AOPA In Advance SmartBrief
Breaking News
December 9, 2014

AOPA Headlines:

AOPA Submits Comments on ALJ Backlog and Increased Hearing Requests

New Analysis from Dobson DaVanzo: 19% of Patients with a Medicare-Reimbursed Off the Shelf Device Later Receive a Custom Device

National Disability Leaders Outraged Over Senate Inaction on Disability Treaty

Now Available for Purchase: AOPA Coding & Billing Seminar Manuals

2015 AOPA National Assembly Exhibit Space is NOW AVAILABLE!

Last Chance to Register for the December 10 Webinar: New Codes and Changes for 2015

Upcoming AOPA Events

AOPA Submits Comments on ALJ Backlog and Increased Hearing Requests

Following the October 29 Medicare Appellant Forum hosted by the Office of Medicare Hearings and Appeals (OMHA), the Department of Health and Human Services (HHS) opened a comment period to solicit suggestions for addressing the growth in the number of requests for Administrative Law Judge (ALJ) hearings, and to help to clear the backlog of pending cases. As you may be aware, the OMHA office is receiving approximately 14,000 appeals per week, compared to the 1,250 per week in 2011 prior to the "Dear Physician" letter and subsequent increase in auditing activities. While OMHA has received a modest budget increase to expand operations, and are implementing several pilot programs, the O&P Community has yet to feel any relief. The current wait time for an ALJ Hearing is 414 days from the time of the request until the decision.

In our comments, AOPA emphasized the following points:

1. Recovery Audit Contractor (RAC) Activities Must be Re-Focused
2. CMS Should Offer Orthotic and Prosthetic Providers the Opportunity to Voluntarily Settle Claims that are Awaiting an ALJ Hearing Using a Statistically Valid Extrapolation Process
3. OMHA Should Overturn Claim Denials that Cannot be Scheduled for an ALJ Hearing Within 90 Days of a Hearing Request
4. Coordinated Actions Needed by HHS, CMS and OMHA
5. OMHA Must be Funded at a Level that Supports its Increased Workload

You can read the full comments submitted here.

New Analysis from Dobson DaVanzo: 19% of Patients with a Medicare-Reimbursed Off the Shelf Device Later Receive a Custom Device

Medicare's own data shows that frequently patients who receive a Medicare-reimbursed OTS device subsequently also receive a Medicare-reimbursed custom-fitted or custom-fabricated orthotic device. Clearly, some modest portion of these data reflect instances in which OTS devices are fitted out of necessity in the acute or emergent setting and occasionally with the knowledge that a custom device will be required further down the road. There are also instances with progressive disorders where an OTS device may be sufficient for a period of time before their condition warrants a custom device. Clinical experience indicates that such instances could account for a relatively small portion of the 19%. But it also appears likely that there is a very significant percentage of cases where OTS devices do not fully or appropriately meet the patients' needs.

Type	Total Patients	RECEIVED OTS AS FIRST ORTHOTIC DEVICE		SUBSEQUENTLY RECEIVED CUSTOM FITTED/FABRICATED DEVICE	
		Patients	Percent of Total Patients	Patients	Percent of OTS Patients
TLSOs	20,408	1,519	7.4%	163	10.7%
LSOs	197,906	19,917	10.1%	3,372	16.9%
AFOs	268,232	56,959	21.2%	11,359	19.9%
Total	486,546	78,395	16.1%	14,894	19.0%

Source: Dobson-DaVanzo analysis of custom cohort Standard Analytic Files (2007-2010) for Medicare beneficiaries who received O&P services from January 1, 2008 through December 31, 2008.

It appears that delivering substantial numbers of OTS devices without any accompanying adjustment and clinical care may not result in patients getting better, but results, at least in a substantial number of instances, in wasted Medicare funds on that OTS device AND a delay in the patient receiving any improvement in their symptoms/ health. In this unfortunate reality, both the patient and the Medicare program will be negatively impacted as a result of increase patient co-payments and additional expenses to the Medicare program, and a disregard for patient health for Medicare beneficiaries as a result of CMS mandating that devices be provided to patients without professional adjustment and fitting, contrary to the premises for FDA-approved labeling. Read the full study here.

National Disability Leaders Outraged Over Senate Inaction on Disability Treaty

December 3rd was the International Day of Persons with Disabilities, and American disability leaders express outrage over the Senate's inaction on ratification of the international Disability Treaty (the Convention on the Rights of Persons with Disabilities, or CRPD). As the end of the 114th Congress nears, it has become clear to disability leaders that the Senate will not pass the resolution for ratification of the CRPD this year.

The Disability Treaty is supported by over 800 disability, civil rights, and faith groups, as well as over 20 of the top veterans' service organizations and many major businesses as well as the U.S. Chamber of Commerce. This is because not only would it protect the human rights of millions of people in other countries, it would also open the world to wounded warriors and other Americans with disabilities who wish to work, study, or travel abroad, and level the international playing field for American corporations.

Marca Bristo, retiring President of the United States International Council on Disabilities and long-time leader of the coalition for ratification of CRPD, said: "Unfortunately, the Senate chose to let politics, lies and misinformation rule the day instead of the rights of more than one billion of the world's most impoverished and marginalized populations. We deeply appreciate those Senators, both Democrat and Republican, who did the right thing and stood with the disability community on this important treaty."

Connect with the U.S. International Council on Disability at www.usicd.org.

Now Available for Purchase: AOPA Coding & Billing Seminar Manuals

You have asked for them, and now they are available!

AOPA has a limited quantity of the AOPAversity Mastering Medicare: Essential Coding & Billing Techniques manuals available for purchase. The manuals are one of the most sought-after components of the coding and billing seminars and cover (in detail) a wide range of subjects including Medicare Medical Policies, Documentation, Appeals, Compliance, etc.

The manuals are being sold on a first come, first served basis, and as soon as they are sold out we will not be printing anymore. Order your Mastering Medicare: Essential Coding & Billing Techniques here and now! See the Mastering Medicare: Essential Coding & Billing Seminar Schedule for 2015.

ORDER NOW

2015 AOPA National Assembly Exhibit Space is NOW AVAILABLE!

AOPA is currently organizing its 2015 National Assembly, which is the country's oldest and largest meeting for the orthotic, prosthetic, and pedorthic profession in the United States. Expand your knowledge, grow your market presence, and advance your career at this unique gathering of high visibility and importance.

- Build your customer base and increase sales by meeting with Owners who actually make the final decisions on purchases.
- Experience face-to-face time with existing customers to answer questions and build new relationships.
- Enjoy sponsored networking opportunities, including an opening reception in the exhibit hall.
- Take advantage of fun traffic-building opportunities.
- Take advantage of education sessions to learn what's happening with regulatory agencies that affect the success of your product.
- Increase visibility for your company/organization in a targeted market.
- Host a Manufacturer's Workshop and/or Product Preview Theater presentation.
- Speak to AOPA reimbursement experts who can answer all your O&P coding, reimbursement and compliance questions.
- Hear from top researchers and clinicians to learn what products and support is needed from manufacturers.
- Participate in key education programs and plenary sessions.
- Be a part of the largest exhibit hall in the US for the orthotic, prosthetics and pedorthic profession, and much more!

More information on exhibiting can be found here. For any exhibitor questions, please contact Kelly O'Neill at KOneill@AOPAnet.org or (571) 431-0852

Last Chance to Register for the December 10 Webinar: New Codes and Changes for 2015

HIPAA requires all payers to use HCPCS Codes. The end of the year marks the beginning of New Codes and Modifier changes that will be effective January 1st, 2015.

Do you have a plan in place? The ability to make sure your practice is sound may prevent unnecessary audits down the road. As we welcome a new year, join AOPA for a Webinar that will focus on New Codes and Medical Policy Changes for 2015 and why it's an important part of your business operation.

An AOPA expert will address the following issues during the Webinar:

- Learn about new HCPCS codes effective January 1, 2015.
- Discuss verbiage changes to existing codes and how they may affect your business.
- Find out which codes will no longer be used as of January 1, 2014.
- Discover other changes to the HCPCS system.
- Find out **AOPA**'s interpretation of why the changes took place.
- Look at any other pertinent policy/legislative changes your facility should be aware of in order to succeed in 2015.

Take your practice to the next level with **AOPAversity!**

The cost of participating is $99 for AOPA members ($199 for nonmembers) and any number of employees may partake on a given line. Attendees earn 1.5 continuing education credits by returning the provided quiz within 30 days and scoring at least 80%. Register online.

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.

Upcoming AOPA Events

Dec 10, 2014 — *New Codes and Changes for 2015*
Webinar Conference
Learn more or register online here

Jan 14, 2015 — *Fill In the Blanks: VA Contracting and the New Template*
Webinar Conference
Learn more or register online here

Feb 9-10, 2015 — *AOPA Mastering Medicare: Essential Coding & Billing Seminar*
Savannah, GA
Learn more or register online here