

MK BATTERY



THE POWER LINE

OFFICIAL NEWSLETTER OF MK BATTERY

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NEW & IMPROVED

www.mkbattery.com

Find your
mobility battery



MK Battery has a new improved website. You can now search online for the battery to fit your wheelchair or scooter. From the MK Battery home page click on the HME/Mobility tab followed by "Find your mobility battery". This search will take you to a pull down menu that allows you to choose a scooter or wheelchair manufacturer and the chair model. Once you select the model you are given the applicable battery for that equipment. If you click on the battery type you will see a pop up window with the specifications for the battery along with a drawing of the battery terminal.

*Simply logon to
www.mkbattery.com
to find the proper battery
for your mobility equipment*

You can also still access other HME related technical information and training materials by going to the "Downloads" button on the MK Homepage. The consumer oriented HME Battery Guide is located there should you need copies for your customers. Don't forget that our Route drivers and Sales Coordinators can get you color brochures as well when requested.

MEDTRADE & ATLANTA 2002

WE ALWAYS LOOK FORWARD TO ATLANTA AND MEDTRADE. THIS IS WHERE IT STARTED. THE PLACE WHERE MANUFACTURERS AND HME SUPPLIERS FIRST REALLY CAME TOGETHER.

THE SHOW NOW IS JUST THREE DAYS. WHILE WE LIKE THE SHORTER TIME, WE DON'T WANT TO MISS ANY OF OUR FRIENDS AND PARTNERS SO PLEASE, TAKE JUST A MINUTE AND PUT BOOTH #4704 ON YOUR "SEE LIST". LETS ALL ENJOY OUR 2002 ATLANTA HOMECOMING.

MEDTRADE ATLANTA, GA
OCTOBER 29-31, 2002
BOOTH # 4704



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HOW CAN YOU COMPARE?

Battery companies frequently cite numbers of cycles and insinuate that a particular product last longer than others. But how did they test their battery? And was it compared to competitor's products using the same test?

A new ISO Standard is currently being developed that will help establish a basic threshold to assure a minimum quality standard for cycle life. Standardized testing will make this possible.

If a battery is fully discharged to 10.5 volts on each cycle, it is a much more abusive test than one in which a battery is only 50% discharged during each cycle. An MK GEL that is discharged fully each cycle yields 500 cycles during its life. The same battery discharged 50% each cycle would yield 1,100 cycles, 120% more cycles over its life! To compare batteries that are discharged to 100% versus the 50% discharge level of another manufacturer certainly does not give the consumer or dealer an accurate picture of quality.

We believe the Battery Council International - Two Hour Life Cycle Test, B.C.I. as they are more commonly known, establishes technical standards for battery manufacturing making them the authority of the industry.

We support the use of this type of standardized testing to level the playing field. The two hour life cycle test is performed as follows:

1. A battery is discharged by its two-hour rate, approximately ten amps until it reaches 10.5 volts. The minutes of run time will be recorded.
2. A battery is then recharged to the manufacturer's specified voltage.
3. Steps 1 and 2 will be repeated until the battery can no longer provide at least 60 minutes of run time in a discharge cycle (50% of rated capacity).

MK IN THE UK



In January 2002 MK Battery opened its first company operated sales and distribution branch servicing both the UK and continental Europe. We have had distribution arrangements for a number of years but the substantial growth in our International operation necessitated our own facility with others expected to follow soon. The UK distribution center is located in Kettering, Northamptonshire.

Our MK staff is lead by Tom Coyne and Dick Bower, our International sales team, with Tom overseeing the operation in Kettering. Colin Dooley and Laura Hards handle customer service, warehousing and communications for our valued customers.

For more details you can reach any of the MK Europe team at:

Tel: 44 (0) 1536 484009; FAX: 44 (0) 1536 484702
email at tomc@mkbattery.com.



TIPS FROM THE TECH...

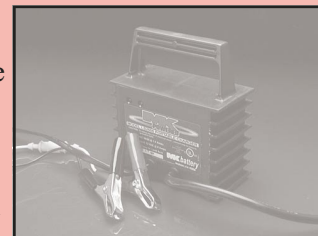
Have you ever had a customer state that their batteries will not take a charge even though the charger was plugged in overnight? When you checked their batteries, you found that they both read 9 volts? This is usually due to a light or a brake being left on for an extended period of time, which drains the batteries.

The reason why the charger is not working is that most wheelchair battery chargers need to read at least 21-22 volts in order to begin charging. This is how the polarity protection system of many chargers work. If the user were to hook up the positive and negative backwards, nothing would happen to the charger or the batteries because the batteries never read any voltage so it never started.

The drawback to this polarity protection design is when a user over-discharges their batteries below the 21-22 volt cutoff. Although the charger is connected, it does not receive the signal to begin the charging process so the batteries never get charged.

The best way to solve this problem is to remove the batteries from the wheelchair and charge each battery separately with a 12-volt battery charger. When each battery is fully charged, they can then be reinstalled in the chair and returned to service. Note: It may take the batteries up to 15 cycles to return to their former capacity if they have been severely discharged.

If you need a shop charger to do this, we recommend the LS2606. This charger is designed for use on Wet, AGM and GEL batteries.



This unit determines the type of battery it is connected to based on the internal resistance it reads, then charges the battery accordingly so there is no setting that needs to be programmed.

The cost of a LS2606 is \$65.95. If you are interested in this product, please ask your Customer Service Representative or call us at 800-372-9253.

COMPETITIVE BIDDING UPDATE

In June the U.S. Congress passed H.R. 4945 which contained national competitive bidding for durable medical equipment. Currently, the Senate is considering whether to include national competitive bidding as part of their provider giveback legislation.

Competitive bidding eliminates the incentive to compete on the basis of quality by allowing Medicare to award contracts for DME items or services to suppliers that submit low bids. This will undermine quality of care, restrict patients' choice of suppliers and service providers, stifle the development of new technology, and drive small suppliers out of operation.

In 1997, "CMS" was authorized to conduct up to five demonstration projects for competitive bidding. Florida and Texas were the first. Results are still incomplete. Even CMS' analysis of the Florida demonstration states that "it is premature to declare that competitive bidding is

either an appropriate or an inappropriate reimbursement mechanism" for durable medical equipment. Medicare "competitive bidding" is a misnomer. The



"Competitive bidding is anti-competitive and will wipe out many small businesses."

"Competition" will destroy many small businesses who are unable to offer a qualifying price and will be excluded from this marketplace. As a result, bid prices are likely to rise and will continue to rise as more suppliers are eliminated in subsequent rounds. This trend was demonstrated in the Florida demonstration. As suppliers are eliminated from the market, Medicare patients and physicians will no longer be able to obtain DME items and services from the supplier of their choice. Consumers will no

longer have a longstanding relationship with their supplier that is often the key to compliance with their therapeutic regimen. Competitive bidding will force all Medicare beneficiaries to obtain their medical equipment and technology from a supplier chosen by the federal government. Sound like a good idea?

The effect on providing safe, effective, high-quality care, and access to specialists such as those in the re/hab technology field is a gamble we cannot afford to chance. It is imperative that you contact your Senator and Representative about the harmful effects of national competitive bidding and tell them you believe in choice for healthcare and the wise use of your tax dollars, not a bigger bureaucracy.

Special thanks to Carol Gilligan at Health Aid of OH for her contribution to this article.

HOT TOPICS AT THE 2002 NRRTS LEADERSHIP CONFERENCE

Attendance by National Registry of Rehabilitation Technology Suppliers (NRRTS) members was up 30% over last year at the St. Louis Leadership Conference in August. One of the main topics for the meeting was the Competitive Bidding amendments being proposed by the US Congress. Many NRRTS members are actively involved in education efforts within their communities and at the government level to show why Competitive Bidding will fail the public in essential healthcare and mobility needs.

A set of "Think Tank" discussions of various topics were held, sponsored by some Corporate Friends Of NRRTS members. MK battery is proud to be a Charter CFON and we enjoyed the lively discussion at our roundtable regarding the need for educational requirements in separating the specialist in the HME/Rehab field from the product commodity seller segment.

WINTER WEATHER AND BATTERIES



MK gel batteries can

be stored in sub-freezing temperatures as low as -25° F without freezing as long as they are fully charged prior to storage. The self-discharge rate of fully-charged batteries is so low in these conditions that they will not require charging for many months; however, if your gel batteries are frozen...they will not always recover.

To attempt recovery the following is the best plan of action:

- 1) Bring them inside and let them sit at room temperature for two days. (They must reach 60° F).
- 2) Charge the batteries normally. (Follow standard safety procedures).
- 3) Run a capacity check either through a quality discharge tester or by operating your power wheelchair in a controlled environment.
- 4) If you don't get enough run time then repeat steps 2 and 3.



MK Battery

1645 South Sinclair Street
Anaheim, CA 92806
800-372-9253
Fax: 714-937-0818
www.mkbattery.com



*POWER YOU CAN
DEPEND ON!*

For comments or
questions about our
newsletter please contact
Lilia at 800-372-9253.

*COME SEE US AT MEDTRADE ATLANTA
BOOTH #4704*

NEW "K" CODE DESCRIPTIONS FOR BATTERIES

We were contacted by a DMERC Medical Director about coding for all Sealed Lead acid batteries this year and whether new codes were needed. We recommended following the ANSI-RESNA Standard wording using Sealed as the base term. We're pleased to see the updated changes effective July 1, 2002 and anticipate others in the future.

Descriptions revised effective July 1, 2002 as follows:

- K0082** 22NF non-sealed lead acid battery, each
(Short description: 22NF non sealed lead acid)
- K0083** 22NF sealed lead acid battery, each (e.g., gel cell, absorbed glass mat)
(Short description: 22NF sealed lead acid battery)
- K0084** Group 24 non-sealed lead acid battery, each
(Short description: Gr24 non-sealed lead acid)
- K0085** Group 24 sealed lead acid battery, each (e.g., gel cell, absorbed glass mat)
(Short description: Gr24 sealed lead acid battery)
- K0086** U-1 non-sealed lead acid battery, each
(Short description: U1 non-sealed lead acid battery)
- K0087** U-1 sealed lead acid battery, each (e.g., gel cell, absorbed glass mat)
(Short description: U1 sealed lead acid battery)
- K0088** Battery charger, single mode, for use with only one battery type, sealed or non -sealed
(Short description: Battery charger, single mode)
- K0089** Battery charger, dual mode, for use with either battery type, sealed or non -sealed
(Short description: Battery charger, dual mode)