



AOPA In Advance SmartBrief
Breaking News
January 7th, 2013

AOPA Headlines:

[AOPA's Coding & Billing Seminar Goes to New Orleans in 2014!](#)

[AOPA's 2014 Coding Products are available for Pre-Order!](#)

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**Now's a great time...
To renew your membership for 2014!**

Renew online at www.AOPAnet.org and prevent any disruption to your valuable benefits.

Continue access to our coding and billing experts, members-only LCodeSearch.com, UPS discounts, free online education, and member pricing on educational products, seminars, and the 2014 National Assembly in Las Vegas.

Explore all the member-only resources on AOPAnet.org! Get all of our latest press releases, updates on our litigation against CMS, regulatory news, as well as Essential Health Benefits, the FDA manual, and other resources.



Please contact AOPA at 571/431-0876 for a copy of your invoice or AOPAnet login information.

Mastering Medicare: Advanced Coding and Billing Techniques

FEBRUARY 10-11, 2014 • ROYAL SONESTA HOTEL • NEW ORLEANS, LA

During this two-day seminar, O&P Practitioners and O&P Office Billing Staff will learn the most up-to-date information on Medical Policies, documentation, compliance and how to audit your charts. Participate in break-out sessions and interactive discussions.

In the breakout session practitioners will cover:

- Coding Principles
- How to code complex devices
- Coding of repairs and adjustments
- Usage of '99 codes
- Mutually exclusive codes

In the breakout session billing staff will cover:

- The Quality and Supplier Standards
- Strategies for handling appeals and denials
- How to handle unique billing situations
- Documentation Requirements
- Medicare as Secondary Payer



AOPA has reserved a block of hotel rooms at the Royal Sonesta at the rate of \$159 per night for reservations made before January 20, based on availability. Hotel reservations can be made by calling 866-766-3782 or 504-586-0300. For more information on the Coding & Billing seminars, [please visit AOPA's website here.](#)

Questions? Contact Betty Leppin at bleppin@AOPAnet.org or 571/431-0876

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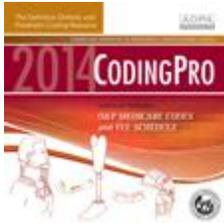
AOPA's 2014 Coding Products are available for Pre-Order!

Pre-order your 2014 Coding Products Today



2014 Illustrated Guide

This easy-to-use reference manual provides an illustrated guide to the coding system in use for orthotics, prosthetics, and shoes, including the HCPCS code, the official Medicare descriptor and an illustration for each code.



2014 Coding Pro SU Non-Member

The Coding Pro is O&P's comprehensive guide to Medicare codes, reimbursement, and medical policies. This is the single-source reference for all your coding needs! The Coding Pro CD-ROM provides updated Medicare fee schedules for all 50 states and allows you to customize and import other fee schedules used by your office. Illustrations of the codes allow you to quickly sort codes. And writing prescriptions just got easier with the prescription writing tool. Network Version for use on multiple office terminals.



2014 Quick Coder

Stop searching through numerous pages to find a code! AOPA's redesigned Quick Coder provides a speedy reference to the HCPCS orthotic, shoe and prosthetic codes and modifiers. These laminated cards are durable, long-lasting and convenient to store.



2014 Coding Suite

Save \$50 when you purchase the newly updated Coding Suite--you'll receive everything you need to code like a pro! 1. Coding Pro Single User CD Software; 2. Illustrated Guide; 3. Quick Coder.

Anticipated delivery is March 1, 2014.



[Go to the AOPA Bookstore and Pre-order your Coding Products today!](#)

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People in the News: BOC New Board Chair, Executive Committee



The Chair and Executive Committee of its Board of Directors were recently announced by the Board of Certification/Accreditation (BOC). James L. Hewlett, BOCO, who has served two terms as Vice Chair of the Board, assumed the role of Chair beginning January 1, 2014.

The Executive Committee is tasked with leading BOC's strategic efforts, hiring and providing ongoing support to the President & CEO, and providing financial oversight of the organization.

John P. Kenney, MURP, BOCO, who has served two terms as Chair, said of Hewlett's election, "Jim will fill the role well. As Vice Chair, he already has played an important part in BOC's strategic direction, and he brings vast experience in orthotics, prosthetics, and durable medical equipment."

Since he joined the BOC Board in 2008, Hewlett has served as Member-at-Large, Vice Chair, and now Chair. In each role, he has contributed his passion for the profession and experience as a business owner and manager. Claudia Zacharias, MBA, CAE, BOC President & CEO, notes, "Jim has helped shepherd BOC to a prominent place in the credentialing community. We look forward to continued success with him at the helm."

Hewlett has volunteered with BOC as a subject matter expert in many capacities and has been an integral part of BOC's Board leadership team. He has been a BOC-Certified Orthotist since 1997 and, beyond his service on the Board of Directors since 2008, has volunteered in many capacities including the test development and review processes. He was BOC's first male Certified Mastectomy Fitter, and his orthotic and mastectomy fitter courses are approved by the National Commission on Orthotic and Prosthetic Education (NCOPE). He also has been a BOC representative on the O&P Alliance, a coalition of the leading national organizations representing the O&P profession. As owner of Yuma Brace and Splint for eleven years, Hewlett has hands-on experience with facility accreditation and Medicare compliance.

Joining Hewlett on the Board's Executive Committee will be:

- **R. Jeffrey Hedges, CDME**, as Vice Chair
- **William J. Powers, MBA, LFACHE**, as Secretary
- **James Newberry, Jr. BOCPO, BOCPD**, as Treasurer
- **Mark L. Parris, Pharm D, RPh, COF**, as Member-at Large
- **John P. Kenney, MURP, BOCO**, as Immediate Past Chair

Hewlett enthusiastically accepted his new role as Chair, stating, "I am humbled and excited by my colleagues' confidence in me, and I recognize the responsibility of leading this important organization through a challenging climate. I look forward to advancing BOC's mission to assure patients, physicians, professional organizations, the public-at-large, and government agencies of the competence, professionalism, and safe practice environments of BOC-certified professionals and BOC-accredited facilities."

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CMS Announces a New Date for PECOS Implementation

CMS has announced that Medicare claims with a date of service on or after January 6, 2014 will be subject to edits that will ensure that the referring/ordering physician has an active profile in the Provider Enrollment Chain Ownership System (PECOS). Claims where there is no PECOS record for the referring/ordering physician will be denied.



The Affordable Care Act established the PECOS requirement for referring providers but implementation has been delayed. Since 2009, claims that involved a non-PECOS enrolled physician have been processed with a warning message that the referring provider was not in PECOS. On or after January 6, 2014, these claims will be denied.

[The official announcement from CMS is contained in MedLearn Matters Article SE1305 which may be viewed here.](#)

[Click here for a direct link to the CMS ordering/referring list.](#)

Questions regarding this issue may be directed to Joe McTernan at jmcternan@aopanet.org or Devon Bernard at dbernard@aopanet.org

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In O&P Memory: Grover Addison 'Buddy' Jeffcoat

Grover Addison 'Buddy' Jeffcoat, III, 61, of Prosperity passed away January 1, 2014. Born on June 18, 1952 in Columbia, SC. Jeffcoat served in the Army at Walter Reed Hospital Washington, D.C. during the Vietnam War. After his military service he received his formal education in orthotics at New York University and Northwestern University.

He was instrumental in improving National Certification Standards for Orthotics and was a National Examiner for the industry. He was owner of Savannah Orthotics and Prosthetics and founding President of the Georgia Society of Orthotics and Prosthetics. He was active within his community and served 4 terms on city council for the City of Pooler, GA.



...Dedicated to Educational Excellence...

Surviving to cherish his memory are his loving wife of 42 years, Debra James Jeffcoat; daughter - Melissa (Mike) Howard, Pooler, GA; son - Blair (Amanda) Jeffcoat, Pooler, GA

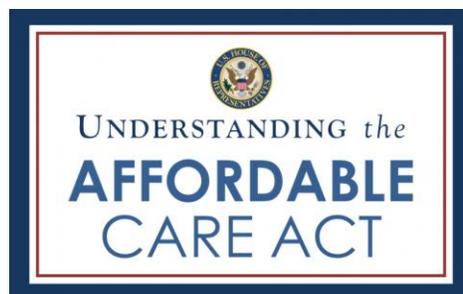
See more at:

<http://www.legacy.com/obituaries/savannah/obituary.aspx?n=grover-jeffcoat&pid=168875390#sthash.Dr3tAQcD.dpuf>

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Affordable Care Act Grace Period Holds Perils for Providers

Under the Affordable Care Act, Qualified Health Plans (QHP) are prohibited from terminating coverage for enrollees receiving advance premium tax credits on the grounds of non-payment of premiums during the grace period. Enrollees have a 90 day grace period after the initial non-payment of the individual's portion of the premium to pay past due premiums. After 90 days the QHP is allowed to terminate coverage.



That's a problem for O&P and other providers. Providers may be told a patient is covered by the insurer prior to providing services not realizing that the patient's failure to pay the premium could leave providers holding the bag. QHPs must pay all appropriate claims for service rendered to the enrollee during the first month of the 90-day grace period but the current HHS guidance only requires the QHP to notify providers of a lapsed enrollee after a provider has submitted a claim. QHPs may pend claims for services rendered to the enrollee in the second and third months of the grace period.

For providers that accept patients and administer health care services on the basis that the patient currently has QHP coverage at the time of service, this allowance for the "pending" of claims during the second and third months of the 90-day grace period presents serious concerns.

So a patient receiving advance payment tax credits with ongoing needs may be verified as appropriately insured when services are initially delivered but if the patient fails to pay premiums during the grace period the QHP may use its discretion as to when a "potentially affected" provider should be notified of a coverage lapse.

The Medical Group Management Association (MGMA) asserts that a QHP should be required to provide an eligibility determination anytime a physician requests. But, what about the rest of the provider world?



Further complicating the situation and adding additional perils is the widespread decision by many insurance companies to give consumers an extra ten days to pay their first-month premium. So with a coverage start date of January 1, a patient may be determined eligible for services delivered on January 5th but on January 11th that eligibility could end for patients not receiving advance premium tax credits.

So what should an O&P provider do? At this time the best advice is "vigilance" and continued checking on any patient's eligibility who is insured under a Qualified Health Plan.

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Register now for the 2014 AOPAversity Audio Conference Series

AOPA has confirmed the dates and topics for its 2014 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.



[Buy the Series and Get Two FREE!](#)

Jan 8th: New Year, New Opportunity: Are You Billing For All That You Can?

Feb 12th: Billing for Diabetic and Orthopedic Shoes, Mastectomy Services, and Surgical Dressings

March 12th: The ABC's of Audits: What to Expect and How to Respond

April 9th: How to Use Advanced Beneficiary Notices (ABNs) Effectively

May 14th: Modifiers: How and When to Use Them

June 11th: The Self Audit: A Useful Tool

July 9th: The OIG: Who Are They and Why Are They Important

August 13th: AFO/KAFO Policy: Understanding the Rules

September 10th: Urban Legends in O&P: What to Believe

October 8th: Medicare Enrollment, Revalidation, and Participation

November 12th: Gifts: Showing Appreciation without Violating the Law

December 10th: New Codes and Changes for 2015

Visit the AOPA Website, 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 in the form of an MP3. Seminars are priced at just \$99 per line for members (\$199 for non-members).

[Registration online here!](#)

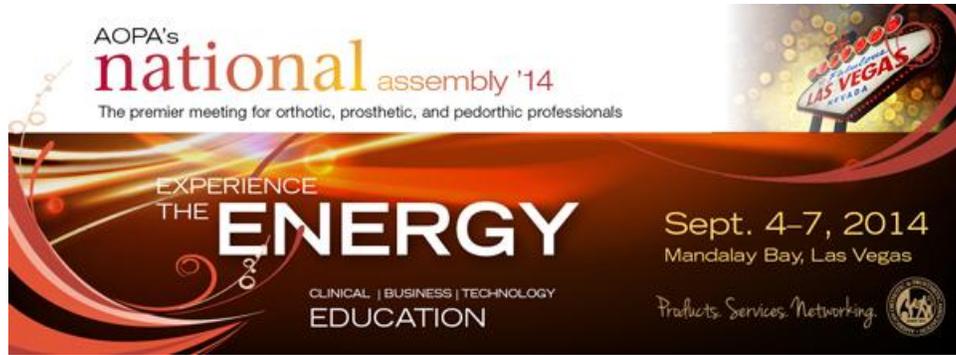
[\(http://bit.ly/aopa2014audio\)](http://bit.ly/aopa2014audio)

Questions? Contact Betty Leppin at bleppin@AOPAnet.org or 571/431-0876.

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Become a Presenter at the 2014 AOPA National Assembly!



Share Your Expertise ▪ Advance Your Career ▪ Improve Patient Care

Become a Presenter at the 97th Annual AOPA National Assembly

Your submissions, based on sound research and strong empirical data, will set the stage for a broad curriculum of highly valued clinical and business offerings at the 2014 AOPA National Assembly. Submit an abstract of your proposed scientific paper or description of your proposed business or technical paper today.

All free paper abstracts or symposia proposals for the 2014 AOPA National Assembly must be submitted electronically using the online submission forms at:

<http://www.aopanet.org/education/2014-assembly/call-for-papers/>

For complete details, visit <http://www.aopanet.org/education/2014-assembly/call-for-papers/>, or contact AOPA Headquarters at (571) 431-0876 or tmoran@AOPAnet.org

THE AOPA NATIONAL ASSEMBLY
SEPTEMBER 4-7, 2014 ♦ LAS VEGAS
THE MANDALAY BAY RESORT AND CASINO

For millions of people around the world, Las Vegas is a city unlike any on earth. It's unpredictable, constantly evolving and always delivers unforgettable experiences—which is exactly why it is the perfect location for the 2014 AOPA National Assembly. Don't miss this incredible show as we combine the ENERGY of Las Vegas with the ENERGY of 200 Exhibitors and the ENERGY of more than 2,000 attendees along with top-notch business and clinical experts to give the 2014 AOPA National Assembly.

To participate or obtain additional information visit www.AOPAnet.org or contact Tina Moran at (571) 431-0808 or tmoran@AOPAnet.org

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**New Year, New Opportunities: Are You Billing For All That You Can?
January Audio Conference**



Are you billing for all that you can? New codes and modifier changes are effective January 1st, 2014. Do you have a plan in place? As we welcome a new year, join AOPA January 8th for an AOPAiversity Mastering Medicare Audio Conference that will focus on billing opportunities that you may have overlooked, and why it's an important part of your business operation. During the Audio Conference, an AOPA expert will address how to bill for:

- Deluxe or upgraded features
- Refused or returned items
- For patient evaluations
- Miscellaneous codes
- Repairs and adjustments

The cost of participating is always just \$99 for AOPA members (\$199 for nonmembers) 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%.

[**Register online here!**](#)

Contact Devon Bernard at dbernard@AOPAnet.org or 571/431-0854 with content questions.

Contact Betty Leppin at bleppin@AOPAnet.org or 571/431-0876 with registration questions.

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Upcoming Events

- Jan 8 *New Year, New Opportunity:
Are you billing for all that you can?*
Telephone Audio Conference
[Learn more or register online here](#)
- Feb 10-11 *Mastering Medicare: Essential
Coding Billing Techniques Seminar
New Orleans, LA*
[Learn more or register online here](#)
- Feb 12 *Billing for Diabetic & Orthopedic
Shoes, Mastectomy Services, and
Surgical Dressings*
Telephone Audio Conference
[Learn more or register online here](#)

January 2014

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	