

HomeCare[®]

THE LEADING BUSINESS RESOURCE FOR HME & HOME HEALTH PROFESSIONALS
HOMECAREMAG.COM

OCTOBER 2022

FINDING A NEW FOCUS

Creating a low-vision program can keep those with low vision home safe & grow your business

Plus, a look at voice assistants & other advances in aging in place

HME
Partnering with private equity

IHC
Overcoming prior authorization

*The
Medtrade
East
Issue!*

TCT is an amazing accreditation company to work with. Staff is incredibly supportive and responsive . . . a pleasure to work with. I would highly recommend TCT as they assist and make sure we DME providers succeed and thrive at patient care.

— AWAYK Health, Inc.

We are very pleased to have chosen TCT to be our accreditation organization . . . highly recommend for any company looking to become accredited for the first time or thinking about transitioning from another accreditation organization.

— StarPlus DME

What our DME Exemplary Providers® are saying about us.

This company has been fantastic to work with! Very professional, responsive, and helpful in navigating the accreditation process. Highly recommend!

— Anne H.

I have worked with The Compliance Team for nearly a decade. TCT treats clients like partners with the shared goal of better patient care. Incredibly helpful and available to answer my questions. I would definitely recommend them. — Chris H.

We changed the way they think about accreditation.

In 1998, The Compliance Team™ became the first national healthcare evaluation firm to employ concise, plain language, patient-centric, point-of-contact, quality measures in a dramatically simplified, yet uniquely comprehensive, accreditation process.

Our Exemplary Provider® programs have since earned national acclaim and Medicare's formal approval as a DMEPOS accreditation choice. Common-sense measures, combined with our simplified implementation process, work to the benefit of all — patients, providers, and payers.

The Compliance Team[™]
Accreditation Organization

215-654-9110
TheComplianceTeam.org

Check 110 on index.



ECLIPSE 5® TRANSPORTABLE OXYGEN YOUR HOSPITAL DISCHARGE SOLUTION

- Quick and efficient discharge process
- Improve route planning and servicing of rural areas
- Encourage patient compliance upon discharge
- Collaborate with referrals on patient care

Connect with us at Medtrade East or visit
www.caireinc.com/providers to learn more.


CAIRE®
O₂ is what we do.



SEE PRODUCT WARRANTY STATEMENT FOR COMPLETE INFORMATION. Please consult the applicable product instructions for use for product indications, contraindications, warnings, precautions, and detailed safety information.
© Copyright 2022 CAIRE Inc. All Rights Reserved.

Check 104 on index.

Dear HomeCare Readers,

A dear friend recently had cataract surgery and was blown away by the improvement in his vision after he healed. But in the short time he was in recovery, he was also struck by how hard it was to get around the house. We've written a lot about preventing falls and protecting seniors so they can age in place, but this month I was fascinated to learn about what can be done to help the rapidly growing population of people with impaired or low vision live safely at home—and how that can help your brand bring in business. It's our cover story this month, along with other angles on the fast-changing world of aging in place.



I am looking forward to learning a lot more about that topic and many others this month at Medtrade East. This is the final fall meeting in Atlanta before the show shifts to a single session in Dallas in 2023, and we're looking forward to seeing you all there and to sponsoring both the New Product Pavilion and the bar at the Stand Up for Homecare event. You'll find me there (yes, I did just say meet me at the bar!) or at Booth 425. At the same time, Managing Editor Kristin Easterling will be heading to St. Louis to attend the 2022 Home Care & Hospice Expo (find her at Booth 543). We're both looking forward to connecting with as many readers as possible at these shows.

Also inside this issue are helpful dives into protecting your brand identity, collecting and sharing better data, partnering with private equity, improving payer relations, onboarding employees, automating prior authorization, optimizing personal emergency response systems and much, much more. We hope you enjoy.

Thank you for reading!

Hannah Wolfson

BE HEARD

We want to know what you think and how we can serve you better.

Send your comments and feedback to Managing Editor Kristin Easterling at keasterling@cahabamedia.com. We'd love to hear from you!

HomeCare® (ISSN# 0882-2700) is published monthly by the Cahaba Media Group, 1900 28th Avenue S., Suite 200, Birmingham, AL 35209. Periodicals postage paid at Birmingham, AL, and additional mailing offices. **SUBSCRIPTIONS:** Free of charge to qualified HME and home health workers. Publisher reserves the right to determine qualifications. **Annual subscriptions:** U.S. and possessions \$48, all other countries \$125 U.S. funds (via air mail). Single copies: U.S. and possessions \$5, all other countries \$15 U.S. funds (via air mail). Call 205-278-2840 inside or outside the U.S. **POSTMASTER:** Send changes of address and form 3579 to HomeCare Magazine, Subscription Dept., P.O. Box 530067, Birmingham, AL 35253. ©2022 Cahaba Media Group, Inc. No part of this publication may be reproduced without the written consent of the publisher. The publisher does not warrant, either expressly or by implication, the factual accuracy of any advertisements, articles or descriptions herein, nor does the publisher warrant the validity of any views or opinions offered by the authors of said articles or descriptions. The opinions expressed are those of the individual authors, and do not necessarily represent the opinions of Cahaba Media Group. Cahaba Media Group makes no representation or warranties regarding the accuracy or appropriateness of the advice or any advertisements contained in this magazine. **SUBMISSIONS:** We welcome submissions. Unless otherwise negotiated in writing by the editors, by sending us your submission, you grant Cahaba Media Group, Inc., permission by an irrevocable license (with the right to license to third parties) to edit, reproduce, distribute, publish, and adapt your submission in any medium on multiple occasions. You are free to publish your submission yourself or to allow others to republish your submission. Submissions will not be returned. VOLUME 44 NUMBER 10



EDITORIAL

Editor

Hannah Wolfson | (205) 278-2825
hwolfson@cahabamedia.com

Managing Editor

Kristin Easterling | (205) 314-8267
keasterling@cahabamedia.com

CREATIVE SERVICES

Art Director

Jessi Tygielski

Digital Project Manager

Greg Ragsdale

Web Developer

Greg Caudle

CIRCULATION

Subscription Changes & Inquiries

homecaremag@omeda.com | (800) 256-2785

ADVERTISING

Associate Publisher

Jim Harmon | (205) 933-0333
jharmon@cahabamedia.com

Sales Development Representative

Jill Kuerner | (205) 961-3378
jkuerner@cahabamedia.com

Client Services Coordinator

Kimberly Holmes
kholmes@cahabamedia.com

EDITORIAL ADVISORY BOARD

Cara Bachenheimer

Chair, Government Affairs Practice
Brown & Fortunato, P.C.

Jeffrey S. Baird

Chairman, Health Care Group, Brown & Fortunato, P.C.

Mary Ellen Conway

Chief Compliance Officer, US Med

Louis Feuer

President, Dynamic Seminars & Consulting

Jim Grestorex

Vice President, VGM Live at Home

Mike Hamilton

Executive Director, Alabama Durable Medical
Equipment Association

Sarah Hanna

VP of Consulting Services, ACU-Serve Corp.

Seth Johnson

VP Government Affairs, Pride Mobility Products Corp.

Miriam Lieber

President, Lieber Consulting

York Schwab

Show Director, Medtrade

Bradley M. Smith

Managing Director/Partner, Vertess

William A. Dombi

President, National Association for Home Care
& Hospice



Publisher

Matthew G. Conroy

Director of Finance

Brandon Whittemore

Vice President of Sales

Greg Meineke

1900 28th Avenue South, Suite 200
Birmingham, AL 35209 • Phone: (205) 212-9402

WE INSURE ORGANIZATIONS WHOSE QUALITY OF CARE HITS HOME WITH US.



PHLY protects our Home Healthcare, Hospice & Home Medical Equipment policyholders so they can continue to provide a high standard of care. We offer customizable package policies, superior claims handling service, and an extensive spectrum of risk management service tools to meet their ever changing needs. Helping you deliver high quality protection that hits home with us.

Call 800.873.4552 or visit
PHLY.com/HumanService

AM Best A++ Rating
Ward's Top 50 2001-2022
97.4% Claims Satisfaction
120+ Niche Industries



PHILADELPHIA
INSURANCE COMPANIES

A Member of the Tokio Marine Group

Non-Profit/For Profit Human Services | Mental Health | Substance Abuse | Home Health Care | Home Medical Equipment

Philadelphia Insurance Companies is the marketing name for the property and casualty insurance operations of Philadelphia Consolidated Holding Corp., a member of Tokio Marine Group. All admitted coverages are written by Philadelphia Indemnity Insurance Company. Coverages are subject to act



In this issue



COVER SERIES: AGING IN PLACE

- 16 Simple changes that make aging in place safer for those with low vision
- 18 How the right voice-recognition device can save caregivers time
- 22 Lifeway Mobility looks to create a national home access supplier

HME

- 24 How to partner with private equity instead of selling outright
- 30 Shifting Medicaid enrollment status may boost reimbursement rates
- 34 A quick primer for onboarding your next employee

IN-HOME CARE

- 38 PERS & RPM technology can help seniors manage soaring costs
- 42 Reduce claim denials with automated prior authorization
- 46 Ways to improve communication between providers & patients

COLUMNS

- 10 **HME:** Protecting your brand identity is about more than just your logo
- 12 **IN-HOME CARE:** 4 ways to position your agency to partner with in-home medical services
- 14 **ROADMAP:** How interoperability helps communicate your company's value to payers

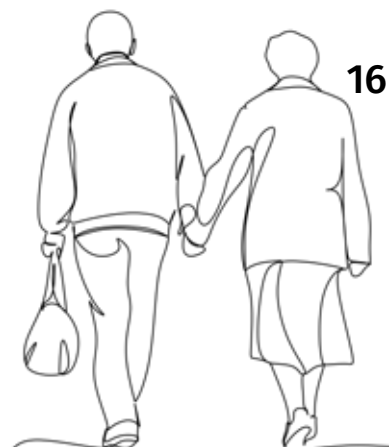


MARKET-LEADING PRODUCTS

- 49 **New on the Market**
- 50 **Power Chairs**
- 52 **Exercise & Rehab**
- 53 **Ramps**

IN EVERY ISSUE

- 6 **Industry News**
- 8 **Government Affairs**
- 10 **Columns**
- 48 **HomeCare Directory:
PERS & Home Monitoring**
- 56 **Back Page**



HIGH TURNOVER?



Deploy the TBO Team to control your revolving door.

Our clients are saving money on labor every year by hiring TBO!
Gone are the days of high turnover, high labor costs, under-experienced recruits, and lengthy onboarding. Our teams are ready to work, committed to your success, and experienced. Expect to save money not just on labor costs but also on training & onboarding, ancillary support, and employee overhead!



TACTICAL
BACK OFFICE PERSONNEL

Learn more by calling **(800) 588-7501**
or visiting our website at **TACTICALBACKOFFICE.COM**

Sunrise Medical Buys European Brands

Sunrise Medical, a global provider of advanced assistive mobility solutions, announced that it has completed two strategic acquisitions in Europe—the Helping Hand Company, based in the United Kingdom, and Now Tech, based in Hungary—continuing its strong pursuit of strategic improvements and growth.

The Helping Hand Company is a British company specializing in the design, manufacturing and distribution of pressure management seating and positioning products, postural care, independent living and environmental products.

Its well-established operation and vertically integrated manufacturing will benefit Sunrise Medical group in strengthening production capability in Europe and further optimizing its global supply chain. It also extends the product portfolio, especially in the seating and pediatrics area, to offer more comprehensive 24-hour postural care products to satisfy the well-diversified customer demand.

Now Tech, a Budapest-headquartered tech startup company, joins Sunrise Medical with a strong digital, software and electronic engineering team, bringing highly desired technical skills and more than 10 years of industry-specific knowledge and expertise. Its latest innovation, the special head control product Gyroset Vigo, has already been well received by the market and will become part of Sunrise Medical's SWITCH-IT power wheelchair special control product offering. The addition of Now Tech will significantly strengthen the group's innovation power. sunrisemedical.com

BOC Names Judi Knott CEO

The Board of Certification/Accreditation's (BOC) board of directors announced the appointment of Judi L. Knott, MA, MBA, as the organization's new president and CEO, effective Jan. 1, 2023. Knott currently serves as BOC's chief strategy and marketing officer. Current president and CEO Claudia Zacharias, MBA, CAE will retire at the end of this year.

Since joining BOC in 2017, Knott has managed the BOC marketing, regulatory and business development teams, with a focus on customer experience. Under her leadership, BOC achieved an annual average of 15% sales growth in new business between 2017 and 2021 and retained nearly 95% of certificants in 2021.

She spent 15 years at T. Rowe Price Group working as vice president in the Retirement Plan Service division focused on leading participant communications, strategic marketing and individual investor strategy. She spearheaded a variety of initiatives

to improve lead generation and customer retention as well as introduce new pilot concepts that supported the capture of more than \$2.1 billion in rollover asset under management.

bocusa.org

Steve Gottfried Joins Myndshft

In hiring Steve Gottfried to lead business development efforts, Myndshft, a fully automated end-to-end prior authorization platform, reaffirms its core mission of relieving health care providers, partners and payers from the complex, time-consuming administrative processes that undermine patient care.

Before joining Myndshft, Gottfried served as a business development leader for several health care technology organizations, including Curasev, Curative, SourceMed and Net Health. During those years, he gained invaluable insights into critical electronic health record, patient intake and revenue cycle management processes.

myndshft.com

NAHC Board Chair Selected for Hospice Technical Expert Panel

The National Association for Home Care & Hospice (NAHC) is proud to announce that Ken Albert, RN, Esq., has been selected to serve on the technical expert panel (TEP) set up to develop a hospice special focus program by the Centers for Medicare & Medicaid Services (CMS).

In addition to serving as the chair of the NAHC board of directors and as former chair of the NAHC Hospice Advisory Council, Albert is president and chief executive officer of Androscoggin Home Healthcare & Hospice and the Maine Center for Palliative Medicine. A nurse and attorney, he has extensive experience as a federal and state regulator, including service as the director for the Maine Division of Licensing and Regulatory Services, during which time he oversaw the CMS Special Focus Facility program for long-term care.

nahc.org

UPCOMING EVENTS

We want to make sure our readers know about upcoming event opportunities. Did we miss an event? Send info to keasterling@cahabamedia.com.

Oct. 16–19
LeadingAge Annual Meeting & Expo
Denver, CO
leadingage.org

Oct. 23–25
NAHC Home Care & Hospice Conference & Expo
St. Louis, MO
nahc.org

Oct. 24–26
Medtrade East
Atlanta, GA
medtrade.com

Dec. 4–8
ASHP Midyear Clinical Meeting 2022
Las Vegas, NV
ashp.org

MEDTRADE TRIES NEW SCHEDULE AT LAST ATLANTA SHOW

When the last Medtrade East at the Atlanta World Congress Center happens Oct. 24-26, it will be a blend of first-time and last-time events before Medtrade moves to a single show in Dallas in 2023. Show Director York Schwab said the show is bigger than it has been and is also in Expo Hall A, which is more convenient than last year's location.

"For the show this fall, we're in a new building. We have a slightly tweaked conference schedule, we've got a different expo hall schedule," Schwab said. "We're taking attendees' and exhibitors' feedback and changing the show in different ways with the goal of putting forth the best possible show we can."

One of those changes is to the always popular "Ask the Experts" event, which has returned to Monday—the first day of the show, which is focused on educational sessions and workshops—and will run from 5-6:15 p.m. And this time, the event won't be separately ticketed, so it's open to all attendees.

"This slate of speakers at 'Ask the Experts' is off the charts," Schwab said. "It's such invaluable time to get one-on-one time with the experts in the field, and I would highly recommend to all of our conference attendees to come in and take advantage."

Tuesday will be the main day of the show, with the show floor open 9 a.m.-5 p.m. and a new opening night reception from 4-5 p.m. The American Association for Homecare's (AAHomeCare) Stand Up For Homecare event will be held immediately after across the street.

Wednesday, the show floor will be open from 9 a.m.-1 p.m., the AAHomeCare update was expected to be a bit later than usual at 10 a.m., and voting will also close for the favorites in the New Product Pavilion, which HomeCare Media sponsors.

Schwab said the team has also been working closely with Medtrade's Educational Advisory Board to ensure

that the educational content is the most current information out there, with a full slate of talented speakers.

"We are always experimenting. I never want us to be accused of doing the same thing every year and hoping for different results," he said.

At press time, space was still available in five in-depth workshops set for Monday, Oct. 24. The topics are:

- **KEY METRICS FROM ORDER TO CASH**
- **AN INTRODUCTION TO THE CERTIFIED DURABLE MEDICAL EQUIPMENT SPECIALIST**
- **TEAM@WORK SALES BOOTCAMP**
- **FORENSIC DENIALS DME, SEASON 2, EPISODE 2**
- **THE FOUNDATION TO OPERATING A PROFITABLE BUSINESS**

Visit medtrade.com to sign up or to register for the show.

Essentially Women Launches Mother-Baby Program

Essentially Women (EW), a division of VGM & Associates, has announced Lily, a new mother-baby program designed to help members grow their business in this fast-growing area of the women's health industry.

Named after the flower associated with femininity, love and motherhood, Lily is focused on helping members support mothers and babies in every aspect, from pregnancy to new mom and beyond.

This program offers products, services and solutions to help members support women in all stages of motherhood. Resources include thought leadership, education and training, discount programs and more. Leading vendor partners of EW are also part of this program.

essentiallywomen.com/lily

Invacare Leadership Changes

Geoffrey P. Purtill, who had been serving as Invacare Corporation's senior vice president and general manager for Europe, the Middle East and Africa, and Asia Pacific, has been named the company's interim president and CEO, replacing Matthew E. Monaghan, who has left his role as chairman, president and CEO.

The board of directors has started a search for a permanent CEO.

Before joining Invacare, Purtill held various sales, category management and supply chain leadership roles at Johnson & Johnson and Nestle. He spent 14 years in the Australian Army where he was a captain in the Intelligence Corps.

The company also announced that Michael J. Merriman, Jr. was appointed as a

director and named nonexecutive chairman of the board. Merriman, who previously served on Invacare's board and was chair of its audit committee from 2014 to 2018, will also serve on the company's strategy committee.

As the independent chairman of the board, Merriman succeeds Cliff Nastas as the company's lead independent director.

invacare.com



GET MORE NEWS

Visit homecaremag.com/news for the industry info you need to know.

Investing in Better Services for Seniors

The Innovation in Aging Act, S 3473

By Kristin Easterling

The number of Americans age 85 and over is projected to more than double by 2040 from 6.6 million in 2019 to 14.4 million, many of whom will need additional services and access to care, according to the Administration on Aging (AoA).

The 1965 Older Americans Act established the AoA and gave it the authority to give grants to states for community planning and social services, research and development projects, and personnel training in the field of aging. The act must be reauthorized every few years to maintain funding; it was most recently reauthorized in 2020.

However, some of the priorities of the Older Americans Act weren't updated, leading to outmoded services. Sens. Angus King (I-Maine) and Bob Casey (D-Pennsylvania) have introduced the Innovation in Aging Act (S 3473) to address these concerns.

The Innovation in Aging Act makes significant investments in the Administration for Community Living's (ACL) Research, Demonstration, and Evaluation Center to find opportunities for improvements in projects like home-delivered meal and long-term care programs.

The text of the bill does not lay out an exact funding amount for the ACL, but allows for "such sums as may be necessary" to carry out the agency's mission as outlined in the Older Americans Act.

The bill was introduced in January and is currently in the Senate Health, Education, Labor, and Pensions Committee.

WHY IT MATTERS



Regular evaluations of best practices and impact on aging services help maintain the infrastructure needed to allow seniors to age in place.

LEARN MORE [Track this bill at congress.gov.](https://www.congress.gov/bills/116/3473)

FROM THE SPONSORS

"To support these valued members of our community, we must make forward-looking investments to help aging Americans have access to the modern resources they need to safely and comfortably age in place. The Innovation in Aging Act would strengthen important programs that support millions of seniors across the country, investing in evidence-based efforts and creating significant opportunities to improve quality of life for seniors. Taking this action today will help prepare us for the needs of tomorrow."

—Sen. Angus King

"The Innovation in Aging Act represents our commitment to the generations who came before us and lifts up seniors. We must continue to fund programs that support older Americans as our nation ages, ensuring seniors have access to comprehensive services that enable them to live independently during their golden years."

—Sen. Bob Casey

DID YOU KNOW?

Between 1980 and 2019, the centenarian population increased by a larger percentage than the total population did. There were 100,322 people age 100 and older in 2019—more than triple the 1980 figure of 32,194.

spark >>> KINETIC SLEEVES

COMPRESSION FUSED WITH KINESIOLOGY

Spark Kinetic Sleeves combine the benefits of kinesiology and compression in one easy to use, comfortable sleeve. Plus, they're intuitive to put on and won't leave sticky residue when removed. Now you can focus more of your energy towards achieving your fitness goals.



ENHANCED
SUPPORT
KINESIOLOGY



HIGH
PERFORMANCE
COMPRESSION



GRIP-TRACK
BANDING



MOISTURE-
WICKING



Contact Katja Planert to learn more • katja.planert@brownmed.com 816-482-3417

See the entire Spark product line and other innovative products
from Brownmed at Medtrade East Booth 406

 **Brownmed** www.brownmed.com ©2022 Brownmed - Spark is a registered trademark of Brownmed (877-853-5518).

Check 103 on index.

Protecting Your Identity

Public perception of your company hinges on more than your logo

By Christina Thronson



With over 17 years in the digital industry, CHRISTINA THRONSON is a seasoned digital marketing strategist focused on bringing businesses and their targeted audiences together to meet goals and maximize their return on investment. As a long-time VGM Group, Inc., team member, Thronson currently serves clients with a variety of online and offline marketing tactics within Moxie, a division of VGM. Her unique experience and knowledge in new media marketing allow her to focus most of her time on planning and executing campaigns for VGM's largest vendor and member partners. Visit experiencemoxie.com

Brand identity is often defined as a logo; companies like Starbucks, Pepsi and Microsoft may come to mind. Yet, brand identity is more correctly defined as how a company is perceived by others. That perception can vary from person to person as well.

While no company can completely control how the public perceives it, it can control the attributed elements such as its logo, colors, fonts, style, tone and imagery. But brand identity goes well beyond flashy design and also includes your company's culture and service offerings—the things that will keep customers coming back for more.

Why do I need a brand identity?

Brand identity allows your company to connect with current and prospective customers in an impactful and memorable way. It provides a visual or “face” for the company, builds trust and credibility, supports your values and mission, promotes your offerings and more. A company's brand identity is powerful!

As you read this article, you may think:

- Does our company have a brand identity?
- Our company is too small/big. This doesn't apply to me.
- I have a marketing department; this is their job.
- We've been in business for a long time. No one cares about my brand identity.
- I don't have time for this.
- My company has a great brand identity; she's not talking to me.

I am talking to you directly, my friend.

Let me assure you:

- Your company does have a brand identity.
- Regardless of your size, the need for a brand identity applies to you.
- Development and management of the brand identity is not the sole responsibility of a marketing team, intern or individual.
- Your messaging and branding impacts your targeted audience, community, competitors, partners and team. They care about your brand identity.
- Implementing a branding plan can

A successful brand doesn't just happen. It's developed over time by purposeful action and continued maintenance. It's a staple for all companies.



actually reduce wasted time and feelings of anxiety.

- While your brand identity may be great, this is not a “one and done” effort. It’s an ongoing effort that must be planned and cared for.

What Customers Want

As more and more companies compete for your audience’s attention, the need to manage your brand identity moves up on the list of priorities and becomes an important differentiator for your own organization.

A successful brand doesn’t just happen. It’s developed over time by purposeful action and continued maintenance. It’s a staple for all companies big and small as the hub of communication, service, relationships, promotional efforts and company strategy. Brand identity is important to your audience and requires the proper attention to analyze, strategize, plan, execute and measure.

At the end of the day, it’s the consumer’s opinion and needs that are important, because word of mouth will drive traffic to your business. Here are three things your customers are looking for from your brand.

1 Authenticity

Consumers want to do business with honest brands they can connect with and trust. Your messaging should be consistent and transparent and speak to the company’s values. According to a Stackla survey, 88% of consumers say authenticity is important when deciding which brands they like.

2 Trust

Product experience is no longer the main driver of consumers. Many want to build long-lasting relationships they can rely on. Consumers seek brand value and the promise of a customer experience. Like No. 1 above, consumers want trust-based relationships. A Salsify survey found that 46% of consumers would pay more for brands they trust.

3 Brand Consistency

A consistent brand presence across all channels (e.g., website, email, snail mail, social media, etc.) has a positive impact on consumers’ awareness. Consistent presentation of a brand has been seen to increase revenue by 33%, according to a study by Lucidpress.

The benefits of a defined, consistent brand identity paired with the right strategy and plan are great both internally and externally. This will help guide your team, as well as create comfort and clarity for consumers, with a consistent, committed message that will result in success. **HC**



LEARN MORE

If you want more information on creating your brand identity, visit the author’s Medtrade East session, “Brand Identity in a Consumer Referral Driven Market,” on Tuesday, Oct. 25 at 11:30 a.m. in Atlanta. This session will provide takeaways on how to uncover, manage, grow and measure your brand, no matter your organization’s size or current location on the brand identity journey.

The Growth in Hospital Outreach Will Impact Care

4 ways to partner with in-home medical service providers

By Rich Paul



RICH PAUL is the chief partnership officer for SYNERGY HomeCare, a nonmedical in-home care provider serving 39 states. Visit synergyhomecare.com.

The COVID-19 pandemic certainly magnified people's desire to receive care at home versus in a facility, and, consequently, hospital systems across the country have begun accelerating efforts to develop or expand their capacity to provide acute medical services in the home. Hospital systems that offer in-home medical care have found that they are able to reduce expenses and achieve higher patient satisfaction and overall better outcomes.

Health care professionals generally believe that people recover better at home, where they can be surrounded by family and friends in a comfortable and familiar setting. For that very reason, "hospital-at-home" is not a passing fad. Hospital budgets large and small reflect significant investments in building or expanding in-home medical services.

So what are the implications of this trend for private-duty, nonmedical homecare providers?

Homecare often sits outside the traditional health care ecosystem, but this is changing rapidly. There can be no doubt that personal care has an important role to play in the health care continuum. The industry needs to continually voice its significance in that continuum and, more importantly, its impact on patient health, safety and well-being.

Limitless Opportunity for Providers

Hospital-at-home providers recognize that they can't be in the home around

the clock and therefore they must rely on either family members or professional care providers to offer additional patient support. Aligning and partnering with in-home medical and nonmedical providers is the first step toward introducing the benefits of homecare. How can you position your home health or nonmedical homecare agency as the preferred partner to hospital systems and other in-home care providers? Here are four steps:

1 Don't assume all hospital-at-home providers know the full scope of services that your agency provides.

It is critical to educate potential partners about what homecare consists of and, most importantly, how those services benefit someone recovering at home. They may understand that you assist with activities of daily living and instrumental activities of daily living, but do they understand your capabilities around memory care and fall prevention? Recovery and healing is enhanced when individuals are not worried about things they can't control. Services such as transportation to medical appointments, meal preparation, pet care and household chores provide patients with much-needed peace of mind so they can focus on recovery and healing.

2 Share the impact of your services with hospital-at-home providers.

Hospital-at-home providers seek homecare partners that demonstrate positive client

outcomes. Quality in-home care should support their efforts to reduce hospital readmissions, emergency room visits, the risk of falls and other health-related complications.

In-home care can also assist hospitals with improved Healthcare Effectiveness Data and Information Set and STAR ratings. Moreover, by achieving such outcomes, you will establish yourself as a trusted homecare partner who is viewed as a critical member of the care circle.

3 Expand caregiver training to include their role in care coordination.

While we assume that quality caregivers have a passion for helping others, great empathy and compassion, they may not have received training for some of the specific needs of individuals recovering from serious illness or certain types of surgery. Training your caregiving team to work with this population should include activities that promote the patients' safety, comfort and post-care plans.

Caregivers should observe changes in a patient that may require medical intervention or contacting family members. By tracking and reporting sleep patterns, appetite changes, adverse effects from medication or other developing health concerns, caregivers can be an integral part of the continuum of care.

4 Demonstrate a willingness to be part of the discharge planning process.

Every person's needs following hospital discharge or a medical procedure are different. If your agency can be brought into discharge planning discussions as early as possible, you will not only be best positioned to support the needs of the patient, but you will also instill confidence in the medical provider that you understand the goals of the after-care plan.

Through homecare services, patients can receive the comfort, familiarity and independence that comes with recovery at home while having an attentive and experienced caregiver available to help with meal preparation, mobility around the house, bathing and dressing, and transportation to and from follow-up appointments. Caregivers can also provide companionship and offer support with aftercare plans to aid in the healing and recovery process.

In the Future

As hospital-at-home programs continue to grow and traditional hospital stays result in more rapid discharges of patients to home, nonmedical homecare providers are well positioned to play a critical role in keeping patients home.

Strategic partnerships and alliances with hospital-at-home organizations represent an ideal business opportunity for the homecare industry. **HC**

Software tailored to fit your needs.

SEE US AT
medtrade
IN OCTOBER

Universal offers dynamic, innovative HDMS software that is tailored to fit your unique needs. With over 20 years in the home care industry, USS is trusted by hundreds of companies of all sizes.

- Flexible API allows customization for your unique needs
- Responsive 100% US-based customer support when you need answers
- On-premise and Cloud deployments
- Onsite implementation and training

Find out more about USS and how we are the right company to serve your home healthcare software needs and provide the support you deserve when you need it!

Visit us @ www.universalss.com
or call 810.653.5000 today!

Serving HME, Home Infusion & Specialty Pharmacy Industries

UNIVERSAL
SOFTWARE SOLUTIONS

Check 120 on index.

Don't Sell Yourself Short

The right technology can help you tell a better story to payers

By David Kerr



DAVID KERR is the chief technology officer of Forcura, a health care technology company that enables connected care for better performance. Over the years, he has held several tech and engineering leadership roles at organizations such as Infincept, Fortress Consulting and S&P Global. Visit forcura.com.

Over the years, home health and in-home care providers, as well as others in the post-acute sector, have been denied seats at the larger health care continuum table.

While some progress has been made as consumers increasingly seek care at home, a large gap remains, primarily between payers and post-acute providers. The source is a lack of two-way communication and, therefore, opportunities to educate each other and collaborate.

Payers are left without a full understanding of the services and impact that home health and in-home care providers deliver. This leads to lower reimbursement rates and funding opportunities that ultimately limit the potential of high-quality care and experiences for the patient or client.

Worse, by not closing this gap, the post-acute sector risks facing federal budget reductions, as evidenced by the Centers for Medicare & Medicaid Services' (CMS) recently proposed cuts to home health payments. In-home personal care has yet to be recognized by CMS' star rating system, and home medical equipment providers are still fighting to be reimbursed appropriately.

The opportunity to begin mitigating these risks by building payer relationships is right in front of us—and the time to capitalize is now.

When discussing the importance of payer and provider collaboration during a recent

Forcura event, Wanda Coley, vice president of strategy at UnitedHealth Group, said, "Our [shared] goal is to make navigating the health care system easier and to improve the outcomes and to have quality care for patients."

The post-acute sector must be proactive and create opportunities to come together with payers to achieve our common goal. The key to building those payer relationships is identifying alternative approaches to measuring your value as a provider and the impact you have on your patients or clients, and then communicating with payers and educating them about that value.

"It's about articulating what value you are bringing to the table, and particularly if you're filling a gap that's out there in the health care system ... bring it to the table and share it," Coley said. "When we align in that way ... the incentives start to line up as well."

Being at Your Best = Being Interoperable

The most effective way to prove your value to payers is by identifying the quantifiable impact of the services and impact you deliver both for patients or clients and for all of the players across the care continuum.

Maximizing that value means achieving interoperability. At its core, interoperability is deploying technology and methods that enable the efficient exchange of information

and data among different entities.

When properly at work in health care, interoperability allows acute and post-acute providers to share patient documentation, process referrals and much more in an efficient and timely manner.

This fosters a variety of benefits for providers. You'll experience stronger compliance, leaner and more profitable operations, and, ultimately, a smoother care experience for patients who are discharging from the hospital and receiving episodic or ongoing care at home.

It also supports staff satisfaction and retention, as employees will spend less time on administrative tasks such as sending faxes and gathering physician signatures, enabling a shift to more strategic, productive and fulfilling roles.

Interoperability also allows providers to generate quantifiable data that measures efficiency, impact and value in ways that weren't previously possible.

When presented properly, this exchange of data and cross-sector collaboration gives payers a stronger understanding of provider services and their impact—which encourages them to appropriately reimburse based on data and fact.

Ultimately, interoperability creates an environment of connected care that leads to better performance across the entire health care continuum.

Leveraging Technology to Achieve Interoperability

True interoperability is possible only with the right technology and approach. You must leverage the technology systems that align with your services and compliance requirements and that can integrate into your operations.

For example, it's critical to ensure that your organization's technology can talk to other systems, especially electronic health record systems and referral sources. You must have the capability to transfer and receive sensitive medical information, data

When presented properly, this exchange of data and cross-sector collaboration gives payers a stronger understanding of provider services and their impact.

and files electronically, from almost any source.

Further, the systems and methods you deploy must reduce workload for staff rather than creating more of it. The tools and approach you implement must generate more automation and avoid increasing unnecessary processes that simply lead to more headaches.

And finally, it's important you have the capability to extract analytics and data so you can identify quantifiable metrics that will help you report on your performance and articulate the value you provide or the gaps you fill.

Metrics to Extract & Report

When you become interoperable as a provider, the opportunities for establishing metrics that tell your value story are vast. What's first important is identifying characteristics of your services and operations that are quantifiable in nature and are relevant to the payer audience.

For example, reporting on your agency's ability to onboard a new patient communicates to a payer how quickly and efficiently you can move a patient from the hospital to a home setting. Metrics to consider may include the volume of referrals and the average speed at which you are accepting them. Also consider tracking the ratio of your back-office staff to referrals created daily as a measure of your internal efficiency.

Next, don't overlook the importance of staff retention, especially in today's economy. While not a direct correlation

to profitability, communicating a strong year-to-year retention rate indicates a more sustainable operation where less investment in training and hiring is required and quality of care could be higher.

And finally, identify how the payers you want to partner with are measuring their success with patient outcomes, cost savings and more. Match your services to those metrics as evidence of your value and discuss how you can create common metrics against those goals.

Closing the Gap Between Payers & Providers

Creating common ground between payers and providers won't happen overnight—it's more of a marathon in which education and relationship building is key. But the longer we wait, the more risk we face in regard to receiving lower reimbursements and even reductions in federal funding.

Providers must start by building toward interoperability and telling their value story in different and creative ways.

Don't wait until it's all perfect, either. Determine what you do well and where you can improve. Share your strengths with payers as well as what you are working on in the short and long term. And invest in the right tools that help you improve and become interoperable with others.

By quantifying your impact beyond the number of stars you receive, you form a more tangible and powerful argument on why in-home care is a necessary and instrumental part of the health care continuum. **HC**



Aging in Place

A Sight for Sore Eyes

Simple changes that make aging in place safer for those with low vision

By Michelle Cone

A 2016 study in *JAMA Ophthalmology* projects that the number of blind and visually impaired Americans will double by 2050. The reason behind this spike? For homecare providers, the answer should come as no surprise—age.

Aging is the greatest contributing factor to low vision disorders, with more than 12 million Americans aged 40 and older experiencing some level of vision impairment. At the rate the senior population is increasing, providers are facing the largest number of vision-impaired clients they have ever experienced.

For homecare providers, these predictions illuminate a compelling need and an opportunity: Older adults with vision loss need specialty care support developed explicitly to address the challenges associated with low vision. By tailoring services to clients living with low vision, providers nationwide can empower vision-impaired seniors in their communities to thrive at home and enjoy the liberties of aging in place. Simultaneously, they solidify their roles within the care continuum by helping reduce hospital readmission rates.

A More Mindful Approach

The likelihood of provide care to low-vision clients is already high, as many seniors experience some degree of vision impairment. There are even estimates that one in three individuals has some form of vision-reducing eye disease by age 65. Hence, initial client home assessments

typically account for potential hazards or obstructions in the hallways and other high-traffic areas of the home to prevent falls for vision-impaired clients. So, why should in-home care and home medical equipment providers develop a program specifically for low vision?

Brand programs thrive on specificity, and a well-executed low-vision program is no exception, as it can enhance the appeal of your care to potential clients and their families. This begs the question: What particular needs should a low-vision program address?

1 Fall Prevention

Falls pose a serious threat to the well-being and independence of older adults, as one slip can result in a severe injury and a trip to the emergency room. Each year, one in four Americans age 65 and older experiences a fall, and impaired vision more than doubles this fall risk.

For seniors struggling to see, the repercussions of a potential fall can cause a paralyzing fear and withdrawal from performing everyday tasks or their favorite hobbies. A study published in the journal “Investigative Ophthalmology and Visual Science” found that 40% to 50% of older adults with chronic eye disorders limited their activities because they feared falling, putting them at greater risk for social isolation, immobility and disability.

Vision impairment and fall risk go together, as the latter is often a direct result

of low vision, but both require individual attention. Fortunately, by properly equipping a home for low-vision clients, organizations can address potential hazards in each client’s residence to prevent falls and preserve their confidence and health.

2 Mental Health

A 2020 study from the National Library of Medicine found that up to 8.6% of older adults with vision loss met the criteria for a depressive disorder. Between 10.9% and 43% reported clinically significant levels of depressive symptoms, both noticeably higher percentages than those found in the general aging population. The same study revealed that seniors with vision impairment exhibited more anxiety symptoms than those with other health conditions such as diabetes or cardiovascular problems.

Because vision loss is usually gradual, seniors and their loved ones may not be aware of how compromised their vision has become, posing a greater risk to their safety. Simply locating items around the house or enjoying activities such as gardening or cooking can become dangerous for certain older adults and consequently hinder their enjoyment and independence in living at home.

3 A Need for Color & Contrast in the Home

Marking areas of the home using a bright array of colors and contrasting light against dark elements can help clients navigate their homes and distinguish between household items, such as a favorite chair, and medical items, such as prescription bottles.

Color

Bright colors that reflect light are generally the easiest to see, especially vivid primary colors such as red, orange and yellow. Bright contrast tape, stickers or sticky notes in fluorescent colors can be used to mark changes in levels like stairs, identify



household items like documents or bills, and warn clients of potential hazards such as doors or cabinets left ajar. Bright decorative elements like vibrant throw pillows, blankets or magnets can assist clients in locating furniture or appliances in their homes. Grab bars that are available in bright colors would also be useful to low-vision customers.

Contrast

Enhancing the contrast of light against dark or vice versa in clients' homes has proven beneficial. Consider creating contrasting backgrounds, such as a dark switch plate behind a light-colored switch, or placing dark objects against lighter backgrounds. For example, a pale green chair can easily disappear in front of a yellow wall. Incorporating a dark blue throw blanket or slipcover can help clients identify this furniture against the yellow wall. Updating paint colors to provide more contrast is also an option, if the senior approves.

It is equally important to avoid or remove items that are transparent or too easily blend in with their surroundings, like glass items. In addition, try to avoid using patterned materials when possible, as contrasting is most effective using solid colors. This is

something to keep in mind as a provider of lift chairs or other home furnishings.

4 Low Vision Tasks & Errands

Household tasks and certain errands, such as shopping or traveling to and from appointments, can be dangerous for low-vision clients to perform. Depending on the degree of their visual impairment, a caregiver may need to complete certain tasks or assist the client by performing any duties or steps requiring keen eyesight. These tasks can include meal preparation, laundry and light housekeeping.

While these services may fall under the category of general home care, including and promoting them in your low-vision program helps ensure clients and their families that your caregivers and care managers are mindful of any potential needs resulting from vision impairment.

Regular eye exams are also critical to seniors since age-related macular degeneration is the leading cause of vision loss for individuals aged 50 or older. As seniors age, their risk or degree of vision impairment increases. The National Eye Institute recommends that adults over 60 receive a comprehensive eye exam with

dilation every one to two years. While the exam is not to be carried out by a caregiver, it is helpful for home care providers and caregivers to be aware of the recommended frequency of eye exams and be prepared to transport their clients to and from appointments.

Low Vision in the Care Continuum

As a home care provider, you play a pivotal role in the care continuum. As we face the largest elderly population in our nation's history, health care systems will need to lean on your expertise more than ever to support their patients' journeys and avoid readmission into their system.

Diversifying your offerings and tailoring your care through brand programs, such as low vision, reinforces your value in the eyes of clients, their families, and both the home care and health care industry. **HC**

Michelle Cone is senior vice president of training and brand programs with HomeWell Franchising, Inc., the franchiser of HomeWell Care Services, a nonmedical in-home care provider. A licensed home health administrator, she has more than two decades of extensive health care experience in the post-acute care space. Visit homewellcares.com.



Aging in Place

‘OK Google!’ Voice Recognition Can Extend Freedom at Home

The right devices can also save caregivers time

By Lawrence Kosick

There will be 80 million Americans age 65 and older by 2040, according a recent study from the Urban Institute. Most of them will want to age in place rather than move to assisted living or long-term care facilities, and they will likely require increasing levels of in-home care. Thus, the homecare industry has an opportunity to be the innovation hub for their needs. Companies can do this by adopting technology and tools to help connect older adults to resources, services and monitoring to make their homes safer, healthier and happier.

Tech for Staffing Shortages

There is a shortage of in-home caregivers. Experts at PHI predict that by 2030 this shortage will amount to a lack of more than 150,000 direct care workers, and that number will more than double by 2040. However, there are many exciting advances in technology to help bolster existing and future caregiving services.

Age-tech devices, health-tech devices and virtual communities have emerged to help fill the caregiver void. Many of these technologies are available for use in the home through smart devices. It's not always necessary to buy senior-specific devices to use senior-specific services. Many smart devices have services that can be customized to work for seniors' benefits or to access affordable add-on services. Plus, many services offered by health plans

and local Area Agencies on Aging can be integrated with everyday technologies.

Voice recognition devices represent a new way to make the lives of older adult easier, safer and more independent. With these devices, seniors can not only coordinate more efficiently with their caregivers remotely, they can also get daily assistance in their homes when they need it. Best of all, these devices are becoming more accessible and affordable, and their popularity among

baby boomers is on the rise. According to Serpwatch's report on smart speakers, voice assistants and their users, 26% of users are between the ages of 45 and 60 and 20% of survey participants aged 60 or older said they used a smart speaker. The report also found that, while seniors are less likely to own a smart speaker, those aged 60 or older who already own a smart speaker are more likely to use it every day than are those aged 30 or younger.





**IN-STOCK AND
AVAILABLE TO SHIP
SAME DAY!**



**Take advantage of our attractive financing rates NOW—as low as 0%*
Act now before rates go up!**

- 12 months at 0%
- 36 month lease with 3.97% interest and **NO PAYMENTS FOR 3 MONTHS** (followed by 33 equal payments)
- Other plans are available!

866.936.7074 | www.oxygo.life

Check 106 on index.

* Minimum orders of \$10,000. Documentation fee required. Financing subject to pricing approval. Valid in US only.



Aging in Place

Voice Recognition Defined

Voice recognition devices rely on spoken commands to perform tasks. Common devices such as Google Assistant and Amazon Alexa are easy-to-use knowledge-based virtual assistants. They can use voice commands to perform searches, complete tasks, make phone calls and many other functions.

Voice recognition devices generally listen for preprogrammed keywords or phrases. When the device recognizes a preprogrammed keyword or phrase, it links the spoken word or phrase to a specific command on the software. For example, “OK Google” or “Alexa” is the command for the device to listen for its next task.

Considering that the software can be updated and programmed with more benefits, these tools can be a game changer for those wanting to age in place. Caregivers can help older adults preprogram these devices with care needs. They can add in reminders, safety features and opportunities to connect with others through call settings.

Potential Help for Caregivers

As people age, the risk of them losing their independence increases if their physical or cognitive health declines. Yet overall health and wellness tend to remain higher the longer people remain independent.

Fortunately, technology offers ways to help people stay at home longer and live more fulfilling lives. One study projects that

20%

of survey participants aged 60 or older say they use a smart speaker, and may use it every day.

by 2030, more than 130 million Americans over the age of 50 will spend nearly \$85 billion on technology. When digital resources are paired with caregiving services, these tools can create holistic health and wellness.

Voice recognition devices can make life easier for seniors and their caregivers in a variety of ways. They can help with tasks such as:

- **Scheduling appointments:** Either caregivers or seniors can schedule appointments via a shared calendar. This allows both parties to keep track of activities and ensure important events are attended.
- **Reminders:** Scheduled events can have reminders, as can daily activities like taking medication or performing a check-in. This can help caregivers to know that basic needs are being met even if they can't be present.
- **Fall prevention:** If these devices are paired with smart bulbs or outlets, older adults can use them to turn on the lights in the house. This way they never have to get up in the dark and risk tripping over an unseen obstacle.
- **Help with visual impairments:** More than 12% of people age 65 to 74 and more than 15% of people 75 and older report some level of vision loss. Voice recognition allows the visually impaired to use the same devices as everyone else and to operate smartphones, computers and other devices without navigating a keyboard or screen. This makes it easier for them to independently email, text or surf the web. Voice recognition devices can also be paired with other assistive devices like screen readers and braille keyboards, allowing access to a wide range of resources including digital books, websites and more.
- **Empowering people with dexterity impairments:** When you have arthritis or hand tremors, it can be hard to use your hands—especially when trying

to manipulate a touch-screen device, keyboard or a television remote. Voice recognition technology is an excellent solution for people who struggle with these challenges since it allows them to use their voices instead of their hands.

- **Special aging services:** When paired with other devices or services, these devices can help monitor for falls. Some can be paired with third-party fall detection options that automatically alert people in the care network and call local emergency services. Other well-being check-in opportunities are available as well to help give caregivers and family members peace of mind.

These devices could help professional caregivers attend to more patients and know where to focus based on feedback from the voice recognition devices so that even with limited time, caregivers can offer the best possible care available. Plus, these devices can connect family caregivers with loved ones and create stronger care networks.

As voice recognition technology continues to improve, expect that the benefits it provides for older adults and their caretakers will only increase. The increasing population of seniors will need to use digital services for everything from booking vaccines to doctor visits. Integrating innovative technologies will be an essential part of future aging care. Caregivers may not be the heaviest users of such technologies now, but they can already start to use technology resources to assist with caregiving responsibilities. **HC**

Lawrence Kosick is co-founder and president at GetSetUp, a learning platform for older adults that empowers them to live happier, healthier and more connected lives that's inspired by the work his father did to help older adults many years ago. Kosick has led business development and partnership teams for decades at companies such as IFTTT, Sight Machine and Yahoo. He can be reached at lawrence@getsetup.io. Visit getsetup.io.

We Are Now A Collections Machine!

***“TeamDME! has
revolutionized
our cash flow
for the good.”***

Kathleen

Hope Medical Supply
(happy customer since 1999)

- Exclusive to DME space
- Wizards Make Billing Simple, Fast & Compliant
- Cloud Based
- Prefill Authorization Documents
- Track Documentation
- Mail Merge Letters
- Send Claims Electronically
- Send Invoices Electronically



Call today for a free demo!
888-832-6363
teamdme.com



Medtrade Booth #725
TEAMDME!

Next-Level Billing Software for DME Providers

Check 111 on index.



Aging in Place

When Bigger Is Better

Lifeway Mobility looks to create a national home access supplier

By Kristin Easterling

The home medical equipment (HME) industry is facing a time of consolidation through mergers and acquisitions. While this can create uncertainty, it can also help medium-sized providers to grow and serve more communities.

This is the case for Accessible Systems, headquartered in Denver, Colorado. The home access provider served clients in Colorado, Utah, Wyoming, Texas and Kansas before being acquired by the Connecticut-based company Lifeway Mobility earlier this year. Lifeway Mobility serves clients in 25 states.

Moving under the Lifeway Mobility banner was a great growth opportunity, said Nathan Colburn, Accessible Systems co-founder and a Certified Aging in Place

Specialist. “We saw the ability to go national as a team,” he said.

Colburn didn’t exit the business he created once it sold. Instead, he and the other co-founders of Accessible Systems took on leadership roles with Lifeway. He is now the division vice president for the central region, focusing on expanding the company in the central time zone of the United States.

“Accessible Systems has a strong team culture and commitment to high-quality service, as evidenced by their consistently strong and industry-leading customer reviews,” said Paul Bergantino, president of Lifeway. “This combination brings together two leaders in the home accessibility industry and further expands [our] national footprint and positions the combined platform as an industry leader at the forefront of shaping the nascent accessibility industry.”

It’s About Service

Home accessibility is vital to aging in place. If a home isn’t outfitted for fall prevention, walker and wheelchair access, and other access measures, then seniors may end up injured and having to move out to institutional care. HME suppliers are in a great position to provide the products and services seniors need to make their home safe.

Colburn noted that the team at Lifeway had observed that most of the home access market is dominated by smaller dealers that are focused on smaller geographic areas, something they thought could change.

“There is not an experienced company in every market,” he said. “Just as we experienced, a smaller provider has to develop systems and training and recruiting and all the things that a bigger company has to have,” Colburn said. Not every company can do it well—or at all.

That’s why Lifeway is pursuing a strategy of acquisition for its growth: bringing service



to more people, but also leveraging nearly 20 years of experience and expertise in the home access market to help new partners grow alongside. Senior Vice President of Sales and Marketing Bob Garvin said the company is looking specifically for people and companies with a passion for excellent customer service.

John Bixenman, another co-founder of Accessible Systems, is working to build a national training organization to help Lifeway build and retain its new employee base. Colburn said it take from one to three years to train a technician or accessibility designer before they are ready to do independent home evaluations.

For now, Accessible Systems is keeping its name in its original service area; Marty Twaddell, the third and final co-founder, has taken over day-to-day operations. Colburn said the company didn’t lose a single employee during the merger, and is working with its referral partners to ensure they know the business model hasn’t changed.

“We were able to serve the same customers with the same values and the same culture,” Colburn said. **HC**

Kristin Easterling is managing editor of HomeCare.



GET MORE

Find an extended version of this profile

at homecaremag.com/october-2022/lifeway-mobility.

Proudly Manufactured in the USA



sleepnetmasks.com



Introducing the iQ[®]2 and Phantom[®]2

Interchangeable, lightweight, and moldable
CPAP masks available for immediate shipment.

Contact us: 1-800-742-3646
Extension 6620 or
orders@sleepnetcorp.com

Come see us at Medtrade East booth 1244

M90153 Rev A

Check 129 on index.



PARTNERSHIPS

How to Get Help From Private Equity

Everything you need to know about the recap process & when it's a good option

By Bradley M. Smith

Whether you're a health care business owner seeking to reduce your risk and supercharge company growth or you're looking ahead to the sale of your business but aren't ready to give up all your ownership just yet, there's an alternative financial technique you should know about: private equity recapitalization, also called recap. Recapitalization occurs when health care business owners sell a portion of their business to private equity group (PEG) partners.

This article summarizes how private equity recapitalization works, explains what a post-recap partnership with a PEG can mean to business owners and shares some benefits and risks you'll want to consider before entering into such a partnership.

Health Care Private Equity Recap

To gain a better understanding of how the recapitalization process works, let's look at one scenario representing what a health care business owner could expect if they go down this path.

Mary founded Medical Equipment Specialists (MES) 10 years ago. Her Medicare durable medical equipment (DME) company has achieved impressive growth over the past decade and is debt free. Mary has identified several unpursued opportunities for further—and significant—company growth. These include expanding into new markets and adding service lines. However, Mary worries that she lacks the bandwidth, experience and funding to effectively

execute those growth strategies. In addition, concerns about the economy and recent market developments have Mary believing that she has too much of her net worth tied up in the company. She is looking for options to diversify her wealth and reduce her risk from having too many of her eggs in this one basket.

MES has a strong staff, including many employees who have been with the company since its early days, and their loyalty is a significant reason the company has achieved its level of success. Mary wants to ensure that whatever decision she makes for the company going forward is not only good for her but also good for these employees.

Through her research and discussions with other entrepreneurs and her merger and acquisitions (M&A) advisor, she identifies recapitalization as the right next step for her business and decides to pursue a PEG recap. With the help of the advisor, Mary finds a PEG with managers who have a shared passion for patient care, believe in her vision for the future of the company, would bring the expertise needed to take advantage of growth opportunities, and, importantly, want to invest in MES.

MES's negotiated enterprise value (EV) is agreed upon by both parties to be \$20 million. The acquisition will be financed with 60% equity and 40% debt. After the transaction, MES will then carry \$12 million in debt. Mary will maintain 30% of the equity of the company.

A breakdown of the value of the equity following the recap is as follows:

Total EV of MES	\$20,000,000
Less debt on recapitalization	(\$8,000,000)
New equity value of MES	\$12,000,000
Total EV of MES	\$20,000,000
Less buy-in for 30% of the equity value	(\$2,400,000)
Pre-tax proceeds to Mary	\$17,600,000

The Post-Recap Experience

Let's look at what happens to MES now that it has become a platform company for the PEG. PEGs typically hold (i.e., own) their platform companies for five to seven years. During this period, the PEG will heavily—if not fully—depend on Mary and her management team for the day-to-day operations of the company.

But that doesn't mean the PEG is a passive partner. Rather, PEGs will typically add value in several ways, including: filling in knowledge gaps, adding new expertise and introducing efficiencies intended to help an owner and their management team—which usually expands quite significantly over the recap period—work smarter. These efficiencies can take many forms, but most notably, PEGs will help companies like MES grow through acquisitions.

In this growth-through-acquisition strategy, PEGs go out, find and acquire strategic companies that add value to existing portfolio companies—MES in this scenario. The acquisitions can enhance value by adding geography, enhancing concentration within a market, providing an entrance into a parallel or complementary service or product, or through other possible avenues. The PEG typically handles the transactional function and leaves the post-transaction integrations to the company's

MEDTRADE EAST EXHIBITOR SHOWCASE

Sponsored

Aulisa Medical USA



615.476.3970 | aulisa.com/medical | Booth #1249

Guardian Angel

Aulisa FDA-Cleared Pulse Oximetry System
Aulisa Guardian Angel is an FDA-cleared wearable, wireless, continuous pulse oximeter with alarms for adults, children and infants. This popular GA2000 device can be used to monitor patients' vitals including heart rate, oxygen level and temperature continuously, wirelessly and in real time. Remote monitoring has never been this easy.



Seal-Tight Infinity

The Easy, Durable Way to Stay Dry

Recommended by doctors for showering and bathing, Seal-Tight Infinity's unique infinity edge enhances protection, prevents water pooling on the ring and forms a uniform watertight seal on the limb. The updated Infinity design features molded grips for easy, no-slip application and a patented covering to deliver the ultimate in cast and wound protection.



877.853.5518 | brownmed.com | Booth #406

Brownmed

Parks Health Products



844.433.2435 | parkshealthproducts.com | Booth #512

Kalmia Perfect Height Bed System

The KALMIA adjustable Hi-Low bed with therapeutic mattress was designed from the ground up as an easy-to-use upscale alternative for residential sleep mobility. Ask about showroom samples, special dealer pricing and how to become a Parks Health Provider.

- Same-day shipping
- U.S.-based customer service
- Strong margin opportunity
- Credit terms available
- Floor sample discounts
- 75+ years of manufacturing expertise



Sol Full Face CPAP Mask

It's a premium mask without the premium price. The Sol Full Face CPAP Mask has premium features like easy pop cushions, skin-friendly fabric, a quieter vent and quick release connector—all at a great value price point. Wake up to a brighter day with Sol!



Sunset Healthcare Solutions



877.578.6738 | sunsethcs.com | Booth #841

management team. After the five to seven years have passed, the PEG will execute on a liquidity event for the business. This is accomplished through the sale to another larger private equity firm or a strategic buyer or through an initial public offering.

A few important notes: Mary would not have a personal guarantee on the third-party bank debt the PEG uses to further enhance the gain on the second sale. Additionally, she would deleverage any risk she may have had with personal guarantees for vendors or payers. MES takes on these liabilities itself.

PEGs typically look to deliver their limited partners (LPs) a three times cash-on-cash return for their investment into the fund. LPs can be wealthy individuals, endowments, pension or retirement administrators or even corporations. Many PEGs focusing on health-related investments like to partner with LPs that also have health care backgrounds.

Let's get back to our MES scenario. If the PEG was able to triple the enterprise value of the business over its timeline and Mary chose this as the time to fully exit her business, her equity value in the second sale of MES, would look like this:

Second sale of business (assuming EV triples)	\$60,000,000
Less debt outstanding on second sale (estimate)	(\$10,000,000)
Equity value of MES	\$50,000,000
Mary's 30% equity value on second sale	\$15,000,000

Thus, Mary walks away with \$32.6 million (\$17.6 million + \$15 million)—well above the \$20 million she would have earned had she initially sold her entire company. If the EV was to exceed three times over this period, which is not an unreasonable assumption given the mandate of most PEGs to aggressively grow their portfolio companies, Mary would earn even more.

In addition to profiting greatly from her company's growth, Mary remained CEO but reduced her role thanks to the fuller management team built around her to take over other MES operational functions. The PEG continued to assist with executing an aggressive growth strategy—one that would not have been possible without the PEG's involvement—and by providing valuable board representation and positioning MES for a premium valuation on the second exit.

Benefits & Risks

Let's take a closer look at some of the benefits and risks commonly associated with a recap, starting with the benefits:

- 1. More money comes to owners.** As the MES scenario demonstrated, owners can significantly increase the amount of money earned through the sale of the company in a relatively short period. But they don't need to exit their business after this initial period. While some may, others remain heavily involved in their companies and support longer-term efforts to further grow value. Owners may be able to gradually reduce their percentage of ownership through additional recaps.
- 2. Risk is reduced.** Like Mary, most owners of health care organizations have their wealth wrapped up in their company. Considering the volatility we've seen in health care and the broader economic markets over the past several years, that can be scary. A single change to Medicare, regulatory requirements, competition, the supply chain—the list goes on—can significantly affect a business overnight. By choosing recapitalization, an owner can keep a meaningful stake and continue to run the business while selling off enough of it to reduce their primary source of risk.
- 3. Existing growth strategies can be executed.** A PEG brings capital and expertise that can help a company move forward aggressively on growth plans that are being considered or are already

in the works, such as adding service lines, upgrading technologies, improving existing processes and opening additional locations.

- 4. New expertise is offered.** One of the most appealing aspects of working with a PEG is that the group can often provide expertise that was previously missing within the company. This often takes the form of a chief financial officer. Most health care business owners lack a strong financial background—which is critical to making sound growth decisions and investments. The PEG can help fill this and other missing leadership positions.
- 5. Acquisitions help achieve growth.** A PEG's growth-through-acquisition strategy can potentially supercharge growth. Consider a DME company that has been recapitalized. This DME company's PEG may look to acquire a pediatric homecare and/or pediatric nursing company to run alongside the DME company. Such a strategy can open up new revenue streams and different directions for growth the company may not have thought about or been able to execute on its own.
- 6. The company can overcome a growth "wall."** I'm working with a company right now that's owned by two siblings. They took over the company from their father and grew it to almost \$20 million in revenue. It's a great success story. The company has tremendous growth potential, and the owners have identified several worthwhile growth avenues to consider, but they recognize that they've hit a wall. They're not confident in their abilities to execute on the initiatives needed to take their company to \$50 million and ultimately \$100 million in revenue—or even more. They also lack, and do not want to take out, the significant money that will be required to get them over this wall. They're looking for private equity partner with the skill and capital to build upon and achieve this growth vision.

7. It provides for a leadership transition period. A recap provides owners with time to reduce their involvement in daily operations while helping management take on greater responsibility. This can help ensure the company and its clients remain in good hands when owners decide to complete their exit.

Some Risks to Consider

- 1. You may lose majority control.** A PEG will set up an advisory board and empower the management team to drive the business. Most business owners find it difficult to relinquish control they've had for many years and may find it difficult to report to others, possibly for the first time in decades.
- 2. It can bring additional work and stress.** There are new people involved in the company, including managers. If acquisitions occur, an owner may need to be heavily involved in the integration of the new company and its people. Even the reduction in operations work and stress can bring with it a different kind of stress, especially for those people who enjoyed being in the weeds day in and day out.
- 3. New variables will arise.** The value of the company on the second exit is not guaranteed, nor is the timeline known. There are many variables that could derail post-recap plans.
- 4. High debt can be worrisome.** Following a recapitalization, the company can carry a significant amount of debt. Most business owners are cautious about burdening their company and management with high debt levels.
- 5. You'll stay involved in the longer term.** A recap requires an owner to remain with the company, usually for at least five more years. You can't just bank some money and then cruise along for the next few years until reaching a final payday.

There are a multitude of benefits and risks to consider before pursuing a recapitalization, and there are benefits and risks associated with selecting a PEG partner. The right partner can deliver an experience like the one Mary experienced with MES in our example. On the other hand, the wrong partner can overleverage a company with debt, pursue questionable growth strategies, micromanage operations and even cause a business to fail. Work closely with your M&A advisor to get to know the different prospective PEGs and their managers and to confirm the track record of these PEGs to help determine the likelihood of a successful partnership. **HC**

Bradley M. Smith, ATP, CMAA, is a former durable medical equipment company owner, a managing director with the international health care mergers and acquisitions firm VERTESS, and a member of HomeCare's Editorial Advisory Board. If you would like to personally discuss this article, the value of your health care company/practice, or how to get the best price when you sell it, you can reach him directly at (817) 793-3773 or bsmith@vertess.com.



We're more than a
mobility company.

WE'RE A MOBILITY PARTNER.

We help people move through life.
With National Seating & Mobility,
you can build a meaningful career
while leaving a lasting impact
on the lives of those we serve.

LEARN MORE AT
NSM-SEATING.COM/CAREERS

 NATIONAL
SEATING &
MOBILITY

MOVING LIVES FORWARD

SINCE 1962

Check 117 on index.

PATIENT LIFTS

PROTEKT® ELECTRIC LIFTS

- 6-point spreader bar allows for multiple sling options, safer patient handling and a wider range of transfers.
- Capable of lifting from the floor.
- Ergonomically designed foot pedal offers hands free opening of base.
- Manual emergency lowering provides safe response to power loss.
- Dual rear locking casters.
- Clip free sling hookups.



Item #	Weight Capacity
33500	500 lb.
33600	600 lb.

PROTEKT® SIT-TO-STAND LIFTS

- Soft pad with lateral contour secures legs in three positions.
- 4 sling hooks allows for multiple sling options, safer patient handling and a wider range of transfers.
- Legs spread with an easy to operate foot pedal.
- Ergonomic design makes the lift ideal for toilet transfers.
- Fast, simple sling attachment.
- Manual emergency lowering provides safe response to power loss.
- Dual rear locking casters.



Item #	Weight Capacity
34500	500 lb.
34600	600 lb.

PROTEKT® ONYX HYDRAULIC LIFT

- High performance hydraulics raise and lower patients gradually and safely from any stationary position.
- Spreader bar allows for use of 4- or 6-point slings, safer patient handling and a wider range of transfers.
- User friendly hand operated base opening adjusts and locks easily.
- Sturdy lift welding ensures safe patient transfers.
- Dual rear locking casters.
- No tool required for assembly.
- Includes chain connections.



Item #	Weight Capacity
32475	450 lb.

NEW!

PROTEKT® ALL-IN-ONE UNIVERSAL PORTABLE ELECTRIC LIFT

- Universal transfer applications: Car, Bed, Chair or Floor.
- Portable and foldable will fit in most car trunks.
- 4-point spreader bar with "clip" sling attachment.
- Lightweight and easy to move.
- Foot pedal base width adjustment.
- Manual emergency lowering for added safety.
- Dual rear locking casters.
- Battery gauge with audible low-battery indicator.



Item #	Weight Capacity
33350	350 lb.

FOR MORE INFORMATION, PLEASE CALL OR VISIT:

270 Washington Street, Mount Vernon, NY 10553 • Tel: 855-237-7622 • www.proactivemedical.com

AIR MATTRESSES

PROTEKT® AIRE 3000 SERIES LOW AIR LOSS/ALTERNATING PRESSURE MATTRESS SYSTEM



- User friendly air flow dial offers custom weight settings.
- 350 lb. weight capacity.
- 18 Month non-prorated warranty.

Product	Item #	Description
3000	80030	with standard mattress
3500	83500	with 3" safety base mattress
3600	83600	with cell-on-cell mattress
3600AB	83600AB	with side air bolsters

PROTEKT® AIRE 6000 SERIES DELUXE DIGITAL LOW AIR LOSS MATTRESS SYSTEM WITH CELL-ON-CELL TECHNOLOGY



- Deluxe digital pump offers (4) alternating cycles (10, 15, 20, 25 min.)
- 450 lb. weight capacity.
- 2 Year non-prorated warranty.

Product	Item #	Description
6000	80060	with cell-on-cell mattress
6450	86450	with 3" safety base mattress
6400	86400	with standard mattress
6000AB	80060AB	with side air bolsters

NEW!

PROTEKT® 1st DEFENSE DYNAMIC HYBRID MATTRESS SYSTEM



*Patent Pending

- Alternating pressure & low air loss therapies.
- Foam top cover insert creates a more comfortable support surface.
- 350 lb. weight capacity.
- 2 Year non-prorated warranty.

Item #	Description
82030	Protekt® 1st Defense System 36"x80"x7"
82030RR	Protekt® 1st Defense System with raised rails

PROTEKT® AIRE 8000 LOW AIR LOSS/ALTERNATING PRESSURE BARIATRIC MATTRESS SYSTEM



- Digital dual compressors offer greater airflow.
- 750 lb. weight capacity.
- 2 Year non-prorated warranty.

Item #	Description
80080	bariatric mattress 42"
86080AB-42	bariatric mattress w/ side air bolsters 42"
80085	bariatric mattress 48"
86080AB-48	bariatric mattress w/ side air bolsters 48"
80080-54	bariatric mattress 54"

FOR MORE INFORMATION, PLEASE CALL OR VISIT:

270 Washington Street, Mount Vernon, NY 10553 • Tel: 855-237-7622 • www.proactivemedical.com

Just Say ‘No’ to Medicare

Shifting your enrollment status may help reimbursement rates across the industry

By Ronda Buhrmester

The home medical equipment (HME) industry has dealt with a variety of issues during the past few years: staffing shortages, skyrocketing overhead expenses—including payroll expenses at record highs—and supply chain shortages. Delivery charges, meaning delivery to the patient’s home for equipment setup, have increased more than 50% on average. In addition, suppliers have faced an increase in acquisition costs and surcharges ranging from 20% to 30%. With a standard business model, higher overhead expenses and acquisition costs are passed onto the end user. HME suppliers, however, have a business model that limits them from passing increased costs onto patients when fee schedules don’t adjust with changing industry circumstances.

Therefore, understanding the difference between the two types of enrollment statuses and claims—participating versus nonparticipating and assigned versus nonassigned—is vital.

Enrollment Status Explained

Enrollment as a participating supplier means that the supplier accepts the Medicare allowable and will submit all claims on an assigned basis.

Being enrolled as a nonparticipating supplier means there are options to either submit the claim on an assigned basis or on a nonassigned basis. With the current reimbursement rates, having options for

claim submission is key to maintaining business operations and keeping a healthy bottom line.

Hospital-based HME suppliers should know that the enrollment status follows the company’s tax ID. Generally, hospital-based HME suppliers are under the hospital’s tax ID, which means the HME supplier follows the enrollment status of the hospital. To change to a different status, the hospital-based HME supplier would have to get a separate tax ID. This is doable, and should be considered if the hospital is participating and the supplier wants to switch to nonparticipating.

For those suppliers located within a competitive bid area (CBA), having a competitive bid (CB) contract does not direct enrollment status. A supplier with a CB contract can be enrolled as nonparticipating and can submit claims as nonassigned for items not included in the competitive bid program or that the supplier did not bid for. Having a contract under the Medicare CB program simply states a supplier must accept assignment on those products within the contract.

Suppliers located in a CBA that do not have a contract for CB items would not get reimbursed for CB items on any claim—assigned or nonassigned. If the beneficiary chooses to use a noncontracted supplier and waive their Medicare benefits, the item would be a cash transaction. In such a case,

FREQUENTLY ASKED QUESTIONS

Q. Does a participating supplier get reimbursed at a higher rate?

A. No. This applies to physician services, not HME suppliers.

Q. Are there many advantages to being enrolled as a participating supplier?

A. No. The only reward for being enrolled as a participating supplier is getting listed in the supplier directory.

Q. Is there a limiting charge to the patient on nonassigned claims?

A. No. There is not a limiting charge for HME suppliers.

Q. Is there any liability for suppliers with nonassigned claims?

A. Yes. The liability still exists with that claim. It does not matter if the claim is being submitted as assigned or nonassigned, the supplier can still get a denial and still get an audit on a nonassigned claim.

Q. Will obtaining an ABN signed by the patient be acceptable for nonassigned claims?

A. It depends. An ABN is not required simply because the claim is nonassigned. The reasons to use an ABN are the same for both assigned and nonassigned claims. There must be a specific reason that Medicare would deny the claim; submitting the claim as nonassigned is not a valid reason.

Q. If the cost of the product is higher than the allowable, can a supplier implement an ABN that will allow for an upgrade so the patient can pay the difference?

A. No. An ABN cannot be used for shifting a cost to the patient. An upgrade is not allowed within the same HCPCS code.

medtradeEAST

OCTOBER 24-26, 2022

GEORGIA WORLD CONGRESS CENTER • ATLANTA, GA



WILL WE SEE YOU IN ATLANTA?

Join us in Atlanta and see new products and technology, reconnect with industry colleagues, and hear the latest educational offerings from speakers!

Use code **HCMAG22** to receive a free expo pass*.

[medtrade.com](https://www.medtrade.com)

Produced by:



* Free expo pass offer valid for qualified attendees only and does not apply to exhibiting-type companies (manufacturers/producers/distributors) who sell to attendees.



the supplier should make sure to use an Advanced Beneficiary Notice (ABN).

About Nonassigned Claims

Let's review a few key points about nonassigned claims. For nonassigned claims for rental equipment, an assignment of benefits (AOB) or payment authorization is required for each month the claim is being submitted nonassigned. For example, if a capped rental device is being submitted as nonassigned, the supplier needs to obtain an AOB each month from the patient before the claim is submitted, for a total of 13 AOBs. The patient cannot sign all 13 at once and cannot sign a single AOB for all 13 months.

There is a solution to consider for capped rental equipment. Because claim submission is on a claim-by-claim basis, once the total allowed amount is determined on a capped rental item, a supplier may choose to offer

the first month of the rental as nonassigned and the next 12 months as assigned. By the end of the capped rental period, the supplier will reach their cost.

EXAMPLE OF BILLING FIRST MONTH NONASSIGNED*

Hospital bed: Supplier's cost is \$900
Allowable after 13 months: \$664.55
Needed above the allowable in the first month: \$298.74
First month rental: \$63.29 plus \$235.45 = \$298.74 (nonassigned)
Months two through 12 are assigned claims
Total collected after 13 months: \$900

**Note this is just an example, use your individual numbers for calculation.*

Negotiating Payments

The Centers for Medicare & Medicaid Services (CMS) continuously monitors the HME industry's habits and collects data showing that the majority of suppliers (over 98%) accept assignment. From their perspective, the fee schedule allowables are sufficient because suppliers continue to accept assignment. Said another way, as CMS continues to drop reimbursement rates, supplier habits remain unchanged.

With the already low—and inadequate—reimbursement rates coming from all payers, suppliers must become a part of the solution. While the nonassigned model applies to Medicare fee-for-service claims, this model could be negotiated with other payer contracts as well. This will take some effort, but it is doable. Otherwise, suppliers are looking at a deluxe feature charge or upgrade charge where the patient will have

WE ACCREDIT. WE CERTIFY. EVERYONE BENEFITS.

Accreditation for businesses.

Certification for professionals.

Confidence for all.

medtrade
EAST BOC Booth #331

➤ Experience the BOC difference.
877.776.2200 / bocusa.org



CMS-Deemed Accreditation
DMEPOS Certification



SCAN ME

Check 113 on index.



some out-of-pocket expense.

It's important to create a company policy that states that specific items are always nonassigned, which sets the threshold needed to accept the fee schedule for those items from any other payer. If that threshold isn't met, it's a retail cash sale. There are suppliers that are successfully working with this model.

Changing the Landscape

If you are considering changing your

Medicare enrollment status, open enrollment starts Nov. 15 and continues through Dec. 31, every year. The new enrollment status begins on Jan. 1.

That said, suppliers are not required to submit a claim nonassigned on Jan. 1. Take the time to educate your staff and ensure that you provide adequate training on the nonassigned model, then start with one product such as a walker to get the process down before your team moves on to additional products.

In order to change the reimbursement landscape, the HME industry needs to change its habits. This means submitting more claims as nonassigned and, unfortunately, passing some of the costs onto the patient—the person needing the equipment. Getting patients more involved with understanding the financial impact of Medicare reimbursement rates will also help the industry's voice be heard. **HC**

Ronda Buhrmester is the senior director of payer relations and reimbursement at VGM & Associates, specializing in billing, reimbursement and audits. She managed a hospital-based HME in Illinois for 12 years. She serves on the Medicare council for all jurisdictions including the National Supplier Clearinghouse. She is also a member of the Great Lakes Home Medical Services Association board of directors. Buhrmester has presented at the VGM Heartland Conference, Medtrade and many other conferences. Visit vgm.com.

Medtrade Booth #940

A partner you can trust, so you can focus on what matters most.

COMPUTERS UNLIMITED
TIMS
SOFTWARE | SERVICE | SUPPORT

WWW.TIMSOFTWARE.COM/MEDICAL

Check 114 on index.

Starting Off on the Right Foot

A quick primer for ensuring your next employee is comfortable

By Miriam Lieber

As is true in every industry, hiring the right people and training them properly are essential steps for retention. Once hired, new employees typically start with an onboarding process. According to Gallup, only 12% of employees feel like their onboarding was done well. Conversely, employees who have positive onboarding experiences are three times as likely to feel prepared and supported in their role.

Knowing that staff retention is a key outcome of a strong training program, how does your company's onboarding stack up? Historically, home medical equipment (HME) companies have lacked structured training programs and typically underestimate the length of time training requires. As companies continue to grow and consolidate, expect to see training initiatives become more of a focus as the emphasis on employee retention intensifies.

In this article, I will discuss personnel and onboarding, the impact of company culture on the new hire, and expectations, goals and tools to achieve on-boarding success.

Personnel

Research shows that the sooner a new hire is introduced to people in the company, the better. Further, having the new employee meet key stakeholders at the outset of their employment makes a tremendous difference in their first impression and sense of belonging.



For some companies, meeting the CEO over coffee is part of the onboarding process. When that isn't possible, holding a group introduction is another way to have the key stakeholders meet new hires. In another company, the CEO calls every new employee to personally welcome them to the almost-5,000 employee business. That is a commendable gesture.

Another great idea for initially onboarding a new employee is to tell them specifically why they were hired. It makes the person aware of what you saw in them

that earned them the job. Moreover, it will help them focus on their strengths, a key component to success. Another way to instruct a new employee is to provide them with an employee directory that includes each staff member's role in the company and contact information. This provides a "who's who," enables the new person to feel a part of the team and gives them an idea of whom they can reach out to as needed.

Culture

According to one LinkedIn survey, 66%

Stand Up *for* Homecare

Join your colleagues on the second evening of Medtrade in Atlanta for AAHomecare's Stand Up for Homecare reception. The Stand Up for Homecare campaign strengthens industry efforts to promote a positive image of home medical equipment, help us raise public awareness of homecare's many benefits, and support consumer advocacy groups like the ITEM Coalition.

Diamond Sponsors:



Platinum Sponsors:



Gold Sponsors:



Silver:



Media:



Tickets Available at
aahomecare.org/standup

CAMPAIGN
COMMUNICATING
VALUE OF HME

VENTANAS,
ATLANTA

OCT 25
5:30-7:00 PM

FUNDRAISING &
NETWORKING
WITH INDUSTRY
LEADERS



of job seekers think that culture is a vital consideration when deciding on career opportunities. Welcoming a new employee to multiple departments in addition to the one where they will be placed and providing opportunities for immediate bonding can provide a good first impression. To enhance team culture and a sense of inclusion, give the employee swag such as a coffee mug with the company's name or clothing with the company's insignia when they first start. Include a personalized welcome letter.

New hires have shared with me that hands-on training methods make the onboarding process fun and tangible. Such hands-on methods can include learning how each piece of equipment operates and scavenger hunts to help them find key places in the office. Studies show that these types of engagement tactics will help your team outperform others by 20% or more.

Survey the new employee after a few weeks to determine the effectiveness of the early stages of the onboarding process. Responses will dictate shifts in the process as necessary.

Expectations

Another key component that enlightens and supports a new staff member is the way you set expectations so they are aware of what should happen at each step in their onboarding process.

For example, some HME companies have created a "What to expect to after week one, week two, etc." document. Supervisors typically meet with the new hire to review

their progress and to help with any questions or concerns at the end of each week. Further, some HME providers have at least one trainer/team lead per every six to 12 people on duty. This means that there is always someone available to help.

To ensure the new hire understands that it takes time to learn their tasks, give them industry benchmarks. For example, many HME companies state that a new hire should

BiWaze[®] Cough SYSTEM

Provide your patients an efficient and effective cough therapy to clear secretions.

Helping your patients:

- Be more comfortable with a natural cough pattern¹
- Maintain lung volume after therapy¹
- Remove secretions easier due to consistent oscillations¹



1. Malone, P., DiBlasi, R. BiWaze Cough System – a bench study evaluation and comparison of cough efficiency. ABM Respiratory Care. <https://abmrc.com/biwaze-cough-white-paper/>

BiWaze[®] and ABM Respiratory Care[™] are registered trademarks of ABMRC, LLC.

©2022 ABMRC, LLC. ALL RIGHTS RESERVED. PRTN-1585539264-330 rev 1.0 SEP-2022 ENG US



Check 112 on index.

not be expected to take phone calls for at least 12 weeks; a few might do it earlier but admit to the riskiness of phone duty earlier than 12 weeks. Tell the new staffer how many lines they should expect to work or orders they should expect to confirm in a day. Finally, tell the new employee that it takes upwards of six months to a year before they will feel completely comfortable in their position. A mentor advising them will help them maintain confidence along the onboarding journey.

Tools & Trackers

There are tools and cheat sheets that can help new employees feel a sense of belonging. Survey the new employee after a few weeks to determine the effectiveness of the early stages of the onboarding process. Responses from the survey will dictate shifts in the process as necessary. Also provide a

checklist of what the new hire is expected to know at each interval in the process. It should include what they have accomplished that week as well as an assessment of how well the person is progressing. This is done by auditing their work and measuring it against stated goals. Remediation that is done early in the process makes it easier to detect if a person might learn differently or if someone is not catching on.

Helpful tools include recorded Teams or Zoom trainings, learning management system assessments and further mentorship. Regardless of the training method, as the new employee makes progress, showing appreciation for a job well done will give them the confidence to build on their success.

When you onboard a new employee, ask about their preferred appreciation method and their favorite snacks, candies

or activities. When a reward is earned, personalizing it makes it that much more special of a gift.

While hiring the right person is essential, it is not the end of the story. Once the person begins their first day, the real opportunity for success begins.

From the people they meet to the culture of the company, a real fit for the employee will take shape. That, combined with clear expectations of the onboarding process and with specific tools and trackers used to mark their progress, will create the environment tailored for a new hire's success. And as I always say, success breeds success. **HC**

Miriam Lieber is president of Lieber Consulting, LLC, and a member of HomeCare's Editorial Advisory Board. She can be reached at (818) 692-1626 or miriam@lieberconsulting.com. Visit lieberconsulting.com.

We offer a cafeteria menu of services, customized to each client's needs:

BILLING SERVICES

- ▶ Commercial and Governmental Insurance Billing
- ▶ Payment Posting
- ▶ Verify Reimbursement Accuracy
- ▶ Patient Statements
- ▶ Answer Patient Phone Calls
- ▶ Claims Denial Management
- ▶ Obtain Prior Authorizations
- ▶ Emergency "Fill In" or Transition Billing

PROFESSIONAL SERVICES

- ▶ Provider Credentialing
- ▶ Insurance Contracting
- ▶ Workflow Analysis
- ▶ Audit Preparation

YOUR REVENUE CYCLE PARTNER

Quick Cost Effective Billing Solutions



For A Free Consultation Call
702.800.3689

info@hmebillingandconsulting.com | www.hmebillingandconsulting.com

Check 115 on index.

It's a Rich Man's World

Connected care can help seniors manage soaring costs

By Rosemary Kennedy

As seniors face increasing costs for everything from health care to food, medication and personal care items, they are making daily decisions that impact their health and life. Personal emergency response systems (PERS) and remote patient monitoring (RPM) are two crucial technologies that offer this vulnerable population a way to save money so that they don't feel pressure to skip meals and medication.

PERS and RPM can come in many forms. At their highest use, these devices combine to create an artificial intelligence-enabled digital health and safety platform that provides secure, noninvasive, continuous monitoring with emergency and nonemergency support to help aging and vulnerable populations live safely, independently and well at home.

Importantly, these platforms feature data and analytics that help caregivers understand critical changes in a patient's health, activity and mobility, enabling more informed clinical decision-making, smarter interventions and fewer adverse events. The result can be dramatically better outcomes, lower care costs and extended quality of life.

PERS and RPM may also represent a lifeline for the many homecare agencies struggling with staffing shortages that are projected to worsen, as the United States Bureau of Labor Statistics predicts the number of openings for home health and

personal care aides will increase nearly 37% by 2028.

The New Crisis Facing Seniors

In 2022, American consumers have been left reeling by a toxic economic brew of growing inflation, rising interest rates and supply chain crunches that have many suffering financially. It was eye-opening to read the results of a recent consumer survey of American adults by West Health and Gallup that explored the various ways that health care costs are affecting older Americans.

The survey found that 37% of adults 65 and above are concerned they will not be able to pay for needed health care services in the next year. The situation is even worse for older Americans who are not yet eligible for Medicare, with that figure growing to 45% for those aged 50 to 64. As a result, nearly 50 million adults aged 50 and up are at risk for more severe illness and even death due to the cost of health care, according to Gallup.

It's hardly a surprise that rapidly rising health care costs are burdensome for older Americans. Consider that out-of-pocket health care expenses for adults 65 and older rose 41% from 2009 to 2019, according to the U.S. Department of Health and Human Services. For those affected, the consequences can be dire, as some older Americans report sacrificing basic needs simply to afford care. About one in four adults 65 and older and three in 10 aged

50 to 64 have cut back on food, utilities, clothing or medication due to health care costs. This problem is experienced to a greater degree by older women and Black Americans, according to Gallup.

Other seniors cope by avoiding needed care, which could further exacerbate the health problems they are experiencing. Twelve percent of those 65 and older say they or a member of their household had a health problem in the last year that they did not seek treatment for due to cost, and the number increases to 25% for Americans between 50 and 64.

Ways RPM & PERS Can Relieve the Burden

For years, the concept of aging in place has been appealing to many seniors as advances in technology made it more feasible, but the COVID-19 pandemic accelerated the process. For example, more than 75% of consumers said they are willing to get in-home care for anything ranging from a well visit to chronic disease management, according to PwC's Health Research Institute. Additionally, recently proposed federal legislation would provide tax incentives for home modifications to allow seniors and those with disabilities to live comfortably and safely in their own homes.

To accommodate this growing desire to age in place, the challenge for homecare providers lies in addressing the

HomeCare HEROES

2022

THANK YOU FOR NOMINATING



Thank you for nominating the colleagues, friends and mentors you called HomeCare Heroes. It is inspiring to read their stories and we are grateful for the work this entire industry does to heal and protect our communities.

Be sure to check in next month. HomeCare will dedicate our November issue to honoring our finalists and will also share their stories online at homecaremag.com.

A very special thank you to our sponsors for making this possible:

CHANGE
HEALTHCARE

GENERATIONS.
Homecare System

PointClickCare

PHILIPS

RESPIRONICS



It's hardly a surprise that rapidly rising health care costs are burdensome for older Americans.



We're here to help.



Offering over 30,000 combinations of safety beds for those with Special Needs addressing physical and cognitive disabilities.



SleepSafe® II - Medium Bed in Multi-Color w/Safety Rail Up - 32" Transfer Height



SleepSafe II® - Medium Bed in Oak Cream Padding, IV Pole & Tubing Channel Access Cut Out



SleepSafer® Extension Bed in Cherry Shown with Open Safety Rails

SleepSafe® Beds is a Virginia manufacturer of adaptable safety beds designed to address the issues of entrapment and falls for those with Special Needs. Bed models include SleepSafe®, SleepSafe® II, and SleepSafer® offering varied levels of rail protection and mattress heights.



SleepSafe® Beds provide a safer sleeping environment for the user. All beds are built to order and are available in twin, full or queen sizes. Foundations include fixed, articulation, adjustable mattress elevations, in manual or electric configurations.

Contact us for DME provider applications!

Made in Bassett, Virginia · 866-852-2337 · SleepSafeBed.com · Free Consultation

Check 118 on index.

complex physical, emotional and social vulnerabilities that make it more difficult for aging seniors to remain independent and at home. Today, more agencies are looking to PERS and RPM to streamline their services and help seniors transition care to lower-cost at-home settings by providing detailed data and insights that inform smarter decision-making in at-home patient care. Among all PERS end users, the homecare segment accounted for a major share of around 31% in 2021 in the U.S., according to Research and Markets.

With these technologies, home health and hospice agencies can increase the efficiency of their staffs, leveraging data to determine which patients require in-home visits from nurses or aides and how immediately, for example.

At the same time, nurses can save time that was previously required for traveling

between patients' homes for basic monitor checks, enabling more productivity and greater reimbursement. Similarly, by remaining in their homes, patients save on the substantial costs associated with assisted-living facilities, which can average as much as \$9,000 per month, according to Genworth.

Spotting Social Determinants

Even more compelling is the fact that RPM and PERS facilitate the collection of data related to social determinants of health, which may include insecurity around housing, nutrition, employment or access to care. By obtaining a clearer picture of the nonmedical challenges patients are facing, homecare agencies gain the ability to connect seniors to community-based organizations that can help them address these issues.

As seniors grapple with the high costs of everything, including health care, and homecare agencies face staffing shortages, both groups are smart to look to technology to cut costs, while helping maintain high standards of care.

RPM and PERS are the right technologies to accommodate seniors' increasing demand to age in place and to help the homecare agencies that serve their up-to-the minute needs. **HC**

Rosemary Kennedy, Ph.D., RN, is chief health informatics officer for Connect America, a provider of connective health solutions dedicated to empowering aging adults and vulnerable populations to age gracefully and independently with dignity at home. The company's artificial intelligence-assisted digital health and safety platform includes RPM, PERS, medication management, analytics and social determinants of health support for continuous in-home and mobile monitoring for timely interventions and smart escalations of care. Visit connectamerica.com.

Sol

Full Face CPAP Mask

NEW

*A premium mask
without the premium price*



Call **1-877-578-6738**
or visit **SunsetHCS.com**



SUNSET
HEALTHCARE SOLUTIONS

Check 119 on index.

Avoiding the Obstacle That Is Prior Authorization

Reduce claim denials & speed up your cycle with automation

By Ron Wince

“Prior authorization required.”

It’s a phrase that’s all too familiar among health care providers. Recently, the Kaiser Family Foundation looked at various services subject to prior authorization within Medicare Advantage (MA) plans. At 99%, durable medical equipment topped the list, with home health services and physical therapy coming in slightly lower at 92% and 89% respectively.

Since these MA plans must follow federal guidelines—and many private insurers also follow suit—submitting prior authorization requests is part of the daily routine of most homecare providers. What’s more, as the services that require prior authorization continue to expand, so do payment denial rates. According to an American Hospital Association survey, 89% of providers saw an increase in claim denials between 2018 and 2020, with 51% saying the increase was “significant.”

Knowing if prior authorization is required and submitting clean claims are critical to the well-being of both the patients you care for and your revenue cycle.

A Clunky Process Yields a Sluggish Revenue Cycle

Today’s prior authorization process is ripe for change. It still relies heavily on repetitive data entry. Often, your team depends on tribal knowledge—there’s that staff person

who knows the “Blues” better than anyone or a “Bible” of payer information that must be constantly maintained. Usually, prior authorization involves legwork to determine if it is required and to identify submission criteria, all of which needs to be gathered and submitted on the correct form via the payer’s preferred submission channel. It’s an

inefficient process, despite your best efforts.

To make matters worse, post-acute providers are in a particularly precarious position because you rely on referrals. This adds a layer of complexity to the process. You depend on the accuracy and completeness of the information from the referring provider. If information is missing,



you backtrack to fill in the blanks before you can get started—or risk a denial. It's a burden at any time, but it's particularly challenging now due to staffing shortages.

Denials, of course, aren't always attributed to problems with the prior authorization submission. Earlier this year, for example, the U.S. Department of Health and Human Services' Office of Inspector General reported that 13% of prior authorization requests to Medicare Advantage plans were improperly denied. The fact remains that many requests are denied due to missing information or typographical errors. Reworking the claim may overturn the denial, but that increases the pressure on overworked staff, delays patient care and strains your cash flow.

How Intelligent Automation Helps

If you're skeptical about taking on

13%

denied, according to the U.S. Department of Health and Human Services' Office of Inspector General.

The number of prior authorization requests to Medicare Advantage plans that were improperly

intelligent automation, you aren't alone. Change—even if it will definitely lead to improvements—can be daunting. You might worry that switching to automated prior authorization means you're relinquishing visibility and control over a critical part of your revenue cycle.

The reality, however, is that you're establishing greater control. When you implement intelligent automation, it follows a repeatable process that meets payer-specific requirements, removing opportunities for errors. Intelligent automation also decreases the time it takes

MES has you covered!

... for 55 years



Clean ventilator cover



Labels



Ventilator cover



Live Customer Service



Woman Owned



Ships within 24 hours

800-423-2215



mymesinc.com

Check 116 on index.



FDA CLEARED WEARABLE, WIRELESS AND CONTINUOUS PULSE OXIMETER

20% Medtrade East Show discount on all Guardian Angel purchases with code **AULISA20** on www.aulisa.com.



For any questions, please contact our VP of Sales & Marketing Kenny Abriola directly at **(615) 476-3970**.

Check 122 on index.



Providing a Full Line of Billable Maternity Products

Get maximum revenue and great reimbursement all while growing your current business!

BREAST PUMPS • MATERNITY COMPRESSION • PEDIATRICS • & MORE!



From billable breast pumps, maternity compression, and breastfeeding supplies, Motif Medical makes it easy for distributors to become a mom's one-stop-shop with our full line of maternity products!

FOR MORE INFO, VISIT
MOTIFMEDICAL.COM/WHOLESALE-INFO

Check 125 on index.

The combination of intelligent automation and robust data pipelines give you the fuel needed to submit claims that are right the first time.

to determine prior authorization requirements, gather and submit a request to five minutes, a time savings of nearly 90% over manual process involving repetitive data entry, and waiting on hold to confirm details with payers and other inefficiencies.

Automated prior authorization breaks down into four components.

- 1. Requirements:** Based on factors such as payer, plan, service type, CPT/HCPCS codes, place of service, diagnosis and clinical documentation, intelligent automation enables real-time connections to determine if prior authorization is required, and if it is, identifies the correct submission form and criteria.
- 2. Pre-screening:** As a best practice, the intelligent automation solution you adopt should check submissions for errors, information gaps and medical necessity. By doing so, you can experience up to 90% reduction in claims rework due to preventable denials.
- 3. Submission:** Automation enables submissions directly via e-fax, payer portal or an EDI 278 transaction. You may still have to handle a handful of submissions manually when peer-to-peer reviews are needed, but even then, most of the heavy lifting will have been handled through the automated process.
- 4. Monitoring:** With time-stamped submissions available all in one place, keeping track of the request's status is simplified. The process is automated so you can quickly see approvals or denials as they happen. No more juggling multiple passwords for dozens of payer portals or time-consuming faxes and phone calls just to see if requests have been approved or rejected.

Part of automating this data-intensive, manual process involves enabling fast, secure exchanges of patient, provider and



payer data, and delivering the necessary data where and when it's needed, regardless of your system of record. Built-in controls in the automation can even help identify discrepancies in the data and flag them for correction prior to submission.

Look at Upstream Processes for Proactive Denial Management

It's also important to troubleshoot and address denials internally. Are there areas where data gaps or errors occur further upstream of prior authorizations?

You might, for example, discover that errors or omissions in demographic information can be prevented by changing or standardizing your data intake or registration process. You can look at your internal documentation practices and collaborate with other providers such as referring physicians to ensure that everyone involved is capturing complete information needed to submit a clean claim.

The combination of intelligent automation and robust data pipelines give you the fuel needed to submit claims that are right the first time. You can dramatically reduce preventable errors, which account for 90% of all denials. That will do wonders for your revenue integrity and help you stay focused on what matters most: delivering the care your patients need. **HC**

As the founder and CEO of Myndshft Technologies, Ron Wince started with a big idea: to enable value-based care by automating and optimizing time-consuming administrative tasks like prior authorization. An engineer by training, he has put his decades of experience to work so that providers and payers can focus on patients, not paperwork. Learn more about prior authorization automation at myndshft.com.

 **TRANQUILITY**



Help Them Stay Home Longer



The right absorbent products help:

- Deter falls, skin issues, infection
- Allow for healthy sleep
- Improve wearer and caregiver experience

FREE SAMPLES AVAILABLE

Visit TranquilityProducts.com/HOME22

*Tranquility is a registered trademark of Principle Business Enterprises, Inc. | © Copyright 2022 | 6TQB-006-AD22

Check 127 on index.



WE MAKE IT LAST

The Armada System assembles easily with one 1/2" wrench and the fully anodized finish will last a lifetime.

ARMADA
by AlumiRamp

1.800.800.3864 • www.alumiramp.com

Proudly made in the U.S.A. since 1986.

Check 121 on index.

Removing Barriers to Care at Home

Best practices for practicing remotely

By Ryan Bullock

Telehealth and its innovation have become essential to positive growth in the health care industry as a whole, and to homecare in particular. As digital transformation continues to drive the industry forward and providers strive to reach all demographics, they must understand the benefits of using technology and integrating the latest developments into their coverage plans. New growth in the industry has improved communication between patients and providers, yet certain barriers remain prevalent—especially for minority groups.

A recent study found that even when there are health plans to address disparities, historically oppressed and disadvantaged

populations are still faced with more challenges. And with 80% of providers in the United States planning to invest in technologies to continue innovating digital health in 2022, now is the time for homecare providers to understand how to best use telehealth to reach patients in all locations.

Telehealth allows access to those in need of guidance from a provider, leading to the flourishing of in-home care, which results in caregivers providing professional treatment directly in the patient's home. With technology, the opportunities for ease, comfort, cost effectiveness and numerous other benefits skyrocket. Home health options are also easier to learn about

when communicating with providers via telehealth platforms.

Best Practices

Homecare providers must know how to use telecommunications to their advantage. This requires understanding patient needs and ensuring they are comfortable using the platform. Since the patient is in a remote location, you must be sure to build a trusted relationship so they feel comfortable using virtual platforms to communicate. Home-bound patients will be more engaged if you follow these basic practices before, during and after interactions.

- Test your equipment beforehand and have a private location for the appointment. Even if all is going well with your primary technology, have a backup plan with your patient such as a phone number or email address.
- Send a reminder to your patient before the appointment explaining how to appropriately prepare for the virtual visit, which may include a how-to-guide for signing on, an emergency number to call in case of difficulty and more.
- Center the patient. It's common to feel like you need to fill moments of silence, but this can cause patients to feel lectured to. Ensure effective communication by providing ample time for patients to respond.
- Ensure patient comfort by asking them how they prefer to receive information and how they would like the interaction to go. Do they want a summary of the visit sent post-appointment? Are they comfortable taking their own notes? Camera on or off?
- Practice active listening to let them know you are understanding their needs during the appointment. Repeat what they say and ask them if you are understanding their feelings accurately, then suggest a treatment plan.

Patients receiving care from their home can be aided significantly by telehealth. The



use of communication through technology allows the patient to remain independent, comfortable, limits daily disruptions and so much more.

Understand Shifting Demands

Since the start of the COVID-19 pandemic, a consistent theme among patients has been convenience. A 2021 survey found more than half of consumers surveyed prefer telehealth visits and other virtual care, as it requires less time, energy and cost than in-person care. As this trend continues in 2022, providers and agents must not only ensure that their virtual abilities are updated, but also that all demographics they serve have access to this technology and understand how to properly utilize it to access their care.

Efficiency and effectiveness are also at the core of success in telehealth. If the patient feels they are not receiving accurate and professional care, they will not feel comfortable speaking about their medical history, symptoms, etc. with the provider or health insurance agent virtually. Additionally, be prepared for the meeting by understanding the reason for their appointment and having their files on hand in case you need to reference them. Patients will not appreciate you “wasting” their time by trying to sift through files or asking them questions they think you should already know the answers to. Be thorough during the meeting, yet be sure you are not spending unnecessary time on conversations you could have better prepared for.

Improve Digital Literacy

Telemedicine, virtual visits, virtual reality, artificial intelligence and machine learning have taken the helm of the health care industry. Providers hoping to stay on top of consumer demand and reach all demographics will need to ensure they are integrating the latest advancements and properly understand how to execute the technology. After understanding new telehealth advancements, providers should then strive to work with their communities to educate consumers on how to best operate new systems and practices, especially providers catering to older communities and populations where access to technology (i.e. smartphones, computers, etc.) is limited.

By understanding why there are technology gaps and how to avoid them, providers can improve their performance when interacting with patients virtually. Patient demands such as comfort, convenience, efficiency and effectiveness are essential to address so technological advancements can continue to flourish within the homecare industry. **HC**

Ryan Bullock is chief operating officer of AeroFlow Healthcare, a provider of durable medical equipment. Bullock is focused on developing and delivering community-driven business services and solutions, facilitating excellent client service and directing successful revenue growth. Visit aeroflowhc.com.

MAC'S

PL-50, PL-72
& PL-90

MAC's Vertical Home Lift

- 5-Year Limited Warranty
- Still taking VPL orders!

800.795.6227
macshomelift.com

Check 124 on index.

Margin

PARKS health products®

Everything is Better with Kalmia®

- Same-day shipping
- USA based customer service
- Strong margin opportunity
- Credit terms available
- Floor sample discounts
- 75+ years of manufacturing expertise

Visit us at
Booth #512
medtradeEAST

Scan Here

Kalmia Perfect Height Bed System

Become a Dealer Today!
844-433-2435 | parkshealthproducts.com

Check 126 on index.

PERS & HOME MONITORING

In this directory, HomeCare delivers a monthly breakdown of crucial sections of our annual Buyer's Guide, providing the most up-to-date information on the products and services your business needs. This month, we're featuring personal emergency response systems (PERS) and home monitoring products. Here and on homecaremag.com/buyers-guide, you can find the essentials to help your business thrive. **HC**

Alert Sentry
Lakeville, MA
(877) 253-7899
alertsentry.com

Freeus
Farr West, UT
(888) 924-1026
freeus.com

LogicMark
Louisville, KY
(800) 519-2419
logicmark.com

Silent Call Communications
Waterford, MI
(800) 572-5227
silentcall.com

Care Innovations
Folsom, CA
(855) 885-2273
careinnovations.com

GrandCare System
West Bend, WI
(262) 338-6147
grandcare.com

Medical Guardian
Philadelphia, PA
(800) 668-9200
medicalguardian.com

Simpl Technology
Palm Beach, FL
(833) 237-4675
smpltec.com

CARETEQ
Las Vegas, NV
(424) 535-8595
sofihub.com

Independa, Inc.
San Diego, CA
(800) 815-7829
independa.com

ResponseNow Medical
Alert Systems
Portland, OR
(866) 795-4321
responsenow.com

Smart Caregiver Corporation
Petaluma, CA
(800) 650-3637
smartcaregiver.com

Clear Arch Health
Boca Raton, FL
(800) 995-1854
cleararchhealth.com

LifeStation
Union, NJ
(800) 446-3300
lifestation.com

Seniors Home Services
Annapolis, MD
(800) 600-7210
seniorshomeservices.com

Connect America
Broomall, PA
(800) 893-7000
connectamerica.com

Lively
San Diego, CA
(800) 733-6632
lively.com



2022 HOMECARE BUYER'S GUIDE LISTINGS

Our 2022 Buyer's Guide is filled with manufacturers' and service providers' contact information to help you find the right mix of products and services for your company. No matter which way you plan to steer your business in 2022, we know that products and services are at the heart of it all, and this comprehensive guide will help you grow and stay on track throughout the year. You can also easily reach these resources online at:

homecaremag.com/buyers-guide.

NEW ON THE MARKET

Hand-picked by the editors of HomeCare, these products are the newest frontrunners shaping the homecare marketplace. Stay tuned in every issue for more industry-leading solutions.

2



1 Perfect Posture Corrector

CORE PRODUCTS INTERNATIONAL

The Core Products Perfect Posture Corrector helps relieve pain and discomfort associated with poor posture by providing a firm foundation while improving postural awareness. Constructed of resilient mesh material to help keep your customers cool and comfortable, it provides indirect pressure on the spine by covering a wider area than most posture correctors. This helps prevent irritation to the spine. The shoulder straps help correct posture by placing the shoulders in proper alignment, helping improve posture and relieving pain. The durable pulls are connected to the shoulder straps, crisscross at the lower back and are secured around the waist. Visit coreproducts.com.

Check 200 on index.

2 RespiMask

DOCTOR IN THE HOUSE

This meditation and sleep mask combines light blocking, eye-space protection, healing sound and soothing comfort to take CPAP users to a deeper level of relaxation. The RespiMask is designed to decrease the anxiety and stress related to sleep apnea and the noise and look of CPAP equipment. The mask works with earbuds so users can enjoy their favorite music or other soothing sounds. Visit docinthehouse.com.

Check 201 on index.

3 MedaChair Freedom

MEDACHAIR INC.

The Medachair Freedom eliminates the need for caregiver to physically lift and lower loved ones on and off the toilet, which eliminates bathroom-related injuries and helps strengthen dignity. MedaChair is adjustable so it can role through any door and over any commode. MedaChair is available for purchase and/lease and rent. Visit medachair.com.

Check 202 on index.

4 Solo and Smart Book

SENIORCARE.COM

From solo aging expert Carol Marak comes a book that provides a road map for seniors to live confidently on their own. Includes tips on aging in place, health needs, social engagement, finances, legal matters, faith and more. Visit seniorcare.com.

Check 203 on index.

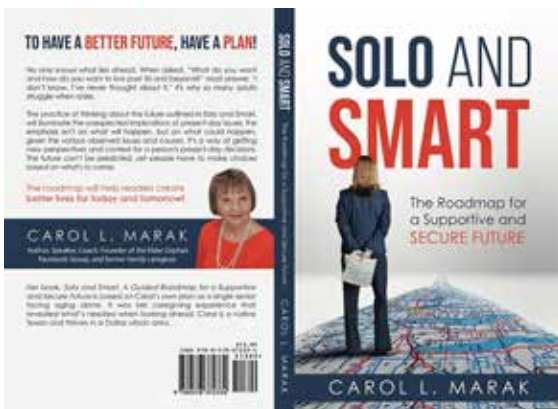
1



3



4



POWER CHAIRS

1 EW-M30

EWHEELS

The EW-M30 power wheelchair is designed with travel in mind; simply fold and go. When folded, it can fit in spaces such as a closet or the trunk of a car. This power chair gives your customers the freedom to travel without having to worry about vehicle lifts, heavy equipment or disassembling a scooter. The EW-M30 aluminum frame is strong and durable and the 16-inch rear wheels provide added comfort and versatility. This chair travels up to 12 miles on a single battery charge and has a maximum speed of 3.7 miles per hour. Visit ewheelsdealers.com.

Check 204 on index.

2 Feather Power Chair

FEATHER

The Feather power chair weighs in at just 33 pounds, including the battery. That's less than half the weight of most electric wheelchairs, making it easier to lift in and out of a car for travel. The Feather Power Chair is a hybrid chair that allows the user to be pushed when the chair is in neutral. The 24-volt, 10-amp-hour battery provides up to 10 miles of travel on a single charge, with a maximum speed of four miles per hour. Includes flip-back armrests for comfort and optional anti-tippers for safety. Visit feathermobility.com.

Check 205 on index.

3 Aviva Storm RX

INVACARE

The Invacare Aviva Storm RX power wheelchair was developed with the customer experience in mind and brings new features to enhance the user, provider and clinician experience. The Aviva Storm RX is designed for users who travel outdoors but also need maneuverability indoors. It is intuitive to drive and is an easy transition for people moving from a manual wheelchair to a power chair. It comes with the ultra-low Maxx power positioning system and LiNX electronic control system. Visit rehab.invacare.com.

Check 206 on index.





4 EZ-Go

MERITS HEALTH PRODUCTS

Merits Health products' EZ-Go is a compact and lightweight mobility solution for people on the go. The quick-connect feature makes for easy assembly, disassembly and transportation. The heaviest piece weighs only 42 pounds. The EZ-Go features a tight turning radius of 23 inches. The ergonomic mid-back seat gives additional support. Customers can also choose from a number of accessories including a cane or crutch holder, walker holder, oxygen tank holder and more. Weight capacity is 250 pounds. Visit meritsusa.com.

Check 207 on index.

5



5 Jazzy EVO 613 Series

PRIDE MOBILITY PRODUCTS

The Medicare-reimbursable Jazzy EVO 613 series power chair has a narrow base width of only 22 inches. The Jazzy EVO 613 Li model (pictured) is lithium powered, featuring 25% less charging time and 25% more range. The Jazzy EVO 613 series features a depth-adjustable, limited recline, comfort-style memory foam seat that swivels for greater access. Other series highlights include mid-wheel drive, a three-inch ground clearance, maximum speeds up to 5.1 miles per hour, 13-inch mid-wheel drive tires, Pride's patented Active-Trac suspension and removable matte-finish color-through shrouds. Visit pridemobility.com.

Check 208 on index.

6



6 Model F

WHILL, Inc.

The new WHILL Model F has everything desired in a travel power chair. Lightweight, foldable and maneuverable, the Model F allows users to get out and explore with greater mobility and independence. The Model F folds in three seconds or less and weighs just 52 pounds (without battery), making it easy to transport. The six-pound lithium-ion battery offers a range up to 12.4 miles. The free WHILL app allows users to monitor key device information, lock and unlock to prevent unwanted use, manage speed settings and drive the device remotely. Visit whill.inc.

Check 209 on index.

EXERCISE & REHAB

1 Compact Seated Ellipticals

CUBII

Cubii's compact seated ellipticals bring approachable movement and exercise to users of all backgrounds, body types and ability levels—especially those who are aging or going through rehabilitation. These products emphasize ease of use and superior quality. Cubii is a great choice for home medical equipment providers looking to enhance their retail offerings with a modern and eye-catching solution. Visit cubii.com.

Check 210 on index.



2 Vizziq Neuromuscular Trainer

KC PRODUCT DEVELOPMENT LLC

The Vizziq Neuromuscular Trainer is a neuromuscular gait training device designed to support natural posture, dynamic stability, efficient forward propulsion and gait speed. Vizziq training increases gait speed, stride length and trunk rotation, leading to an improvement in confidence and independence, as well as a decreased fear of falling. Technology-driven features are based on aquatic therapy and Pilates and include a spring-loaded, pivoting frame with optional frame lock; adjustable ergonomic handlebars; polyurethane wheels for better traction, turning and maneuverability; and a rear-locking mechanism to turn the Vizziq into a personal exercise station. Visit vizziq.com.

Check 211 on index.



3 Kneewell

KNEEWELL, LLC

Kneewell is designed to help post-arthroscopic knee surgery patients regain full range of motion. The ratcheting mechanism allows the user to adjust the force applied to the contracted knee soft tissue and stubborn scar tissue that hinders full range of extension. This device mimics the therapeutic action of low load, long-duration extension treatment. The user can now benefit from the same treatment process three times per day, resulting in more robust therapy with less backsliding between clinic visits. Designed for use independently or as an adjunct to post-operative physical therapy. Size adjustable for use by a variety of clients. Visit kneewell.com.

Check 212 on index.



4 MVPmini Percussion Massager

PLAYMAKAR

This compact massager is a device your customers will use every day. It combines the power to relax sore muscles, improve flexibility and promote healing with the portability customers are seeking. The MVPmini is also now available with PlayMakar's HeatTip, combining percussive massage with heat for targeted therapy—ideal for releasing tension and knots, warming up muscle tissues, and improving recovery and range of motion. Comes with a carrying case. Visit playmakar.com.

Check 213 on index.



RAMPS

1



1 Sliding Door Threshold Ramp

HANDIRAMP

HandiRamp's Sliding Door Threshold Ramp is an accessibility solution for sliding doors. Sliding glass doors can present an obstacle for people who use wheelchairs, walkers, scooters or other mobility devices. Even though they are not greatly elevated in height, the tracks of sliding doors impede the wheels of mobility devices and can be damaged by scooters or wheelchairs. The HandiRamp Sliding Door Threshold Ramp has a 750-pound capacity and creates a smooth, continuous platform over the tracks. When not in use, the crossover bridge section of the ramp can be flipped up so the sliding door can completely close without moving the ramp. Visit handiramp.com.

Check 214 on index.

2



2 Rubber Threshold Ramp

HARMAR MOBILITY, LLC

Use the threshold rubber ramp inside or outside the home. The slip-resistant, durable rubber ramp can accommodate up to 850 pounds and is easily installed, requiring no drilling or home modifications. With 36 inches of usable space, the ramp can also be modified by trimming, cutting or notching for a custom fit. This heavy-duty ramp can provide accessibility for most people in wheelchairs, scooters and power chairs. Visit harmar.com.

Check 215 on index.

3



3 Liberty Series Solid Aluminum Ramp

NATIONAL RAMP

The Liberty series provides a maintenance-free aluminum ramp with a nonslip solid deck surface. National Ramp's solid surface aluminum ramp aids those with mobility impairments to get in and out of their homes safely. This Americans with Disabilities Act (ADA)-compliant, modular, solid-surface aluminum deck ramp is the perfect solution for any home. These wheelchair ramps can be installed quickly. Visit homeaccess.nationalramp.com.

Check 216 on index.

4



4 RapidRamp

PSS

RapidRamp is a portable, temporary ramp that makes installation quick and easy. The six-foot ramp consists of six articulated, 48-inch wide, slip-resistant sections and can support up to 1,000 pounds. Lightweight sections allow for convenient transport and can be assembled in minutes to accommodate a six-inch curb. RapidRamp grants broader and easier access with its ADA-compliant design and ease of transport, allowing for safe ramp applications. Visit pss-innovations.com.

Check 217 on index.

5



5 Roll-A-Ramp

ROLL-A-RAMP

Roll-A-Ramp aluminum ramps are portable and versatile to meet your customers' access needs. Available in six widths, ramps can be built to any length. Constructed from 6061-aircraft aluminum, these ramps are sturdy yet lightweight. Use just the ramp or add handrails for added security. Ramps can be used for homes, vans, RVs, watercraft and more. No building permit or special tools are required for set up. Change the length at any time by adding and removing links. Visit rollaramp.com.

Check 218 on index.

GET FREE INFORMATION

HomeCare

READER SERVICE

Expires
90 days
from
1022

Check the box(es) below to receive free information from companies listed in this issue.

ONLINE

For fastest service, visit hcfreeinfo.com (U.S. only)

FAX

Complete, tear out and fax to 416-620-9790

MAIL

Complete, tear out, place in an envelope and mail to: HomeCare, c/o IMS, PO Box 1663, Buffalo, NY 14205



ADVERTISERS

Advertiser Name	RS#	Page
AHomecare		35
ABM Respiratory Care	<input type="checkbox"/> 112	36
AlumiRamp	<input type="checkbox"/> 121	45
Aulisa Medical USA, Inc.	<input type="checkbox"/> 122	44
Board of Certification/Accreditation	<input type="checkbox"/> 113	32
Brightree	<input type="checkbox"/> 102	BC
Brownmed	<input type="checkbox"/> 103	9
CAIRE	<input type="checkbox"/> 104	1
Dignity Lifts	<input type="checkbox"/> 128	55
HME Billing & Consulting	<input type="checkbox"/> 115	37
Mac's Lift Gate Inc	<input type="checkbox"/> 124	47
Medtrade		31
MES	<input type="checkbox"/> 116	43
Motif Medical	<input type="checkbox"/> 125	44
National Seating and Mobility	<input type="checkbox"/> 117	27
OxyGo	<input type="checkbox"/> 106	19
Parks Health Products/Kalmia	<input type="checkbox"/> 126	47
Philadelphia Insurance Companies	<input type="checkbox"/> 107	3
PointClickCare	<input type="checkbox"/> 108	IBC
Proactive Medical Products	<input type="checkbox"/> 101	28-29
Sleepnet	<input type="checkbox"/> 129	23
SleepSafe Beds	<input type="checkbox"/> 118	40
Sunset Healthcare Solutions	<input type="checkbox"/> 119	41
Tactical Back Office	<input type="checkbox"/> 109	5
TeamDME!	<input type="checkbox"/> 111	21
The Compliance Team	<input type="checkbox"/> 110	IFC
TIMS/Computers Unlimited	<input type="checkbox"/> 114	33
Tranquility	<input type="checkbox"/> 127	45
Universal Software Solutions Inc	<input type="checkbox"/> 120	13

*This ad index is furnished as a courtesy, and no responsibility is assumed for incorrect information.

PRODUCTS

Company Name	RS#	Page
Core Products International	<input type="checkbox"/> 200	49
Cubii	<input type="checkbox"/> 210	52
Doctor In The House	<input type="checkbox"/> 201	49
EWheels	<input type="checkbox"/> 204	50
Feather	<input type="checkbox"/> 205	50
HandiRamp	<input type="checkbox"/> 214	53
Harmar Mobility, LLC	<input type="checkbox"/> 215	53
Invacare	<input type="checkbox"/> 206	50
KC Product Development LLC	<input type="checkbox"/> 211	52
Kneewell, LLC	<input type="checkbox"/> 212	52
MedaChair	<input type="checkbox"/> 202	49
Merits Health Products	<input type="checkbox"/> 207	51
National Ramp	<input type="checkbox"/> 216	53
PlayMakar	<input type="checkbox"/> 213	52
Pride Mobility Products	<input type="checkbox"/> 208	51
PSS	<input type="checkbox"/> 217	53
Roll-A-Ramp	<input type="checkbox"/> 218	53
Seniorcare.com	<input type="checkbox"/> 203	49
WHILL, Inc.	<input type="checkbox"/> 209	51

REQUIRED for both SUBSCRIPTIONS and READER SERVICE

Name	Address
Title	City/State/Country/Zip/Post
Company	*Phone
	*Email

RS2210

FREE SUBSCRIPTION

- YES! I wish to receive a FREE subscription to HomeCare.
- No, cancel my FREE subscription.

HomeCare



*Signature

Required for Subscription

Date

YOU MUST SIGN AND ANSWER ALL QUESTIONS TO QUALIFY FOR A FREE SUBSCRIPTION

Qualified subscriptions begin at the publisher's discretion. Incomplete forms cannot be processed or acknowledged. We will use your email address to send your annual renewal notice and other related products and services.

Check here to opt out of email messages from our marketing partners.

1. What is your job title? (Check only one)

- 15 Owner, CEO, CFO, COO, Pres, VP, GM, Dir
- 21 Manager, Supervisor, Controller, Accountant, Purchasing Agent
- 22 RT, Nurse, Doctor, OT, PT, Pharmacist, ATP, SMS, Rehab Specialist, Other Licensed Medical Professionals
- 19 Sales/Marketing Rep, Mgr, Dir
- 20 Other (Please Specify) _____

2. What is your primary type of business? (Check only one)

- 01 Home Medical Equipment Provider
- 13 Hospital with HME
- 03 Independent Pharmacy/Chain Drugstore
- 15 Hospital with Home Health Agency
- 05 Home Health Agency/Nursing (Medical)
- 16 Hospice Agency
- 12 Personal Care/Home Care Services (Non-Medical)
- 14 Long Term Care Facilities (SKNF, Assisted Living)
- 08 Physical Therapy/Occupational Therapy
- 07 Manufacturer/Manufacturer's Rep Firm/Distributor
- 10 Other (Please Specify) _____

3. What other areas of business is your company involved in? (Check all that apply)

- 41 Home Medical Equipment Provider
- 42 Hospital with HME
- 43 Independent Pharmacy/Chain Drugstore
- 44 Specialty Pharmacy (Compounding/Infusion)
- 45 Hospital with Home Health Agency
- 46 Home Health Agency/Nursing (Medical)
- 47 Hospice Agency
- 48 Personal Care/Home Care Services (Non-Medical)
- 49 Long Term Care Facilities (SKNF, Assisted Living)
- 50 Physical/Occupational Therapy
- 98 None
- 99 Other (Please Specify) _____

ONLINE

For fastest service, complete this form online homecaremag.com/subscribe

FAX

Complete, tear out and fax to 205-314-8272

MAIL

Complete, tear out, place in an envelope and mail to: HomeCare Magazine, PO Box 530067, Birmingham, AL 35253-0067

STAY UP-TO-DATE HME & Home Health

subscribe

HOMEAREMAG.COM/SUBSCRIBE



**DIGNITY
LIFTS**

Deluxe Toilet Lift - DL1
\$1799⁰⁰
www.DignityLifts.com

Check 128 on index.

The advertisement for Dignity Lifts features the company logo at the top, which includes the text "DIGNITY LIFTS" and a stylized purple arrow icon. Below the logo is a photograph of a woman with glasses sitting on a white toilet lift. The background is a solid purple color. At the bottom, the product name "Deluxe Toilet Lift - DL1" is written in italics, followed by the price "\$1799⁰⁰" in bold. The website "www.DignityLifts.com" is listed below. A small yellow box on the left side of the ad contains the text "Check 128 on index."

NEW PODCAST

NEWEST EPISODE

Marketing Your Homecare Business

With Chris Zayid of Affinity
Senior Care



Look for this and other podcasts at homecaremag.com/podcasts

WALKING THE WALK

Hitting a Milestone

Always Best Care walks to end Alzheimer's

By Kristin Easterling

Today, 6.5 million people are living with Alzheimer's disease in the United States, according to data from the Centers for Disease Control and Prevention—and this number is only expected to increase as more



baby boomers reach their senior years.

The Alzheimer's Association and other groups are investing in research to find treatments and even potential cures for the disease. One of the association's biggest fundraisers every year is the Walk to End Alzheimer's, which takes place in more than 600 communities nationwide.

This year, Always Best Care Senior Services is celebrating its 12th year as a national team, earning the National Team Longevity Award for more than a decade of support. The company also reached the Lifetime Achievement Level, raising over \$785,000 over the dozen years it has participated.

Always Best Care said in a news release that the company is on track to raise \$100,000 this year, which puts it in the top 50 among national teams.

"As a leader in senior care, Always Best Care is proud to partner with the Walk to End Alzheimer's every year on behalf of the more than 6 million Americans living with Alzheimer's disease," said Jake Brown, Always Best's president and CEO. "We know that extra attention and tender compassionate care must accompany every service we provide. This is especially true for our clients who have been diagnosed with Alzheimer's."

Always Best Care franchises form teams across the country for walks and raise funds that advance the care, support and research efforts of the Alzheimer's Association. Each

team's donations play an important role in improving the lives of people living with Alzheimer's, their families and caregivers.

Two teams that have routinely rallied together for the cause are Always Best Care of Delaware and Always Best Care of Philadelphia, which are both owned by Bryant Greene. His work on behalf of the cause has landed him in the top 25 of national fundraisers and made him the top fundraiser in the Delaware Valley for the past eight years. Greene, who has also been named to the board of directors for the Alzheimer's Association's Delaware Valley chapter, has raised more than half a million dollars in his markets over the past 10 years.

"It is my honor to build awareness of and promote the important resources the Alzheimer's Association provides and to help connect my audiences with those resources," said Greene, who also hosts popular television and radio programs in the Philadelphia market. "I grew up with a beloved babysitter who lost her battle with Alzheimer's. Through my Always Best Care businesses, I've made many more personal connections with individuals and families impacted by this disease, and I see the struggles they endure. That's why this cause is near and dear to my heart."

You can find a walk that's near you at act.alz.org. **HC**

Kristin Easterling is managing editor of HomeCare.

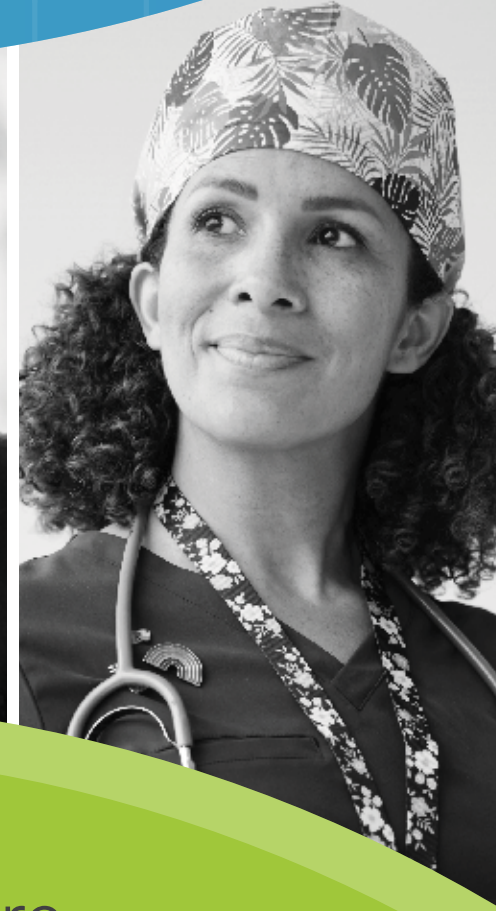
THE TOP 10 2022 NATIONAL TEAM DONORS

1. **Edward Jones**
\$2,169,535.21
2. **Brookdale Senior Living**
\$856,235.29
3. **Senior Star**
\$514,249.21
4. **Sigma Kappa**
\$450,363.62
5. **American Seniors Housing Association**
\$237,428.08
6. **Alzheimer's/Dementia Rotary Action Group**
\$165,753.20
7. **Life Care Services**
\$143,885.91
8. **UnitedHealth Group**
\$136,435.11
9. **Home Instead**
\$128,126.59
10. **Senior Living Communities**
\$112,495.13

PointClickCare®

 collectivemedical®

AUDACIOUS™
INQUIRY



With PointClickCare,
You Get More.

More data. More connections. More Insights.

Ready to join North America's most comprehensive
care collaboration network?

[Learn More](#)



Check 108 on index.

It's simple.
It's seamless.
It's collaborative.
It's automated.
It's the way
outreach should be.
It's Brightree DX.

Your patients want it; your business needs it.
And **Brightree Digital Experience** (Brightree DX) delivers it.

Our digital patient platform helps lower your overhead, reduces complexity and saves time by automating patient touchpoints. And did we mention that includes instant communication customized to your patient's device of choice for greater satisfaction and loyalty?

Get the experience.



Check 102 on index.

Learn more at Medtrade East October 24-26

