



**American Orthotic &
Prosthetic Association**

2nd Quarter 2014 Staff Report

To: AOPA Board of Directors
From: Thomas F. Fise, Executive Director
Date: June 16, 2014

Subject: No decision on AOPA Lawsuit Against CMS, Close Call On Post Acute Care Bundling, VA Patient Delay Impact on O&P, CMS Prior Authorization Proposal, Mobility Saves Website and Much More.

There just seems to be an increasing flurry of activity in regulatory actions or legislative threats affecting O&P these last few months and there's no sign of any let up. RACs, ALJ hearing delays, battling post acute care bundling threats, new proposed CMS regulations to establish prior authorization for some prosthetic devices, and PDAC querying suppliers on whether their devices are delivered to patients primarily OTS or custom fit are just a sampling of the hot issues in which AOPA has been engaged. AOPA's participation in four separate hearings separated by only a few days with two Congressional hearings in one day offered an opportunity to address several of these issues. But for all the clatter, we can be thankful that it gives O&P added opportunities to present our case in our continuing effort to educate and inform decision makers on Capitol Hill, CMS and the Veterans Administration about O&P.

The most sophisticated effort yet pursued by AOPA to bring our message of cost effective solutions to the ears and eyes of payers, referral sources, patients, our own peers and the all important policy decision makers in Congress and the agencies had a soft launch June 23rd for the AOPA Board's review. July 1st was the official launch date so please go to the www.mobilitysaves.org to see all of the offerings. "Mobility Saves – Lives and Money," is the messaging now being delivered in social media, a micro website, and an action tool kit for members, and in a video news release and related media out reach. These are just a few of the elements that will help make sure that people gain a clearer understanding of just how much money is saved by timely O&P intervention through lower healthcare costs and delivering better outcomes. You'll see a lot more of "Mobility Saves," in the very near future. The effort is based on the groundbreaking cost effectiveness study commissioned by the Amputee Coalition, underwritten by AOPA and conducted by the healthcare consulting firm, Dobson DaVanzo headed by Allen Dobson, former CMS director of research.

You'll also see in this report all the pieces of the multi-faceted strategy AOPA has employed to make sure members weigh in on the CMS proposal on prior authorization for 89 prosthetic codes. It's kind of a "be careful what you ask for" scenario.

What follows next is a recap of those issues or actions we've been involved in on behalf our members for the past several weeks and in part, what's coming up such as the National Assembly, September 4-7, 2014 at the Mandalay Bay in Las Vegas. That's a do not miss high energy experience with 36 CEU's available.

Regulatory Challenges

Off The Shelf Orthoses

Effective for dates of service on or after January 1, 2014, the Centers for Medicare and Medicaid Services (CMS) implemented a total of 55 codes that are designated for off the shelf orthoses. Included in these codes are a set of 23 “split” codes that describe identical orthoses that are either delivered as off the shelf (OTS) or as custom fitted by an individual with appropriate expertise. CMS has indicated that in order to bill for orthoses using the custom fitted version of the split code, the provider must have documentation regarding the specific adjustments and modifications to the device in order to achieve a proper fit and documentation that the modifications were performed by an individual with the appropriate training and expertise necessary to perform the modifications, such as a certified orthotist.

AOPA believes that the progressive expansion of the definition of OTS orthoses, from the statutory definition of OTS orthoses to the latest DME MAC policy statement that requires “substantial modification” to the device in order to be considered custom fitted exceeds the intent of the statutory definition of “minimal self adjustment” and AOPA continues to challenge CMS’ authority to further expand the definition of “minimal self adjustment.”

An April 2, 2014 letter from AOPA to Laurence Wilson expressed our concerns about CMS expanding the definition of off the shelf orthotics beyond needing “minimal self adjustment” by the patient. CMS further strayed when describing custom fit orthotics as requiring “substantial modification” by the provider which AOPA also challenged as violating the law. The letter also raised serious questions about who determines whether one of the 23 exploded codes is delivered custom fit or OTS. AOPA’s effort was followed by the April 25, 2014 O&P Alliance letter to all four medical directors which voiced similar concerns.

The underlying peril in the CMS policy direction is the ultimate harm to patients if unqualified providers through a competitive bidding process endanger the patient’s well being because of their professional inability to determine a specific patient’s medical necessity for the right device and any needed adjustments which only a trained orthotist can most accurately determine.

PDAC Code Re-Verification of Split Code Orthoses

The Pricing, Data Analysis, and Coding contractor (PDAC) recently has sent requests to manufacturers of devices represented by the 23 split codes for which a coding verification has been issued in order to determine if any of the products are always delivered as OTS. AOPA has communicated with its supplier members to make sure they understand what the PDAC communication is asking for, things to carefully consider when responding and avoid the risks involved in stating that every device is delivered OTS when that may not be the case or is an unknown to the supplier.

Jurisdiction B Changes Policy Regarding Manufacturer Information on Additional Documentation Requests

Jurisdiction B will no longer require providers to reference a manufacturer catalog page number (including MSRP) for established HCPCS codes when requesting additional documentation (ADRs) as part of its pre-payment review program for lower and upper limb prosthetic claims. While the request will remain part of the ADR letter, verbiage has been added to indicate that this information is only required when a miscellaneous code is reported by the provider of service.

This issue arose when an AOPA member received an ADR for a claim that did not contain miscellaneous codes and questioned the reasoning for the request. AOPA staff contacted the Provider Outreach and Education department at Jurisdiction B and discussed the need for this information when reviewing claims that did not contain miscellaneous codes. AOPA was pleased with the response from Jurisdiction B and hopes to continue this positive relationship through the use of open communication.

Delay in Implementation of ICD-10 System

As a result of the April 1, 2014 passage of *the Protecting Access to Medicare Act of 2014* the implementation of ICD-10 codes was delayed from October 1, 2014 until no sooner than October 1, 2015. An interim final rule indicating the new implementation date for ICD-10 codes will be released in the future.

Legislative Activities & Update

Congressional Hearings

The second quarter of 2014 as noted earlier proved to be a very active quarter for AOPA and its legislative activities, especially on the Congressional side. In this quarter AOPA presented statements to four separate House Committee hearings covering Medicare payment policies that have some bearing on RAC & Prepayment Audits, Delays in ALJ Hearings, and Post Acute Care Bundling Issues.

- April 30, 2014 — Health Subcommittee of the House Ways and Means Committee — Statement of the American Orthotic and Prosthetic Association on Combating Fraud, Waste, and Abuse in the Medicare Program
- May 20, 2014 — Health Subcommittee of the House Ways and Means Committee — [Statement of the American Orthotic and Prosthetic Association on Short Stays and Unintended Consequences of RAC Audits and the Massive Backlog of Medicare Appeals](#)
- May 20, 2014 — Oversight and Government Reform Subcommittee on Energy Policy, Health Care and Entitlements — [Statement of the American Orthotic and Prosthetic Association on Combating Fraud, Waste, and Abuse in the Medicare Program.](#)
- May 21, 2014 — House Energy & Commerce Health Subcommittee –Statement of the American Orthotic & Prosthetic Association on Medicare Site of Service & Related Issues of Cost Effectiveness of Orthotic & Prosthetic Care and on RAC Audits.

With these four hearings and subsequent statements AOPA indicated its commitment to continue to work with Congress and CMS to ensure that those who prey on Medicare beneficiaries do not find the orthotics and prosthetics field an easy place to establish and operate a fraud scheme. We drove home the belief that the fairest and most effective system is one that prevents fraud before it starts, and we asked that Congress direct CMS to develop a system taking the pathways outlined in both Section 427 of BIPA 2000 and H.R. 3112 (The Medicare O&P Improvement Act of 2013) to deter fraud, promote program integrity, and protect the due process rights of legitimate orthotics and prosthetics suppliers.

AOPA also used these hearings to educate and inform Congress that the moratorium on RAC audits for certain Part A inpatient stay claims doesn't extend to Part B and O&P claims, and that no relief from the RAC audits has been provided to Part B providers/suppliers. We urged CMS to implement a moratorium on RAC audits so that it can explore fully the effect the audits have on legitimate Part B providers/suppliers.

AOPA also enlisted the assistance of Rep. Tammy Duckworth (D-IL), a staunch O&P supporter and herself an amputee, and Rep. Todd Rokita (R-IA) to write a letter challenging HHS/CMS for their egregious violation of the law which requires that a provider receive a final decision from an Administrative Law Judge within 90 days of filing an appeal and insist that CMS "pause" all Part B O&P RAC and pre-payment audits until HHS is able to meet its statutory responsibility to deliver the ALJ decision within the 90 days prescribed by the statute. This letter was signed onto by 30 other members of

Congress and was sent to Kathleen Sebelius, HHS Secretary, on May 28, 2014 prior to the confirmation and swearing in of her successor, Sylvia Mathews Burwell.

AOPA members should contact their Representatives via the AOPAVotes website, www.AOPAVotes.org, and ask them to take a stand against CMS/HHS egregious violations and have them restore your due process rights. To date 376 AOPA members have sent 1,259 letters to 280 different Representatives.

Post Acute Care Bundling Legislation

Earlier this year [we advised you regarding a potential threat to O&P Medicare reimbursements](#) as a result of Congress' attempts to find and pay for a permanent "doc fix". The primary means identified to pay for the doc fix was to implement a form of post acute care bundling; a system where Medicare would make one reduced payment to a contracted entity to provide all services, potentially even orthotics and prosthetics, for a patient for the first 90 days after discharge from the hospital.

AOPA had several meetings with key members of Congress, and submitted a position paper to other key Congressional staff, outlining the reasoning and need for orthotics and prosthetics to be exempt from post acute care bundling. These same sentiments were echoed by the O&P Alliance in communications as a result of the series of meetings. AOPA did receive preliminary assurances from staffers on the House Energy and Commerce Committee indicating a favorable response to AOPA's position.

These assurances that O&P would be exempt from any post acute care bundling became more of a reality when the final version of the post acute care bundling bill, Bundling and Coordinating Post-Acute Care act (BACPAC) of 2014, was introduced by Rep. McKinley (R-WV) on May 19, 2014. Section 3 of BACPAC clearly exempts orthotics and prosthetics from the proposed bundle.

However, it is too early to count this as a victory. This bill has been just introduced and has not been passed by either the Senate or the House, and nothing is final until the bill is passed and signed into law. AOPA will keep track of this legislation and continue to make every effort to make sure O&P remains exempt, and ensure that O&P is exempt from any similar pieces of legislation.

Proposed Prior Authorization Legislation

On May 22, 2014, the Centers for Medicare & Medicaid Services (CMS) released a proposed rule to establish a prior authorization process alleging that this would ensure beneficiaries receiving medically necessary care while minimizing the risk of improper payments and therefore protecting the Medicare Trust Fund. AOPA has very significant concerns with the use of prior authorization in the Medicare program as outlined by CMS in this proposal. Mainly because the prior authorization process poses serious risk to not only worsening the backlog of provider appeals, but also threatening beneficiary access to items and services. As proposed by CMS, prior authorization or an "affirmation" is not a promise or guarantee of reimbursement.

- I. AOPA believes that health professionals engaged in direct patient care encounters—physicians, therapists and O&P professionals—need to be considered as one category and there needs to be an exception from Prior Authorization for them. All three of these players share portions of the market for Medicare billings--if O&P were subject to Medicare Prior Authorization, but physicians and/or therapists were not, it would manipulate the Medicare market. Moreover, Prior Authorization in patient care more generally, can serve to delay care and inappropriately interfere with patient care delivery.

II. Key Factors About Prior Authorization--these points address the reasons why O&P has consistently questioned the concept of Prior Authorization which would need to be resolved if AOPA were to reconsider its opposition:

- a. recognize the notes of the prosthetist and orthotist as a legitimate part of the medical record for both therapeutic and reimbursement purposes.
- b. legislative separation of O&P from DME--the former are licensed/certified health professionals, the latter are 'suppliers'.
- c. delays as seen in power mobility equipment Prior Authorization--CMS has 5 days to approve a Prior Authorization, or to deny with an explanation, unique and specific to this patient why it is not approved, if no answer in five days, it is deemed approved and patient care may proceed.
- d. Prior Authorization needs to constitute a guarantee of Medicare payment.
- e. threshold for Prior Authorization. 167% of the average total per patient prosthetic claim by Medicare data for the last available year, inflation adjusted to become current year.
- f. elimination of RACs and prepayment audits across all claims.
- g. still need a remedy for appeals and a plan to hasten ALJ hearings (or return funds until the ALJ hearing occurs).
- h. other issues from the RAC legislation, e.g., requiring CMS to make its records more granular and separate reporting of O&P appeals record, completely separate from DME.

AOPA will be submitting comments on this proposal by the July 28, 2014 deadline which will address all of these issues but is providing tools so all members can comment as well. Unless there is a barrage of member comments directed to CMS, there could be a perception that O&P is insufficiently interested in the rule to make it a workable process. Members should go to AOPAVotes.org for a sample letter that can be directed to CMS. AOPA's own twelve page set of comments will be shared with all members for guidance. A vital part of the effort is to encourage members to file their own comments but equally important, AOPA members have been supplied postcards which should be given amputee patients urging them to also weigh in on the proposal sharing their fears that timely care will be delayed. The postage paid postcards simply require signing and mailing by the patient -- one to CMS and a copy of that same postcard to AOPA so we can gauge the level of patient involvement.

The Medicare O&P Improvement Act

The Medicare O&P Improvement Act of 2013 (H.R. 3112) was introduced by Rep. Glenn Thompson (R-PA) and Rep. Mike Thompson (R-CA) on September 17, 2013, and it takes a very constructive and proactive approach to tackling fraud and abuse while saving money for the Medicare program and taxpayers. It would require CMS to implement provisions of the Benefits Improvement and Portability Act of 2000.

It prohibits the Centers for Medicare and Medicaid Services (CMS) from making any payment for orthotics and prosthetics to a provider who is not appropriately licensed (if a state requires licensure), and it underscores the existing statute that practitioners in states without licensure need to be certified by ABC or BOC or a certifying body with equivalent standards and requires CMS to implement regulations on this qualified provider topic. The combination of these two much needed reforms will keep fraudulent providers out of the O&P arena, so that only legitimate, qualified O&P practitioners will be paid for serving Medicare beneficiaries.

Also, since eligibility for payment would be linked to the qualifications of the provider and the complexity of the device the patient needs, patient quality of care will be improved. Additionally, taxpayer dollars will be saved through a reduction in poor outcomes and repeated charges for follow up O&P care that would not be necessary if a qualified provider served the patient in the first instance.

Please contact your Representative and ask them to sign on to and become a co-sponsor of the Medicare Orthotics and Prosthetics Improvement Act of 2013 (H.R. 3112) via the AOPAVotes website, www.AOPAVotes.org. At this time 213 members have sent 240 separate letters to 141 different Representatives. So, if you have not already done so please visit the AOPAVotes website and send your letter. As of July 1, 2014, these Representatives have joined co-sponsors Glenn Thompson (R-PA) and Mike Thompson (D-CA) by signing on: Michelle Bachmann (R-MN), Tammy Duckworth (D-IL), J. Randy Forbes (R-VA), Tim Griffin (R-AR), Brett Guthrie (R-KY), Steve Israel (D-NY), Peter King (R-NY), Tom Latham (R-IA), David Loesback (D-IA), James P. McGovern (D-MA), Erik Paulsen (R-MN), Peter Roskam (R-IL), C. A. Dutch Ruppersberger, (D-MD) and Aaron Schock (R-IL).

Insurance Fairness for Amputees Act

The Insurance Fairness for Amputees Act (H.R. 3020) was introduced by Rep. Charles Dent (R-PA) and Rep. Robert Andrews (D-NJ) on August 2, 2013 and it attempts to provide fairness under group and individual health plans for prosthetics and custom orthotics care on the same basis as the plan's general medical and surgical coverage, by ensuring that no separate caps, exclusions or lifetime limits be placed on orthotic and prosthetic services and items. Also, it is important to stress that this Act would not mandate coverage, and enactment would incur zero dollars in federal costs. The cost to private insurers would be minimal, less than a dollar per beneficiary per year.

AOPA members should contact their Representatives and ask them to sign on to and become a co-sponsor of the Insurance Fairness for Amputees Act via the AOPAVotes website, www.AOPAVotes.org.

Section 322 of S. 1982, the Comprehensive Veterans Health and Benefits and Military Retirement Pay Restoration Act of 2014 (Grants for O&P Education)

The Wounded Warrior Workforce Enhancement Act (S. 522) was introduced by Sen. Richard Durbin (D – IL) on March 11, 2013. The Act directs the Veterans Administration to provide grants to schools and universities to either create or expand upon current masters and/or doctoral programs for O&P. The \$10 million in funding provides grants that may be used to supplement faculty salaries, offer financial aid to admit additional students and a host of other positive actions to enhance O&P teaching institutions.

Provisions of S. 522 were folded into Section 322 of the Comprehensive Veterans Health and Benefits and Military Retirement Pay Restoration Act of 2014 (S.1982) by the Senate VA Committee. This bill failed to pass the Senate vote, by a narrow margin, because it was deemed to be too costly. But, efforts to retain the O&UP provision in the VA bill continue.

A related development is the possibility that VA utilization of outside O&P providers may be restrained and AOPA has written letters of concern to key members of the House Veterans Affairs Committee chaired by Rep. Jeff Miller (R-FL) and to ranking member Rep. Michael Michaud (D-ME). The same letter went to Sen. Bernie Sanders (I-VT), chair of the Senate Committee on Veterans Affairs and to ranking member, Sen. Richard Burr (R-NC). AOPA pointed out the elimination of outside O&P providers would contribute to further timely care delays and force veterans in many cases to travel a significant distance to inconvenient VA facilities if private care available more conveniently were eliminated.

Catriona Macdonald of Linchpin Strategies has been AOPA's consultant in getting this VA O&P education legislation introduced and was also responsible for the inclusion of the outcomes research provision in the Omnibus appropriations bill Department of Defense budget that was signed into law by the President.

To receive more information on this bill or to send a letter your Senators, and Representatives, asking them to endorse Section 322 of S. 1982 please visit the AOPAVotes website at www.AOPAVotes.org.

Injured & Amputee Veterans Bill of Rights

Injured and Amputee Veterans Bill of Rights (H.R. 3408) was introduced by Representative Renee Ellmers (R-NC) on October 31, 2013 and currently has 40 co-sponsors. This bill will require the VA to post a written list of 'rights' that apply to every veteran in need of O&P care and these rights include:

- Access to appropriate O&P technology to meet individual veterans' needs
- Ability to receive care from a private O&P practitioner of choice (the vast majority of veterans receive prosthetic care through 600 contracts with private O&P practitioners)
- A second opinion from VA medical personnel as to O&P treatment options
- Have a functional spare prosthetic limb or orthotic brace, and
- Timely and efficient prosthetic and orthotic care.

While veterans currently have these rights (although private O&P care is being challenged), many veterans and even VA employees are unaware of the available healthcare options.

To receive more information on this bill or to send a letter to your Representative asking them to sign on and become a co-sponsor of H.R. 3408 please visit the AOPAVotes website at www.AOPAVotes.org.

AOPA Government Relations Update

2014 O&P PAC Donors & Supporters

The O&P PAC is the political action committee representing you and the O&P community on Capitol Hill and provides you with a means of increasing the visibility and recognition of orthotic and prosthetic services among legislators. It allows individuals to unite and pool their resources to support candidates for federal office who understand the crucial role of O&P in the health care delivery system.

Thanks to the following individuals for their contributions to the O&P PAC in 2014. This list covers the period from January 1, 2014 through June 9, 2014. If we missed your name please accept our apologies, and any contributions made or received after June 9, 2014 will be published in the O&P Almanac and the next quarterly staff report.

Maynard Carkhuff
Rick Fleetwood, MPA
Wendy Miller, BOCCO, CDME

Frank Snell, CPO, FAAOP
Claudia Zacharias, MBA, CAE

Special Support Group – Each year, the O&P PAC organizes fundraising events for members of Congress who have been supportive of O&P. For each event AOPA members make a personal contribution to the member's campaign and spend time with the member talking about a variety of issues including health care and the provision of O&P. These events are a unique way to share O&P concerns, get to know a member of Congress, and have been very successful in getting Congress to understand O&P concerns.

We would like to thank those individuals who in 2014 have donated directly to a candidate's fundraiser or to an O&P PAC sponsored event, as they provide valuable support in achieving the legislative goals of AOPA and the O&P PAC.

Jim Cahill, CPO
James Campbell, Ph.D., CO
Maynard Carkhuff
Jeff Collins, CPA
Glenn Crumpton, CPO
Charles Dankmeyer, CPO
Mitchell Dobson, CPO, FAAOP
Thomas F. Fise, JD
Foley Lardner PAC
Rick Fleetwood, MPA
Elizabeth Ginzel, CPO
Hanger PAC

John Horne, CPO
Paul Johnston, CP, CPed, Cfo
Thomas Kirk, PhD
Eileen Levis
Anita Liberman-Lampear, MA
Ron Manganiello
David McGill
Michael Oros, CPO, FAAOP
Jeff Parson, CO
Matt Perkins
Powers, Pyles, Sutter & Verville
PAC

Rick Riley
Brad Ruhl, CEO
Scott Schneider
Christopher Snell
Clint Snell, CPO
Gordon Stevens, CPO
Peter Thomas
Ted Trower, CPO, FAAOP
Frank Vero, CPO
Jim Weber, MBA
Pam Young
James Young, CP, FAAOP

7th Annual Wine Auction & Tasting

The 7th Annual Wine Tasting & Auction is scheduled to take place at 6:30 p.m., on Friday, September 5th during the 2014 AOPA National Assembly. The Wine Tasting and Auction is a fun event but seriously important in its ability to focus attention on the AOPA PAC's role in supporting the AOPA legislative agenda. Proceeds from the wine auction and the registration fees paid by personal checks PAC eligible donors go directly to the AOPA Political Action Committee. The auction plays a vital role for raising awareness of all of AOPA's Government Relations advocacy outreach programs.

We would like to thank the following individuals for their generous donations to the 7th Annual Wine Tasting & Auction:

Vinit Asar
Frank Bostock, CO
Thomas Costin
Charles Dankmeyer, CPO

Rick Fleetwood, MPA
Al Kritter, CPO, FAAOP
Eileen Levis
Anita Liberman-Lampear, MA

Pam Lupo, CO
Claudia Zacharias, MBA, CAE

If you would like more information on the wine auction (i.e. interested in donating, interested in attending, etc.) please contact Devon Bernard at dbernard@AOPAnet.org.

National Assembly – Energy to be Energized. Don't Miss It!

Register today for the 2014 AOPA National Assembly, to be held September 4-7 at the Mandalay Bay Resort in Las Vegas. Don't gamble with your valuable time, financial resources or continuing education—attend the show that provides the biggest return on your investment—The AOPA National Assembly.

There is a reason why more people attend the AOPA National Assembly than any other O&P convention in the U.S. No other meeting offers the high-quality venue, business education, top-notch speakers, networking opportunities or the massive trade show that is part of the National Assembly.

What's New This Year?

1. 36 CE credits have been approved.
2. New Exhibit Hall Schedule provides more time in the exhibit hall without sacrificing CE credits. The exhibit hall will not be open the traditional last half-day which this year is Sunday.
3. Five dedicated education tracks for orthotists, prosthetists, technicians, pedorthists and business managers
4. More Symposia! 13 organized symposia.
5. Coordinated four-day Pedorthic Education Program focusing on diabetic treatment and wound care from a multidisciplinary faculty of physicians, wound care experts and diabetes educators.

6. More receptions and networking events, plus a new and improved Thranhardt Golf Classic scheduled the day before Manufacturers' Workshops. A newly formed workgroup is meeting to breathe new life into our joint tournament.
7. Alumni Networking Opportunities.
8. New Las Vegas Location—The Assembly meeting space at the Mandalay Bay has the exhibit hall and meeting space in very close proximity that should keep attendees engaged. 29 dining outlets ranging from Charlie Palmers Steakhouse to a Food Court and everything in between. Many entertainment options at the Mandalay Bay are within close proximity—it's Vegas.
9. So much More!

Make the Alumni Connection

When completing your Assembly registration, be sure to include your graduating school and year so you can be invited to connect with other alumni from your school. *(Even if it is the school of hard knocks, connect with your classmates.)*

- Connect with your classmates through the Mobile App—your school will be set up as a networking group.
- Proudly wear your school button which will be provided at registration.
- Join your friends at the Welcome Reception where you will find a table and message board for your school.
- Share pictures, messages and more through the facebook event page.
- Meet your friends at informal social gatherings on Saturday night.

Preview the Preliminary Program: <http://www.aopanet.org/wp-content/uploads/2014/05/Natl-Assembly-2014-Prelim-Program.pdf>

Register online: <https://www.expotrashows.com/aopa/2014/>

General Information: <http://www.aopanet.org/education/2014-assembly/>

Hotel Reservations: <http://www.aopanet.org/education/2014-assembly/attend/#hotel>

Questions: Visit www.AOPAnet.org or Contact AOPA at (571) 431-0876 or info@AOPAnet.org

Business Certificate Programming

Great news for AOPA's Business Certificate Program! AOPA is offering the required and elective courses in the Management Module on September 4th at the 2014 National Assembly in Las Vegas NV. We hope you plan to attend and join us in celebrating the Program's first graduating class.

The courses to be offered in Las Vegas are:

- Management Required Course: Making Sure Your Company is Not Violating any State or Federal Laws: How to Implement an O&P Compliance Program for Your Company
- Management Elective: Human Resources: How to Develop a Human Resource Program for your Company that will Improve Employee Productivity

Contact Betty Leppin at bleppin@aopanet.org to find out which courses you need to complete the program.

Exhibit Hall Happenings - Mandalay Bay Convention Center

The 2014 AOPA National Assembly Exhibit Hall will be located in the Mandalay Bay South Convention Center, Shorelines A on level 2. The 176,000+ sq. ft exhibit hall is the center stage for many exciting activities for this year's National Assembly.

- **Viva Las Vegas Welcome Reception**

Starting immediately after the Manufactures Workshops, don't miss the fun opening reception as exhibitors (and Elvis) welcome you to the National Assembly "Las Vegas Style." Get your photo taken with Elvis or Marilyn; enjoy refreshments and peruse the massive exhibit hall. The Welcome Reception is included in the full conference registration. This year's Welcome Reception will be extra special as our sponsor, WillowWood, provides you with a special party favor. Stop by the WillowWood booth to get your photo taken with Elvis.

- **Exhibitor Sponsored Happy Hour**

What better way of wrapping up a full day of learning than spending an hour in the exhibit hall, enjoying refreshments and networking with your colleagues and exhibitors. The Happy Hour is hosted by exhibitors. A list of sponsors will be included in the final program and on the website to make it easier for you to partake in the fun.

- **Exhibit Hall Closing Extravaganza and \$5,000 Giveaway**

New for 2014 is a revised exhibit hall schedule and a new exhibit hall closing extravaganza Saturday evening, September 6th. Win prizes; Participate in the \$5,000 giveaway; get entertained by Las Vegas performers and participate in the closing ceremony.

- **Giant Slot Machine**

Back by popular demand...the Giant Slot Machine. As you attend educational sessions, be sure to get your token for the giant slot machine located in the exhibit hall. Test your luck and play your tokens to win fabulous prizes from exhibitors and AOPA – including several chances to win an iPad!

2014 AOPA National Assembly APP

We will once again provide a Mobile APP for the 2014 AOPA National Assembly. Download the National Assembly APP on your iPhone, Android or iPad to:

- Easily view the Agenda
- Interact with colleagues
- Share photo's and comments
- Search for speakers and specific topics
- Create your own personal agenda
- Navigate the Exhibit Hall
- Join Alumni Groups

The AOPA National Assembly APP will be available for download in August. More information will be available on accessing the APP soon on the AOPA National Assembly website.

Keeping Informed – AOPA's Communications Program

In the 2nd quarter of 2014, the April issue of the *O&P Almanac* started using its first 'This Just In' Article, which was written by Adam Stone, covering the recent news and information on Post-Acute Care Bundling; this story covered what it is, how it can affect AOPA members' business, and why it's important to the relationship of patient and provider. AOPA celebrated 'Limb Loss Awareness Month' by talking to practitioners and patients about the value of cosmesis and the evolution of life-like prosthetics in the cover story, "Achieving 'Selfie' Status." The feature story 'Ensuring Quality During Unprecedented Change' provided a point/counterpoint discussion by industry experts Arlene Gillis, LPO, CP, M.Ed., NCOPE president, and Brian Gustin, CP, founder and CEO of Forensic Prosthetic and Orthotic Consulting, who shared their views on how we define a qualified O&P practitioner and what the demand for their services will be in the coming years. Both the Reimbursement Page and Compliance Corner, gave readers a chance for four Business CE's and also had the first President's Corner article written by 2014 President, Anita Liberman-Lampear.

AOPA's May issue featured a cover story on the newest viewpoints in Diabetes Treatment. While the number of U.S. adults with diabetes is rising, the rate of diabetes-related amputations is declining, indicating the effectiveness of pedorthic and orthotic interventions in diabetic foot care. In the *Almanac*, several diabetes specialists shared success stories in treating patients in various stages of the disease. The newest 'This Just In' piece covered the rollout of AOPA's public relations campaign, 'Mobility Saves – Lives & Money.' Backed by industry research, this new initiative seeks to help demonstrate the value of O&P care to payers and policymakers alike through the cost effectiveness research commissioned by the Amputee Coalition, conducted by the noted healthcare consulting firm, Dobson-DaVanzo, and funded by AOPA. The 2014 omnibus appropriations bill was covered in the feature article 'Funding the Future' reporting on the \$10 million for O&P outcomes research included in the Department of Defense appropriation's budget. The article outlined what you'll need to know about how the funding will be dispersed, and most importantly, how to get involved.

As a great flavor piece, AOPA celebrated Limb Loss Awareness Month with a lunchtime charity walk joined by ABC and NCOPE in an effort that raised more than \$2,300 to boost awareness of Limb Loss and send youths to the Amputee Coalition's Summer Camp. This 'In The News' item received a great following on Facebook and Twitter.

The most recent *O&P Almanac*, June, was the largest content issue this year, coming in at 80 pages with four featured stories and the ever-popular Buyer's Guide. One feature focused on O&P profitability with successful O&P business owners and experts sharing their "best practices" for reducing expenses and maximizing profits. They also offered strategies for decreasing non-revenue-producing activities. June's 'This Just In' covered the recently published, flawed study, that questioned the effectiveness of cranial helmet treatment. Industry leaders challenged this study as reported in *The New York Times* and offered their viewpoints on trusted practices, insurance concerns, flawed testing, and specifically questioned the sample selection that made the findings suspect. AOPA 2014 President, Anita Liberman-Lamphear, issued a letter to the editor at the *New York Times*, saying "Science demands replicability, and any new finding must be demonstrated as capable of validation through similar results reached by other investigators using parallel methods. No single article changes existing science," she noted in her letter published online and in the print versions of the paper. As a special spotlight, in 'Ask the Expert,' the pros and cons of prior authorization were discussed, which will receive significant attention as the 'This Just In' for the July 2014 Issue.

Two special features in the June *Almanac* included the 2014 Policy Forum Follow-up and the preview release for the 2014 AOPA National Assembly in Las Vegas. The Policy Forum was 'A Day for Change Makers' with more than 100 industry advocates participating in the April 2-4 expanded program to meet with legislators on important topics such as RAC audits, post-acute care bundling, ALJ hearing delays, reimbursement, and more. Member efforts add significant credibility in educating elected officials about legislation that will directly impact the O&P community. 'Vegas After Hours' was a preview piece to plan your trip to the National Assembly in Las Vegas at the Mandalay Bay Hotel & Casino. Recommendations for food, fun and entertainment were emphasized to help entice the O&P community to the biggest meeting in the profession.

On the horizon, per the editorial calendar, this is what's coming:

July – Sports and Physical Therapy and the updated versions of the *O&P Almanac*

August – Fabrication & Design Innovations, National Assembly Exhibitor and Product Showcase

September – The National Assembly issue & Global Research Trends

Look out next month -- AOPA is pleased to announce that starting with the July 2014 magazine, *The O&P Almanac* is launching a new and improved design and expanded content! We are unveiling our flagship communication piece to our core readership by releasing the most up-to-date O&P business news, updates on the most current O&P legislative efforts, and recognizing the profession's long history and nearly 100 year existence of the association. The *O&P Almanac* is focused on strengthening our existing columns, as well as developing new columns – The Compliance Corner, Tech Tutor, and Clinical Care – are three columns that will be featured

on a rotating basis bringing trending education and timely content to our readership. We hope you like what you see and look forward to your reaction.

Online Communications

Facebook. In this quarter, AOPA's Facebook has garnered a total of 2,158 followers. We've received high click-thru rates and views without paid reach and have an average of 200 viewers a day. We post daily during and one of the highest visible posts was our recent 'Legislators in Action for O&P' release with a viewership of 585, all done organically.

Constant Contact. Via Constant Contact in the 2st Quarter, AOPA has had much breaking news to release to Membership and the O&P Industry including: *NYT* Letter to Editor regarding the Cranial Helmet Study, Administrative Law Judge Hearing Notice, the Congressional Sign-on Letter to then HHS Secretary Sebelius, Policy Forum marketing, Post Acute Care Bundling, and more. Sending to E-mail lists of over 12,000 recipients, we have retained an average 20% open rate with our highest open rate of 26% on the *NYT* Letter to Editor regarding the Cranial Helmet Study.

Twitter. AOPA's Twitter Fan Page has earned a total of 1,857 followers and we are following 1,369 users who have Twitter Handles for their O&P Facilities. Using short URL's and quick links (via bit.ly) has been highly useful on Twitter to promote awareness to certain web pages such as: *O&P Almanac* Quizzes, Policy Forum Schedule, and highlighting the Dobson-DaVanzo studies for higher visibility. Recently we've doubled the use of Twitter for releasing short links to Constant Contact Emails – many of our human interest stories from *SmartBrief* have garnered significant attention.

And Finally

As you can see from this report the challenges and threats just keep coming our way. AOPA wants to be a constructive force in helping reduce fraud and abuse and reigning in healthcare costs. At the same time our obligation is to serve you and your patients. Medicare is a vast and complicated system but someone has to play the watchdog role to make sure that in the CMS well-intentioned efforts to contain costs that unintended consequences are not visited on you and your patients that can have long term crippling effects. You'll see the statistics on how many of you have responded to our pleas to contact your legislators and the record is very good. But we'll all agree it could be better. So we urge your participation and more importantly, please keep checking our membership directory to see if any colleagues are not sharing the load with you. Urge them to join AOPA.

Thank you for your terrific support and always please don't hesitate to let us know how we can serve your better.

Sincerely,



Thomas F. Fise, JD
Executive Director