



AOPA Submits Comments on the CMS Proposed Rule That Would Provide States with Additional Flexibility in Defining Essential Health Benefits

AOPA commented that O&P must remain essential health benefits

On November 2, 2017, CMS published a proposed rule in the Federal Register entitled "Patient Protection and Affordable Care Act; HHS Notice of Benefit and Payment Parameters for 2019."

Among the provisions in the proposed rule is a section that would provide individual states with increased flexibility in defining essential health benefits (EHB) for purposes of establishing benchmark plans required by the Affordable Care Act. AOPA submitted official comments on

November 27 that reflected AOPA's consistent position that orthoses and prostheses must remain essential health benefits and any action by CMS that restricts or reduces access to O&P services is not in the best interest of quality patient care. [Read AOPA's comments.](#)

Call for Papers for 2018 National Assembly

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AOPA is seeking high-quality educational and research content for the 2018 AOPA National Assembly, September 26-29 in Vancouver, BC, Canada. All submissions are due March 1, 2018.

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AOPA Participates in CMS Special Open Door Forum on Proposed Revisions to DMEPOS Quality Standards on Diabetic Inserts

AOPA followed up with letter to CMS

On November 28, AOPA participated in a Special Open Door Forum hosted by CMS. The purpose of the Special Open Door Forum was to receive input from experts and stakeholders regarding proposed changes to the DMEPOS quality standards that would expand the definition of the term "molded to patient model" to include diabetic inserts that are custom fabricated from digital or virtual models using a direct milling process.

During the Forum AOPA expressed its concern regarding a frequently asked questions document published by CMS prior to the forum. In this document, CMS indicated that inserts that were fabricated using a direct milling process would be reimbursed approximately 14% lower than those

that were molded over a physical model of the patient's foot. AOPA and other industry representatives questioned this apparent "toll" on providers who chose to provide direct milled inserts that are identical to inserts fabricated using the older technology of molding the insert over a model of the patient's foot. AOPA was not satisfied with the answer that was provided by CMS officials during the Forum and followed up with a letter to CMS reiterating the question and challenging CMS's response. AOPA will incorporate its concerns into its full comments on the proposed changes to the DMEPOS quality standards. AOPA's comments will be submitted to CMS by the December 11, 2017 deadline. [Read AOPA's letter to CMS.](#)

First Coding & Billing Seminar of 2018 is in Atlanta

February 26-27

Earn 14 CEs and learn to code like a pro at AOPA's first Mastering Medicare: Essential Coding & Billing Techniques Seminar of 2018. AOPA experts provide the most up-to-date information to help O&P Practitioners and office billing staff learn how to code complex devices, including repairs and adjustments, through interactive discussions with AOPA experts, your colleagues, and much more. Meant for both practitioners and office staff, this advanced two-day event will feature breakout sessions for these two groups, to ensure concentration on material appropriate to each group. Register by January 26 for the early bird rate. [Register now.](#)



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November 14: Evaluating Your Compliance Plan & Procedures: How to Audit Your Practice

December 12: New Codes, Medicare Changes & Updates



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Publication from AOPA Funded Research

Systematic Review by Dr. Michael Dillon

We are pleased to share that the AOPA funded research by Dr. Michael Dillon has now been published in the journal *Systematic Reviews*. The article, "A systematic review describing incidence rate and prevalence of dysvascular partial foot amputation; how both have changed over time and compare to transtibial amputation" is available through open access. [Read the article.](#)

