



■ Jamie Loper advises providers on how not to be a sitting duck. **See page 9.**



■ **Product Spotlight:**
This month we feature sleep therapy products, like this Aspen Full Face CPAP Mask from InnoMed Technologies. **See page 23.**



■ Have you ever attempted to get a claim that was denied for technical reasons overturned? **See results on page 27.**

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CMS relents on technical errors

Of denied claims submitted for reopening, 70% were overturned, stakeholders say

BY LIZ BEAULIEU, Editor

WASHINGTON — HME industry stakeholders are seeing their first real sign of relief in the fight against audits.

As a result of discussions with the Jurisdiction D DME Advisory Council (DAC), CMS has reminded its contractors that their “scope of services” includes reopening cases where claims



Peggy Walker

have been denied due to technical reasons. That has opened the door for council members Peggy Walker and Mary Stoner to get more than 70% of the denied claims they submitted for reopening overturned.

“This is huge,” said Walker, a billing and reimbursement advisor for The VGM

TECHNICAL SEE PAGE 26



Ready for a fight

Two hundred mobility stakeholders gathered in Washington, D.C., for the National CRT Advocacy & Leadership Conference in April. Part of their mission: to educate lawmakers on the need for a separate benefit for complex rehab. See story page 17.

ROTECH CEO TALKS STRATEGY ‘We weren’t working fast enough’

BY THERESA FLAHERTY, Managing Editor

ORLANDO, Fla. — Rotech Healthcare is speeding up turnaround plans, with a new CEO and some “aggressive goals.”

“We determined we weren’t working fast enough to make necessary changes to position ourselves to the new realities of our industry—now and in the future,” said Tim Pigg, CEO. “The Rotech management team has established some aggressive and difficult financial goals.”

Pigg, who took over the reins from Steve Alsene in January, is a 30-year veteran at Rotech. The company emerged from Chapter 11 bankruptcy in September under a reorganization plan that reduced its debt by \$300 million.

At the top of Rotech’s to-do list: dropping product lines where it’s a minor player. That includes enteral nutrition, though the provider stresses it continues to honor existing contracts.

“We want to simplify our busi-

ness so we can shift more of our resources into assuring that we do things right and more efficiently for our core respiratory and DME patient-related products and services,” said Pigg. “We have substantially reduced the non-core, redundant products and services we previously offered.”

Rotech accepted nearly 200 contracts—mainly for oxygen and CPAP—in Round 2 of competitive bidding. With an average

ROTECH SEE PAGE 14

‘Sleep is the glue’

New sleep exec believes silos need to be taken out of health care

BY THERESA FLAHERTY, Managing Editor

THERE’S NO magic pill for sleep apnea, but education, research and patient empowerment go a long way toward improving quality of life, says Adam Amdur, who was recently named COO of the American Sleep Apnea Association (ASAA). Amdur, a sleep apnea patient himself, recently spoke to HME News about why the nearly 25-year-old association is making itself more patient-oriented and participating in a new research endeavor, myapnea.org.

HME NEWS: One big change for the ASAA is that it is working with the Patient Centered Research Outcomes Institute (PCORI). What’s

GLUE SEE PAGE 21

ACU-Serve grows with right sourcing

BY LIZ BEAULIEU, Editor

CUYAHOGA FALLS, Ohio — ACU-Serve has responded to rampant consolidation in the HME industry by revamping its business model.

When a provider signs on to have its billing outsourced to ACU-Serve, the company now

offers to take over its billing staff, train them and put them to work on that and other accounts. This positions ACU-Serve to better meet the needs of increasingly larger providers.

“Doing it this way



Jim Knight

allows us to have the people we need when we need them,” said Jim Knight, CEO. “It solves the people problem, so we can grow faster.”

Traditionally, when a provider decides to

ACU-SERVE SEE PAGE 25