



Overview for DME Providers

Serving patients—together

What to expect today

- A quick introduction to Synapse Health and our performance-based care approach
- How our technology simplifies DME for providers, plans and patients
- Opportunity for partnership: performance, operations and what's ahead
- Next steps to join network



Synapse Health + UnitedHealthcare

Beginning June 1, 2026 and August 1, 2026 Synapse Health will manage the durable medical equipment (DME) ordering and fulfillment process for certain UnitedHealthcare® Medicare Advantage plans in specific states.

What this means for existing DME Providers:

DME providers will need to join the Synapse Health network to continue to provide standard DME for most UnitedHealthcare Medicare Advantage Plan members.

Built for partnership. Powered by performance.

Synapse is a value-based DME solution that works in partnership with payors and our DME provider partners to better manage the cost, quality and service of DME care.

We help you thrive in the fast-changing world of DME care by bringing access to sole source agreements through national health plan contracts.



Best-in-class expertise to revolutionize the industry

✓ Proven leadership in DME space

✓ Deep experience in network optimization and value-based care

✓ Strong operational, clinical and payor-aligned expertise



Cory Roberts
Chief Executive Officer

Current: Co-founder and President at Triple Aim Partners
Previously: President at OptumCare (UHG), CFO at Surgical Care Affiliates



Mandira Singh
President

Previously: Sr Partner & CPO at Habitat Health, SVP & GM at PointClickCare, Exec Dir at athenahealth



Shaw Rietkerk
Chief Operating Officer

Previously: COO & CRO at AdapthHealth, Exec VP & GM at Brightree, SVP at M*Modal Worldwide Operations



Nicholas Tabler
Chief Growth Officer

Current: VP Triple at Aim Partners
Previously: VP of Value-Based Homecare at Humana/Centerwell



Jay Shah
Chief Financial Officer

Previously: CFO at Integra Partners, CFO US Commercial Payments at American Express



Sara Sortal
SVP Solutions

Previously: VP Ambulatory Surgery at Aurora Health, VP & GM at AIM Specialty Health, Director of Operations at Surgical Care Affiliates



Nic Macomber
SVP Network

Previously: VP Strategy and Sales at AdapthHealth, VP Sales & Marketing at SuperCare Health



Nick Kues
VP, DME Provider Success

Previously: Director, Strategy Advancement - National Medicaid Operations at Humana



Maggie O'Keefe
SVP, Product Management

Previously: VP Product at PointClickCare, Sr Dir Product at Health Catalyst, Clinical Data Analyst at Community Care of NC



Current & Expanding Network Markets

Current Cap Contracts – June 1, 2026

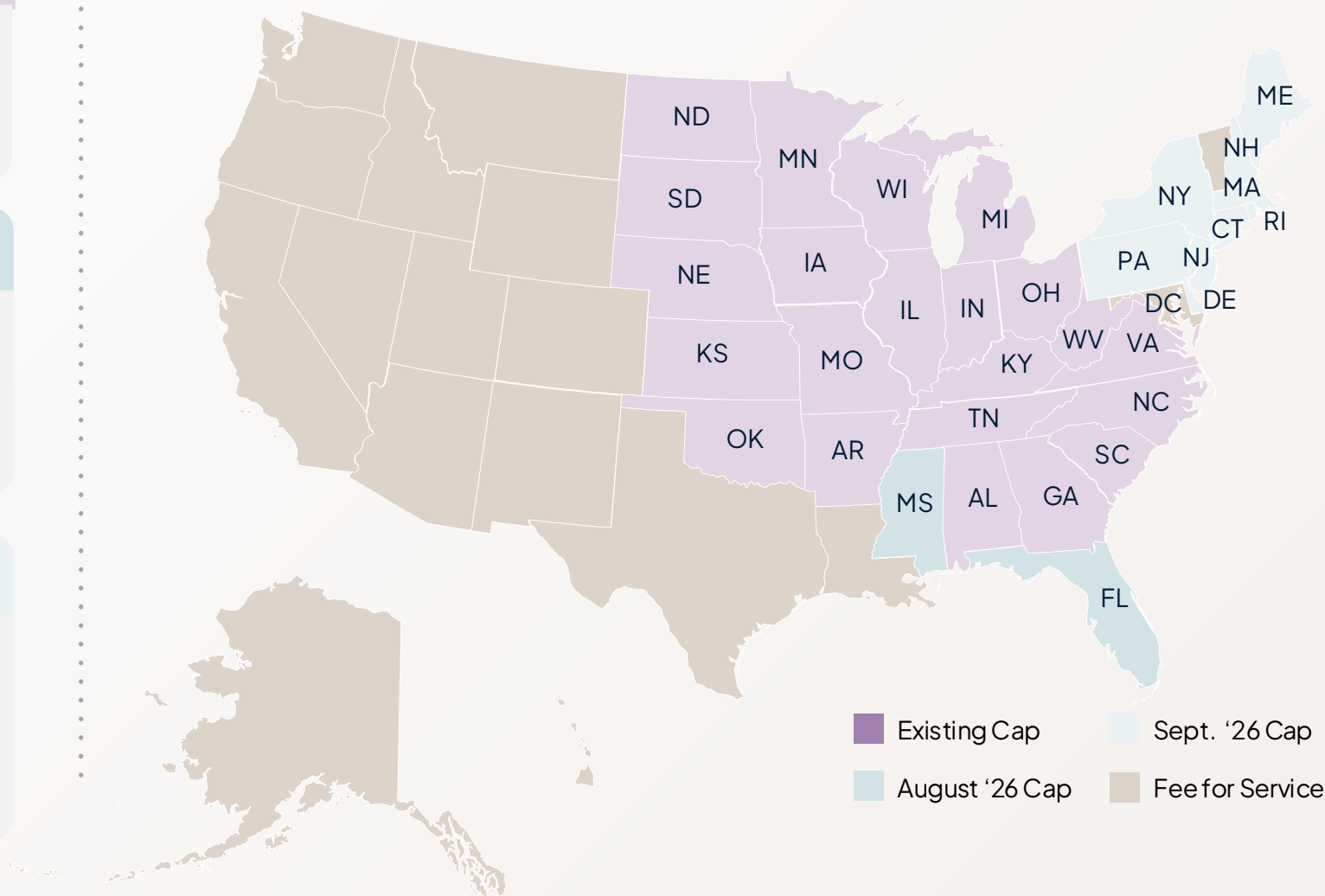
- 22 states with 10 new added in June 2026.
- New expanding Medicare Advantage scope in 6 existing states (C-SNP/D-SNP)

Cap Expansion – August 1, 2026

- Adding new members across 10 states
- Expanding Medicare Advantage scope in 3 existing states (C-SNP/D-SNP)

Cap Expansion – Sept. 1, 2026

- Adding new members across 10 states and the District of Columbia (DC)
- Expanding Medicare Advantage scope in one existing state, GA (D-SNP).



Aug. & Sept. 2026 Market Expansion States & Products

• = Currently In-Scope

AUG = Effective August 1, 2026

SEPT = Effective September 1, 2026

State	IND-MA	C-SNP	D-SNP	State	IND-MA	C-SNP	D-SNP
Alabama	•	AUG	AUG	Missouri	•		
Arkansas	•	•	AUG	Nebraska	•		
Connecticut	SEPT		SEPT	New Hampshire	SEPT	SEPT	
DC	SEPT			New Jersey	SEPT		
Delaware	SEPT	SEPT		New York	SEPT	SEPT	
Florida	AUG	AUG		North Carolina	•	•	
Georgia	•	•	SEPT	North Dakota	•	•	•
Illinois	•	•		Ohio	•	•	
Indiana	•	•		Oklahoma	•	•	
Iowa	•	•		Pennsylvania	SEPT	SEPT	
Kansas	•	•		Rhode Island	SEPT	SEPT	
Kentucky	•	•		South Carolina	•	AUG	AUG
Maine	SEPT	SEPT	SEPT	South Dakota	•		•
Massachusetts	SEPT	SEPT		Tennessee	•	•	
Michigan	•	•		Virginia	•	•	
Minnesota	•	•		West Virginia	•		•
Mississippi	AUG	AUG		Wisconsin	•	•	

In-Scope DME

- Bent Metal
- CPM Device
- Diabetes
- DME & Supplies
- Enteral Nutrition
- Infusion Pumps (non-insulin)
- Mobility Products
- Ostomy Supplies
- Respiratory
- Stimulators
- Urological Supplies
- Wound Care

Out-of-Scope DME

- Orthotics & Prosthetics
- Complex Rehabilitation
- Lymphedema Pumps
- Bone Stimulators
- Cardiac Defibrillators
- Oral Devices
- Parenteral Nutrition
- Vision and hearing

- Plans covered will be for Individual Medicare Advantage Plans (IND-MA), Chronic Special Needs Plans (C-SNP), and/or Dual Eligible Special Needs Plans (D-SNP)
- Synapse Health will become the provider of record for expansion population beginning 6.1.26, 8.1.26, and 9.1.26

What's wrong with DME today



Disconnected workflows

- Multiple portals, faxes and calls to process a single order
- Lack of standardization leads to extra work and delays



Audit and bad debt risk

- Financial risk of denied claims, audits and patient balances
- Delayed payments and operational uncertainty



Misaligned incentives

- FFS contracting rewards volume over quality and efficiency
- Payments don't reflect the full value of your services



Administrative overload

- Hours lost to documentation, authorizations and audits
- Complex billing and admin drive up costs

Synapse helps DME providers simplify operations & strengthen margins

What You Gain



- + Predictable revenue
- + Timely payment, no patient collections
- + Delivery-ready, delegated orders
- + Lower SG&A, increase market share

What You Eliminate

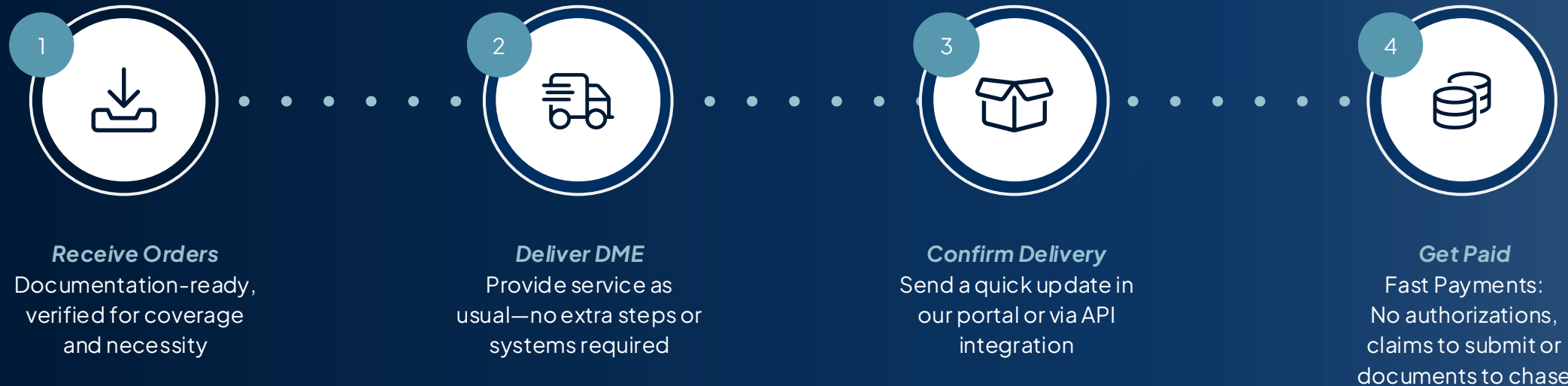


- X Payor claims & denials
- X Prior authorizations & patient billing
- X Chasing documentation
- X Bad debt associated with patient collections

Clear roles ensure successful partnership

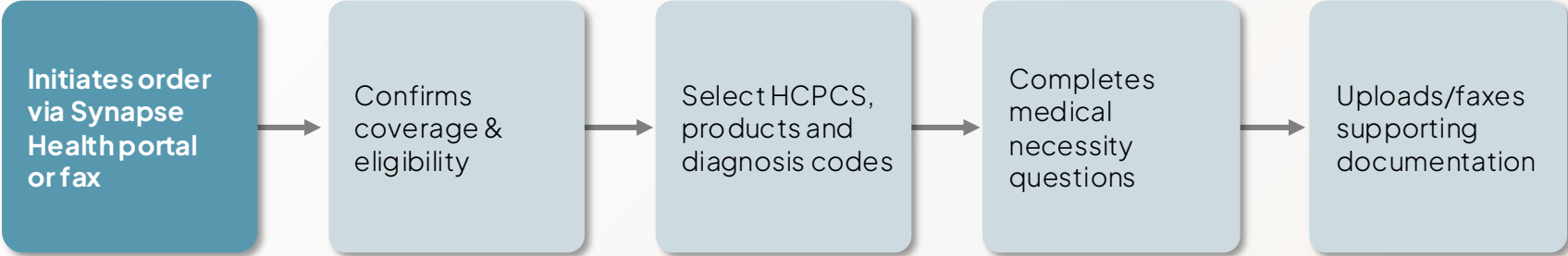
	 Synapse Role	DME Provider Role
 Orders & documentation	Retrieve documentation, verify coverage, submit PAs	Fulfill orders, confirm delivery
 Patient experience	Outreach, education, resupply reminders, copay collection	Coordinate delivery, support logistics and shared patient education
 Prescriber support	Educate prescribers, integrate into existing workflows	Maintain referral relationships, support prescriber education
 Payment	Assume claim and patient payment risk	Delivery confirmation triggers invoice

A simplified process for contracted providers

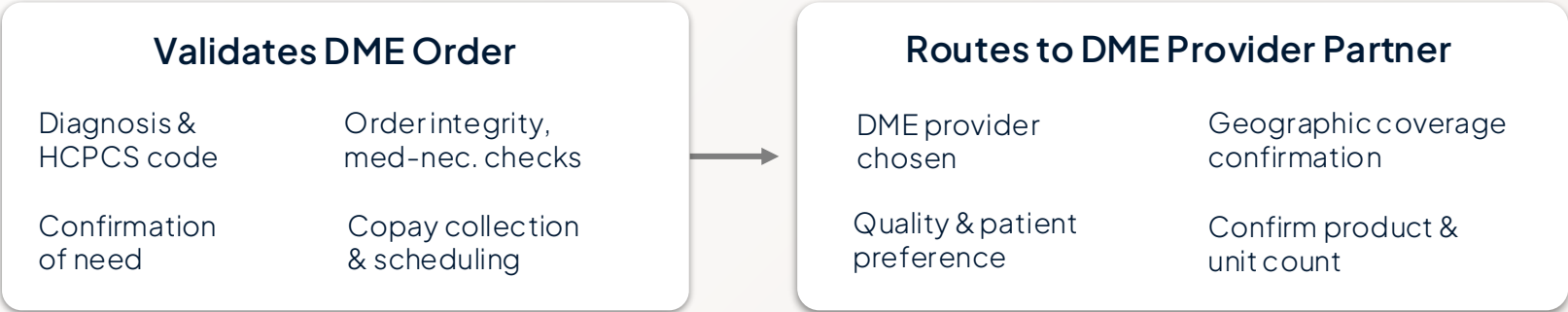


How it works: Order intake through fulfillment

**Prescriber or
DME
Provider**



**Synapse
Health**



**DME
Provider**



Network Support Model

One place to send support requests tracked to completion.

Every question, order issue, and escalation comes to one intake point. We classify it, route it, and keep one accountable owner on it until you have the answer with a response target you can hold us to.

HOW IT WORKS

- 1 **Send it once.**
- 2 **We classify and route it.**
- 2 **One owner sees it through.**

WHAT IT MEANS FOR YOUR OPERATION

- **Fulfill is still your first stop for order-level questions and updates.**
- You stay in control of service delivery and the patient experience.
- No claims submission. Payment stays tied to delivery confirmation.

L0

Information & guidance

Policy and process guidance, documentation requirements, SWO / F2F, payor changes, resupply FAQs. Start at the Resource Hub.

YOU CAN EXPECT
Within 4 business days

L1

Case-specific questions

Order status and next steps, qualification failure reasons, document completeness, criteria lookups, portal access questions.

YOU CAN EXPECT
Within 2 business days

L2

Complex or consequential

Eligibility, contested cancellations, wrong product or HCPCS, billing and AR disputes, recurring or systemic patterns.

YOU CAN EXPECT
Documented within 2 business days

PS

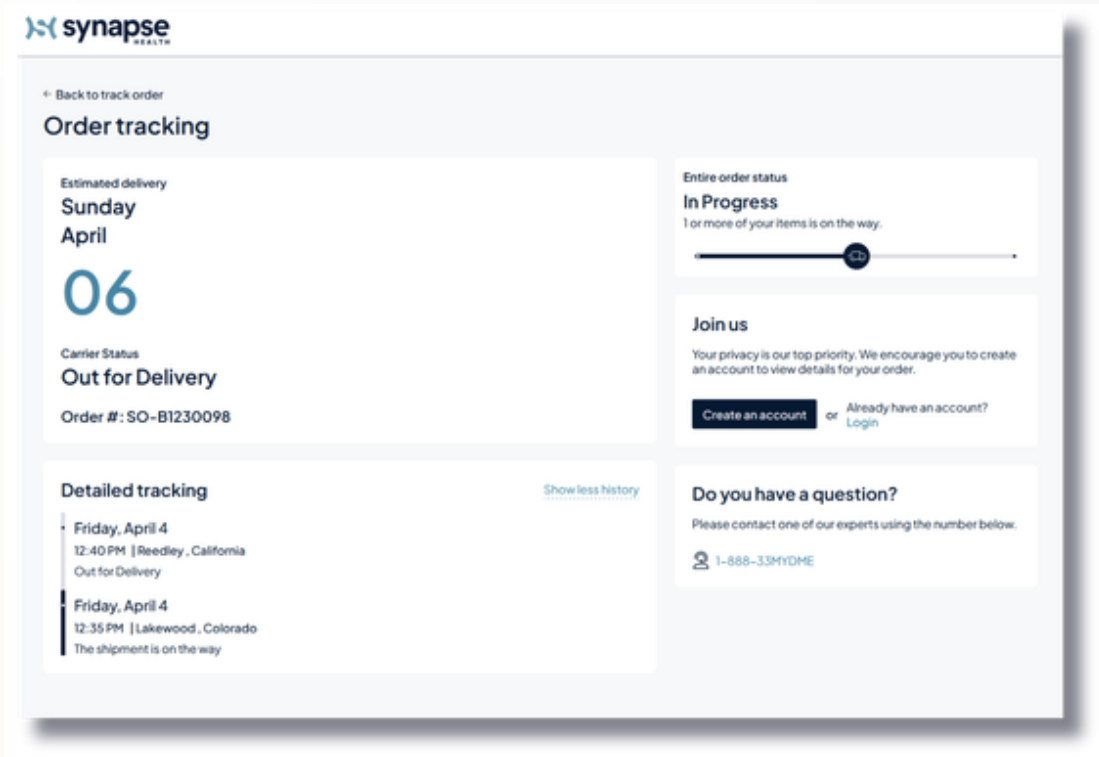
Patient safety

A delivery has failed or is at risk on a life-sustaining product, and timing directly affects patient care.

YOU CAN EXPECT
Same-day contact from us

The Synapse Health Patient Portal

A 24/7 self-service portal for patients and caregivers, tied to the same order flow you already work in. Status you post in Fulfill and Deliver surfaces here automatically for members.



What patients handle themselves

- Track order status and delivery updates in real time
- Submit and e-sign health plan documentation
- Pay balances and review billing history
- Request resupply on existing equipment
- Pull up setup instructions and support contacts

What it means for your operation

- **Patient billing stays with Synapse.** Patients pay through the portal. No claims submission, no patient collections on your side — payment runs on the standardized fee schedule, monthly, tied to delivery confirmation.
- **Fewer status calls to your dispatch desk.** Patients check delivery timing themselves or call Synapse support 24/7 instead of your team.
- **Documentation moves without your follow-up.** Intake forms, signatures, and plan paperwork are collected in the portal before the order routes to you.
- **You stay in control of service delivery.** The portal reports on the order. Setup, education, and the visit itself remain yours.



How Synapse builds trust with prescribers

Multi-channel educational outreach ensures a smooth onboarding process



Hospital Discharges

- Educate discharge planners with in-person & virtual support
- Integrate into CareLink, CarePort and other EHRs
- Partner via DME Provider reps to ensure alignment



Outpatient Prescribers

- Use multi-channel campaigns (fax, email, direct mailers)
- Prescriber onboarding webinars
- Partner with DME Provider sales teams for co-education

Minimizing Patient Disruption: UHC Capped Rental Purchase Process

DME providers can submit a one-time purchase claim for eligible capped rental equipment that has been rented for four months or more.

Eligible Equipment (not all-inclusive):

- Wheelchairs
- Hospital Beds
- Support Surfaces
- Patient Lifts
- Cough Assists
- Suction Machines
- Nebulizers
- HFCWO Devices
- PAP Humidifiers

Ineligible Equipment:

- Ventilators
- Oxygen Equipment
- CPAP & BiPAP Devices

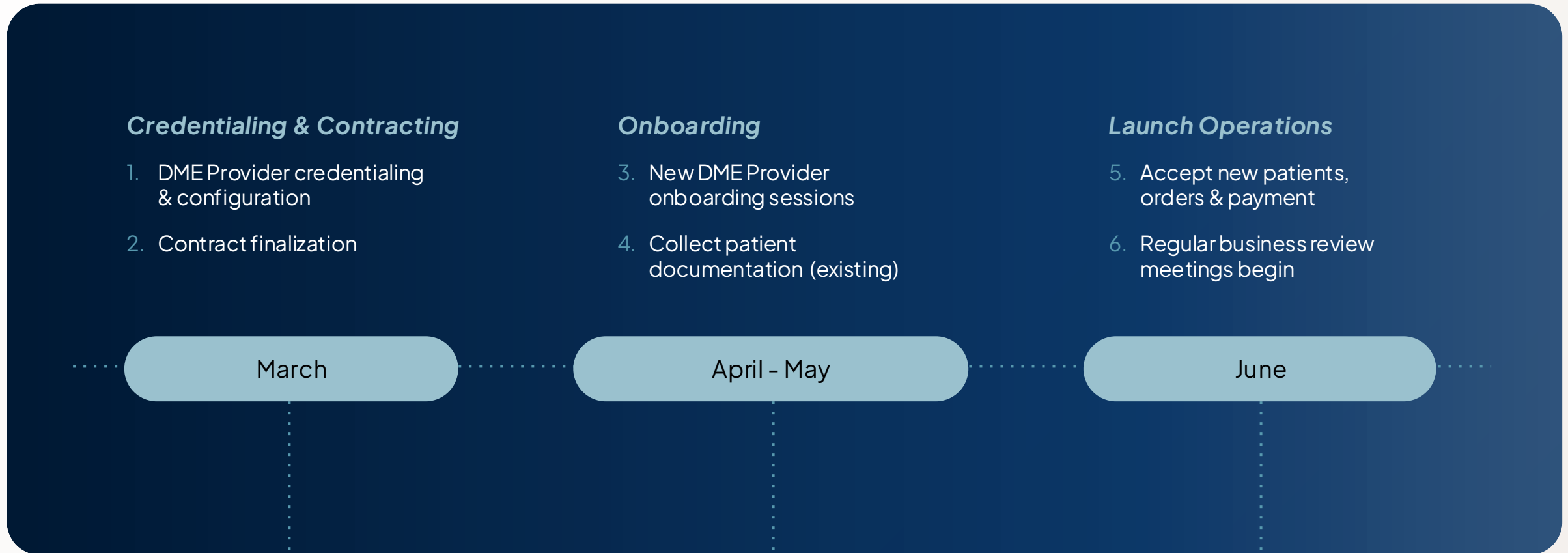
Provider Action Required:

1. Submit a one-time purchase claim to UHC. The DOS for this claim should be PRIOR to SH go live date (ex: 4/1/26 go live, claim date = any day prior to that date)
2. Calculate the claim total as follows: Purchase Rate (as per your UHC M&R Agreement) MINUS Completed Rental Amounts (for months 1-4)
3. Submit the claim in accordance with your contracted purchase terms
4. Obtain PA if it is required for the specific equipment type

Example

- Hospital Bed Purchase Price: \$1,601.16
 - Rental Rate: \$133.43/month
 - Completed Rentals (4 months): \$533.72
- Claim Total: $\$1,601.16 - \$533.72 = \$1,067.44$

New DME provider onboarding & enrollment process



Ready to join the future of DME?

The process is simple:

1. Send us an email introducing your business
JoinOutNetwork@synapsehealth.com
2. Complete our Business Questionnaire and Contract
3. Sign up for onboarding
4. Start receiving new orders

Alyssa Arrowood
DME Provider Relations

alyssa.arrowood@synapsehealth.com

Nick Kues
VP, Network Success

nick.kues@synapsehealth.com



Not a right fit?

In an effort to aid in seamlessly transitioning patients to in-network providers, Synapse offers two different programs to reimburse you for providing patient demos and order details.



PAP Buyout Program

Participation Criteria:

To take part in this program, providers are asked to submit:

- A list of eligible, capitated UHCMA patients with an ongoing rental and their demographics
- Order details, including interface details
- Documentation compliant with Medicare LCD billing guidelines
- Serial numbers, modem IDs, and system association with Synapse Health (AirView, React Connect, CareOrchestrator)

Program Objectives:

By participating in this program, you will:

- Receive a one-time payment based on remaining rental months
- Ensure uninterrupted care and support for patients
- Simplify the administrative process by transferring the responsibility to us

Next Steps:

1. Sign up for the PAP Buyout Program [here](#)
2. Compile all qualifying Medicare documentation for your existing PAP population
3. A team member will be in touch within 72 hours of completion of sign-up
4. Complete the necessary paperwork and submit the documentation via our ShareFile SFTP site

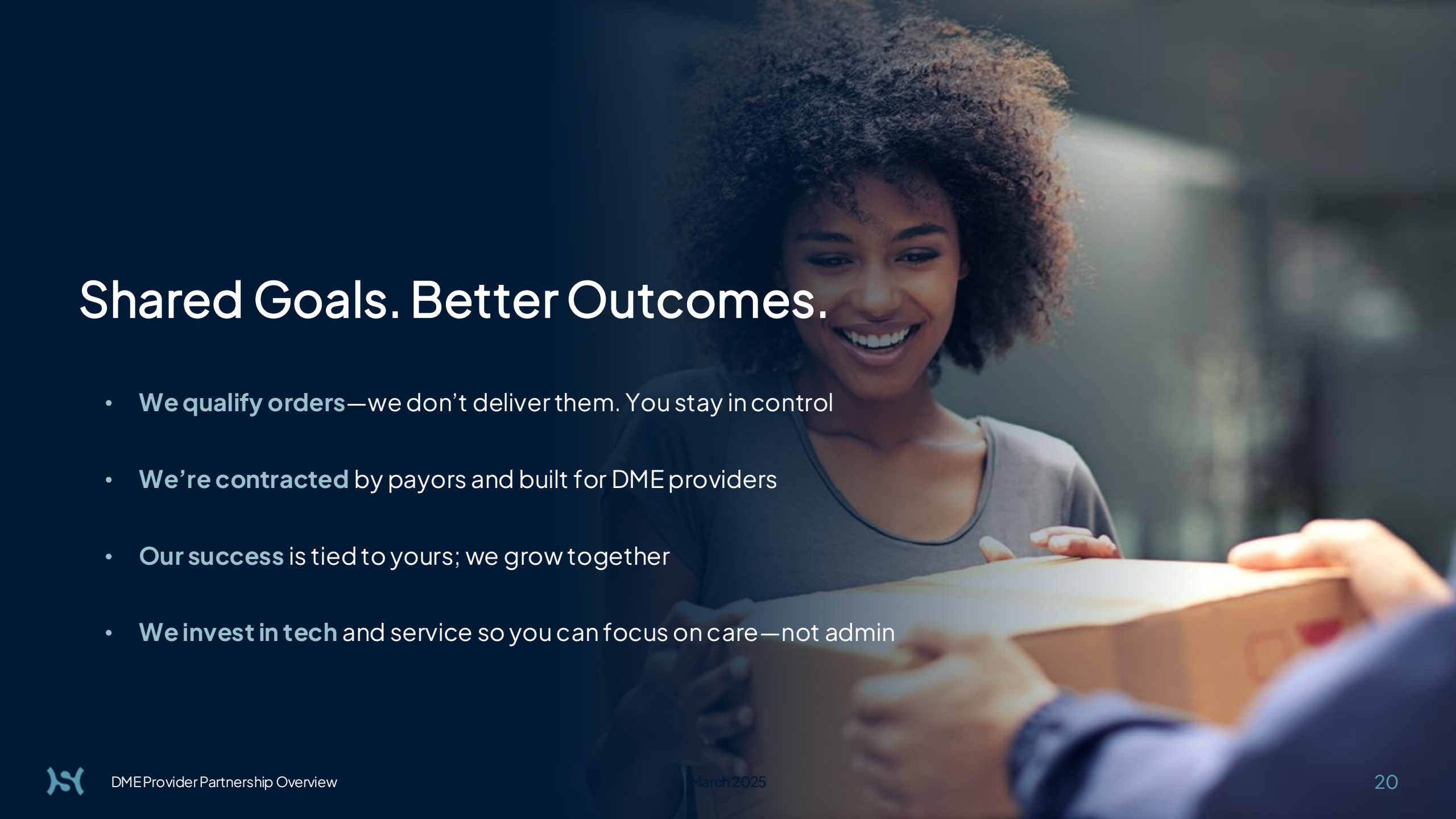


Admin Fee Program*

- **Save Time:** Offload the admin burden of document transfer.
- **Get Paid:** Receive an administrative fee for every successful transition.
- **Smoother Offboarding:** Quick, clean process for equipment return and patient discharge.
- **Partnership Over Pressure:** Work with us directly instead of facing health plan escalations.

**Contract Required*





Shared Goals. Better Outcomes.

- **We qualify orders**—we don't deliver them. You stay in control
- **We're contracted** by payors and built for DME providers
- **Our success** is tied to yours; we grow together
- **We invest in tech** and service so you can focus on care—not admin

