

A SUPPLEMENT TO

HME News

THE BUSINESS NEWSPAPER FOR HOME MEDICAL EQUIPMENT PROVIDERS

DECEMBER 2009



of the State Industry 2009

The HME Market By The Numbers



INVACARE

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Anniversary

Mal Mason, J. B. Ritchey and a group of investors purchase Invacare for \$7.8 million



Launches One Stop Shopping™

Introduces Invacare® Solars® 3G Custom Manual Wheelchair



Introduces Invacare® XPO™ Portable Oxygen Concentrator



Yes, you can.®

Introduces to give

Mal Mason, CEO and Jerry Blouch, COO

Introduces Pella® IV Power Wheelchair



Introduces Invacare® microAIR® Bed

Introduces first Invacare® HomeFit® Oxygen System



Introduces Invacare® TDX® Power Wheelchair



\$1.8 billion in sales with 200 associates

\$1.8 billion in sales with 600 associates



1979

1980 - 1988

1989 - 1995

1996 - 2003

2004 - 2008

2009

Invacare Celebrates 30 Years

Thirty years ago, Invacare was an obscure U.S. player. Today, we've grown to become the global leader in the home medical equipment industry. Invacare has been your partner over the last three decades, with a proven history of innovation and mutual success. Invacare has the right team, the right products and the right services to help you thrive while meeting the needs of patients and clinicians.

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Data shows a changing marketplace

As I look through this year's State of the Industry data, one thing strikes me: The state of the industry is shrinking. Check out the graph at the bottom of this page.

Specifically, look at the number of HME providers who billed Medicare for \$300,000 a year or less in 2008. This number declined a little in 2007, but not so much that it raised a red flag. This year the red flag is flying high.



Something is going on, and that something is consolidation fueled by Medicare's 2009 reimbursement cuts, mandatory accreditation, surety bond requirement, and other regulatory hurdles too high for many small HMEs to clear. National competitive bidding, if not repealed, will raise the bar even higher. (Interestingly, the very thought of these changes, which took effect this year, convinced many providers to call it quits in 2008.)

You'll find a story on this consolidation in the December 2009 issue of HME News, but the bottom line is this: Medium-sized and large-sized companies have the economies of scale needed to maneuver in the current HME market; small companies, for the most part, do not. The chart on this page says

as much, and many industry analysts agree.

If you're a provider and wonder if you have what it takes to survive in this changing marketplace, turn to pages 8, 9 and 10. That's where you'll find some valuable benchmarks to measure your company against.

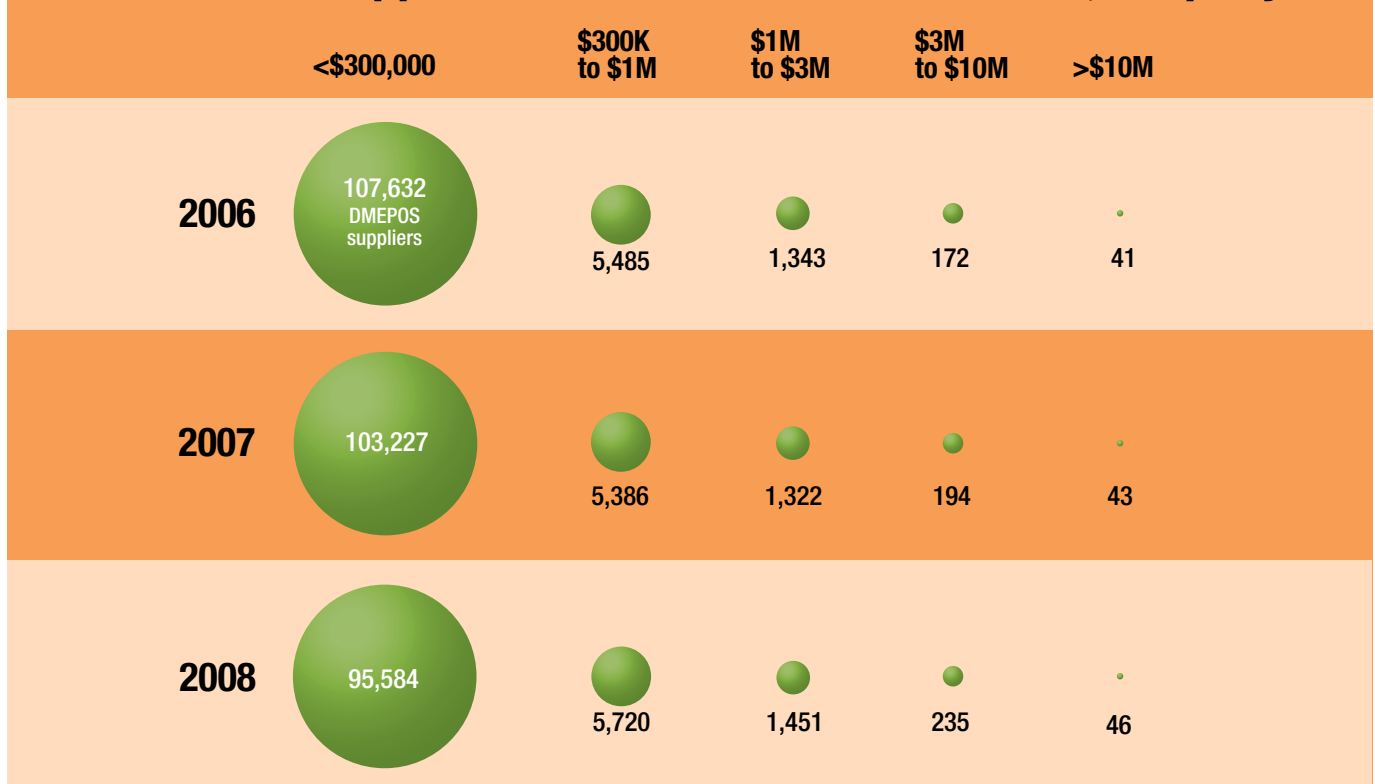
Finally, this year's State of the Industry report is a little different than in years past. We've still got a ton of Medicare data, but you won't find the top HME providers in various product categories, such as oxygen concentrators, power wheelchairs and blood glucose strips.

That's always been a fun feature, but the Pricing, Data Analysis and Coding Contractor (PDAC) has been slow to process this data for us. The PDAC (Noridian Administrative Services) replaced the Statistical Analysis DME Regional Carrier (SADMERC) in August 2008 as the official repository of Medicare data. The SADMERC (Palmetto GBA) processed our annual data requests, which we file in early May, in about three months. The PDAC has processed and delivered some of our data, but as of today (Nov. 10), there's still a bunch outstanding.

As soon as we receive that data—I've got my fingers crossed that it will arrive before Christmas—we'll post it to the HME DataBank (www.hmedatabank.com). **HME**

— **Mike Moran**, Executive Editor, HME News

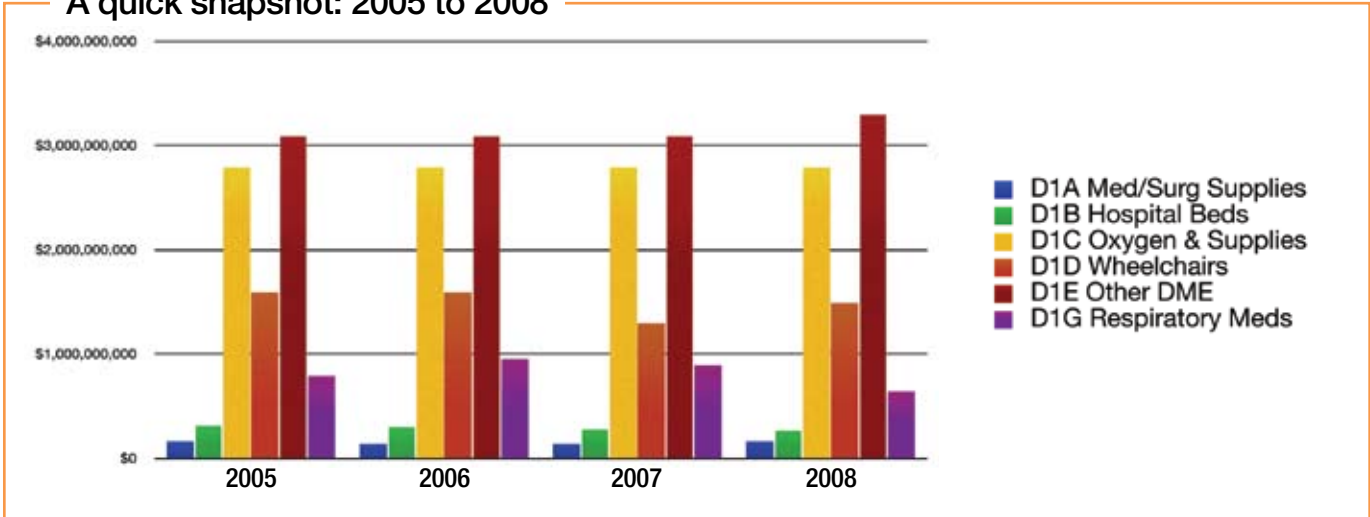
Most DMEPOS suppliers bill Medicare less than \$300,000 per year



SOURCE: CMS, VIA FREEDOM OF INFORMATION ACT

Medicare: DME growth by category

A quick snapshot: 2005 to 2008



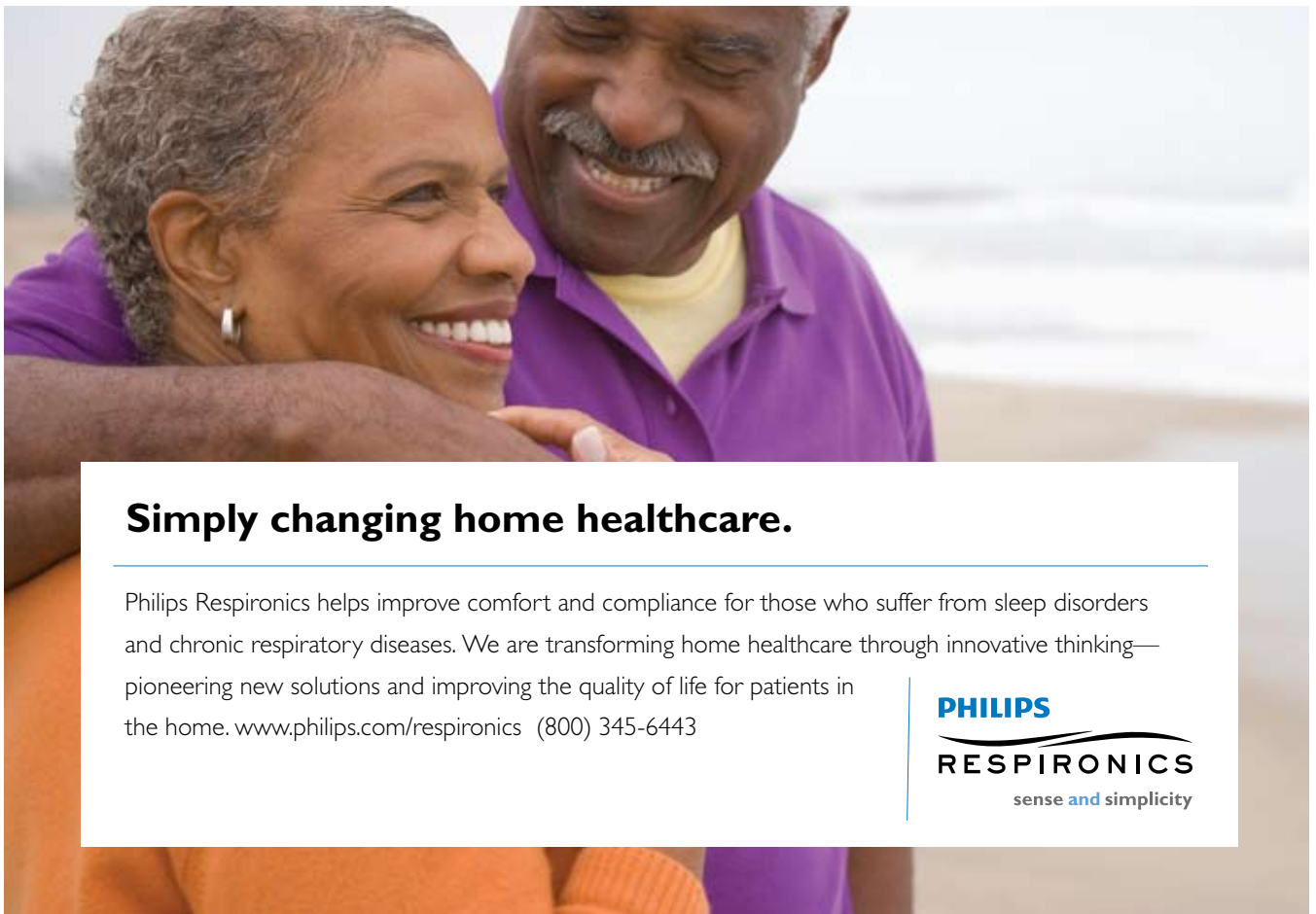
BETOS	Product	2005	2006	2007	2008
D1A	Med/surg supplies	177M	145M	152M	176M
D1B	Hospital beds.....	319M	306M	287M	276M
D1C	Oxygen and supplies.....	2.8B	2.8B	2.8B	2.8B
D1D	Wheelchairs	1.6B	1.6B	1.3B	1.5B
D1E	Other DME.....	3.1B	3.1B	3.1B	3.3B
D1G	Respiratory meds.....	799M	957M	900M	657M
	Total.....	8.8B	8.9B	8.5B	8.7B

Allowed Charges

What is a BETOS bucket?

BETOS STANDS FOR BERENSON-EGGERS TYPE OF SERVICE, and it's the name of a coding system developed to analyze the growth in Medicare expenditures. The coding system covers all HCPCS codes; assigns a HCPCS code to only one BETOS bucket; consists of readily understood clinical categories that permit objective assignment; is stable over time; and is relatively immune to minor changes in technology or practice patterns.

SOURCE: CMS



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Medicare: Number of beneficiaries, suppliers, 2008

✓ E1390 O2 Concentrator

Jurisdiction	Beneficiaries	Suppliers
A	223,253	2,259
B	302,623	3,069
C	658,204	6,580
D	342,149	3,075
Nation*		9,584

✓ E0601 CPAP

Jurisdiction	Beneficiaries	Suppliers
A	90,716	1,666
B	131,435	2,487
C	269,191	5,756
D	136,425	2,508
Nation*		8,796

✓ E0260 Hospital Beds

Jurisdiction	Beneficiaries	Suppliers
A	105,643	2,365
B	91,845	2,633
C	224,454	6,660
D	102,255	3,089
Nation*		11,946

✓ K0738 Portable Gas O2

Jurisdiction	Beneficiaries	Suppliers
A	18,598	477
B	20,947	746
C	26,487	1,274
D	16,634	780
Nation*		2,772

✓ K0823 Power Chair

Jurisdiction	Beneficiaries	Suppliers
A	13,955	647
B	22,974	827
C	69,639	2,680
D	46,345	1,504
Nation*		5,094

✓ K0001 Standard Chair

Jurisdiction	Beneficiaries	Suppliers
A	80,951	2,552
B	77,629	2,905
C	154,282	6,488
D	86,440	3,085
Nation*		12,236

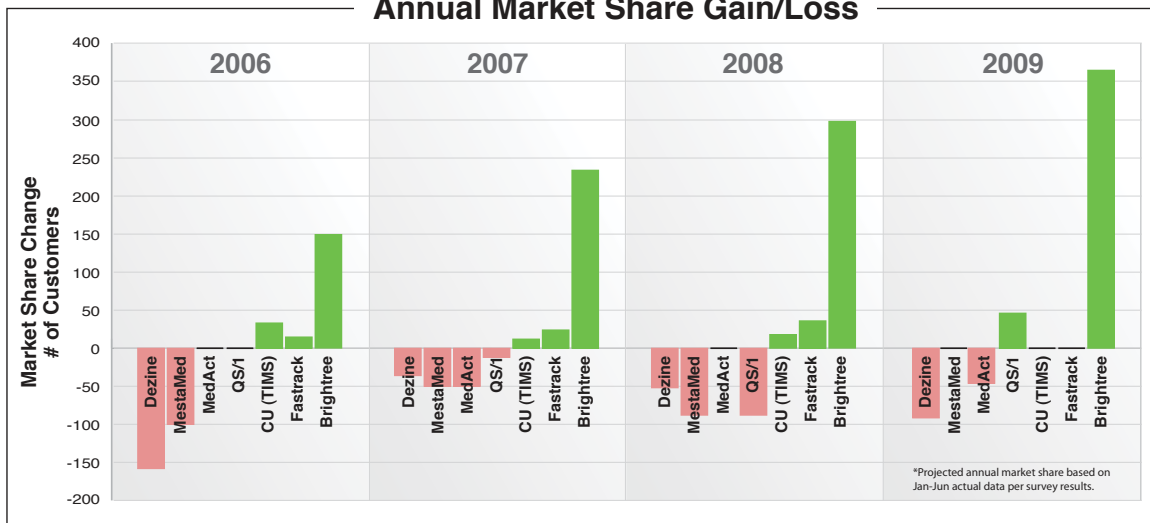
SOURCE: CMS, VIA FREEDOM OF INFORMATION ACT

***EDITOR'S NOTE:** Why doesn't the number of suppliers from each category equal the total number of suppliers in the nation? Some suppliers work in more than one jurisdiction.

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Leading HME/DME Business Management Software Products

Annual Market Share Gain/Loss



THIS CHART DEPICTS MARKET SHARE GAINS AND LOSSES for each of the major business management software solutions designed for the HME/DME market. Results are based on an independent survey of a statistically valid sample of providers for each of the years 2006-2009. Each year the survey was sent to a sample of 1,000 providers who were chosen at random from all HME News magazine subscribers. The results were tabulated and interpreted by Anservitz & Associates.

Projected change in # of customers based on actual survey results (Jan-Jun 2009). Complete survey results at www.brightree.com. HME News name and logo are the property of United Publications Inc. Product names may be registered trademarks of their owners.



Medicare: Utilization for 2008

Respiratory

Rank	HCPCS	Product	Allowed Charges	Allowed Services	2008 Growth
1	E1390	Oxygen Concentrator	\$2,519,605,965	12,627,424	5.56%
17	J7626	Budesonide	\$298,307,950	58,206,765	-10.32%
21	E0601	CPAP Device	\$253,380,910	2,838,356	2.11%
26	E0431	Portable Gaseous Oxygen	\$221,819,216	6,980,149	-0.50%
38	J7620	Albuterol Ipratropium	\$157,572,568	240,614,799	-37.35%
43	E0439	Stationary Liquid Oxygen	\$133,575,631	666,393	2.53%
46	Q0513	Dispensing Fee Inhalation	\$121,568,864	3,686,281	-15.14%
50	E0470	Bi-Level CPAP	\$106,859,463	515,800	7.37%
54	A7034	Nasal CPAP Mask	\$104,326,007	891,539	17.97%
66	J7603	Albuterol Inhalation	\$76,040,142	179,498,812	n/a
67	E0562	CPAP Humidifier	\$75,279,785	781,434	11.09%
79	A7030	CPAP Full Face Mask	\$65,033,742	346,661	41.62%
89	E0570	Nebulizer, With Compressor	\$57,587,189	4,221,217	-2.71%
112	A7037	Pos Airway Pressure Tubing	\$40,971,165	1,023,050	10.74%
117	E0471	NPPV	\$40,049,348	81,050	29.24%
126	A7035	CPAP Headgear	\$36,174,420	961,867	22.83%
149	K0738	Portable Gas Oxygen	\$28,668,952	556,082	65.21%
153	E0434	Portable Liquid Oxygen	\$27,972,417	880,193	-4.07%
173	E0463	Press Support Ventilator w/ Vol Cont	\$23,800,959	17,021	n/a
195	A7032	Cushion Nasal Mask Interface Replacement	\$20,331,395	512,985	n/a

SOURCE: CMS, VIA FREEDOM OF INFORMATION ACT

Mobility

Rank	HCPCS	Product	Allowed Charges	Allowed Services	2008 Growth
11	K0823	Power Wheelchair	\$620,307,154	159,293	25.16%
69	K0004	High Strength, Ltwt Wheelchair	\$74,226,627	715,895	-1.70%
70	K0001	Standard Wheelchair	\$73,574,511	1,700,510	-3.73%
78	K0003	Lightweight Wheelchair	\$65,579,400	928,350	0.71%
82	K0822	Power Wheelchair Gp 2 Std Seat/Back	\$61,942,712	17,035	-4.55%
105	K0825	Power Wheelchair Gr 2 Heavy Duty	\$44,648,190	10,391	40.69%
110	E2365	U-1 Sealed Lead Acid Battery	\$41,680,223	374,438	20.67%
135	E1007	Power Seating System Comb Tilt/Recline	\$33,370,307	3,851	80.13%
166	E0973	Wheelchair Access Adj Det Armrest	\$24,604,065	305,839	31.55%
181	K0861	Power Wheelchair Gp 3 Std Multiple Power	\$22,897,966	4,113	n/a
183	E1002	Power Seating System Tilt Only	\$22,398,663	5,577	32.28%
189	K0856	Power Wheelchair Gp 3 Std Single Power	\$20,858,593	3,730	n/a
197	K0108	Other Component/Accessory	\$20,123,113	168,723	n/a

SOURCE: CMS, VIA FREEDOM OF INFORMATION ACT

Durable Medical Equipment

Rank	HCPCS	Product	Allowed Charges	Allowed Services	2008 Growth
19	E0260	Hospital Bed Semi-Electr w/Matt	\$259,935,242	2,188,544	-0.11%
57	E0277	Powered Pres-Redu Air Mattress	\$99,555,125	169,875	-3.44%
58	E0143	Walker Folding Wheeled	\$90,971,988	809,199	3.57%
83	G0283	Electrical Stim Other Than Wound	\$61,535,861	5,421,419	6.93%
107	E0163	Commode Chair With Fixed Arms	\$42,934,122	410,346	3.04%
131	L8030	Breast Prosthesis Silicone Or Equal	\$34,994,482	121,340	2.27%
145	L7900	Male Vacuum Erection System	\$30,383,191	66,267	12.31%
155	E0730	TENS Device	\$27,211,169	196,806	n/a
159	L5981	Lower Extremity Prosthesis Flex-Walk	\$26,493,143	9,798	n/a
162	E0630	Patient Lift Hydraulic Or Mechanical	\$25,366,310	308,291	-1.68%
187	L8000	Breast Prosthesis Mastectomy Bra	\$21,603,821	610,319	4.72%
198	L5980	Lower Extremity Prosthesis Flex Foot	\$20,111,683	5,850	n/a
199	L1960	Ankle Foot Orthosis Custom	\$20,062,450	39,226	n/a
200	L5987	Lower Extremity Prosthesis Shank Foot	\$19,995,223	3,249	n/a

SOURCE: CMS, VIA FREEDOM OF INFORMATION ACT

Medicare: Utilization for 2008

Diabetes, Infusion & Supplies

Rank	HCPCS	Product	Allowed Charges	Allowed Services	2008 Growth
3	A4253	Blood Glucose Strips	\$1,408,091,978	39,214,036	24.89%
31	B4035	Enteral Feeding Supply Pump	\$187,448,840	15,139,488	4.34%
34	E2402	Neg Press Wound Therapy Pump	\$170,621,407	101,715	16.31%
39	A4259	Lancets Per Box	\$150,309,734	12,935,247	29.26%
45	B4154	Enteral Feeding Nutri Complete Special Metabolic	\$125,273,420	100,024,923	n/a
49	B4150	Enteral Feeding Nutri Complete W/Intact Nutrients	\$115,290,239	166,742,005	n/a
51	A5500	Diabetic Shoe Insert	\$106,420,227	1,680,800	12.81%
73	A5512	Diabetic Shoe Insert Direct Formed	\$72,010,827	2,789,245	n/a
75	A5513	Diabetic Shoe Insert Custom Formed	\$70,319,451	1,827,415	n/a
81	B4197	Parenteral Solution 74-100	\$62,443,904	220,510	16.08%
87	B4152	Enteral Feeding Calorically Dense	\$58,378,827	101,522,331	18.74%
94	A4353	Intermittent Urinary Catheter	\$53,847,027	7,875,324	36.51%
118	A6021	Collagen Dressing	\$38,535,110	1,844,112	11.11%
124	A6550	Neg Press Wound Therapy Drsg Setmp	\$36,646,733	1,335,857	19.91%
132	B4193	Parenteral Solution 52-73	\$33,697,622	147,831	6.50%
133	A4258	Spring-Powered Device For Lancet	\$33,643,242	1,888,615	9.68%
134	B4034	Enteral Feeding Supply Kit Syringe Fed Per Day	\$33,584,751	5,246,963	8.79%
140	E0784	External Ambulatory Infusion Pump Insulin	\$31,987,231	92,991	n/a
141	B9002	Enteral Nutrition Infusion Pump W/Alarm	\$31,749,442	252,738	11.30%
146	A4221	Infusion Supplies For Maintenance	\$29,560,487	1,316,139	n/a
150	A4222	Infusion Supplies w/Pump	\$28,667,037	647,178	6.85%
154	E0607	Home Blood Glucose Monitor	\$27,932,095	436,457	8.07%
160	A4414	Ostomy Skin Barrier	\$26,409,750	5,418,432	n/a
165	B4199	Parenteral Solution	\$25,050,999	77,087	16.41%
174	A4351	Intermittent Urinary Cath Straight Tip	\$23,643,414	14,336,750	n/a
180	A4407	Ostomy Skin Barrier Ext Wear	\$22,954,524	2,654,803	8.83%
184	A6212	Foam Dressing Wound Cover	\$22,162,367	2,297,576	n/a
192	E0781	Ambulatory Infusion Pump	\$20,689,069	94,283	8.22%

SOURCE: CMS, VIA FREEDOM OF INFORMATION ACT

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Performance benchmarks for HME providers

Management Efficiency - Employee Resources

- ❖ Revenue per employee is a good measure of productivity and use of labor resources.
 - ◆ Target should be \$165,000 or greater.
 - ◆ Lincare leads HME publicly traded companies with a revenue per employee of \$156,650 (3Q 2009).
 - ◆ American HomePatient lags behind at \$112,362 revenue per employee (3Q 2009).

Management Efficiency - Inventory Management

- ❖ Gross Margin is another important measure as it represents the cost of goods sold relative to net revenue.
 - ◆ Gross margin results will depend heavily on rental to sales ratio (the higher the percentage of rentals, the higher the gross margin will likely be) and procurement efficiency/volume will also drive down COGS (gross margin target: 68%-72%).
 - ◆ Lincare had the highest gross margin among publicly traded companies at 75.9% and American HomePatient was significantly lower at 65.8%.

Management Efficiency - Accounts Receivable Resources

- ❖ Revenue Per Billing Employee – According to 2004/2005 industry surveys, on average one A/R staff member was required for every \$717,000 of revenue.
- ❖ Due to performance improvement measures implemented to counter the decreases in reimbursement this number has significantly increased.
- ❖ In many cases, revenue per billing employee has improved by as much as 30% compared to previous financial surveys with larger companies enjoying a higher level due to economies of scale.
- ❖ Best practice goal - \$1 million or greater of revenue per billing employee.

Accounts Performance

- ❖ Days Sales Outstanding/Receivable Turnover.
- ❖ AAHomecare 2005 Financial Performance Survey indicated the average DSO was 86 days and an A/R turnover of 4.3. Lincare reported a billed DSO of 41 and an A/R turnover of 8.9 for year-end 2008. Held DSO should run between 5 to 8 days.
- ❖ Percentage of A/R over 120 days – Best practice 15% or lower. The 2005 AAHomecare Financial Performance Survey reported that the percentage of accounts receivable over 120 days was 25%. The percentage of A/R over 120 days remains a challenge for many companies.
- ❖ Denial rate – 5% commonly considered acceptable but goal should be to get denial rate down to 2% to 3%. Denials use labor resources and extend the time it takes to receive payment.
- ❖ Bad Debt – Best Practice is 2% to 3%.

Editor's note: These benchmarks come from Karen Moore, vice president of AnCor Healthcare Consulting. Moore is an expert in revenue cycle and operations management and business software optimization. She spoke at the 2009 HME News Business Summit.



Watch for details on the 2010 event:
www.hmesummit.com

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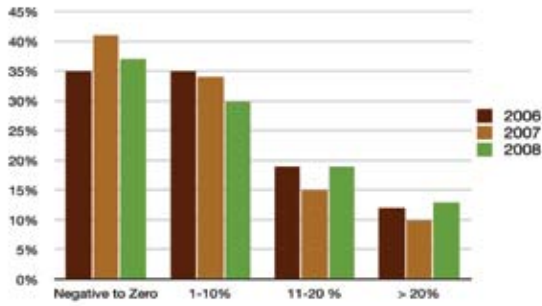


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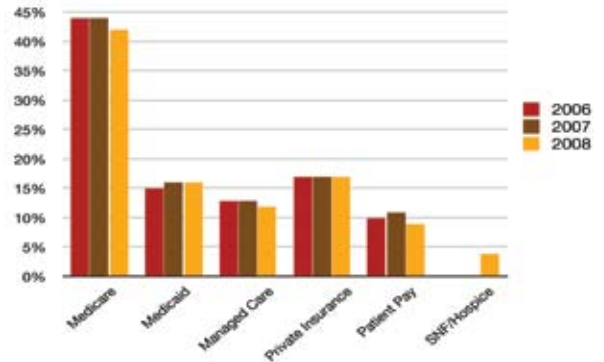


2009 HME News/SRA Financial Survey

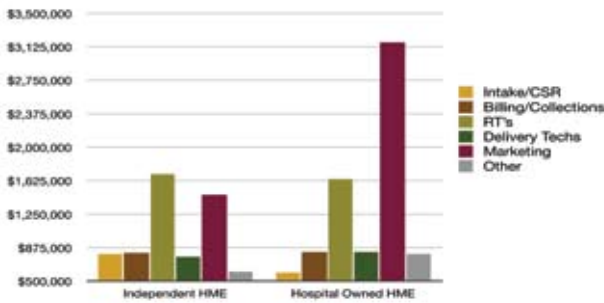
Revenue Growth-Historic



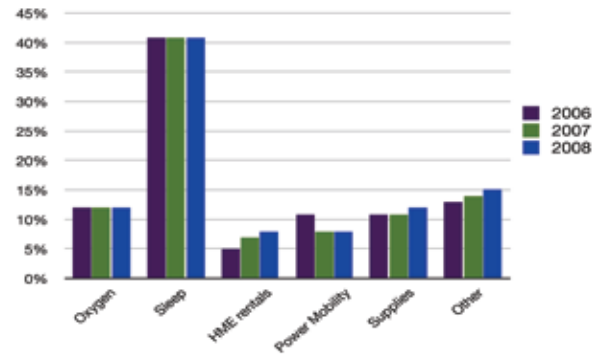
Revenue By Payer Type-Historic Percentage Comparison



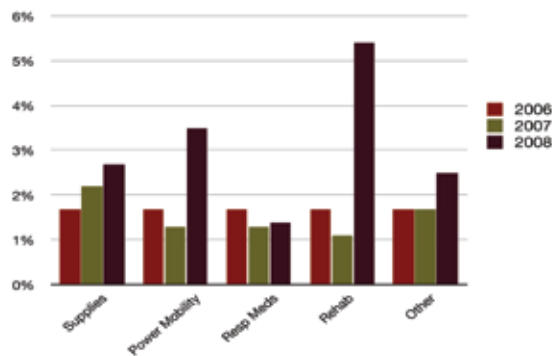
Revenue By Employee Type



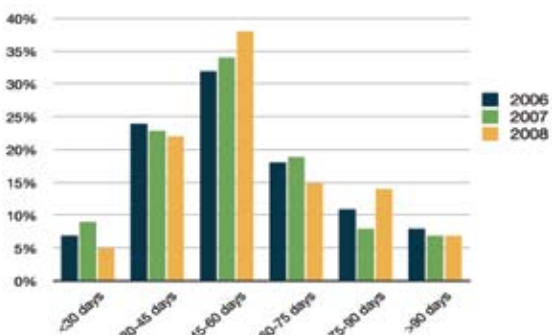
Revenues - Fastest Growing Product Lines



Revenues - Discontinued Product Lines



DSO



EDITOR'S NOTE: The 2009 HME News/Steven Richards & Associates financial survey includes 2008 data gathered from 173 HME companies. The entire report can be found at www.hmenews.com.

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Business benchmarks

BY DON DAVIS

There are three publicly traded providers in the HME industry: Lincare, Rotech and American HomePatient. Their varying performance reflects the business dynamics in the HME industry, where cost containment, cash efficiency and judicious debt management are key ingredients for surviving.

Of the three, Lincare is the unquestioned market leader. Like AHP and Rotech, it has been significantly impacted by lower reimbursement rates. Even in this environment, however, Lincare has continued to pay down debt and slightly reduce capital expenditures (CAPEX) as a percentage of sales. Lincare's margins, cash efficiency and DSO far exceed those of its publicly traded peers.



For American HomePatient, the impact of reimbursement cuts and a heavy debt load have negatively impacted its profit margins. On the plus side, increased attention to DSO and lower bad debt costs have helped improve overall cash efficiency.

Rotech has seen some margin improvement from prior periods despite lower revenues, but its cash efficiency, DSO and percentage of bad debts, all trail its rivals.

When using this information to assess your own business, the success of Lincare, despite its size, establishes a worthy benchmark. Whereas all three publicly traded companies were impacted by reimbursement changes, Lincare has maintained a steady focus on the cash aspects of its business to ensure maximum financial flexibility. Despite profit margin declines, Lincare has been able to maintain a very steady cash efficiency percentage by focusing on industry-best levels of DSO and bad debt charges while cutting CAPEX to match its revenue. In your business the same lessons hold true: Managing for cash regardless of market conditions is always a winning formula.

Consultant Don Davis has 30 years experience as a senior finance executive in all areas of operations. He spoke at the 2009 HME News Business Summit.

Lincare Financial Summary

In \$ millions	Through 6/30/09	Through 6/30/08	2008	2007
Sales	752.0	843.8	1,664.6	1,596.0
EBIT	114.5	208.7	398.7	383.1
EBITDA	173.6	268.3	516.2	499.4
Net Income	59.5	118.4	237.2	226.1
Cash from Operations	149.1	193.9	439.1	406.2
AR	178.7	227.2	176.8	198.9
Debt	474.9	717.0	556.9	838.0
EBIT Margin	15%	25%	24%	24%
EBITDA Margin	23%	32%	31%	31%
Net Margin	8%	14%	14%	14%
Sales Converted to Operating Cash	20%	23%	26%	25%
CAPEX to Sales	8%	7%	9%	9%
Bad Debt Expense	1.5%	1.5%	1.5%	1.5%
Days Sales Outstanding	43	38	39	45

American Home Patient Financial Summary

In \$ millions	Through 6/30/09	Through 6/30/08	2008	2007
Sales	116.0	133.4	266.9	293.0
EBIT	1.1	9.1	21.4	12.6
EBITDA	3.1	11.2	25.5	16.0
Net Income	(9.2)	(1.6)	0.5	(5.5)
Cash from Operations	21.7	24.2	35.4	32.5
AR	30.3	38.1	39.1	45.1
Debt	228.8	239.8	234.3	244.4
EBIT Margin	1%	7%	8%	4%
EBITDA Margin	3%	8%	10%	5%
Net Margin	-8%	-1%	0%	-2%
Sales Converted to Operating Cash	19%	18%	13%	11%
CAPEX to Sales	8%	7%	8%	6%
Bad Debt Expense	1.8%	2.1%	1.7%	3.2%
Days Sales Outstanding	47	53	51	57

Rotech Financial Summary

In \$ millions	Through 6/30/09	Through 6/30/08	2008	2007
Sales	234.2	282.7	544.5	559.4
EBIT*	9.9	0.3	12.4	(4.2)
EBITDA*	15.0	7.0	25.0	10.4
Net Income	(11.9)	(24.1)	(246.9)	(46.1)
Cash from Operations	11.8	17.9	68.4	47.7
AR	67.3	80.2	61.8	77.1
Debt	510.9	491.0	500.1	481.0
EBIT Margin	4%	0%	2%	-1%
EBITDA Margin	6%	2%	5%	2%
Net Margin	-5%	-9%	-45%	-8%
Sales Converted to Operating Cash	5%	6%	13%	9%
CAPEX to Sales	7%	9%	9%	9%
Bad Debt Expense	3.4%	3.5%	3.5%	3.3%
Days Sales Outstanding	52	50	43	51

*Adjusted for Restructuring Charges and Goodwill Impairment

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From our proactive patient safety requirements to the detailed patient "tracer" activities that guide our on-site survey, our accreditation experience is uniquely designed to help DME managers more reliably predict future operational performance and safeguard the patients they serve.



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Visit us at www.jointcommission.org/hcinfo for immediate access to our online informational toolkit. Or call us at 630.792.5070 to speak to a member of our accreditation team.



Tough times. Smart choices.

Home oxygen providers must look for innovative ways to combat tightening reimbursements and a weakening economy.

The current climate calls for forward-thinking approaches offering the most cost-effective and reliable oxygen systems available. One of the biggest movements among homecare providers has been toward more advanced oxygen-generating devices that eliminate recurrent oxygen delivery costs and give users the ability to make oxygen in the home.

Freedom Series to the rescue

The Freedom Series could be the oxygen-generating solution homecare providers have been seeking. Kevin Strong, Director of Operations, Kohll's Pharmacy and Homecare, Omaha, Nebraska, says, "With the reduction in reimbursements, we had to find ways to be more efficient. For us, one approach was to reduce delivery and maintenance costs. Freedom Series fit these criteria and helped us remain competitive." "Freedom Series does not have the inventory control problems associated with cylinders – maintenance

costs and labor. We didn't need a driver solely dedicated to delivering oxygen and the costs associated with that: gas, insurance, upkeep on the vehicles and salary," explains James Aldridge, Director of Ochsner DME, New Orleans, Louisiana.

The Freedom Series gives patients an ideal solution at home and on the go. It consists of EverFlo, a stationary oxygen concentrator and EverGo, a lightweight portable concentrator. Both units offer patients and providers a host of benefits.

EverFlo is a small, sleek, stationary concentrator that is field-proven to be low-maintenance. In terms of quality and reliability, a majority of providers believes EverFlo is the best stationary oxygen concentrator.¹ "As a provider, one of the biggest benefits is how lightweight the units are, which makes them a cinch to transport and deliver," says James Weber, Operations Manager, Ochsner DME.

EverGo is a portable concentrator that's ideal for patient mobility. With an 8-hour battery life, it is lightweight, simple to use, and FAA approved for use on planes.* Also, an AC-adaptor allows EverGo to make oxygen anywhere.

Freedom Series is backed with a comprehensive offering of value-added tools. From financing options to training and support, providers can be sure they are getting everything they need to succeed. "I would absolutely recommend Freedom Series to anyone," says Weber. "Fuel is going back up, labor costs are rising, and reimbursements are going down. The long-term cost savings of Freedom Series just make sense." Strong adds, "We're always looking for products that will grow our business. Freedom Series was one of those. The start-up costs were significantly less than home oxygen refilling systems, and the maintenance costs over the first year have been practically non-existent."



Learn how Freedom Series can help

Download our Freedom Series Calculator today to quickly and easily compare delivered oxygen systems to Freedom Series. Simply go to <http://FreedomCalculator.Respironics.com> to download or to request a CD copy of the Freedom Series Calculator.

Reference: 1. HME Home Oxygen Survey, 2008. Data on file. Philips Respironics.

*Airline policies for traveling with an oxygen concentrator vary.