

Written by Rob Brant
Tuesday, 27 July 2010 00:00

After nearly two weeks of pushing and calling for a factual retraction regarding outrageous comments about the Medical Equipment Industry by Commentary Mike Thomas, the Orlando Sentinel has finally printed one editorial response that corrects Mr. Thomas' accusations and lies. The Sentinel claims they will release another that will clarify the situation with competitive bidding from the providers' perspective, but that has yet to be released.

OrlandoSentinel.com

My Word: Medicare bidding flawed

By Aaron C. Bates
July 27, 2010

Mike Thomas' recent column on Medicare's competitive bidding program for home equipment and services was biased and laden with problems. It is based upon the flawed premise that medical equipment and related services (oxygen therapy, wheelchairs, etc.) delivered to Medicare beneficiaries in their homes should be reimbursed based on what one would pay on the Internet or at a retailer for the equipment alone.

As someone who has used a wheelchair since the age of 4 due to a form of muscular dystrophy, I can tell you that a power wheelchair, specifically fitted for my disability, cannot be acquired over the Internet. Even oxygen, as a regulated prescription drug, can't just be picked up at a local Walmart. Should a user who depends on supplemental oxygen to stay alive pick it up at Walmart, adjust the flow rate, and maintain this system, plus a back-up, on their own? Will Walmart provide emergency supplies of oxygen after a hurricane when the power's out?

What some don't understand is that getting the cheapest reimbursement for a medically required device for home use is not in the patient's or taxpayer's best interest. Quality home medical equipment and services help keep seniors and people with disabilities safe and independent in the most cost-effective setting for care - their own homes.

Medicare currently pays under \$7 per day to provide oxygen therapy in the homes of people with lung disease or heart failure. Compare that to more than \$7,000 on average that Medicare pays for a short hospital stay. Bottom line: quality equipment and services provided to Medicare beneficiaries in their homes is part of the answer - not the problem - to Medicare's financial crisis.

This poorly designed Medicare bidding was implemented for two weeks in 2008. The program excluded 90 percent of local area providers, excluded qualified applications, and awarded contracts to unqualified providers with no experience in this area. Had the program continued, patient choice, access to care, and quality competition would have suffered.

07/27/10 - RESPONSE TO OUTRAGEOUS CLAIMS ABOUT HME INDUSTRY

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Unfortunately, the flaws in this program remain. It's due to resume in Orlando and Miami in 2011. There is no way to predict the detrimental impact on Florida beneficiaries. A bipartisan bill to repeal Medicare bidding is supported by 255 members of Congress and designed to be budget neutral.

The bill would cut payments to home medical equipment to make up for the savings the bid program would have reaped - without dismantling the existing network of home medical providers.

Aaron C. Bates lives in Orlando.