



The World's only Bowel Prosthetic Device

Thank you for your interest in the PIE* Products.

Please find attached all the forms required to start the process of receiving a PIE Unit. Please print them so that you can begin the process of receiving your own PIE*.

The Patient Intake Form gives us your demographics and insurance information to call your insurance and verify benefits.

The AOB Release form gives us your approval to obtain all information on your behalf and also authorizes the insurance to pay us once the unit is approved.

The CMN (Certificate of Medical Necessity) is the Form you will need to have your physician complete, this is the document specifying your need of the PIE Unit.

We must have the original AOB request back with signature to start the process of verifying insurance benefits. Working together, we should be able to obtain a determination of coverage for you.

Thank you for the request and we look forward to working together. In case your Doctor must send the forms directly to your insurance company, please make sure that all documents after this letter are sent.

Sincerely,

A handwritten signature in blue ink, appearing to be "Roy Abell", written over a circular scribble.

Roy Abell
Quadriplegic/Inventor of the PIE*
President
PIE*Medical International, Inc.
2713 Brickton North Drive
Buford, GA 30518
877-482-6043
Fax: 404-806-7048
royabell@piemed.com
<http://www.piemed.com>

The PIE* Bowel Prosthetic Device & Disposables



The PIE* Bowel Prosthetic Device is very easy to use in the home care environment.

Our clients using the PIE* BP at home either provide the procedures to themselves; have a family member or a personal attendant. The tank in the foreground holds tap water at body temperature. The water is pumped from the tank through a disposable kit called the PIE*Pak into the colon of the patient. As water is being infused there is a gentle pulsing activity in the water to break up the stool for easy removal with the ongoing water.



Demonstration of the wave activity in the colon.



After the water has been pulsed through the colon, it is then discharged from the colon by gravity through the Speculum and into the Waste Water Tank to be emptied into a nearby toilet.

The entire process is very clean and completely sealed.



The PIE* Speculum.

The Speculum has an inflatable cuff that is inflated after insertion. This secures the Speculum in the Rectal Vault and helps to trigger autonomic peristaltic activities. The large holes allow the fecal material and water to pass through by gravity only.



The PIE*Pak for Home Care.

A PIE* Procedure uses all of the components shown in this picture and everything is disposed of after each procedure. Physicians that are using the PIE* in their practice on a regular basis recommend that the individual receive a PIE* procedure every other day. With that routine, there is little chance of fecal impactions or accidents. The cleanliness of this procedure contributes heavily to reducing UTI. The PIE*Paks are packaged 15 kits to the case to allow one case to last one month.



COMMENTS by Terry Puet, MD: (Author of several published PIE* Studies.)

Because the PIE* Bowel Prosthetic Device/Procedures completely removes all of the fecal material there are many positive changes in the health of your patient. Experience from my patients have shown us that hospital admissions for fecal impactions, rectum lesions, hemorrhoids, bleeding hemorrhoids from repetitive digital stimulation and repetitive UTI seem to disappear when the patient uses the PIE* Procedure every other day.

Patient Intake Form

Patient Last Name: _____ First Name: _____ MI: _____

Address: _____ E-mail: _____

City: _____ State: _____ Zip +4 _____

Phone: Home _____ Work: _____ ext. _____ Cell: _____

Date of Birth: _____ SSN: _____ Sex: _____ Marital Status: _____

Emergency Contact: _____ Relationship: _____ Phone: _____

Diagnosis: 1: _____ 2: _____ 3: _____ 4: _____

Employer: _____ Occupation: _____

Employer Address: _____ Phone: _____

Physician: _____ Phone: _____ Fax: _____ ID #: _____

Physician Address: _____

Primary Insurance

Is this condition due to an accident? _____ Go to End of Form!

Primary Insurance Carrier: _____ Phone: _____ Fax: _____

Mailing Address: _____

Insured Name: _____ DOB: _____ Relationship: _____ SSN#: _____

Policy Number: _____ Group Number: _____ Eff. Date _____

Insured Employer: _____ Phone: _____ Fax: _____

Insured Employer Address: _____

Secondary Insurance

Secondary Insurance Carrier: _____ Phone: _____ Fax: _____

Mailing Address: _____

Insured Name: _____ DOB: _____ Relationship: _____ SSN#: _____

Policy Number: _____ Group Number: _____ Eff. Date: _____

Insured Employer: _____ Phone: _____ Fax: _____

Insured Employer Address: _____

Work or Motor Vehicle Injury

Have you filed a claim? (Circle) Yes No Workers Comp: _____ Auto: _____ Other: _____

Date of Injury/ accident: _____ Claim Number: _____

Insurance Carrier: _____

Billing Address: _____

City: _____ State _____ Zip code: _____

Phone: _____ Fax: _____

Adjuster Name: _____ Phone: _____

Attorney Name: _____ Phone: _____

Release of Information & Assignment of Benefits

Commercial Insurance

I hereby authorize release of any medical information necessary to file a claim with my insurance company and assign benefits otherwise payable to me _____ to PIE Medical International, Inc..

I understand I may be financially responsible for any balance not covered by my insurance carrier, if I have any financial difficulty in payments I will notify PIE Medical International, Inc. to work out these obligations.

A Copy of this signature is as valid as the original.

Signature of patient or guardian _____

Medicare Insurance

Beneficiary _____ Medicare Number _____

I authorize any holder of medical and or other information about me to release to the Social Security Administration and Health Care Financing Administration or its Intermediaries, Carriers or Providers any information needed for this or a related Medicare Claim. I permit a copy of this authorization to be used in place of the original, and request payment of medical insurance benefits either to myself or to the party who accepts assignment. I understand it is mandatory to notify the healthcare provider of any other party who may be responsible for paying for my treatment. (Section 1128B of the Social Security Act and 31 U.S. C. 3801-3812 provides penalties for withholding this information) Regulations pertaining to Medicare assignment of benefits also apply.

Signature _____ Date _____

Medicare Supplemental Insurance

I request that payment of authorized Medigap benefits be made on my behalf to PIE Medical International, Inc. for any services furnished to me by them. I authorize any holder of medical information about me to release to Medigap insurance carrier any information needed to determine these benefits payable for related services.

Beneficiary _____ Medicare Number _____

Medigap ID Number _____

Beneficiary Signature _____ Date _____

Electronic Bowel Irrigation Evacuation Prosthetic Device

Certificate of Medical Necessity

HCPC Codes E 0350 & E 0352

Prosthetic Device: **"Replacing the function of a permanently dysfunctional colon."**

Referral Date / /

Help: 877-482-6043

Fax Completed CMN to: 404-806-7048

Patient Name: _____ Date of Birth / /

Social Security #

--	--	--	--	--	--	--	--

Sex MALE FEMALE

Shipping Address: _____

City: _____ State: _____ Zip: _____

Phone (H) () Phone (W) () Emergency Phone ()

County: _____ Contact: _____ Relationship to Patient: _____

Method of Payment

Effective Dates: _____

- | | |
|--|--|
| <input type="checkbox"/> MEDICARE | <input type="checkbox"/> MEDICAID |
| <input type="checkbox"/> PRIVATE INSURANCE | <input type="checkbox"/> WORKER'S COMPENSATION |
| <input type="checkbox"/> MEDICARE (PART B) _____ / _____ / _____ | <input type="checkbox"/> MEDICAID NUMBER _____ / _____ / _____ |

MEDICARE NUMBER: _____ MEDICAID NUMBER: _____

INSURANCE COMPANY: _____ PHONE: _____

(Complete for HMO, Private Insurance and Worker's Compensation)

Policy Holder

Name: _____ Date of Birth / /

Social Security #

--	--	--	--	--	--	--	--

TYPE OF POLICY:

- MAJOR MEDICAL
- PPO
- HMO
- COBRA
- WORKER'S COMPENSATION
- OTHER _____

Patient's Relationship to Policy Holder: Self Spouse Child Other: _____

ID # _____ GROUP # _____

Employer: _____

Special Usage Notes: _____

Medical Information

I Certify the Medical necessity of the Electronic Bowel Irrigation Evacuation (PIE®BP) E0350 and required (15) monthly disposables kits E0352 as the Required Therapy for this patient. All other traditional means of artificially removing stool from this patient have been tried and are not successful for the patient to maintain health. The PIE®BP has been clinically proven safe and effective. I am ordering this product for this patient as a reasonable and necessary treatment for their diagnosis.

- ICD-9 DIAGNOSIS: PRIMARY: _____ SECONDARY: _____
- Yes No Neurogenic Bowel (ICD 9 code 564.81)
- The patient has the following bowel dysfunctions requiring change in their treatment:
- Failure of Bowel Function Chronic Fecal Incontinence Chronic Constipation Frequent Fecal Impactions
 - Other: _____

Additional health complication(s) relating to patient's bowel dysfunction (Check all that apply):

- Decubitus ulcers) Recurrent UTI Dehydration Hemorrhoids
- Mega Colon Autonomic dysreflexia Frequent ER/office visits Electrolyte imbalance
- Other: _____

The following bowel evacuating methods have failed for this Patient. (Check all that apply):

- Bowel training routine/programs Fluids Manual disimpaction Softeners Oral cathartics
- Digital stimulation Enemas Suppositories Fiber
- Other: _____

As a result of insufficient bowel elimination, the patient's health is: _____

Plan of Care Information

HCFA Codes: PIE®BP E0350 and disposable PIE®Pak kits E0352. FDA Certified as a Class II Medical Devices.

Due to the patient's permanent condition and since other methods are no longer providing acceptable results, there is sufficient clinical and case evidence that the PIE®BP Therapy has produced repeated successful results with other patients; I prescribe the PIE® Therapy to be performed as follows:

- 1 procedure every _____ days for _____ months.
- 1 procedure every _____ days from this day forward for life.
- I prescribe the home therapy system (1) PIE® BP (E0350) and (15) monthly PIE®Pak disposable kits (E0352) monthly to perform the necessary function of their permanently dysfunctional bowel.

Physician Treating this Condition: _____ Office Phone: () _____

Address: _____ Office Fax: () _____

City: _____ State: _____ Zip: _____ Fed. ID# _____

PHYSICIAN SIGNATURE: _____ Date _____ UPIN# _____

Fax completed document to: 404-806-7048

Published Medical Studies on the PIE* Abstracts:

(This abstract is probably the most valuable as it was created by the Cleveland Clinic using for long-term patients using the PIE* BP for almost seven years. Not only were the colon tissue samples very healthy, all four patients had no admissions for Fecal Impaction or UTI.)

Long Term Safety of Pulsed Irrigation Evacuation (PIE) Use with Chronic Bowel Conditions. Digestive Diseases and Sciences, August 1998. Gramlich (Cleveland Clinic) and Puet (Medical Director of Hillside Rehabilitation Hospital).

In order to determine the long-term effects of Pulsed Irrigation Evacuation on the colon, sigmoid/colonoscopy was performed on four patients with spinal cord injuries who have used this procedure an average of 3.5 times weekly, for an average of 6.7 years. No gross or microscopic abnormalities were identified in any of these individuals. Impactions as well as other complaints were markedly diminished or absent following the initiation of PIE* Bowel Therapy. Pulsed Irrigation Evacuation is a safe and effective method for long-term treatment of chronic neurogenic bowel.

Use of Pulsed Irrigation Evacuation in the Management of the Neuropathic Bowel International Sciences of Paraplegia, 1997. Puet, Jackson and Amy.

Management of the neuropathic bowel is one of the major issues in the treatment of patients with severe spinal cord injury (SCI). Pulsed Irrigation Evacuation (PIE) has been evaluated in several small studies for the clearing of fecal impactions in patients with a neuropathic bowel. Three Hundred, ninety-eight PIE procedures performed on inpatients and outpatients at Hillside Rehabilitation Hospital were evaluated. PIE* Bowel Therapy has proven to be both safe and effective in a wide variety of patients with neuropathic bowel, and is a useful addition to traditional methods of bowel management.

Treatment of Fecal Impaction with Pulsed Irrigation Enhanced Evacuation. Dis Colon Rectum, February 1994. Kokoszka, Nelson, Falconio and Abcarian.

A new method of treating fecal impaction, Pulsed Irrigation Evacuation, is described. Individuals were selected for treatment based on evidence of massive fecal impaction on physical examination or abdominal x-ray and would otherwise have required operative disimpaction. Fourteen individuals were treated for fecal impaction. The patients ranged in age from 13 to 86 years. Only one patient required intravenous sedation, an elderly patient with Alzheimer's disease. The treatment was successful in each case, although repeated treatment was often necessary. No morbidity arose from the treatment. By the midpoint of the study PIE* Bowel Therapy was so effective no patient required hospitalization for impaction. These PIE* Procedures demonstrate that Pulsed Irrigation Evacuation, PIE* Bowel Therapy is a simple, quick and effective treatment for severe fecal impaction.

New Treatment for Rectal Impaction in Children: An Efficacy, Comfort and Safety Trial of the Pulsed Irrigation Enhanced Evacuation Procedure. Journal of Pediatric Gastroenterology and Nutrition, 1994. Gilger, Wagner, Barrish, McCarroll and Healy.

To determine the efficacy, comfort and safety of the pulsed irrigation enhanced evacuation (PIEE) procedure in children, 27 procedures performed on 24 consecutive children were evaluated. Sixteen boys and 8 girls, 4-15 years old (mean 8.7) with chronic constipation, encopresis and rectal impaction made up the test group. Children with known heart, lung or neurological diseases were excluded. Temperature, pulse, respiratory rate and blood pressure were obtained prior to, during and immediately after the procedure. Abdominal radiographs were obtained before and after the procedure and a single radiologist estimated the degree of disimpaction. Patients graded the discomfort of the procedure at the time of speculum insertion and every 15 minutes. Serum sodium, potassium, chloride and bicarbonate values were obtained before and immediately after and 90 minutes after the procedure and compared by paired Student analysis. In conclusion, the PIE* Bowel Therapy procedure successfully disimpacted all patients either immediately or

within hours of completion. Patients accepted the procedure well and no clinically significant electrolyte changes were noted. This new method of rectal disimpaction appears to be safe, effective and acceptable to children.

Pulsed Irrigation Enhanced Evacuation: New Method for Treating Fecal Impaction. Arch Phys Med Rehabil, October 1991. Puet, Phen and Hurst.

Fecal impaction is a common problem in patients with neurological impairment. The Pulsed Irrigation Evacuation (PIE) procedure is a new method of clearing fecal impactions using pulses of warm water in controlled amounts to hydrate stool and improve peristalsis. Thirty-seven PIE* Bowel Therapy procedures were performed on 28 patients with a variety of neurological problems. The PIE* procedure was observed to be effective and safe. It should be useful adjunct to a proper bowel management program.

Per-rectal Pulsed Irrigation Versus Per-oral Colonic Lavage for Colonoscopy Preparation: A Randomized, Controlled Trial. Gastrointestinal Endoscopy, 1991. Chang, Erickson, Schandler, Coye, and Moody.

The aim of this study was to compare the efficacy and patient tolerance of a new Pulsed Irrigation Evacuation system to colonic lavage for colonoscopy preparation. Thirty-four prospective patients scheduled for routine colonoscopy were randomized to one of two preparations: a per-rectal Pulsed Irrigation Evacuation, PIE* Bowel Therapy device (18 patients) versus per-oral colonic lavage (15 patients). Colonoscopy preparation was assessed on a 0 to 4 plus scale by region and overall. This was done live and by videotape by two independent endoscopists who were blinded to the patient's preparation. There was no significant difference with respect to cleanliness of the colon with Pulsed Irrigation Evacuation patients having an average of overall preparation score of 3.0 ± 0.19 (SEM) versus colonic lavage patients with a score of 3.14 ± 0.19 . There was also no statistically significant difference between the two groups with respect to demographics, time to reach the cecum, time for entire procedure, volume of aspiration or wash or sedation given. The new Pulsed Irrigation Evacuation device, PIE* Bowel Therapy, provides an alternative to the standard per-oral lavage solution for colonoscopy preparation.

Dissolution of a Barium Impaction Ileus in a Child Using the PIEE Procedure. Journal of Pediatric Gastroenterology and Nutrition, 1995. Gilger, Wagner and Kelley.

Barium contrast examinations, utilizing either barium meal or enema, are still a common choice for visualization of the gastrointestinal tract in children. After completion of these x-ray procedures the contrast material should be thoroughly evacuated from the bowel. Residual barium sulfate remaining in the gastrointestinal tract has the potential to harden, forming true "concretions" that can become impacted. Purgatives or enemas are often given after barium studies to insure complete evacuation of the contrast material. However, once the barium impaction has formed in the colon, routine enema preparations such as Phosphosoda, oil retention, tap water and soapsuds are frequently ineffective. Recently, the Pulsed Irrigation Evacuation (PIE) (Avatar 2000 Bowel Evacuation System, Aegis Medical, Denver, CO, U.S.A.) procedure was introduced as a simple, effective method for removal of rectal impaction in adults and children. PIE is an automated enema in which controlled pulses of warm water are delivered into the rectum, serving to hydrate feces and promote peristalsis. We report the successful evacuation of a severe barium impaction in a child with total colonic Hirschsprung's disease using the PIE Bowel Therapy Procedure.

Complete Clinical Studies are available at: <http://www.piemed.com/safety.html>

Almost 200,000 PIE* Procedures have been performed with no reports of injury!

PIE* Testimonials:

Michael Andorsky, M.D...

The Johns Hopkins University School of Medicine,
The John Hopkins Hospital, Department of Pediatrics

"As director of the John Hopkins Pediatric Bowel Management Clinic, I have used the PIE* machine to remove fecal impaction and prevent fecal incontinence in children with spina bifida...this has proved to be a valuable adjunct to their bowel maintenance...the PIE* machine has reduced the need for hospital admissions for bowel evacuation...I have used it both in the outpatient department and in the patients' home."

Mark A. Gilger, M.D.

Texas Children's Hospital

"It is my privilege to write a letter in support of the PIE*...our studies confirmed the PIE* to be safe, acceptably comfortable and most importantly, effective in removing fecal impactions in children...we also have recently confirmed the ability of the PIE* to remove serious barium impactions...we currently use the PIE* on a daily basis at Texas Children's Hospital...it is a simple alternative to expensive manual or surgical disimpaction of the rectum...I vigorously endorse the PIE* device for use in children and welcome any inquiries."

John H. Grimes, MD ...

"My patient, J.R.B., has been a paraplegic for many years...has had increasing difficulty emptying bowels and constipation of bowel impactions has frequently been a major problem for him...all standard therapies, including stool softeners, laxatives, enemas and manual disimpaction have proven ineffective...because of this, we have prescribed use of the PIE for him, and it has already proven to make a marked difference in his care."

Margaret Falconio-West, RN, BSN, CGRN, CETN

Highland Park Hospital

"I can attest to the wonderful results of patient comfort, effective bowel evacuation, and the avoidance of surgery...these surgeries, alone, can cost up to \$10,000...another beauty of the PIE* is that we were able to keep patients out of the hospital altogether, even with repeat procedures, they were treated on an outpatient basis...it is a wonderful machine...thank you for bringing it to the people that need it!"

L.H. (Parkinson's Plus)...

"I was hospitalized for 7 weeks because of an impaction and the doctor not being able to regulate my bowels...the doctor recommended the PIE...since using the PIE, I have been able to regulate my bowel movements so that I don't have accidents, which was a common occurrence, nor have I had an impaction...without the PIE, both of these happened...doctors have tried everything with me, enemas, suppositories, laxatives, etc., but nothing ever really worked for me like the PIE. Without the use of the PIE, chances are I would have to be placed in a nursing home."

James F. Frisbie, MD

Veteran's Administration

"The PIE* proved to be a great success...positive improvement regarding vital signs...not only eliminated impaction problems...one patient after 3 weeks experienced natural peristaltic action...in past year 3 KUBs to evaluate previous distended upper colon...noticed a definite contraction and toning of the colon...in my opinion the PIE* has prevented surgery...advised continued use of the PIE* to avoid and prevent many future medical problems."

David H. Doan, MD...

"My patient, I.N., who has long standing paraplegia secondary to a previous spinal cord meningioma...has been using the PIE for the past few years...the patient's pattern of recurrent hospital admission and emergency room evaluation have essentially disappeared...the PIE has been extremely effective for this patient...effective not only on her medical care but also medical costs, and has dramatically improved her quality of life..."



This patient was photographed and treated by Ms. Storey below.

Virginia Storey, R.N.

The University of Illinois Hospital at Chicago

"Since becoming acquainted with the PIE* technique, I find it viable, easily accomplished, and well tolerated by patients...therefore, I have recommended its use to physicians and nurse colleagues at other hospitals and institutions...the PIE* procedure has been used successfully on numerous patients here at our facility on an out-patient basis, thus preventing a costly, usually avoidable in-patient hospitalization."

Alexis D. Butler, RN

Director of Nursing

East Alabama Medical Center

"this is an excellent opportunity to "sing the praises" of PIE*...since we purchased the PIE*, we have used it for virtually every application it was meant to be used for: impaction removal; both inpatient and outpatient (75%), bowel prep for colectomy, colonoscopy, and radiology procedures (20%) and home health visits for impacted home bound patients (10%)...in many instances the PIE* has prevented hospitalization and/or reduced LOS thereby reducing costs."

David H. Doan, MD...

"My patient, I.N., who has long standing paraplegia secondary to a previous spinal cord meningioma...has been using the PIE for the past few years...the patient's pattern of recurrent hospital admission and emergency room evaluation have essentially disappeared...the PIE has been extremely effective for this patient...effective not only on her medical care but also medical costs, and has dramatically improved her quality of life..."

A.B., RN ...

"In many instances, PIE has prevented hospitalization and/or reduced LOS thereby reducing costs."

Wafaa A.Foad, MD ...

"My brother had autonomic hyperreflexia in 1993 (the blood pressure was elevated with distension of bowel, rectum and bladder). This attack of sudden elevation in his blood pressure led to a stroke - bilateral cerebral hemorrhage. He recovered from the coma after two weeks to lose his speech. I wish he had the PIE* earlier. Maybe this all would have never happened. Since we have been using the PIE, our life has been much easier. He has one bowel movement every other day...regular, no bleeding, no mess, no hemorrhoids, no fissures, less time."

C.H., RN ... "meant shortening the length of a patient's stay in the hospital...less nursing time...PIE system used to remove impactions...again shortening patients' length of stay...requiring less nursing time..."

L.H. (Parkinson's Plus)... "I was hospitalized for 7 weeks because of an impaction and the doctor not being able to regulate my bowels...the doctor recommended the PIE...since using the PIE, I have been able to regulate my bowel movements so that I don't have accidents, which was a common occurrence, nor have I had an impaction...without the PIE, both of these happened...doctors have tried everything with me, enemas, suppositories, laxatives, etc., but nothing ever really worked for me like the PIE. Without the use of the PIE, chances are I would have to be placed in a nursing home."

S.B. ... "My son suffered a spinal cord injury...from day one, his biggest problem has been bowel control...impactions resulted in hemorrhoid surgery...without the PIE, his bowel problems kept him unemployed and his only income was Social Security Disability...after receiving the PIE, his life changed dramatically...enabled him to attend school...earns in excess of \$30,000 annually...now has employer paid health insurance...the PIE was the most cost effective purchase we ever made..."

G.J.L. (C-6 Quad)... "Has given me the freedom to enjoy an active social life, finish college, and more importantly, to return to work."

L.L.M. (Spinal Injury)... "I have become more independent in my bowel program...use less attendant care...fewer bladder infections...no emergency room visits...helped me psychologically...more in control of my life."

C.C.M. (Spinal Injury)... "I was left with a non-reflex bowel...treated by 8 different specialists...hospitalized twice...for 4 years the PIE procedure has helped me the most. I did not have any success with suppositories or enemas...daily laxatives gave relief, but also bowel accidents kept me from leaving home."

D.B. (C4/C5 Quad)... "In the past I had many problems with my rectum from the rigorous bowel program that was needed...bleeding and in great pain from digital stimulation...eventually developed fissure in the anus and was admitted to the hospital for surgery...doctors helped me find the PIE to stop this cycle...doctors and I are sure the PIE has kept me from another surgery..."

W.J. ... "My son was born with spina bifida. He has had bowel and bladder problems since birth...tried many different methods of bowel control with no success...while in hospital for kidney infection due to bowels not being empty, his doctor tried the PIE...very impressed and doctor decided it was the method Richard needed...have been using the machine since 1988 and has only been hospitalized for one infection...keeps us out of the hospital for 3 to 4 days because of kidney infections...we used to average 2 hospital stays per year...PIE paid for itself in the first 6 months by keeping us out of the hospital..."

D.B. (M.S.) ... "I now have control of my own bowels...before the PIE*, embarrassing bowel movements would cause me not to go anywhere for months...now I can go places and do things."

T.R. (M.S.) ... "I don't know what I would do without the PIE*...has helped avoid hospitalization because digital stimulation, enemas, and laxatives just do not work...had a bleeding ulcer, and thanks to the PIE, I didn't have to take laxatives and irritate the ulcer even more."

K.W. (Quad) ... "Has eliminated the problem of severe autonomic hyperreflexia that accompanies other methods of bowel evacuation."

M.M. (Autistic Son) ... "For many years my son with autism has had bowel impaction problems and largely because of this problem he ended up in an institution...the PIE is everything I could ask for...my son can even go swimming and live in the community...we are working on supported employment...I feel the PIE might actually have saved his life."

B.W. (T-12 Spinal Injury) ... "I was injured on October 30, 1987...for the next several years I could not have a regular bowel system... enemas were never a success...suppositories worked part time but many times did not...my rectum became very inflamed and painful from the suppositories...the PIE gives me much better control of my bowels...I am able to get out and go places now...the painful inflammation has cleared up...my life is much better because of the PIE."

Current PIE* BP Third Party Reimbursement:

The following are some of the reimbursement resources that have covered the PIE* products. Your reimbursement source to be different and one to add to this list:

- **Medicare** with good documentation of patient's bowel history on the CMN.
- **Medicaid Medi-Cal** with good documentation of patient's bowel history on the CMN.
- Administrative Service Consultants, Div. of Employee Benefit Claims of Wisconsin, Inc.
- Aetna Life & Casualty
- Aetna US Healthcare
- American Automobile Association
- Amerisure Companies
- Alliance (APWU)
- Blue Cross Blue Shield of Arizona
- Blue Cross Blue Shield of California
- BlueCross BlueShield of Illinois
- Blue Cross and Blue Shield (Anthem) of Indiana
- BlueCross BlueShield of Kansas
- BlueCross BlueShield of Massachusetts
- Blue Cross Blue Shield of Maryland
- Blue Cross Blue Shield of Michigan

- BlueCross BlueShield of New Jersey
- Blue Cross and Blue Shield of N.C.
- BlueCross BlueShield of Oklahoma
- Blue Cross Blue Shield of Pennsylvania
- Blue Care of Tennessee
- Blue Shield of Tennessee
- Blue Shield of Pennsylvania
- Regence Blue Shield of Idaho
- Blue Cross Blue Shield of South Carolina
- CIGNA Insurance Company
- Department of Health and Human Services (Medicaid), California
- California Children Services
- Department of Health and Human Services (Medicaid), Missoula, MT
- Connecticut Medicaid
- Missouri Medicaid
- Minnesota Medicaid
- Montana Medicaid
- Vermont Medicaid
- Dade County Dept of Health & Social Services, Dade County, WI
- Dept of Social Services Of Louisiana
- Farm Bureau Insurance Company of Michigan
- GEHA - Government Employees Health Association
- Healthsource-Provident
- Houston General Insurance Co.
- John Alden Insurance Company
- John Hancock Insurance
- Mail Handlers Benefit Plan (MHBP)
- Mass Mutual
- Mississippi Municipal Service Co.
- Nationwide Insurance
- National Telephone Cooperative
- North American Health Plans
- Old Republic Insurance Companies
- Principal Group
- Provident Life & Accident
- Prudential HealthCare HMO
- Secure Horizons/ PacifiCare, TX
- State Farm Mutual Auto Insurance Co.
- State of Washington Uniform Medical Plan
- SAIF Corporation- Workman's Compensation
- United Healthcare of North Carolina, Inc.
- USF&G Co.
- Verthealth of California
- Department of VA Spina Bifida Healthcare Benefits, Denver VA
- Biloxi V.A., Biloxi, Mississippi
- Birmingham V.A., Birmingham, Alabama
- Cleveland VA, Cleveland, OH
- Denver V.A., Denver, CO
- Durham V.A., Durham, NC
- Grand Junction V.A., Grand Junction, CO
- Gainesville VA, Gainesville, FL
- Houston V.A., Houston, TX
- Hines V.A., Hines,
- Miami V.A., Miami, FL
- Murfreesboro V.A., Murfreesboro, TN
- Nashville V.A., Nashville, TN
- Richmond V.A., Richmond, VA
- Palo Alto V. A., Palo Alto, CA
- San Diego V.A., San Diego, CA
- San Juan V.A., San Juan, PR



ITEM #	DESCRIPTION	PRICE \$
PIE* EQUIPMENT		
P1	PIE* 2005 System (Control, Trolley/all Equipment Components)	12,985.00
MONTHLY DISPOSABLE SUPPLIES		
P2HC	Case of Trolley/Cart PIE*Paks (15)	950.00
PMP	Case of Trolley/Cart Professional PIE*Paks (15)	995.00
PIE* REPLACEMENT/OPTIONAL EQUIPMENT		
P4	PIE* 2005 Control	6500.00
P5	PIE* Trolley	6485.00
PIE* DISPOSABLE COMPONENTS		
P7	Water Containment Bags (15)	445.00
P9	Speculums (15)	445.00
PIE* Equipment Replacement Components		
P11	PIE* BATTERY PACK COMPLETE	586.00
P13	PIE* MANUAL FILL SYSTEM	199.00
P15	PIE* Cart/Trolley Replacement Pump Assembly	435.00
P17	PIE* Battery Charger (120 V-12 VDC)	255.00
P18	PIE*Cuff Inflation Bulb	25.00
P19	PIE* Remote Control Assembly	180.00
P21	PIE* Battery 7.5 Amp 12V.	88.00
P21U	PIE* Upgrade Battery Charger (120 V-12 VDC)	255.00
P22	1" Dial Thermometer	20.00
P220	European Battery Charger (220 V-12VDC)	293.00
P24	PIE* Extension for PIE* 2005 (including water lines)	398.00
WH15	Case of Extension Water Hoses (15)	101.00
CABLE	PIE* Battery Cables	198.00
R2005	PIE* 2005 Controller Repair Service	1500.00

All Purchases include normal ground UPS Freight Charges.
WARRANTY: All Equipment with the exception of Battery and Battery Charger -- 1 year.
Battery/Battery Charger – 6 months.

PIE*Medical International, Inc. | 2713 Brickton North Drive | Buford, GA 30518
770-447-1275 | Fax: 404-806-7048