

# Home Health

## BUSINESS REPORT

A WEEKLY  
REPORT ON  
NEWS, TRENDS  
& STRATEGIES  
FOR THE HOME  
HEALTHCARE  
EXECUTIVE

MONDAY, NOV. 8, 1999

VOL. 6, No. 45

PAGE 1 OF 6

## House passes BBA reform bill; final deal imminent

By MATTHEW HAY

HHBR Washington Correspondent

WASHINGTON – The U.S. House of Representatives overwhelmingly passed a Balanced Budget Act of 1997 (BBA) reform bill on Friday that would postpone the 15% reduction in home health reimbursement until one year after the new prospective payment system (PPS) is in place. The vote was 388 to 25. The bill, which is estimated to cost about \$11 billion over five years, is designed to address some of the unintended consequences of the BBA.

Now the House bill must be reconciled with the Senate Finance bill, which would phase-in rather than postpone the 15% cut. House and Senate negotiators met over the weekend to hammer out the differences between the two bills. Congress hopes to adjourn for the year on Wednesday.

Notably, the House bill also requires the Secretary of **Health and Human Services** (Washington) to report to

Congress, within six months of the PPS' implementation, on the need for an additional 15% reduction.

The bill would also pay home health agencies \$10 for every Medicare beneficiary to help offset costs associated with implementation of OASIS and require the **General Accounting Office** (Washington) to assess the actual costs home health agencies incur through OASIS data collection as well as its impact on patient privacy.

The legislation would also limit the surety bond requirement to four years and eliminate the requirement that agencies purchase separate surety bonds for Medicare and Medicaid. The value of the surety bond would be limited to \$50,000 or 10% of the home health agency's Medicare payments in the previous year, whichever is less.

In addition, it would freeze HCFA's inherent reasonableness (IR) authority until the agency promulgates new

*See BBA, Page 2*

## HHS OIG claims access to home health still intact

By MATTHEW HAY

HHBR Washington Correspondent

WASHINGTON – The **Health and Human Services'** (Washington) **Office of Inspector General** (OIG) released a report Nov. 1 that purports to undercut claims by the home care industry that the interim payment system (IPS) has led to major disruptions in access for Medicare beneficiaries requiring home health services. But home health representatives counter that the reports actually substantiate their arguments that major disruptions have occurred, especially for high-cost, medically complex patients. The report was completed at the request of the **Health Care Financing Administration** (HCFA; Baltimore).

The report – *Medicare Beneficiary Access to Home Health Agencies* – found that 85% of hospital discharge planners surveyed reported that Medicare patients were able to obtain home healthcare services, while another 15% reported that home healthcare is not always available. The

OIG found no difference between urban and rural hospitals or hospitals with a financial interest in a home health agency compared to those without.

"Hospital discharges to home healthcare appear to remain constant," the report concluded. "The proportion of Medicare discharges to home healthcare was 11% in the first six months of 1997 and 10.9% in the first six months of 1999."

An OIG spokesperson said the report was designed to determine how IPS has affected access to care. "The industry has painted a picture that IPS has decimated home health, and beneficiaries can't get care," said the spokesperson. "Our survey of the hospital discharge planners shows that the overwhelming majority of Medicare beneficiaries who need home health services after being discharged from the hospital are being placed."

The spokesperson also noted that among the 15% that

*See OIG, Page 4*

<b>INSIDE:</b>	CORAM HEALTHCARE ANNOUNCES DEVELOPMENT OF NEW DIVISION.....	3
	OLSTEN HEALTH SERVICES RECEIVES 98% ON 1999 CIGNA AUDIT.....	4

To subscribe, please call Home Health Business Report® Customer Service at (800) 688-2421; outside the U.S. and Canada, call (404) 262-5476.

Copyright © 1999 American Health Consultants®. Reproduction is strictly prohibited.

**BBA***Continued from Page 1*

regulations through the formal notice and comment process. That would eliminate HCFA's ability to cut reimbursement up to 15% in a single year without formal notice or comment.

Finally, the bill would provide a price update for durable medical equipment (DME) and oxygen equal to the consumer price index, minus 2% for FY01 and FY02.

**Final deal sought**

The widespread expectation is that House Ways and Means Health Subcommittee Chairman Bill Thomas (R-CA) will prevail concerning the 15% reduction.

"Thomas usually gets his way on these issues with [Senate Finance Committee Chairman] Bill Roth," said one home care lobbyist. "That looks very promising, but you can't count these things until you see it done."

One home care lobbyist reported that when budget negotiations turned to home health, Senate Majority Leader Trent Lott signaled that that he favored delay of the 15% cut over a phase-in. "The Democrats had already proposed a delay instead of a phase-in, so there was a lot of support for it," said the lobbyist. "That is why we think they are going to go with the House approach."

"Our goal at this point is to end up with the House approach to the 15% reduction and add some of the items from the Senate bill, such as an increase in the per-visit limits and an increase in the per-beneficiary limits," said **National Association for Home Care's** (Washington) Bill Dombi. He said NAHC also wants to see an extension of periodic interim payments included in the final agreement.

"Another very crucial item is the elimination of consolidated billing," added Dombi. "We would live with the 15-minute requirement because people are already doing it, but we don't understand why Thomas would dig his heels in on the consolidated billing requirement because it really does not have any affect on the Medicare budget." ■

**C O R P O R A T E L A D D E R**

• The **Oregon Nurses Foundation** has elected Mark Newson, president of **Sacred Heart Home Health Services**, as an officer for the 1999-2000 term. ■

**C A L E N D A R**

• **Global Business Research's** (Stamford, CT) conference *Prosper Under PPS: Successfully Balancing Finance and Clinical Operations* is Dec. 9-10 in Orlando, FL. The conference will address how to learn to live with PPS now. For more information, call (800) 868-7188.

• The **American Federation of Home Care Providers**, in conjunction with **U.S. Health Networks** and **Health Services Publishing & Management**, will be conducting several one-day workshops on *Understanding and Managing Under PPS*. The first workshop will be Feb. 1 in St. Petersburg, FL. Other programs are in planning. For more information, call (800) 525-5577.

• The **California Association for Health Services at Home's** (Sacramento) 2000 annual conference is May 17-19 in Pasadena, CA. For more information, call (916) 554-6117.

• The **National Association for Home Care** (Washington) is offering a one-day workshop on the prospective payment system (PPS) to provide attendees with analysis and detailed information about how to successfully implement PPS. The workshop will be offered at different locations, starting in Washington, DC, Nov. 30. The next meeting will be in Las Vegas on Dec. 8. More locations will be announced. For more information, call (202) 547-7424. ■

Home Health Business Report® (ISSN 1073-9572) is published every Monday by American Health Consultants®, 3525 Piedmont Road, Building Six, Suite 400, Atlanta, GA 30305. Opinions expressed are not necessarily those of this publication. Mention of products or services does not constitute endorsement. Home Health Business Report® is a trademark of American Health Consultants®, a Medical Economics Company. Copyright © 1999 American Health Consultants®. All Rights Reserved. No part of this publication may be reproduced without the written consent of American Health Consultants®.

**ATLANTA NEWSROOM:** Executive Editor: **Jim Stommen**. Managing Editor: **Lee Landenberger**. Editor: **Meredith Bonner**. Washington Correspondent: **Matthew Hay**.

**BUSINESS OFFICE:** Vice President/Group Publisher: **Donald R. Johnston**. Marketing Manager: **Amber Godfrey**. Operations Coordinator: **Amy Wesolowski**. Account Representative: **Bob Sobel**. Reprints: (800) 688-2421.

## SUBSCRIBER INFORMATION

Please call **(800) 688-2421** to subscribe or if you have fax transmission problems. Outside U.S. and Canada, call **(404) 262-5476**. Our customer service hours are 8:30 a.m. to 6:00 p.m. EST.

## EDITORIAL

Meredith Bonner **(404) 262-5478**

## VICE PRESIDENT/GROUP PUBLISHER

Donald R. Johnston **(404) 262-5439**

## INTERNET

<http://www.ahcpub.com>

## COMPANIES IN THE NEWS

### Chemed declares cash dividend

**Chemed** (Cincinnati) declared a quarterly cash dividend of 53 cents before announcing a change in its dividend rate beginning in 2000. The 53 cent dividend will be paid Dec. 10 to shareholders of record Nov. 19. The company said it expects to begin declaring quarterly dividends in 2000 in the range of 10 cents.

Chemed said the dividend rate issue has been perplexing since the company sold its **DuBois Chemicals** unit in the early 1990s. Chemed expects a new dividend rate policy will enable its units to aggressively build their respective businesses.

### Coram develops new division

**Coram Healthcare** (Denver) has introduced a new division, **Coram Hemophilia Services** (Malvern, PA), designed to support existing and future patients with hemophilia. The new division offers patients a broad range of products and services, including the provision of oral medication, clinical monitoring, home nursing, case management, billing and reimbursement, patient education programs, and delivery of hemophilia factor. In addition, it will provide several lifestyle services for patients with hemophilia, such as a comprehensive clinical pathway to assist patients who are undergoing joint replacement and other orthopedic procedures, as well as information on fertility options for HIV discordant couples.

### IHS elects against making \$7.7M interest payment

**Integrated Health Services** (IHS; Sparks, MD) elected not to make the interest payment of \$7.7 million due today on the company's \$150 million 10.25% senior subordinated notes due 2006. The indenture under which the notes were issued provides for a 30-day grace period before an Event of Default will occur due to the nonpayment of interest, IHS said. If the interest payment is not made within the 30-day grace period, the notes may be declared immediately due and payable. The notes are a general unsecured obligation of IHS and rank subordinate in right of payment to the company's senior bank debt and lease obligations, IHS said.

As IHS previously announced, it retained **Warburg Dillon Read** as its advisors and **KPMG** as its consultants to analyze strategic alternatives. IHS said it is continuing to honor its obligations to vendors.

### Invacare receives FDA approval for new oxygen system

**Invacare** (Elyria, OH) has received 510(K) clearance from the **Food and Drug Administration** on the Invacare Venture HomeFill Complete Home Oxygen System, which was developed by Invacare in response to

Medicare oxygen reimbursement cuts. The HomeFill System, an oxygen filling system, works in conjunction with a specially adapted Invacare six-liter oxygen concentrator. The system allows a patient to fill his or her own high-pressure oxygen cylinders, thus eliminating time-consuming and costly service calls by the oxygen provider, while at the same time improving the patient's quality of life.

In addition, Invacare launched Invacare Pro, a new application for providers found at [www.invacare.com](http://www.invacare.com). The new application allows providers to order products through a Web-enabled direct order entry system, as well as access information on product availability, order status, manufacturing status, financial account status, proof of delivery, and more. In addition to the launch of Invacare Pro, the company also has reached an agreement with VerticalNet to sponsor an all-new home healthcare business-to-business portal on the Internet at [www.home-healthprovider.com](http://www.home-healthprovider.com). The new site caters to the varied needs of those who rent, sell, and provide home health services and equipment to patients/consumers.

### McKesson teams with Retractable Technologies

**McKesson HBOC** (San Francisco) has entered into an agreement with **Retractable Technologies** (Dallas) under which **McKesson HBOC Medical Group** (Richmond, VA) has contracted with Retractable to supply safety syringes and blood collection tube holder products to its customers. Retractable is the innovator of the VanishPoint product line, which includes needle devices that feature patented technology that automatically retracts the contaminated needle directly from the patient into the empty device barrel upon completion of an injection or blood drawing procedure.

McKesson said the agreement with Retractable follows California groundbreaking safety needle law, requiring all healthcare providers to make available to their workers safety-engineered needle devices designed to eliminate or minimize needle stick injuries. Similar legislation has been passed in 26 other states, McKesson said.

### NHHC acquires assets of Optimum

**National Home Health Care Corp.** (NHHC; Scarsdale, NY), through its wholly owned subsidiaries in Connecticut, has acquired certain assets of **Optimum Home Health of Connecticut** and an affiliate for \$4.4 million. The Optimum entities include a Medicare-certified and licensed home healthcare company and an affiliate that provides staffing services in Connecticut.

NHHC said the Optimum entities were at a run rate of \$20 million for the six months ended June 30, although there can be no assurance as to the actual revenues to be realized. The acquisition, the company said, was made from a court-appointed trustee for the Optimum entities. The purchase price was generated from internal funds.

### Olsten scores 98% on Cigna audit

**Olsten Health Services** (Melville, NY) received a score of 98% on **Cigna Healthcare's** (Philadelphia) July 1999 national audit of home health facilities credentialed by Olsten Health Services in the past year. Olsten's 1999 score was the same as its score in 1998, and slightly lower than its score of 100% in 1997.

More than 1,500 credentialed facilities participate in Olsten's provider panel. The facilities provide local access on a nationwide basis to a number of essential services, such as home healthcare, physical and respiratory therapies, and medical equipment. The oversight audit reviewed the files of 10% of the offices presented to and credentialed by Olsten's National Credentialing Committee from July 1, 1998, through June 30, 1999.

### PSAI completes sale of paramedical division

**Pediatric Services of America** (PSAI; Norcross, GA) has completed the sale of the assets of its paramedical division to Hooper Holmes (Basking Ridge, NJ). PSAI President Joseph Sansone said the company can now "turn our undivided attention to our core pediatric businesses." ■

## OIG

*Continued from Page 1*

cited difficulties, not all are related to IPS. In fact, 13 of the 24 discharge planners that noted difficulties cited a lack of coverage for IV medication or venipuncture or a problem related to Medicare's definition of homebound.

"Essentially what we are saying is that there are still inflated costs in the program and that that should be taken into account when and if Congress decides to change the IPS and also the payment for the (prospective payment system)," the spokesperson said.

### Industry takes opposing view

Several home care representatives take a much different view of the report, however. "I thought their headlines were really misleading and did not reflect what are the most significant findings in the report," asserted Jim Pyles, counsel for **Home Health Services and Staffing Association** (Jacksonville, FL). He pointed out that more than half of the discharge planners found that the sickest patients were being denied access to care.

Pyles also noted that 25% of discharge planners reported that home health patients were not getting the care they required as evidenced by re-hospitalizations and increased admissions to emergency rooms. "That is very significant," argued Pyles.

"The packaging belies the content," concurred **American Federation of Home Care Providers** Executive Director Ann Howard. "The subtitles would make one believe there is not much of a problem, but when you read the fine print, there are some pretty

significant factors."

Howard noted that 28 out of 181 discharge planners reported problems securing home care for beneficiaries. "That is a fairly large chunk," said Howard. "They also admit that higher cost medically complex patients are having trouble."

In addition, Howard noted that the study interviewed only hospital discharge planners and that only 14% or 15% of home care patients come to home health from hospitals.

"In effect, this is a very, very sketchy report," Howard said. ■

## PPM / MSO NEWS

• **Birman Managed Care's** (Cookeville, TN) **Birman Consulting Group** subsidiary has been awarded a new contract with a hospital in Kansas and has begun an expanded consulting service with an existing client in the same region. Together, the contracts are valued at a little more than \$200,000 for one year. The new client contract has a stipulated one-year extension for \$140,000, Birman said. Both Kansas hospitals have contracted to use Birman's Quality Management Program. One is for an inpatient hospital setting, which represents the distinctive services Birman provides at now 19 hospitals in 11 states. The other is for the QMP to be applied in an outpatient clinic. The new hospital contract is for one year, with a built-in extension for a second year.

• **Complete Management** (CMI; New York) has filed a voluntary petition for reorganization with the United States Bankruptcy Court for the Southern District of New York under Chapter 11 of the U.S. Bankruptcy Code. In March, the company said, it defaulted on its 8% convertible subordinated debentures due Aug. 15, 2003, and its 8% convertible subordinated debentures due Dec. 13, 2003. Since then, CMI has worked with an informal committee of debenture holders to finalize a term sheet for a plan of reorganization. The term sheet between the company and the debenture holders committee was signed on Oct. 8, the company said. The term sheet proposes an exchange of debt for equity in a reorganized CMI.

• **Tessa Complete Health Care** (Oakbrook Terrace, IL) has signed an administrative services agreement with **Medical Options**, a company with which Tessa previously announced plans to merge. Under the terms of the agreement, Tessa will immediately begin handling the day to day operations of the six clinics in Medical Options' portfolio. In addition, Medical Options will pay Tessa a monthly fee for providing support services, including payroll processing, administrative support, service and supplies insurance and benefits, marketing, billing, and collections. ■

## REGIONAL DIGEST

## WHAT THEY'RE SAYING

• **Exempla Healthcare** (Denver) is in talks to sell its home health agency to the **Visiting Nurse Association** of Denver, reported the *Denver Rocky Mountain News*. The home health agency, with annual revenues of \$10 million, serves about 2,800 patients and employs 230 workers. Officials from both sides hope to work out a deal in the next month and close on it by mid-January, the *News* reported.

• Home health workers in Wisconsin will get modest wage boosts under Medicaid increases in the new state budget signed by Gov. Tommy Thompson. In signing the legislation, Thompson cited evidence that high staff turnover and the threat of declining patient care were linked to low pay for nurse aides, reported the *Milwaukee Journal Sentinel*. ■

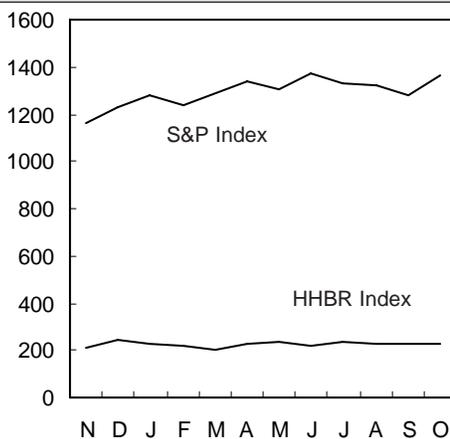
• Jane Orient, executive director of the **Association of American Physicians and Surgeons**, in response to President Clinton's announcement of forthcoming regulations on medical privacy, recently said that "Congress had better take a very close look at the details of the president's privacy regulations when they come out, as this administration's record on privacy is lousy." She further said that while Clinton had no problem with pushing a national patient i.d. through Congress, he refused to make public his own medical file. She said the "same administration that enacted the federal OASIS program this year to collect pages of intrusive personal information, from toilet habits to sexual activity, from people getting home health care," has "repeatedly abused the privacy of others for its own agenda." ■

### MONTHLY STOCK INDEX COMPARISON

	Close 9/30/99	Close 10/29/99	Net Change	Percent Change
Home Health Industry Stock Index	225.26	226.77	1.51	67.00
Dow Jones Industrial Average	10336.95	10729.86	392.91	380.00
N.Y.S.E. Composite	592.79	625.47	32.68	551.00
S&P 500 Composite	1282.41	1362.93	80.52	628.00
NASDAQ OTC Composite	2746.16	2966.43	220.27	802.00
Dow Jones Health Care Index	510.99	466.29	-44.7	-875.00

### HHBR'S HOME HEALTH COMPOSITE STOCK INDEX

The Home Health Business Report Composite Stock Index represents the collective performance of nine publicly traded companies with primary businesses in the home healthcare industry. Companies included in the Composite Index are denoted with an inverted triangle (▽) in the "company name" column of our monthly stock tables appearing on page 6. The HHBR Composite Stock Index was compiled by Nordby International, and has been constructed to show comparative performance of a selected group of home healthcare stocks with the S&P 500-Stock Index. The index was calibrated to match the 435.71 closing of the S&P 500 on Dec. 31, 1992.



### MAJOR MOVERS IN HOME CARE IN OCTOBER 1999

#### TOP FIVE PERCENTAGE GAINERS

Transworld Home HealthCare Inc. ....	15.63
Columbia HCA Healthcare .....	13.86
Mallinckrodt .....	12.42
Staff Builders Inc. ▽ .....	12.05
Option Care Inc. ▽ .....	6.73

#### TOP FIVE DOLLAR GAINERS

Mallinckrodt .....	3.75
Columbia HCA Healthcare .....	2.94
Lincare Holdings Inc. ▽ (s) .....	1.47
Invacare Corp. ....	1.31
Fresenius Medical Care .....	1.00

#### TOP FIVE PERCENTAGE LOSERS

Integrated Health Services Inc. ....	-82.00
Sabratek .....	-71.11
Mid Atlantic Medical Services .....	-39.16
NuMed Home Health Care Inc. ....	-33.33
Pediatric Services of America .....	-33.33

#### TOP FIVE DOLLAR LOSERS

Mid Atlantic Medical Services .....	-3.50
ServiceMaster L.P. ....	-3.00
Sabratek .....	-2.00
Matria Healthcare .....	-1.84
Integrated Health Services Inc. ....	-1.28

Market Diary:	Advances This Month.....11	Declines This Month.....20	Unchanged This Month.....3	New Highs This Month.....1	New Lows This Month....10
---------------	-------------------------------	-------------------------------	-------------------------------	-------------------------------	------------------------------

# Public Company Financial Statistics (Oct. 29, 1999, close)

EXCH	COMPANY	TICKER SYMBOL	CLOSING	% CHANGE		52 WEEK		EPS	PRICE/	MARKET
			PRICE 10/29/99	THIS MONTH	THIS YEAR	HIGH	LOW	LAST 12 MOS.	EARN RATIO	CAPITAL (1000S)-
			\$		\$			\$	\$	\$
NAS	Amedisys	AMED	1.5	6.69	-47.83	4	0.75	0	-	4676
NAS	American HomePatient ▽	(L) AHOM	0.57	-17.03	-68.55	4.13	0.45	-3.75	-	8641
NYS	Apria Healthcare Group ▽	AHG	15.81	-5.6	76.92	22.06	3.5	-3.09	-	822740
NAS	Caretenders HealthCorp.	CTND	1.91	-3.17	-30.68	4.13	1.5	-0.14	-	5967
NYS	Chemed Corp.	CHE	29.94	-1.03	-10.63	35.13	25.75	1.74	17	312787
NYS	Columbia HCA Healthcare	COL	24.13	13.86	-2.53	27.5	16.38	0.89	27	13612242
NAS	Community Care Services	CCSE	0.75	-7.64	200	1.13	0.03	0	-	5414
NYS	Coram Healthcare Corp. ▽	(L) CRH	0.63	0	-66.67	2.88	0.5	-0.82	-	30968
NYS	Fresenius Medical Care	FMS	23.31	4.48	-0.8	26.13	15	0	-	1631875
NAS	Help at Home	(H) HAHI	1.19	5.56	-29.63	2.63	0.94	-1.56	-	2219
NAS	In Home Health ▽ (s)	IHHI	1.81	-14.71	0	3	1.06	0.24	8	9933
NAS	Infu-Tech	INFU	1.13	-30.77	-43.75	4.88	0.44	-0.35	-	3671
NYS	Integrated Health Services	(L) IHS	0.28	-82	-98.01	17.56	0.25	-2.8	-	14891
NAS	Interwest	IWHM	2.91	-16.96	-13.89	5	2.44	0.39	7	11884
NAS	Invacare Corp.	IVC	20.88	6.71	-13.02	26.94	18.06	1.6	13	595710
NAS	Kelly Services Inc.	KELYA	29.31	-2.7	-7.68	35.13	24.13	2.34	13	1051264
NAS	Lincare Holdings Inc. ▽ (s)	LNCR	28.13	5.51	-30.66	41.13	17.25	1.66	17	1637803
NYS	Mallinckrodt	MKG	33.94	12.42	10.14	37.56	25.56	2.51	14	2380784
NAS	Matria Healthcare	MATR	4.03	-31.38	40.22	7.5	1.63	0.09	45	147846
NYS	Mid Atlantic Medical Services	MME	5.44	-39.16	-44.59	13.13	5.19	0.23	24	271630
ASE	National HealthCare	(L) NHC	6.5	-7.14	-58.06	26.25	5.13	-0.68	-	74295
NAS	National Home Health Care Corp.	NHHC	3.75	-4	-21.05	5	2.25	0.21	18	19148
NAS	New York Health Care Inc.	(L) NYHC	0.75	0	-25	5	0.38	-0.04	-	2766
NAS	NuMed Home Health Care Inc.	NUMD	0.2	-33.33	-33.33	0.69	0.13	-0.39	-	1173
NYS	Olsten Corp. (The) ▽	OLS	10.06	-3.59	36.44	10.94	5.19	-0.3	-	818111
NAS	Option Care Inc. ▽	OPTN	3.47	6.73	105.56	5.88	0.75	0.07	50	39336
NAS	Pediatric Services of America	(L) PSAI	0.81	-33.33	-76.79	5.44	0.75	-5.68	-	5405
NAS	Respironics Inc.	(L) RESP	8.44	2.27	-57.88	21.38	7.5	0.72	12	258053
NYS	Sabratek	(L) SBTKE	0.81	-71.11	-95.04	34.25	0.81	0.34	2	8215
NAS	ServiceMaster L.P.	(L) SVM	13.06	-18.68	-40.79	23.81	11.56	0.54	24	4074625
NAS	Staff Builders Inc. ▽	SBLI	0.44	12.05	-22.31	0.88	0.09	-3.19	-	10322
NYS	Star Multi Care Services Inc.	SMCS	1.13	0	-21.74	2.25	0.63	-0.31	-	6077
NAS	Sunrise Medical Inc.	(L) SMD	5.63	-6.25	-54.77	13.75	4.44	0.2	28	124898
NAS	Transworld Home HealthCare Inc.	TWH	2.31	15.63	-50.67	5.4	1.5	-0.24	-	40587

KEY: (H)=NEW HIGH • (L)=NEW LOW • NYS=NEW YORK • ASE=AMERICAN  
 NAS=NASDAQ • (s)=STOCK SPLIT • ▽ in HHBR Composite Index • NA=not available

MARKET CAPITAL figure reflects total for this class of stock only. Stock listed is the most actively traded of the company's classes of stock.

Source: Nordby International, Boulder, CO.

This information is obtained from sources believed to be reliable, and while extensive efforts are made to ensure its accuracy, no guarantees can be made. Nordby International assumes no liability for any inaccuracies. For information on Nordby's customized financial research services, call (303) 938-1877.