



■ Don't let the delay hold you back: Start transitioning to ICD-10 codes now, says Angela Miller. **See page 11.**



■ **Product Spotlight:**
This month we feature billing systems and services, like Brightree Billing & Business Management. **See page 24.**



■ Have you had to cut back your services in the last year due to lower reimbursement? **See results on page 27.**

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■ Create a business diversification plan that allows you to look at growth opportunities to assure viability over the long haul, says Jim Dehler. Those opportunities include home mods. **PAGE 11**

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Industry pushes forward despite disappointing vote

Good news: ICD-10 will be delayed for at least one year

BY THERESA FLAHERTY, Managing Editor

WASHINGTON – In a setback for the HME industry, both the House of Representatives and the Senate in March passed “doc-fix” bills that contain no amendments to fix the competitive bidding program.

“Am I frustrated? Absolutely,” said Tom Ryan, AAHomecare president and CEO. “But I remain confident that the sup-



Tom Ryan

port we’ve ginned up over the past several months (will continue).”

The temporary fix prevents a 24% cut in Medicare payments to physicians for one year.

The bills did have one positive element: a provision to delay the transition to ICD-10 for at least one year, until

Oct. 1, 2015.

“That’s a reprieve for providers,” Ryan said.

If it’s any consolation, plenty of lawmakers and other groups are unhappy with the “doc fix” bill because it’s not a permanent fix, say stakeholders. That could mean the industry has another opportunity to get language included in another bill, they say.

“There are discussions about

BID FIX SEE PAGE 4

As pain spreads, services get cut

BY THERESA FLAHERTY, Managing Editor

WHILE REPORTS of the large nationals cutting back on services tend to vex HME providers, a recent story about Rotech Healthcare was received more pragmatically.

A local TV station in West Virginia recently reported that Rotech has stopped delivering oxygen in that state except for emergencies and first time set-ups. In comments to HME News, Rotech said the newscast con-

tained numerous inaccuracies.

“This does not clearly represent the current situation at this location for our patients,” stated Steven Burres, assistant general counsel for Rotech. “Rotech values its relationships with its patients and does not condone false reports being broadcast or published about the company.”

Regardless of the specifics, with the downward pressure on reimbursement and the increased costs of doing business, the whole

SERVICES SEE PAGE 16

Inogen’s earnings wow

BY LIZ BEAULIEU, Editor

GOLETA, Calif. – The impact of competitive bidding is “pretty much behind us,” Inogen President and CEO Raymond Huggenberger said during the company’s first-ever earnings call on March 27.

Inogen, which completed an initial public offering in Febru-

ary, reported total revenues of \$19.8 million for the fourth quarter ended Dec. 31, 2013, a 43% increase over the same period in 2012. It reported net income of \$20.1 million, including a one-time tax asset benefit attributable to common stockholders, vs. a net loss of \$1.6 million. Gross margin

INOGEN SEE PAGE 26

Save My Medical Supplies

powered by
American Association
for Homecare

AAHOMECARE ON APRIL 1 KICKED OFF a new digital consumer advocacy campaign to allow it to tap into a new outlet of support. “Consumers are our best advocates,” says Tom Ryan. **See story page 3.**

CAPPED-RENTAL

LAW OF THE LAND

Complex rehab just became more complex

BY LEAH HOENEN, Associate Editor

WASHINGTON – Although providers hoped to hear “April Fools,” the rule transitioning certain complex rehab items to capped-rental status went into effect April 1 as planned.

“This change in regulation is so ridiculous, and the basis behind it is so ridiculous, that my Pollyanna personality made me believe we were really going to get a delay or have the whole thing retracted,” said Doug Westerdahl, president of Monroe Wheelchair.



D. Westerdahl

Stakeholders and lawmakers called on CMS to delay implementation of the rule re-classifying 78 codes, including tilt-in-space manual wheelchairs,

pediatric manual wheelchairs and manual wheelchairs with power assist, as capped-rental items.

Industry leaders will now work with the lawmakers behind their bill to create a separate benefit for complex rehab to add an amendment making all complex rehab items available as a purchase or with a purchase option.

“The complexity this adds to what I’d call a very, very delicate situation is uncalled for,” said Bruce Bayes, president and CEO of Custom Mobility. “There’s no way a provider can provide, on a rental basis, what is needed on a permanent basis.”

With the rule in effect, numerous real-life implications are starting to take shape. Should a patient be hospitalized, for example, the provider must

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