



American Orthotic & Prosthetic Association

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AOPA In Advance SmartBrief

Breaking News

July 28, 2016

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DME MACs Release New Coding Guidelines for O&P Suppliers

The four Durable Medical Equipment Medicare Administrative Contractors (DME MAC), recently released a joint correct coding bulletin reminding DMEPOS suppliers that it is each supplier's responsibility to select the proper HCPCS codes for billing. The full bulletin may be found [here](#).

To aid suppliers in their selection of the proper HCPCS code(s) the DME MACs provided the following tips:

- Check the [PDAC Product Classification Lists](#)
- Review DME MAC publications for coding bulletins and coding guidelines
- Refer to the long code descriptor and select the code with the descriptor that most closely describes the item you are providing.
- Most code narratives are written broadly to be all-inclusive. You may not find a specific code that perfectly matches a product. Use the code that most closely describes the item rather than a NOC (not otherwise classified) or miscellaneous code.
- Review LCDs & Policy Articles for coding guidelines for additional information on the characteristics of products that meet a specific HCPCS code.
- Don't select a code based upon the fee schedule amount. HCPCS codes describe the product not the price.
- Check with the PDAC. The PDAC may provide information, outside of a formal product review, that will assist you in code selection.

The bulletin also stressed that the DME MACs and the PDAC are the only entities that have the authority to assign HCPCS codes to specific products and if a supplier chooses to follow coding

recommendations from outside sources; that these recommendations will have no “official standing” during a possible claim review/audit.

AOPA is currently analyzing the joint bulletin and is working with the DME MACs to obtain some clarification and guidance on specific points raised in the bulletin. We will keep you posted of any new information.

Questions? Contact Devon Bernard at dbernard@AOPAnet.org or Joe McTernan at jmcternan@AOPAnet.org

Noridian Releases Prepayment Review Results

Noridian, the Jurisdiction D Durable Medical Equipment Medicare Administrative Contractor (DME MAC), recently released their quarterly results of its review for claims involving the HCPCS codes L1832, L1843, L0648 and L0650.

Between January 2016 and April 2016 Noridian reviewed 181 claims involving the L1831 and all 181 claims were denied; resulting in a 100% error/denial rate. The review of claims involving the L1843 had a denial/error rate of 99%; 124 of 125 claims were denied.

The top four denial reasons were listed as:

- Documentation submitted didn't justify the need for a custom fitted brace
- Documentation did not support the presence of knee instability or that the beneficiary is ambulatory.
- Documentation was not submitted in response to the Additional Documentation Request
- Invalid/Incomplete/Missing proof of delivery.

Noridian, the Jurisdiction D Durable Medical Equipment Medicare Administrative Contractor (DME MAC), recently released their quarterly results of its prepayment review for L0648 and L0650.

Between January 2016 and April 2016 Noridian reviewed 306 claims involving the L0648 and 227 claims were denied; resulting in a 74% error/denial rate. The review of claims involving the L0650 had a denial/error rate of 82%; 429 of 520 reviewed claims were denied.

Some of the top denial reasons listed included:

- Invalid/Missing/Incomplete detailed written orders.
- Documentation was not submitted in response to the Additional Documentation Request
- Invalid/Incomplete/Missing proof of delivery.

Based on these denial/error rates Noridian will continue with their prepayment review of all four codes.

Questions? Contact Devon Bernard at dbernard@AOPAnet.org or Joe McTernan at jmcternan@AOPAnet.org

RAC Audits Placed on Hiatus Again

The Centers for Medicare and Medicaid Services have notified the four existing RAC contractors that as a result of the upcoming award of new RAC contracts, current RAC audit activity will be placed on hiatus to allow the RACs to complete their open audits prior to the completion of their contracts. CMS has provided the following dates to the RAC contractors regarding current audits.

- May 16, 2016 - the last day that a Recovery Auditor could send Additional Documentation Request (ADR) letters or semi-automated notification letters.
- July 29, 2016 - the last day that a Recovery Auditor may send notification of an improper payment to providers. This includes sending a review results letter or no findings letter, and/or providing a portal notification to each provider.
- August 28, 2016 - Recovery Auditors will complete all discussion periods that are in process by this date. Recovery Auditors continue to be required to hold claims for 30 days, starting with the date of the improper payment notification (via letter or portal) to the provider, to allow for discussion period requests.
- October 1, 2016 - the last day a Recovery Auditor may send claim adjustment files to the MACs.

While this is good news for O&P providers in the short term, it is not a signal that the RACs are going away any time soon. It is simply a pause to allow for a smooth transition to new RAC contractors, including the single, national RAC contractor that will focus on claims for DMEPOS, Home Health, and Hospice services. While this announcement may result in a temporary slowdown of RAC activity, it is important to remember that claims that are submitted today may be selected for audit by RAC contractors in the future.

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

Save \$30 off the 2016 Illustrated Guide

Let's celebrate 30 years of the easy-to-use reference manual, AOPA's Illustrated Guide, with a \$30 off sale! The guide covers orthotics, prosthetics, and shoes, and includes the official HCPCS for the official Medicare descriptor and an illustration of each code. And now it is \$30 off until August 30th!

[Purchase your Illustrated Guide today!](#)



August 10 Webinar: Supplier Standards – Are You Compliant?

August 2016

10

1:00 PM Eastern

Cost

- \$99 for AOPA Members/
- \$199 for Non-Members
- (Members use promo code 'member')
- **Date**
- Wed, August 10
- 1:00 PM EST

Join AOPA for a one hour webinar and earn 1.5 CEs, while learning everything you need to know about appeals. During this webinar, participants will:

- Do you have a proper contract with your vendors on file?
- Are you required to have a surety bond?
- Can you use contracted employees?
- What happens if you're non-compliant with the Medicare Supplier Standards?

REGISTER

Contact Your Representative to Support the Medicare O&P Improvement Act

We need you help in urging support for S. 829/HR 1530: The Medicare O&P Improvements Act. This bi-partisan bill that provides common sense solutions to reduce fraud. AOPA Executive Director Tom Fise has been meeting with legislators on the Hill to urge their support, but they need to hear from constituents. [Read the full bill here.](#)

These are some of the provisions included in the bill:

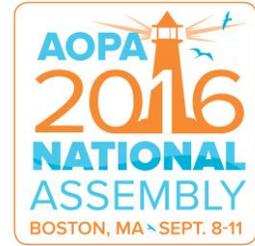
- Requires Medicare to reimburse only those orthotic and prosthetic providers who are licensed (in states that require licensure) or accredited (applicable in all non-licensure states) to provide orthoses and prostheses
- Recognizes the value of the Orthotist's or Prosthetist's Notes in the Medical record;
- Assures due process rights to improve proper Administrative Law Judge (ALJ) time frames;
- Reinstates and clarifies the statutory definition of "Minimal Self Adjustment" for Off-the-Shelf Orthoses to protect Medicare beneficiaries;
- Distinguishes Orthotists and Prosthetists from Suppliers of Durable Medical Equipment (DME);
- Requires greater transparency and granularity in CMS data availability about audit outcomes.

[Send a letter to Congress showing your support.](#)

Book Your Early Bird Registration by August 1st!

99th AOPA National Assembly – Sept. 8-11 – Boston
Save \$100 by Booking By August 1st!

Register today for the country's oldest and largest meeting for orthotic, prosthetic and pedorthic professionals. Take advantage of five dedicated education tracks, providing the most relevant education for orthotists, prosthetists, technicians, pedorthists and business managers.



Featured Programming ~ Role of Patient Self-Management in Improving Quality of Care and Outcomes (C 2)

This symposium brings together a group of national experts on limb loss and self-management. They will present ways prosthetists can meet the challenge of providing patient and family centered care that promotes peer support and self-management to empower patients to take charge of their own recovery.

Meet the Panel



Scott D. Cummings, PT, CPO, FAAOP, is Branch Manager at Next Step Bionics & Prosthetics. Scott specializes in pediatric and geriatric prosthetics as well as pediatric orthotics with an emphasis in scoliosis management. He is also the Next Step Compliance Officer and Resident/Intern Director.



George Gondo, MA, is the Director of Research and Grants at the Amputee Coalition. As Director of Research and Grants he leads the Coalition's overall work in relation to scientific strategy and direction with a particular focus on research, innovation, evidenced-based practice, quality improvement, program development and evaluation, and professional leadership.



Danielle Melton, MD, is board certified in Physical Medicine and Rehabilitation and is the Director of the Amputee Program at Memorial Hermann-The Institute for Rehabilitation and Research (TIRR). She is also an Assistant Professor in the Department of Orthopedic Surgery at the University of Texas Medical School.



Stephen Wegener, PhD, serves as director of Division of Rehab Psychology and Neuropsychology in the Department of PM&R at Johns Hopkins. He is an associate professor of PM&R at the Johns Hopkins University School of Medicine and associate professor of health policy and management at the Bloomberg School of Public Health.

[Learn More or Register Now](#)

AOPA is still accepting exhibit applications. Sign up by **Friday, July 29th** to be included in the show's *Final Program of Activities* and the *Assembly Mobile APP*. If you are looking to introduce your products and services to an expanded group of decision makers—this is the meeting for you! The National Assembly is the country's oldest and largest meeting for the orthotics, prosthetics and pedorthics profession. [Learn more](#) or contact Kelly O'Neill koneill@aopanet.org or (571) 431-0852.

Join the Coding & Billing Experts in Las Vegas!

The AOPA Coding & Billing Experts are Coming to Las Vegas!

AOPA's next Coding & Billing Seminar will be in Las Vegas! Don't miss this opportunity to get the most up-to-date information to advance your O&P practitioners' and billing staff's coding knowledge.

Join your Colleagues November 14-15 in Las Vegas!

At this seminar you will:

- Receive up-to-date information on Prior Authorization and other Hot Topics
- Ensure your Proof of Delivery meets Medicare Requirements
- Learn how to assess risk areas in your practice
- Learn successful appeal strategies and hints to avoid claim denials
- Practice coding complex devices, including repairs and adjustment
- Attend break-out sessions for practitioners and office staff
- Earn 14 CEs



Where else can you get two jam-packed days of reliable, valuable O&P coding and billing information? [Learn more.](#)

Register Now

Upcoming AOPA Events

- | | |
|----------------------|---|
| August 1, 2016 | <i>Early Bird Registration Deadline for 2016 National Assembly</i>
Boston, MA
Learn more and register here |
| August 10, 2016 | <i>Supplier Standards: Are You Compliant?</i>
AOPA Webinar
Learn more and register here |
| September 8-11, 2016 | <i>AOPA National Assembly</i>
Boston, MA
Learn more and register here |