



**American Orthotic &
Prosthetic Association**

AOPA in Advance

Breaking News for O&P Professionals

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Newsletter Feedback

We invite your comments and questions. Please contact Steven Rybicki at srybicki@AOPAnet.org or (571) 431-0835.

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O&P NEWS

Release of Institute of Medicine Recommendations Marks Another Benchmark in Defining Essential Health Benefits Package Under Health Care Reform Law

For orthotics and prosthetics be included within the definition of essential health benefits is of critical importance to everyone in the O&P field. While we believe the case is very strong that O&P should be included under the category of habilitative and rehabilitative services defined by the statute, the final decision rests with the Secretary of HHS (click [here](#) and [here](#) to read about **AOPA** efforts with HHS and others advancing this issue).

On October 7, the Institute of Medicine, an advisor contracted by HHS, released its recommendations on criteria that should be used for defining the Essential Health Benefit Package. This report did not seek to define what should or should not be considered part of the essential health benefits package (EHB), but to make a series of recommendations on how the decision should be made, and to offer key topics/factors that the Secretary should consider.

Those who were looking for some decision, or even clear signals toward a final decision about orthotics and prosthetics will come away disappointed by the 297-page report. The words orthotics and prosthetics do not appear at all in the body of the report (they are referenced in the appendices under some comparisons to what is covered in plans by insurers such as Aetna, CIGNA, United and Wellpoint coverages). Some key findings/comments from the report include:

1. the EHB decision should focus on what is included in a typical small employer health plan to help ensure the affordability criteria;
2. there is a recommendation that nothing be included which does not fall within the 10 categories defined in the law (including habilitative and rehabilitative treatment and devices), and that not everything that falls under those 10 categories are necessarily essential-and expansion in some plans will be needed just to encompass those 10;
3. medical necessity should be a prerequisite for anything to be included;
4. a special committee (referred to as the National Benefits Advisory Council) is recommended to help HHS with determinations of additions/refinements over time to the EHB, but with the stipulation that pre-set cost target limit initial EHB inclusion, and subsequent additions cannot increase the average premium cost of the plans;
5. evidence-based practice and comparative effectiveness research should be a key determinant in considering potential ongoing re-assessments of and additions to the EHBs;
6. There are several references, including specific mentions of habilitative and rehabilitative services, recognizing the need to avoid discrimination in the EHBs against persons with disabilities, and under-served individuals with special needs.
7. Distinguished from the Department of Labor report which stated prevalence of the O&P benefit at 46%, the IOM report references a Mercer report with prosthetics at 86%!
8. In the appendices, prosthetics appears to be covered by most insurer plans, but there appears to be some vacillation in understanding of orthotics (and less universality of coverage in existing plans)-references to the term seem to reference more about shoes than demonstrate a recognition of the unique status of customized orthopedic bracing. Within the body of the report however, there are clearer references to habilitative aids to help restore keys functions, including mobility, and a specific reference to such functions in patients with multiple sclerosis.

The next step will likely be for HHS to prepare a draft regulation to define the EHB more specifically, and there seems a clear plan for inclusion of public input, probably via special "town hall" type events,

as well as by opportunity to comment on a written proposal. **AOPA** will provide some comments to HHS about the IOM report, as well as monitoring, participating, and informing members when/how they can provide input. Please see the links below in the event that you wish to review: (1) the executive summary as well as selected excerpts from the report as to portions with greatest interest to O&P interests ([available by clicking here](#)); and/or (2) to review the entire report ([available by clicking here](#)).

Questions? Contact Steven Rybicki at srybicki@AOPAnet.org or (571) 431-0835.

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AOPA Meets with HHS after Institute of Medicine's Release of Recommendations on Defining Essential Health Benefits Package

After the October 7 release (see story above) of the Institute of Medicine's (IOM) long-awaited report to HHS, **AOPA** participated in a public listening session on October 18 with HHS officials, [including some of those who AOPA met with on August 4](#). **AOPA** availed itself of this opportunity for the purpose of clarifying some vague and broad comments in the IOM report about orthotics, in a statement by **AOPA** Executive Director Tom Fise.

[Click here to read the first part of the statement given to HHS.](#)

[Click here to read the comments AOPA submitted on definitions of O&P coverage.](#)

In the meeting **AOPA** offered arguments about distinguishing customized orthopedic bracing from items such as wrist bands, shoe inserts, and DME. Education on this topic of customized orthoses included entering into the official record examples provided by **AOPA** President Tom DiBello, CO, FAAOP, that explain the difference between a basic over the counter product that could be bought at a pharmacy from the types of customized orthoses (from shoe inserts to customized bracing) provided for the long-term care of patients with chronic diseases and limb impairment and potential detriment to patients if the more sophisticated devices were not available to patients.

In attendance of the meeting were three HHS decision-makers, including Nancy DeLew, Associate Deputy Assistant Secretary for Health Policy, Office of the Assistant Secretary for Planning and Evaluation, who met with **AOPA** on August 4. O&P representatives included **AOPA** Executive Director Tom Fise, the O&P Alliance General Counsel Peter Thomas, and AAOP Executive Director Peter Rosenstein.

The meeting was productive as Tom Fise indicated that the key decision-makers in attendance understood the arguments being made to better differentiate orthotics in terms of customized orthopedic bracing for patients with limb impairment arising from chronic health conditions (e.g. MS, cerebral palsy, and spina bifida). This doesn't mean that efforts to advocate the medical necessity of O&P devices and care will cease. **AOPA** will continue to create, and take advantage of, opportunities to re-enforce these appeals for O&P's inclusion in the essential health benefits package and keep members apprised of those meetings.

Questions? Contact Steven Rybicki at srybicki@AOPAnet.org or (571) 431-0835

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AOPA's 2011 National Assembly: Pictures of "The Place to Be"

The record-breaking attendance of more than 2200 members of the O&P profession defined **AOPA's** 2011 Assembly in Last Vegas, marking another **AOPA** convention as "The Place to Be" for O&P. Below are photos of many highlights of the Assembly.

[Click here to see AOPA President Thomas V. DiBello, CO, FAAOP and AOPA Executive](#)

[Director Tom Fise welcoming attendees to the Assembly.](#)

[Click here to see AOPA members speaking with Rep. Shelley Berkley at a fundraiser that occurred during the Assembly.](#)

[Click here to see William C. Snell being awarded the Ralph R. "Ronney" Snell Legislative Advocacy Award.](#)

[Click here to see Melissa Stockwell, CP delivering the Opening General Session Keynote Speech.](#)

[Click here to see Homayoon Kazerooni, Ph.D. giving his presentation during the education session dedicated to robotics.](#)

[Click here to see Hugh Herr, Ph.D. giving his presentation during the education session dedicated to robotics.](#)

Click [here](#), [here](#), [here](#), and [here](#) for pictures from the Fourth Annual Wine Auction.

[Click here to see the presentation of the Lifetime Achievement Award to Robert E. Arbogast and Rudolf B. Becker, III.](#)

[Click here to see Col. Paul Pasquina, MD presenting during an education session.](#)

[Click here to see the Snell Family with Elvis celebrating Snell Company centennial during the Exhibitor Sponsored Happy Hour in the Exhibit Hall.](#)

[Click here to see attendees visiting AOPA's slot machine Exhibit Hall attraction.](#)

[Click here to see this year's Thranhardt winners being presented their awards.](#)

[Click here to see the winners of the \\$10,000 "Wheel of Good Fortune" Giveaway.](#)

Thanks to all of you - attendees, exhibitors, speakers and board members - for making this year's assembly such a success. A special thanks to the members of the Assembly Committee, chaired by Russ Hornfisher, for their hard work and dedication to making the Las Vegas meeting "The Place to Be." We strive to make the **AOPA** National Assembly each year the best in clinical and business education, the best place to discover and learn about new technology through the exhibits and manufacturer's workshops and the best experience possible for all who attend. Thanks so much for joining us in Las Vegas and we look forward to seeing everyone again next year in Boston!

Questions? Contact Steven Rybicki at srybicki@AOPAnet.org or (571) 431-0835

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HIPPA 5010: Transition Deadline Approaching

In less than 70 days, all HIPAA covered entities (suppliers, health plans, clearinghouses, billing services, etc.) will be required to use the new HIPAA 5010 format for all HIPAA covered electronic transactions (claims submissions, remittance notices, claim status requests, etc.). If you do not make the switch to the HIPAA 5010 format before January 1, 2012, you will experience delays in processing your claims with both Medicare and private payers, as the current 4010 format will not be accepted after January 1, 2012.

Questions? Contact Devon Bernard at dbernard@AOPAnet.org or (571) 431-0854, or Joe McTernan at jmcternan@AOPAnet.org or (571) 431-0811.

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Be on the Look-Out for Three Pieces of Mail for AOPA Members

Over the next two weeks **AOPA** will be sending all members the following information:

1. Executive Director Letter on Essential Benefits - a must read!
2. 3rd Quarter Staff Report - How **AOPA** is using your resources.
3. Your 2012 Membership Renewal Invoice - so we can continue serving you!

All three are important with #1 and #2 our continuing commitment to keep you informed about our efforts on your behalf, And of course the Membership Renewal is important so we can continue the services and advocacy to the O&P community and you especially. Each of these items will come to you separately within a few days of each other.

Questions? Contact Steven Rybicki at srybicki@AOPAnet.org or (571) 431-0835.

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Revised ABN Released

Beginning November 1, 2011 the current version of the Advanced Beneficiary Notice (ABN) form, CMS-R-131 (03/08), will no longer be considered valid by Medicare. You will be required to use the revised ABN form, CMS-R-131 (3/11). The new form is available for download from the Center for Medicare & Medicaid Services (CMS) website.

[Click here to access the form.](#)

In order for an ABN to be considered valid by Medicare, it is mandatory that you use the approved CMS ABN form. To verify that you are using the proper ABN form, beginning November 1, check the lower left hand corner of your ABN form, it should read Form CMS-R-131 (03/11) and not Form CMS-R-131 (03/08).

Please note that the content and the instructions for the use of the ABN have not changed.

Questions? Contact Devon Bernard at dbernard@AOPAnet.org or (571) 431-0854, or Joe McTernan at jmcternan@AOPAnet.org or (571) 431-0811.

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PDAC Requires Product Labeling as of February 1, 2012

The Medicare Pricing, Data Analysis, and Coding contractor (PDAC) has recently published an announcement effective February 1, 2012, that any product that is subject to a PDAC coding verification review must be permanently labeled. According to the PDAC, the label must contain the manufacturer's name, product name and model number. The label on any product delivered to a patient must be identical to the label on the product submitted for coding verification, and must be permanent in nature. For diabetic shoes and inserts, the label must be on both inserts that make up a pair.

PDAC has published a list of products to which the labeling requirement applies. The list includes, diabetic shoes and inserts, prefabricated orthoses, custom orthoses that are not fabricated within a practice location (e.g. manufacturer or central fabricator), and prefabricated prosthetic components. **AOPA** has confirmed that the labeling requirement only applies to products that are required by policy to have a PDAC coding verification (e.g. spinal orthoses, diabetic inserts, etc.) or products for which

a voluntary coding verification has been submitted to PDAC.

It is important to remember that not all O&P products require PDAC verification. The only O&P items that currently require coding verification by PDAC include off the shelf diabetic shoes, heat molded diabetic inserts, custom diabetic inserts made outside of the O&P facility, all spinal orthoses made outside of the O&P facility, knee orthoses described by L1845 and L4380, and cervical orthoses described by L0174. However, PDAC has confirmed that if a voluntary request for coding verification is submitted, those products are then subject to the labeling requirement.

[Click here to access the full announcement.](#)

AOPA is reviewing the announcement and has supplier member to share their views with **AOPA**. Additionally, **AOPA** has been in contact with PDAC and will express any concerns regarding the labeling requirement.

Questions regarding this issue may be directed to Joe McTernan at (571) 431-0811; jmcternan@AOPAnet.org or Devon Bernard at (571) 431-0854; dbernard@AOPAnet.org.

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O&P PAC Corner

The O&P PAC Corner provides updates on the activities of the O&P PAC, including the names of individuals who have made recent donations to the O&P PAC and the names of candidates the O&P PAC has supported. The O&P PAC would like to thank all those who attended the 2011 **AOPA** National Assembly and made a contribution to the O&P PAC.

[Click here to view the list of PAC Contributors.](#)

The purpose of the O&P PAC is to advocate for legislative or political interests at the federal level, which have an impact on the orthotic and prosthetic community. The O&P PAC achieves this goal by working closely with members of the House and Senate to educate them about the issues, and help elect those individuals who support the orthotic and prosthetic community.

In order to participate in and receive information about the O&P PAC, federal law mandates that you must first sign an authorization form.

[Click here to view and sign an O&P PAC authorization form.](#)

Questions? Contact Devon Bernard at dbernard@AOPAnet.org or (571) 431-0854, or Catherine Graf at cgraf@AOPAnet.org or (571) 431-0807.

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Register for AOPA's November 9 Audio Conference: "Happy Holidays! Kickbacks and Gifts in O&P"

As the holiday season approaches, Join **AOPA** for an **AOPA**versity Mastering Medicare Audio Conference that will focus on the question about gifts to referral sources resurfaces. Medicare has very specific rules about what you can and cannot do. Join **AOPA** for a November 9 audio conference entitled "Happy Holidays: Gifts and Kickbacks in O&P". Highlights of this 1 hour audio conference include:

- When gifts to referral sources are acceptable
- When gifts to patience are acceptable
- Federal Anti-Kickback regulation prohibitions
- Doing something nice vs. doing something illegal

The audio conference beings at 1 PM (EDT), the cost of participating is \$99 per line for **AOPA** members (\$199 for non-members), and any number of employees may listen on a given line. Listeners can earn 1.5 continuing education credits by returning the provided quiz within 30 days and scoring at least 80 percent. Contact Devon Bernard at dbernard@AOPAnet.org or (571) 431-0854 with content questions.

[Click here to register online.](#)

Questions? Contact Stephen Custer at scuster@AOPAnet.org (571) 431-0876

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O&P RESOURCES FROM AOPA

Check Out the AOPA Job Board for New Opportunities in O&P

If you need a position filled at your business or are interested in looking at other job possibilities within the O&P field, check out the [AOPA Online Job Board](#). The online job board sports a freshly updated look and an easy-to-navigate profile creation system.

And remember: if you advertise on the Online Job Board and decide to also advertise in the *O&P Almanac*, then you'll receive a 5 percent discount on the cost of advertising in the *Almanac* and on the Job Board.

Questions? Contact Steven Rybicki at srybicki@AOPAnet.org or (571) 431-0835.

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The 2011 Audio Conference Series from AOPA

Numerous offices have benefited from their participation in **AOPA's** Medicare Audio Conferences. These one hour sessions come to you in the comfort of your office on the second Wednesday of each month at 1:00 PM Eastern. This series provides an outstanding opportunity for you and your staff to stay abreast of the latest hot topics in O&P, as well as gain clarification and ask questions on topics that you may not understand as fully as you would like to.

Seminars are still priced at just \$99 per line for members (\$199 for non-members). Buy the series and get two free; members pay just \$990 and non-members pay \$1990. If you purchase all the conferences, all conferences from months prior to your purchase of the set will be sent to you as CDs.

These convenient one-hour telephone seminars are designed to fit easily into your busy schedule. Any practitioners needing credit can get 1.5 per audio conference by returning the provided quiz within 30 days and scoring at least 80%. Billing staff and others who don't need credit can nonetheless gain information they will use right away. The topics for 2011 are:

- January 12: How to Meet the New Medicare Supplier Standards (Available on CD)
- Feb. 9: Using the Lower Limb Medical Policy to Your Advantage (Available on CD)
- March 9: Enhance Your Claims Success, Two Letters at a Time (Available on CD)
- April 13: Improving Clinical Documentation (Available on CD)
- May 11: Which Box to Check? The Negative Effect of the 855S on Reimbursement (Available on CD)
- June 8: Preventing Audit Disasters (Available on CD)
- July 13: Don't Rile the OSHA Police (Available on CD)
- August 10: How to Get Paid for Miscellaneous and Repair Codes (Available on CD)
- September 14: Don't Run Afoul of the KO Rules (Available on CD)
- October 12: Developing Your Medicare Billing Compliance Plan (Available on CD)
- November 9: Happy Holidays: Kickbacks and Gifts in O&P
- December 14: Are You Ready for the New Year? 2012 New Codes and

Policies

[Click here to register for any 2011 Audio Conference.](#)

If you miss an audio conference, it will be available on CD after the fact. Cost is the same as if you participate live (\$99/\$199). We hope you'll be able to join us for this year's series.

Questions? Contact Stephen Custer at scuster@AOPAnet.org (571) 431-0876.

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O&P INSIDER'S TRACK

The Only Up-to-the Minute O&P Newsline

People in the News

[Orthocare Innovations](#) announced that **Stephen Jacobs** has joined the company as Vice President of Sales and Marketing, and announced the promotion of **David Adams** to Chief Operating Officer and **Dr. Adam Arabian** to the position of Director of Product Development

[Pongratz Orthotics and Prosthetic, Inc.](#) announced that Fred Lanier is its new Operations and Business Development Manager

[Trulife](#) announced that **Harry Browne, CP** as is new Director of Prosthetic Development.

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Businesses in the News

As part of its participation in "Breast Cancer Awareness Month," [Ability Prosthetics & Orthotics, Inc.](#) announced its adoption of the Symmetry services for women who have undergone mastectomies.

The [Amputee Coalition](#) and [Össur](#) announced that both organizations are coordinating with Johns Hopkins University to create a new, nationwide program to help prosthetists address the emotional needs of people with limb loss. "While research has shown that a large number of people with limb loss experience depression or other forms of psychological distress, today's standards of care often leave amputees' mental health needs unaddressed," said Kendra Calhoun, Amputee Coalition's president & CEO. "The new Ossur/Amputee Coalition emotional well-being initiative will provide important training and educational resources to enable prosthetists to take a more active role in enhancing their patients' emotional well-being and resilience." This program will launch later this year.

[OPAF](#) announced that its T.O.D.D. Field Day, commemorating Todd Anderson, CP, FAAOP, was successful this year, with more than 250 participants attending the activities held at the Northern Star Boy Scout Base Camp in Minneapolis, MN on October 1.

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Send Us Your News!

The next **AOPA in Advance** will arrive in your inbox on November 1. So if you have a new employee or a new office, tell us! Share your news with the over 15,000 readers of the *O&P Almanac* and **AOPA In Advance** newsletter. Contact Steven Rybicki at srybicki@AOPAnet.org

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