capacity.

www.invacare.com



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www.smilebariatric.com



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Walkers

GF Health Products, Inc.

LUMEX RJ4405K WALKABOUT FOUR-WHEEL IMPERIAL ROLLATOR

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- Ergonomic handgrips, easy-to-operate locking brakes, and height-adjustable handles.
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Stander

EZ FOLD-N-GO ROLLATOR HD (AVAILABLE SUMMER 2021)

- Compact, portable bariatric rollator.
- EZ Fold technology allows it to fold in two directions for easier travel and portability.
- 500-pound weight capacity.

<https://stander.com/>



Invacare

BARIATRIC ROLLATOR

- Durable steel construction with wide, deep frame.
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Cushions

Matrix Seating USA

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- New patent pending auxetic foam does not lose its shape.
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- Accommodates up to 500 pounds in widths from 22 inches to 26 inches.
- TH 2-point or FS 4-point hardware available; 2.2 inches of deep contour.
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GF Health Products, Inc.

GRAFCO 1823

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- No latex.
- Foam cushion, washable cover.

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Invacare

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- Powered electric lift (height/base) with 600-pound capacity.
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- Base legs adjust easily and lock securely into open position with the padded handle.

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Chair

Golden Technologies

COMFORTER

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www.goldentech.com



Next month

IN OUR MARCH ISSUE, WE WILL FEATURE COMPLEX REHAB TECHNOLOGY. Product categories include: power wheelchairs, manual wheelchairs, standing wheelchairs, seating systems, positioning systems, seat/back cushions, drive controls and accessories. For a submission form, please email tfaherty@hmenews.com

HME News

Our New Website is here!

HME News is thrilled to announce the launch of our new website. Not only is it visually appealing with fresh graphics, it's mobile and user friendly with optimal search functionality as well.

The site is also interactive. Users can create a web account to comment on the content. We love hearing from our readers.



Check it out and create your own web account today:
www.hmenews.com



DOUG FRANCIS IS BACK

Lifestyle Mobility Aids expands, bets on HME provider channel

BY LIZ BEAULIEU, Editor

ST. PETERSBURGH, Fla. - Lifestyle Mobility Aids is expanding its footprint beyond Florida and its product portfolio beyond mobility aids with long-time industry exec Doug Francis as its new leader.

The company recently opened a 40,000-square-foot distribution center in Memphis, Tenn., and launched a portable oxygen concentrator



Doug Francis

in December. "Memphis opens up distribution to a big piece of the country," said Francis, president and CEO. "We can service about 80% of the country in two to three days from there."

Francis was formerly a principal and co-founder of Drive

DeVilbiss Healthcare. He left the company in 2018, took a few years off, formed Rhythm Healthcare and then merged it with Lifestyle Mobility Aids.

The POC is the first of a family of products that Lifestyle Mobility Aids will launch in the COPD disease management space. Up next: a 5-liter stationary oxygen concentrator in February and a range of aerosol therapy devices in the first quarter, Francis says.

"We're expanding into more clinically complex areas," he said.

Lifestyle Mobility Aids has also "recalibrated" its existing product portfolio, expanding its range of rollators and updating its range of wheelchairs, Francis says.

"We wanted the portfolio to be less retail focused, and more applicable to Medicare and reimbursement," he said.

LIFESTYLE SEE NEXT PAGE

VGM Insurance prioritizes automation

Longer term, company also targets expansion beyond business products

BY LIZ BEAULIEU, Editor

MIKE KLOOS knows VGM Insurance Services, which recently celebrated 30 years in business, is still considered the new kid on the block - and that's not a bad thing. Here's what Kloos, president, had to say about how that helps VGM Insurance stay "nimble," something that's harder to do for the larger and more established insurance providers.

HME NEWS: How do you see VGM Insurance's position in the market?

Mike Kloos: The future is about being able to bring new ideas and products to market at a much faster pace. For a Hartford or a Travelers, that's hard. Also, when you're talking about home health care, specifically, it's hard for

INSURANCE SEE NEXT PAGE



Guardia Medical donates PPE

Guardia Medical, a manufacturer of PPE, donated 100,000 face masks to charities and foodbanks, including 36,000 to the Boys & Girls Club of America. As many states go into further lockdowns, Guardia Medical is prepared with sufficient inventory to help companies get back to work when businesses reopen, it says. "The U.S. economy has taken a mighty blow over the last eight months and our goal is to help it get back on its feet," said David Lowe, director of marketing. "We are here to protect you, your family, your employees and customers, so we can beat COVID-19 and get back to normal fast."

OxyGEN 'super powers' POCs

BY LIZ BEAULIEU, Editor

BALTIMORE - The founders of OxyGEN will use their most recent prize money to turn their prototype portable oxygen concentrator into an actual product.

Jessica Dakkak, Jonathan Smith and Wilson Tang were recently named the winners of an Innovation Challenge hosted by Three Lakes Foundation and MATTER for their POC combining high-flow ambient air with pulses of concentrated oxygen to provide more efficient therapy.

"We're not trying to produce more oxygen," said Smith, "we're trying to make the oxygen (that the POC) produces



J. Dakkak



J. Smith



Wilson Tang

go further. We're blasting it with additional air, instead of oxygen, super powering the oxygen that's already being produced."

Three Lakes Foundation, a nonprofit that works to unite researchers, industries and philanthropy to advance the treatment of pulmonary fibrosis, and MATTER, an incubator hub of more than 200 start-

ups around the world, selected OxyGEN and two other winners following a "Shark Tank" style pitch presentation via Zoom.

Dakkak, Smith and Tang first began their work on the POC while master's students in bioengineering at Johns Hopkins University, where part of their program was finding an "unmet" need and meeting it. They were given pulmonary therapy as a topic to explore.

"Out of everything (we looked at), we found that

OXYGEN SEE NEXT PAGE

BRIEFS

VGM acquires Redstone Content Solutions

WATERLOO, Iowa - VGM Group has acquired Redstone Content Solutions, a provider of enterprise content management solutions to small and medium-size businesses, and mid-market and enterprise companies. The deal will allow VGM to assist clients in capitalizing on major ECM growth factors: the increasing need to securely organize, categorize and structure all corporate content in a meaningful, easily explorable manner; and the rising demand of companies to deliver personalized content. Founded in 2009, Redstone represents leading software providers like Oracle and DocuSign. The company will continue to operate under its own name and VGM will retain all current employees.

F&P Healthcare wins 'people's choice' award

AUCKLAND, New Zealand - Fisher & Paykel Healthcare was honored to win a Zenith Award from the American Association for Respiratory Care for the sixth year in a row. The Zenith Awards are considered the "people's choice" awards of the respiratory care profession, because its recipients are chosen by more than 47,000 respiratory therapists. "We'd like to thank the thousands of respiratory care professionals who are caring for patients during the COVID-19 pandemic this year," said Justin Callahan, president of North America Operations. "The work of respiratory therapists has never been more critical or more challenging, and we are delighted to be recognized again this year for providing them with education and support." Criteria for the award include quality of equipment, supplies or services; accessibility and helpfulness of sales personnel; responsiveness; service record; truth in advertising; and support of the respiratory care profession.

McKesson tapped to distribute Moderna vaccine

IRVING, Texas - McKesson has been distributing Moderna's COVID-19 vaccine and the ancillary supply kits needed to administer it as part of Operation Warp Speed and under the direction of the Centers for Disease Control and Prevention. The company undertook months of preparation for the distribution, including establishing dedicated centers and assembling the kits. McKesson has partnered with FedEx and UPS to deliver the vaccines and ancillary supply kits throughout the country. The company is not distributing the Pfizer ultra-frozen vaccine.

People news: Raj Sodhi, Doug Harper

Tandem Diabetes Care has named **Raj Sodhi**, president of the software as a service (SaaS) business at ResMed, as an independent member of its board of directors. Sodhi joined ResMed in 2012 through the company's acquisition of Umbian, where he was co-founder and president...**Doug Harper** has joined the board of directors of ABM Respiratory Care, a medical device company focused on developing integrated clearance and ventilation systems.

New year, new focus on Avid Rehab for Merits

BY LIZ BEAULIEU, Editor

FORT MYERS, Fla. - Mike Laiman is the new president of Merits USA and all of its brands but his focus out of the gate will be Avid Rehab.

Laiman says Avid Rehab will improve the seating for its Vector and Velocity complex rehab power wheelchairs and launch new Group 3 wheelchairs in 2021, not to mention more components and accessories "that feed into that product line."

"There will be a focus on high-end rehab," he said. "We want to provide another solution to the industry, with products that will have not only function

but also form. These will be good-looking products."

Merits, which launched Avid Rehab in 2015, also has two other brands: Precision Comfort for seat backs and cushions, and Pilot for home access products like stairlifts.

Laiman has a long history in manufacturing, not only in the HME industry (he worked as senior vice president of operations for Pride Mobility for six years) but also in the automotive and aerospace industries. That latter experience, in particular, will help him elevate Avid Rehab's name in the complex rehab market, he says.

"I think we can bring discipline to the market," he said. "I think we can provide a quality product that works great, looks good and offers a value proposition."

The challenge for Avid Rehab – and any manufacturer of highly technical and very hands-on products, for that matter – is the COVID-19 pandemic, which has eliminated trade shows and limited demos with HME providers and clinicians, Laiman says.

"We're doing a lot of Teams and Skype



Mike Laiman

calls," he said. "We're also partnering with several providers to participate in their seminars and training. But nothing beats that touch and feel, so we're proceeding in designing and rolling out new products, and when the time comes, we'll be ready."

Laiman came out of retirement to accept the role at Merits, driven by the desire to "improve the quality of life and make things more convenient" for wheelchair users, he says.

"It's a great industry to be in, and it's a great company to get back into it with," he said. "I look forward to working with the team here to take this organization to new heights." **HME**

LIFESTYLE

CONTINUED FROM PREVIOUS PAGE

What really sets apart Lifestyle Mobility Aids from its competitors, however, is the company's commitment to HME providers, Francis says. The company won't sell direct to consumer or to big-box retailers, opting instead to focus on developing programs to help providers with their revenue growth, cash flow and other parts of their business.

"We're drawing a line in the sand about who our customer is – the provider," he said. "There is big business to be had with Amazon and Walmart, but that's not our customer. We're going to align with and build programs for the provider."

Francis believes HME providers can beat an Amazon or a Walmart on most days – if they reframe how they see themselves.

"We've been transactional; we've been willing to deliver the prescriptions," he said. "But we haven't thought to capturing everything else. There's still big opportunity for growth if we get this right and capture the opportunity in its entirety." **HME**

COMPLEX REHAB

CONTINUED FROM PAGE 1

next year."

NCART, working with APTA, AOTA and other organizations, submitted comments to the task force by a Jan. 4 deadline.

In the meantime, the Clinician Task Force is also working on a resource called the "CRT Telehealth Clinical Guideline" with practical tips and considerations to prepare for successful remote visits during the pandemic.

"We've all learned some lessons," said Cathy Carver. "There will be guidance on the various aspects of the assessment, but how to do those through telehealth technologies – how to capture objective measures about activity and participation, how to measure body functions and structures, and how to ask the right questions to get the information you need on previous equipment."

Of another top priority for 2021 – permanently exempting accessories for complex rehab manual wheelchairs from competitive bidding pricing – Clayback said, "July 1 will be here before we know it." That's when a temporary pause on the pricing expires.

"Our goal is to get this resolved between now and March," he said. "Then we'll have everything in place by the end of March, well advance of the due date." **HME**

INSURANCE

CONTINUED FROM PREVIOUS PAGE

them to understand the nuances and we do.

HME: Speaking of the future, what does VGM Insurance have in the pipeline?

Kloos: Commercial insurance is still shopped for primarily through agents and one-on-one interactions. The future is taking more of a path like homeowners and auto insurance –



Mike Kloos

it's more of a digital experience. So we're taking a big plunge into that in 2021 by digitizing all of our interactions with the customer, whether that be applications or policy insurance or claims processing.

HME: What about longer term?

Kloos: We also believe we can bring our customers not only business insurance products but also other types of insurance products, like health insurance and 401K. That's on the futuristic drawing board.

HME: VGM has a reputation for good customer service – how do you balance that with increased automation?

Kloos: We always want to maintain the customer experience, but we also want to add digital tools to the toolbox. We will give our customers the ability to do things digitally if they choose to, but we will also service them in the same way we have in the past.

HME: The bulk of your customers are still HME companies, but VGM Insurance has expanded into other markets, particularly in the past five years. Why expand in that way?

Kloos: What we saw is HME companies expanding into things like pharmacy or home health or even physical therapy. We think that having multiple health care services under one company is the wave of the future, so we needed to be able to offer products in those other markets.

HME: What new markets are you looking into next?

Kloos: We're looking into expanding into telemedicine. We believe that's something that will be here to stay – the pandemic has proven that. **HME**

OXYGEN

CONTINUED FROM PREVIOUS PAGE

oxygen therapy was a huge unmet need, specifically portable oxygen equipment," Dakkak said. "We were quick to find how limited the equipment can be in terms of mobility and quality of life."



Through their affiliation with Johns Hopkins, the team surveyed more than 900 patients on oxygen and let that feedback drive the development of their POC. They also attended Medtrade in-person last year and virtually this year.

"We've also taken (POCs) apart to see how they work and how we could potentially improve the components," Dakkak said.

The POC the team came up with also tracks, monitors and automatically adjusts the oxygen level for each patient in real-time.

"We're bringing in a more personalized treatment component," Dakkak said.

With their POC still a prototype, the team still has a long road ahead of it and, in addition to the prize money, will lean on Three Lakes and MATTER for mentorship and connections.

"We'll help them every step of the way to make sure they succeed as quickly as possible," said Steven Collens, CEO of MATTER. "There's an urgency around these solutions – people are depending on these advances to improve their lives."

For Three Lakes Foundation, the awareness that the Challenge and companies like OxyGEN help to raise about pulmonary fibrosis is also important work.

"Especially with an unknown disease, the Challenge provides an opportunity to put a spotlight on the disease," said Dana Ball, executive director. "It's as much about awareness. We're encouraging (people) to lean in, get involved and learn more." **HME**

RESMED POC

CONTINUED FROM PAGE 1

other chronic diseases," said Jayme Rubenstein, a public relations director at ResMed.

ResMed introduced its Mobi POC in 2018 – the result of a collaboration between the company and Austin, Texas-based Inova Labs, which it acquired in 2016 – and made it widely available in the U.S. in early 2019.

ResMed's exit was also due to "the results of our direct-to-consumer trial efforts," Rubenstein said. The company launched a pilot program in 2019 to sell its POCs under the name Oxyensure directly to cash-paying customers.

ResMed notified providers by letter of its exit and stopped selling POCs after Nov. 19. The company will continue to service POCs through Nov. 30, 2025, according to Rubenstein.

ResMed still has a large stake in the home oxygen therapy market, however, with two non-invasive ventilators, the AirCurveo and Stella, and a non-invasive life support platform, the Astral. It also owns Propeller Health, a company that provides connected health solutions for people living with COPD and asthma.

"ResMed continues to be a leader in COPD and other respiratory care solutions," Rubenstein said.

Providers blame a saturated market for POCs, with little in the way of differentiation between devices, for ResMed's exit.

"All the manufacturers have basically maxed out the existing technology," said Woody O'Neal, vice president of O2 Neal Medical in Alabama. "Until there is a breakthrough in battery technology or sieve material, any manufacturer that enters the POC space has to have a very reliable offering and market it heavily."

There's also the issue of the generally slow adoption of POCs by providers who have too much capital tied up in more traditional modalities of oxygen therapy. Medicare spending on E1392 has grown only gradually over the past five years: \$39.9 million 2019, \$33.8 million in 2018, \$26.5 million in 2017 and \$25.4 million in 2016, according to the HME Databank.

"What do you say to the provider with 500 tanks in their warehouse?" said Todd Usher, co-founder of Home Oxygen Co. in California. "We started with POCs from the ground up – they're really a startup model." **HME**

3B Medical, Inc.**3B Lumin Wand**

With the pandemic and a new awareness on the need to sanitize surfaces, 3B Medical is proud to announce an addition to the Lumin family of disinfection products: the Lumin Wand. Avoid the UV wands on the market that are cheaply made and too weakly powered to be effective. 3B developed a high powered UV wand safety engineered and lab tested that's designed to keep work surfaces and household products sanitized and free from harmful germs.

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It's just another reason Zoey CPAP Cleaner is easy to love: Zoey lets patients choose. Zoey now cleans the mask, tube and machine, or just the mask and tube. Zoey's sleek aesthetic and quiet operation fit in with the living space. It's even smaller by volume than the leading CPAP cleaner. Zoey is sold exclusively through providers, with premium packaging that looks great for retail.

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**Therafirm, a division of Knit-Rite, Inc.****Core-Spun by Therafirm Moderate Compression Socks in Pink Argyle**

Core-Spun by Therafirm Pink Argyle Moderate Compression socks feature ultra-stretchy fibers that ensure these socks are easier to put on and more comfortable to wear. High-tech CoolMax or X-STATIC yarns wick away moisture, creating a drier and more hygienic sock environment. Other comfort features include a reinforced heel and toe, and a non-restrictive top, which still stays in place all day. Pink Argyle is also available in mild compression.

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**GF Health Products, Inc.****John Bunn JB02020 Finger Pulse Oximeter**

The John Bunn JB02020 Finger Pulse Oximeter's lightweight, compact design makes it an ideal solution for home, clinical and EMS settings. This pocket-sized solution provides fast and accurate SpO2, pulse rate and Perfusion Index measurements, shown on a large, easy-to-read LED digital display. It provides SpO2 and pulse rate alarms with a simple, one-button operation. The automatic power-off function conserves batteries, and it accommodates a wide range of finger sizes, from pediatric to adult.

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ResMed**ResMed AirTouch N20**

While most CPAP masks have silicone cushions, ResMed's AirTouch N20 features a patented UltraSoft memory foam cushion, making it uniquely comfortable. The company's softest nasal mask is designed to adapt to the contours of the face for a personalized fit, while also helping prevent skin irritation, soreness and red marks around the nose.

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This is a new addition to our line of CPAP mask liners. The trouble with nasal pillow masks is that they often cause uncomfortable pressure against the skin. Our covers attach with Velcro and provide a double layer of fabric to make it easier for a person to sleep more comfortably and stay on therapy. The covers might also help muffle any air leaks.

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**Inogen, Inc.****Inogen TAV, Tidal Assist Ventilator**

The Inogen TAV is an advanced respiratory assist device that can help reduce breathlessness and increase exercise endurance for oxygen patients. With three therapy mode settings - pulse, tidal assist and constant - and five levels of flow for each setting, the powerful and ultra-lightweight Inogen TAV comfortably provides higher oxygen flow and pressure to provide twice the average exercise endurance. The Inogen TAV is affordable and compatible with recommended oxygen concentrators and cylinders.

WWW.INOGEN.COM

**REIMBURSEMENT REMAINS A PROBLEM**

CONTINUED FROM PAGE 3

"Stable DME rates?" wrote one respondent. "The rates may be 'stable,' but the industry certainly isn't stable. The non-rural rates will slowly kill small dealers like us."

Fifty-seven percent of respondents, however, say they do plan to make investments in their businesses in 2021, with the focus for the majority of them on new products and services (32%), including home access and modifications and non-

invasive ventilators.

"We will be ordering more equipment that we sell or rent every day, but we will also be adding new lines to expand our offerings," wrote Dorothy Nowik of Pacific Medical Systems in Bellevue, Wash. "When we can reopen our lobby, we will be ready with new items to offer."

Other areas of focus for new investments, according to respondents: hiring (23%) and technology (23%). **HME**

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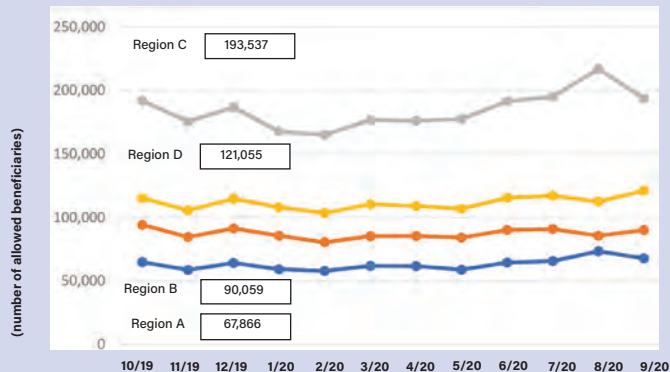
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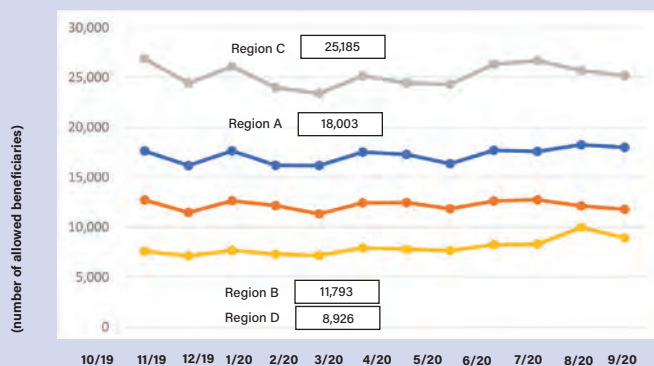
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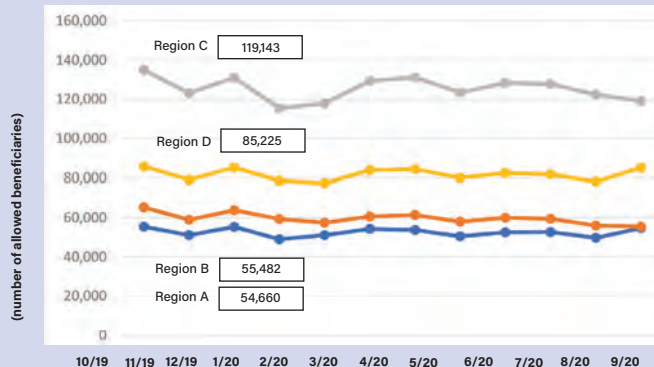
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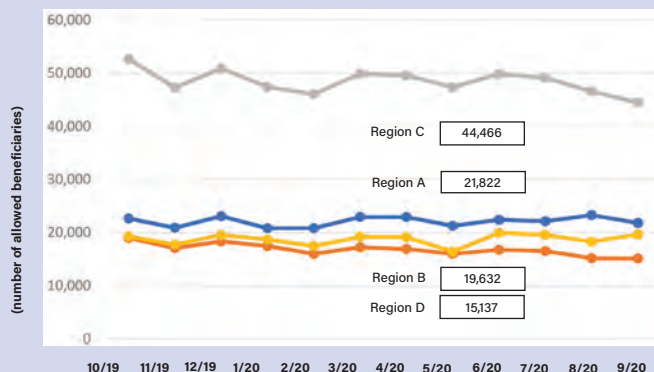
E0260: SEMI-ELECTRIC HOSPITAL BED



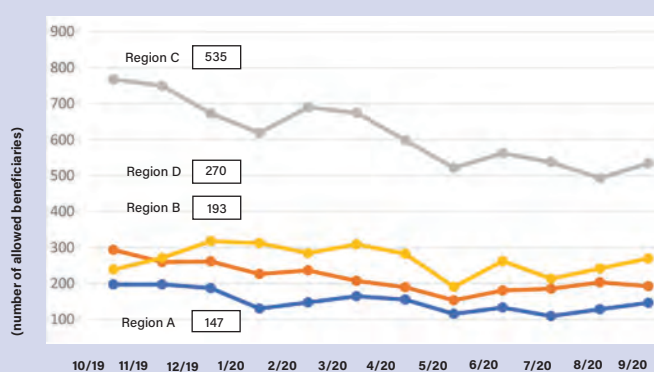
E0601: CPAP



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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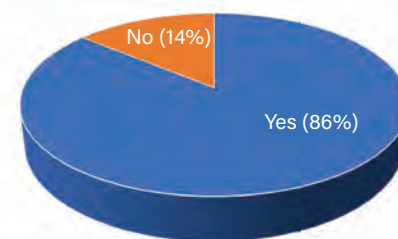
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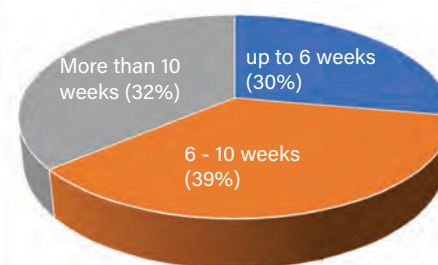
"We have had to source equipment and supplies from so many vendors as supply and demand is so high. Not just for oxygen. The pandemic has affected all product lines."
—Rhonda Martin, Ascension Via Kristi Home Medical

"We started stocking up early and have kept more than 100 over our normal stock. Sometimes there are delays in receiving them with back orders."
—Michael Tracy, Aspirus Home Medical Equipment.

Are you running low on oxygen concentrators?



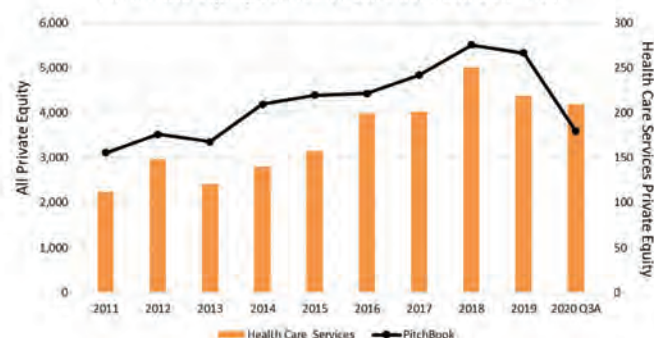
What are the wait times you're seeing?



Newspoll based on 76 respondents.

The Braff Group M&A Insider

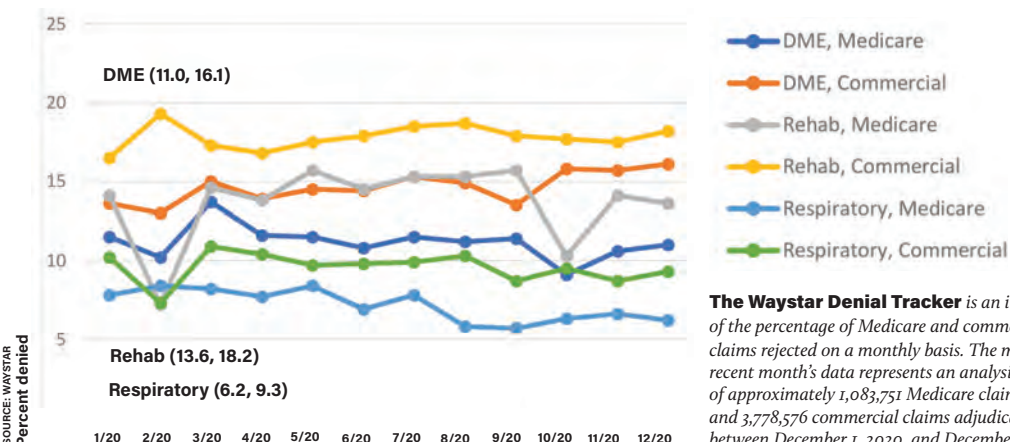
All Private Equity vs. Health Care Services Deal Flow



This month, in the wake of the COVID-19 pandemic, we examine how all private equity sponsored deal flow compares to health care services specifically. The results are not surprising. For many years, we have pointed out that in down markets, due to its inelasticity of demand, health care services M&A tends to out-perform the broad markets. And in this most unusual year, based upon annualized results through the third quarter of 2020, this axiom has held true. While broad market PE transaction volume is down a breathtaking 32.7%, health care services sponsor activity is down a far more modest 4.6%. While we expect fourth quarter numbers to reduce these fall-offs, the gap in performance will almost assuredly remain substantial. That said, in the coming year we anticipate meaningful increases in deal flow both broadly and in health care services. But having fallen more in 2020, the increase in all PE transaction volume will likely outpace that of health care.

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 1,083,751 Medicare claims and 3,778,576 commercial claims adjudicated between December 1, 2020, and December 31, 2020. The index is a categorized and weighted analysis of claims filed by Waystar customers.

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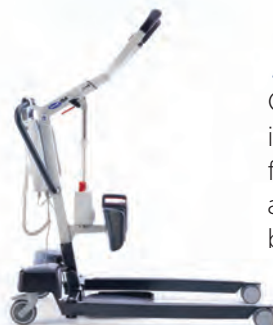
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