

2nd Quarter 2015 Staff Report

To: AOPA Board of Directors

From: Thomas F. Fise, Executive Director

Date: June 22, 2015

Subject: Much afoot for O&P as headlined by the May 1st Congressional Briefing in the Rayburn Office Building keynoted by Adrianne Haslet-Davis generating further CNN exposure; advances in the legislative arena with 26 Members of Congress signing on to a letter to HHS Secretary Burwell authored by Reps. Duckworth and Costello; plus promising research advances that could enhance quality patient care and equitable provider reimbursements. These were just some of the activities that made the 2nd Quarter on balance a positive one for O&P in many important ways. And then, there is the 6 to 3 Supreme Court Decision on upholding subsidy provisions of the Affordable Care Act. Read on for more details about how your investment in AOPA pays dividends!

King vs. Burwell Challenge Denied by Supreme Court

Much will be written about the Supreme Court's 6 to 3 decision basically denying the challenge of *King v. Burwell* to the subsidy provisions in the Affordable Care Act. For O&P and other health care providers, the prospect of a substantial change in how patients are insured, and how they pay for their insurance could have many new challenges if the Court had upheld the plaintiff's challenge.

Synopsis of the case: The petitioners challenged an Internal Revenue Service (IRS) interpretation of the Affordable Care Act's (ACA's) provisions governing eligibility of uninsured individuals for health insurance premium tax credit subsidies for the purchase of qualified health plan (QHP) coverage on Health Insurance Exchanges. Specifically, the petitioners asserted that **the ACA** <u>only</u> **makes premium tax credit subsidies available to individuals residing <u>in states that established their own State-Based Exchanges</u>—while individuals residing in states that rely on the Centers for Medicare and Medicaid Services (CMS) to operate Federally-Facilitated Exchanges (FFEs) on the State's behalf would not be eligible for premium tax credit subsidies.**

Overall, CMS operates FFEs in 34 states that together account for a significant portion of the enrolled population. Reliable estimates are that if the Court had sided with the petitioners in *King v. Burwell* and invalidated premium tax credit subsidies in states with FFEs, roughly 7.5 million individuals would have lost tax credit subsidies and as many as 10 million fewer people would have obtained individual market health insurance coverage through the Health Insurance Exchanges.

Legislative Update

O&P Congressional Developments

The O&P Congressional Briefing May 1st co-sponsored by the Amputee Coalition (AC) and AOPA set the stage for further engaging and educating Members of Congress on the challenges faced by O&P patients and providers. Adrianne Haslet-Davis, Boston Marathon bombing survivor and AC patient representative, Peggy Chenoweth, who is also social media director at the Amputee Coalition, delivered powerful messages on how vital O&P care is in their own mobility after traumatic injury. Ms. Haslet Davis expanded on her experience in a subsequent CNN op-ed in which she especially noted the importance of bringing Congress into the loop on patient challenges.

Timing couldn't have been better to further stimulate interest in the May 19th letter authored by Rep. Tammy Duckworth (D-IL) and Rep. Ryan Costello (R-PA) that resulted in 26 colleagues signing the letter that requested HHS Secretary Burwell to "identify and implement remedies" to correct Medicare policies that "jeopardize patient access to proper treatment and access to appropriately trained providers."

The Duckworth/Costello letter called attention to a previous 2014 letter from Sen. Grassley (R-IA) and Sen. Harkin (D-IA) which "expressed concern about the CMS attempt to negate Congress' narrow definition of the type of orthotics for which it made sense to competitively bid." The Grassley/Harkin letter pointed out that Congress clearly defined OTS orthotics as devices that can be used by the Medicare beneficiary with only "minimal self-adjustment for appropriate use and do not require expertise in trimming, bending, molding, assembling or customizing to fit to the individual."

Secretary Burwell was also taken to task for the fifteen year delay in issuing regulations implementing the Beneficiary Improvement and Protection Act of 2000 (BIPA) which among other things in BIPA 427, prohibited CMS from paying unlicensed providers or providers not accredited by ABC, BOC or organizations with similar training and education requirements. The letter requested a response, "outlining plans to publish at least a proposed rule," within 60 days.

Medicare Orthotics and Prosthetics Improvement Act of 2015 (S.829 and HR 1530)

The House version of the Medicare O&P Improvement Act of 2015 (HR 1530); was introduced on March 23, 2015 by Rep. Glenn Thompson (R-PA) and as of June 19, 2015 is being co-sponsored by Rep. Mike Thompson (D-CA), Rep. Peter King (R-NY), Rep. Steve Stivers (R-NY), Rep. Tammy Duckworth (D-IL) and Rep. Joyce Beatty (D-OH); with others soon to follow.

HR 1530 would require CMS to issue regulations under Section 427 of BIPA 2000, and it would further obligate CMS to implement the statutory directives approved in prior Congresses, namely: no payment to anyone who is not properly licensed in O&P in a state that has a license provision, and in states that have not enacted an O&P licensure statute, no payment under Medicare to any provider who does not meet the law's certification requirements.

The Senate version of the Medicare O&P Improvement Act of 2015 (S. 829) was introduced on March 23, 2015 by Sen. Charles Grassley (R-IA) and co-sponsored by Sen. Mark Warner (D-VA). It also addresses some of the more recent concerns of the O&P community; including RAC audits and the ever expanding definition of "minimal self adjustment" for off-the-shelf orthoses. While provisions of both bills differ slightly, these issues are dealt with in one or the other of the two bills:

- Recognizes the value of the Orthotist's or Prosthetist's Notes in the Medical record;
- Reinstates and strengthens the statutory definition of "Minimal Self Adjustment" for Off-the-Shelf Orthoses to protect Medicare beneficiaries;
- Distinguishes Orthotic and Prosthetic patient care providers from Suppliers of Durable Medical Equipment (DME);
- Requires greater transparency and granularity in CMS reporting DME and O&P separately on claims denials and appeal results; and
- Prohibits CMS or its contractors from recouping more than 50% of any overpayments in response to a RAC audit until an administrative law judge has rendered a decision.

Visit www.AOPAvotes.org and send a letter to your Senators and Representatives asking them to sponsor the Medicare O&P Improvement Act of 2015 (S. 829 and HR 1530). 1,316 individual AOPA members have sent 2,199 letters to 371 individual members of Congress asking for their support of the Medicare O&P Improvement Act of 2015.

The Medicare Audit Improvement Act of 2015 (HR 1526)

On March 23, 2015 Rep. Mark Meadows (R-NC) introduced the Medicare Audit Improvement Act of 2015 (HR 1526). This piece of legislation would require CMS to recognize the validity of the orthotist's and/or prosthetist's notes in determining the medical necessity of an item being provided to a Medicare beneficiary; and would officially and legislatively separate orthotics and prosthetics from durable medical equipment. The bill would also offer new relief by limiting CMS recoupment on a denied claim to no more than 50% of the claim until the ALJ determination is completed.

Visit www.AOPAvotes.org and send a letter to your Representative(s) asking them to co-sponsor the Medicare Audit Improvement Act of 2015 (HR 1526). At the moment 744 AOPA members have sent 862 letters to 289 individual members of Congress asking for their support of the Medicare Audit Improvement Act of 2015. This bill can be the solution to the age-old problem of treating DME and O&P as one-size fits all that has vexed O&P providers for years. Please add your name to the list. Just a few minutes are all you'll need to invest to help save your future.

AOPA Government Relations Update

2015 O&P PAC Supporters & Contributions

As a reminder, 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 directly to the O&P PAC in 2015. This list covers the period from January 1, 2015 through June 19, 2015. If we missed your name please accept our apologies, and any contributions made or received after June 19, 2015 will be published in the next quarterly staff report.

- George Breece
- Maynard Carkhuff
- James Fenton, CPO
- Rick Fleetwood, MPA
- Wendy Miller, BOCO, CDME
- Ted Muilenburg, CP
- Rick Stapleton, CPO
- Thomas Watson, CP
- James Young, CP, FAAOP
- Pamela Young
- Claudia Zacharias, MBA, CAE

As of June 19, 2015 the O&P PAC has contributed and supported the following members of Congress:

- Rep. Tammy Duckworth (D, IL 8th District), Member of the House Armed Services Committee and a current co-sponsor of HR 1530.
- Sen. Grassley (R-IA), Member of the Senate Finance Committee, Chair of the Senate Judiciary Committee and sponsor of S.829.
- Rep. Brett Guthrie (R, KY 2nd District), Member of the House Energy and Commerce Committee
- Rep. Ann Kuster (D, NH 2nd District), Member of the House Veterans' Affairs Committee
- Rep. Mark Meadows (R, NC 11th District) Original sponsor of HR 1526.
- Rep. James Renacci (R, OH 16th District), Member of the House Ways & Means Committee
- Rep. Dutch Ruppersberger (D, MD 2nd District) Member of the House Appropriations Committee
- Rep. Glenn Thompson (R, PA 5th District) Original sponsor of HR 1530
- Rep. Mike Thompson (D, CA 5th District) Member of the House Ways & Means Committee, and a co-sponsor of HR 1530

2015 AOPA National Assembly & The 8th Annual Wine Auction & Tasting

The 8th Annual Wine Tasting & Auction is scheduled to take place at 6:30 pm on Thursday, October 8th during the 2015 AOPA National Assembly. The Wine Tasting and Auction is both a fun event and plays the vital role of raising awareness of all of AOPA's Government Relations advocacy outreach programs. 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.

Coding and Reimbursement Update

AOPA's Take. Where You Go.....When You need to Know!

AOPA's blog site, <u>www.aopastake.org</u> continues to grow in popularity, with over 150 subscribers to date. *AOPA's Take* has proven to be a very useful tool in communicating important information relevant to the O&P community in a timely and efficient manner. Feedback from subscribers has been extremely positive. *AOPA's Take* is quickly becoming a "go to" resource for O&P practices. The goal for the next quarter will be to double the current number of subscriptions, hopefully reaching more than 300 subscribers.

Medicare Proposed Rule on Prior Authorization for Certain Prosthetic Items

CMS has not issued a final rule regarding the implementation of prior authorization for certain prosthetic services. AOPA submitted extensive comments on this proposed rule when it was released in 2014 and continues to monitor the Federal Register for the publication of a final rule relative to this issue. AOPA remains concerned about the potential impact prior authorization may have on the ability to deliver quality prostheses in a reasonable timeframe and will continue to follow this issue closely. AOPA will communicate any future developments to its members immediately.

<u>Medicare Proposed Rule on 2016 Inpatient Acute Hospital Payment Rates and Expansion of Post Acute Care Bundling Initiatives</u>

On April 30, 2015, CMS published a Proposed Rule regarding the 2016 Acute Hospital Inpatient PPS rates. The proposed rule also discussed the potential expansion of post acute care bundling initiatives. AOPA provided comments specific to the potential harm to both patients and providers if orthotic and prosthetic services were included in any post acute care bundled payment scenario. AOPA's comments focused on the significant differences between O&P and DME items, the relative high cost, low utilization of O&P devices in the inpatient setting, and the need for an extended clinical relationship between patients and their prosthetists as reasons why O&P should not be considered for inclusion in a post acute care bundling scenario. AOPA pointed out that two bills currently pending in the House of Representatives (H.R. 1458 and H.R. 2502) both contain provisions that specifically exclude O&P from post acute care bundling.

Medicare Proposed Rule on 2016 SNF PPS Rates

On April 20, 2015, CMS published a Proposed Rule regarding 2016 payment rates under the Skilled Nursing Facility PPS system. As part of this proposed rule, CMS asked for public comments regarding any HCPCS codes that should be added to the current list of codes excluded from the PPS payment system. AOPA submitted comments that requested the inclusion of HCPCS codes L5987 and L5969 in the list of excluded codes. Both of these codes are currently not on the excluded list and therefore must be billed to the SNF as opposed to billed directly to the DME MACs. These two codes meet the statutory requirement as low volume, high dollar items that cannot be reasonably expected to be paid for by the SNF. AOPA will monitor the Federal Register for publication of a final rule and will communicate the results to AOPA members

Off The Shelf Orthoses

AOPA and the O&P Alliance continues to have discussions with CMS, most recently on June 3rd with CMS Deputy Administrator and Director of Program Integrity Dr. Shantanu Agrawal, regarding the authority of CMS contractors to implement policy regarding the definition of custom fitted orthoses and who is qualified to fit them without following the notice and rulemaking process required by the Administrative Procedures Act. Attending the meeting were Charles H. Dankmeyer, CPO, Tom Fise, JD, Al Kritter, CPO, FAAOP and Peter Thomas, Esquire.

In a follow up communication AOPA provided the Dobson/DaVanzo research data that shows K2 patients provided K3 level prosthetics have more mobility and cost less over the long term.

As previously reported, On October 31, 2014, CMS released the final ESRD rule but decided not to implement <u>any</u> of the proposed changes relating to OTS orthotics including the definition of the term "minimal self adjustment" as it relates to the provision of OTS orthoses. In addition, CMS decided not to implement the provisions of the proposed rule that would prevent certified orthotic fitters and assistants, operating within their defined scope of practice, from providing custom fitted orthoses. Prior to the release of the final rule in which CMS elected not to finalize its proposed changes to define who can and cannot fit custom fitted orthoses, the DME MACs updated their Local Coverage Determinations and Policy articles for orthoses to reflect many of the changes that were included in the proposed rule.

AOPA believes that the actions of the DME MACs to implement policy changes based on a proposed rule that CMS specifically elected to not include OTS provisions in its final version is a clear violation of the rules laid out in the Administrative Procedure Act and AOPA will continue to press CMS on this issue.

OTS Orthoses and Competitive Bidding

On April 21, 2015, the Centers for Medicare and Medicaid Services (CMS) announced the product categories and Metropolitan Statistical Areas (MSAs) that will be included in the next round of DMEPOS Competitive Bidding, now being called Round 1 2017. While it appeared that off the shelf (OTS) orthoses were being considered for inclusion in competitive bidding, OTS orthoses were not among the eight product categories identified for inclusion in the Round 1 2017. While this is certainly a positive development, it does not mean that OTS orthoses will not be included in competitive bidding at some point. The descriptor changes that were implemented in 2014 to clearly distinguish OTS orthoses from custom fitted orthoses certainly indicate the intent of CMS to include OTS orthoses in competitive bidding at some point in the future.

AOPA will continue its ongoing discussion with CMS regarding its concern about the continued expansion of what are considered OTS orthoses through regulatory and policy-based channels rather than following the appropriate notice and rulemaking process required by the Administrative Procedure Act.

DME MACS Revise Proof of Delivery Requirements

On February 12, 2015, the DME MACs released a joint article that discussed the proper format for proof of delivery documentation to support Medicare claims. The joint publication indicated that medical reviewers have consistently seen a list of HCPCS codes and their descriptors used on proof of delivery documentation, especially for orthotic and prosthetic claims.

According to the DME MACs, this practice is not acceptable for proof of delivery purposes as it does not allow the medical reviewer to make a determination of what was billed and if it was coded correctly. The joint DME MAC publication provides the following recommendation for maintaining proper proof of delivery documentation:

"The preferred method is use of a brand name and model number, brand name and serial number or manufacturer name and part number to identify the product. If this type of information is not available for the product, suppliers may use a detailed narrative description of the item; however, it must contain sufficient descriptive information to allow a proper coding determination. This "narrative description" of the item is not the HCPCS code narrative."

AOPA believes that this represents yet another reimbursement hurdle for providers who are providing medically necessary O&P care to Medicare beneficiaries. The documentation of HCPCS codes and their complete descriptors has been acceptable proof of delivery for many years. The sudden change in policy appears to be inconsistent with what is in the Program Integrity Manual and other CMS policy documents. AOPA has communicated its concern regarding this policy change with the DME MACs and CMS.

New York State Reverses its One Limb Per Lifetime Policy Administratively – But Needs Legislative Blessing as Well!

An intensive, three month long advocacy effort by O&P professionals in New York State led to a significant victory through a policy reversal in the New York State Healthcare Exchange benchmark plan that limited coverage for artificial limbs to one prosthesis, per limb, per lifetime. In a letter dated May 17, 2015, Donna Frescatore, the Executive Director of the New York State Health Exchange indicated that the benchmark plan will be altered, effective January 1, 2016 to include coverage of the cost of repairs to and replacement of artificial limbs for both children and adults covered by the plan.

This reversal of an overly restrictive and unfair policy that limited coverage to one prosthesis per limb, per lifetime was the direct result of the tireless advocacy efforts of O&P practitioners in New York, who received direct support in their efforts by the Amputee Coalition and the National Association for the Advancement of Orthotics and Prosthetics, as well as broad support from industry groups such as AOPA and the O&P Alliance. The coalition that challenged this policy was extremely well organized and sent a very powerful message to lawmakers and policymakers in New York who had the authority to make this change, that beneficiaries must be treated fairly and have reasonable access to exchange based healthcare benefits that are required under the Affordable Care Act.

However, insurance industry muscle has further complicated what was thought to be a huge win for amputees. The legislative measure to implement the administrative decision has been held up in

Committee and New Yorkers are mounting a last ditch effort to pry it loose for a hoped for favorable vote and win for amputees.

ICD-10 Transition

AOPA published an article in the June, 2015 *O&P Almanac* that focused on the October 1, 2015 transition from ICD-9 diagnosis codes to ICD-10 diagnosis codes. The article outlined what the transition means to O&P facilities and what they must do to prepare for the transition. AOPA is also preparing a resource that will be available to AOPA members, allowing them to easily convert ICD-9 codes to ICD-10 codes.

AOPA Participation on DME MAC Advisory Councils

AOPA continues to actively participate on each of the four DME MAC Advisory Councils. These groups meet on a regular basis with representatives of the four DME MACs to discuss provider issues. AOPA has been able to create and maintain open lines of communication with Medicare contractors as a result of participation on the advisory councils.

Research Lighting the Torch for O&P's Future

AOPA's growing research agenda took a leap forward with the creation of Prosthetics 2020 earlier this year designed to pursue outcomes research in advanced prosthetic technologies and in anticipation of CMS and other payers moving to value based payment policies. The recent history of attrition in payments for prosthetics cannot be sustained. Key objectives include justifying and defending prosthetic reimbursements from further attrition, and deterioration in quality of patient care options, as well as building a strong value proposition for new, advanced technologies as being better for patients and delivering cost-savings to payers.

The first meeting of the Medical Advisory Board (MAB), June 11th at AOPA headquarters started laying that foundation. The MAB consists of three physicians, as well as a biomechnical engineer, all representing major education and health institutions. Thus far, five companies (Endolite, Freedom Innovations, Hanger, Össur and Ottobock) plus AOPA have committed ongoing financial support for the MAB and research needs and advocacy work yet to be identified. All AOPA members have been invited to participate with their financial support either as individual companies or as part of a consortium.

It is hoped a similar initiative can be launched in the orthotics field using Prosthetics 2020 as the model.

AOPA with assistance from the Center for Orthotics & Prosthetics Learning/Evidence Based Practice issued Requests for Proposals in the first quarter of 2015 for systematic reviews, comparative effectiveness studies, and pilot research projects. Three systematic reviews and three pilot research projects will be funded by AOPA based on COPL Board recommendations and two additional projects will be funded.

The Systematic Literature Review grants awarded are listed below:

Jason Highsmith, PT, PhD, CP, FAAOP, University of South Florida, "Cost Efficacy of Transtibial Interventions"

Jason Kahle, MSMS, CPO, FAAOP, Prosthetic Design and Research, "Established Treatment Guidelines to Determine Post Amputation Functional Performance Level and Develop a Prosthetic Candidacy Treatment Algorithm"

Michael Dillon, PhD, La Trobe University, Australia, "Evaluating Outcomes of Dysvascular Partial Foot and Transtibial Amputation: A Systematic Review and Development of Shared Decision Making Resources"

The Pilot Grants awarded are listed below:

Jason Highsmith, PT, PhD, CP, FAAOP, University of South Florida, "Concurrent Validation of the Continuous Scale Physical Functional Performance Test (CS PFP-10) in Transfemoral Amputees" Fan Gao, PhD, UT Southwestern Medical Center at Dallas, "Does Vacuum Assisted Socket System Improve Knee Proprioception and Dynamic Balance in Transtibial Amputees? Jason Kahle, MSMS, CPO, FAAOP, University of South Florida, "Transfemoral interfaces with vacuum assisted suspension comparison of biomechanics using the CAREn: Ischial containment versus brimless"

The two additional projects funded is listed below:

Kenton Kaufman, PhD, PE, Mayo Clinic, "Risk factors and costs associated with accidental falls among adults with above-knee amputations: a populations-based study."

Up to \$35,000 in funding was approved for participation in the annual meeting and related activities of the American Medical Surgeons of the US (AMSUS)

The AOPA Board also reaffirmed \$40,000 in funding for the Patient Registry Project being developed in collaboration with the American Joint Replacement Registry and up to \$200,000 to be applied to a data use proposal AOPA will file requesting from CMS updated Medicare claims data from 2011-2014 and Part D prescription claims information for expanded and updated research into the cost effectiveness of timely O&P intervention and patient outcomes, continuing in the pathway of the Dobson/DaVanzo report and the Mobility Saves Initiative.

AOPAversity Educational Events

Mastering Medicare Webinars

In August of 2014 the ever popular monthly Audio Conferences were converted into webinars to help you get the most out of your learning experience. All Webinars begin at 1:00 PM Eastern on the second Wednesday of each month. The Webinars are \$99 each for members and \$199 for non-members. Members can sign up for the entire 2015 series for only \$990 and get two free. Sign up at www.AOPAnet.org. Mid-year signups for the entire series receive a recorded version of sessions missed.

The webinars are a great way to boost employee morale by providing a monthly staff education event and needed education for CE Credits.*

The Remaining 2015 Schedule

July 8 Who's on First? Medicare as a Secondary Payer

August 12 OTS vs. Custom Fit: The True Story
September 9 Prior Authorization, How Does it Work
Understanding the LSO/TLSO Policy

November 11 How to Make a Good Impression: Marketing Yourself to Your Referrals

December 9 Bringing in the New Year: New Codes and Changes for 2016

AOPA Essential Coding & Billing Seminar

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. The registration rate is \$525 per attendee for members and \$725 for non-members. For additional attendees from the same office, a discount is offered: \$475 for members and \$675 for non-members. The first two seminars in 2015 were held in Savannah, GA and Seattle, WA and were both well attended. The remaining seminars scheduled for 2015 are below:

- 1. Hampton Inn Philadelphia Center City-Convention Center | July 13-14 | Philadelphia, PA
- 2. The Flamingo | November 9-10 | Las Vegas, NV

Learn more at bit.ly/2015billing

You Won't Want to Miss – San Antonio, October 7-10, 2015!

Register today for the 98th Annual AOPA National Assembly – the country's oldest and largest meeting for orthotics, prosthetics and pedorthics to be held October 7-10 in San Antonio, Texas.

- Earn over 35 CE Credits
- Five Concurrent Education Tracks for Orthotists, Prosthetists, Technicians, Pedorthists and Business Managers
- The country's oldest and largest exhibit hall packed full of every device, service, tool and product you will ever need.
- Engaging Networking events
- Top-Notch Speakers from around the world.
- Hands on 3-D Printing Workshop

A copy of the Preliminary Program is enclosed. AOPA is honored to have significant participation from the Center for Intrepid Medical Center located at the Brookfield Army base in San Antonio.

If you are a business manager, practitioner or technician, you won't want to miss this Assembly. Partake in sessions on Documentation, Marketing, Expanding/Growing your Business, Compliance, Audits and Appeals, DME MAC Updates, Business Valuation, Coding and Billing, and Dealing with Denials. Business Managers of all levels of seniority will learn and grow at these sessions:

- Documentation Create Audit-Proof Patient Charts
- Growing Your O&P Practice By Using the Techniques of "Big Data" Analysis
- TED Talks
- Compliance Update: Best Business Practices and How to Comply with Your Standards
- Make Your Online O&P Presence Unforgettable... in Every Way
- Control Your Marketing Message by Controlling the Medium (B4B)
- Managers of HealthCare are not Trained to Succeed in Business
- Lessons Learned Audits and Appeals
- DME MAC Medicare Update Session (B6)
- Business Valuation & The Exit Planning Process
- How to Become Invincible to Lawsuits and Save Thousands in Taxes

- Safely Implementing Video and Photography into Your Practice
- Coding and Reimbursement
- 2013-2014 CERT Errors and Medicare Documentation Requirements
- Identification of Four Common Clinical Documentation Errors by Practitioners Leading to Billing Claim Denials

ABC and BOC have awarded 35.5 and 37.5 Scientific CE Credits for this program. Clinicians will enjoy more symposia style presentations from physicians, research scientists, physical therapists, athletic trainers, educations and top practitioners.

Be sure to participate in our fun special events taking place throughout the show

San Antonio Welcome Reception – Texas Style!

Wednesday, October 7 at 5:15 – 7:15 PM—DON'T MISS THE FUN OPENING RECEPTION as exhibitors greet you—Texas Style. During the reception exhibitors will compete to show their Texas Pride with costume, props and entertainment. Be sure to use the voting ballot you receive with your meeting badge to give three lucky exhibitors bragging rights. Texas style refreshments will be served and you will have the first opportunity to "Ride the Bull," or to get your photo taken at the "Alamo." The Welcome Reception is included in your full conference registration.

O&P PAC Challenge--NEW

Taking a page from the fun and memorable ALS ice bucket challenge, the Assembly committee has created an unforgettable and entertaining way to help raise awareness and money for the O&P PAC. Be on the lookout as your peers challenge you to either ride the mechanical bull or make a donation to the O&P PAC. Official rules will be posted online. All riders will be required to sign a waiver.

Technical Fabrication Contest--NEW

This year's technical fabrication contest has a new twist, instead of entering your fabricated device into a contest, this year's contest will be a timed event on the exhibit hall floor. Participants will properly assemble an articulating AFO joint. Win Cash and Bragging rights! Full details, rules and competition times to be announced. Registration for the technical fabrication contest is done through your National Assembly registration. If you have all ready registered for the Assembly and were not able to register for the Technical Fabrication Contest, you can contact Ryan Gleeson at rgleeson@aopanet.org.

Happy Hour Reception

Thursday, October 8 at 5:15 – 6:30 PM

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. The Happy Hour reception is included in your full conference registration.

<u>Join us at Topgolf—The Ultimate in Golf, Games, Food and Fun For All--NEW</u> Friday, October 9 at 6:30 – 9:30 PM

Topgolf is the premier golf entertainment complex where the competition of sport meets your favorite local hangout. This event promises to be great fun for golfers and non-golfers alike. Come join us in supporting two great causes, AOPA's Capitol Connection and OPAF. Strengthen OPAF's efforts and the

legislative, research and education efforts of the Capitol Connection to further O&P policy by challenging yourself, colleagues, customers, and family to a new kind of golf experience that combines competition with entertainment. Players hit micro-chipped golf balls at targets on an outfield. Just picture a larger-than-life-sized outdoor dartboard – but for golf. And for a little friendly rivalry, the high-tech balls instantly score each shot's accuracy and distance. Tickets are \$125 each and include:

- Lifetime membership to any Topgolf
- Club rental
- Transportation via luxury motor coach
- Awards program with new premier prizes for winners
- · Great food
- Open bar and non-alcoholic beverages

Telling Our Story – Communications!

Mobility Saves Updates

The Mobility Saves public relations campaign has moved forward spreading the word that Mobility Saves lives and money. The www.MobilitySaves.com website continues to serve as a resource for O&P practitioners, other medical providers, payers, and patients to learn about the cost-effectiveness of O&P and see examples of lives improved by O&P. The website is continuously updated with new research as it becomes available, as well as other relevant news. (See the Regulatory/Legislative Policy section for information about AOPA's recent Congressional briefing on Mobility Saves).

Mobility Saves is growing on social media, with over 7,000 likes on Facebook at (like us at www.facebook.com/mobilitysaves), 959 Twitter Followers (www.twitter.com/MobilitySaves), and 115 connections on LinkedIn (www.linkedin.com/company/mobility-saves).

Mobility Saves continues its collaboration with the Amputee Coalition that promotes Mobility Saves though social media, its monthly e-newsletter *Limbline*, and bi-monthly print magazine *inMotion*.

The contest for orthotic and prosthetic users to submit video testimonials continues. O&P users have begun submitting testimonials for a grand prize of \$500, a 2nd prize of \$250, and all entrants receive a tshirt. Please see details of the contest at bit.ly/MobilitySavesContest.

O&P Almanac

The *O&P Almanac* continues to be the go-to O&P magazine, featuring hot topics that appeal to O&P professionals on both the clinical and business side. July's issue featured Extreme Summer Sports, with August featuring amputees Hugh Herr and Adrianne Haslet-Davis's partnership. September's feature story will be on Pediatric Care.

The *O&P Almanac's* April issue explored "Self-Evaluation: How does your facility compare when it comes to patient assessments, fabrication, and more?" May featured "Children and Obesity: How orthotists adjust treatments to ensure optimal outcomes for a number of pathologies." June explored "Trends in Central Fabrication," and also included "Leadership Series: Partnering with Hospitals."

Membership

Welcome New Members

AOPA welcomes the following new patient care facility members this quarter: Innovative Prosthetic & Orthotic of Denver CO; Shamrock Prosthetics of Athens GA; Active Prosthetics & Orthotics of San

Antonio, TX; Surgi-Care Inc., Waltham MA; Pride Rehabilitative Solutions, Marcy NY; Presque Isle Orthopedic Laboratory Inc, Erie, PA; Luke Prosthetics, Findlay, OH; Sound Limbs, Lewiston, ME and Advanced Prosthetic Services, Searcy, AR.

New supplier members joining AOPA this quarter are: LegWorks Inc., Tornoto, Ontario, Canada; SOLS, New York, NY; Pinnacle Prosthetic Labs, Damascus MD; and Makstride Prosthetics, St. George UT.

2014 Operating Performance and Compensation Survey

AOPA's Operating Performance and Compensation Survey Working Group met this quarter to refine the annual survey instrument mailed to members May 1. Members are encouraged to participate in the benchmarking surveys (FREE) to assist in developing specific strategies to gauge and improve the health of their O&P business. The survey also helps AOPA develop a more accurate picture of the financial trends in the industry.

As incentive for participating in 2015, member participants receive **FREE** customized Company Performance Report, comparing their organization with others of similar size and location. (*A private consultant would charge hundreds of dollars for such a report.*) **FREE** copies of the two published reports: 2015 Operating Performance Report and 2015 Compensation Report – valued at \$570 and **FREE** Mastering Medicare Webcast series – a \$693 value. CE credits (13.5) are also available when scoring 80% or higher on the webcast quizzes.

Final 2015 reports are expected to be published late summer/early fall. Preorder your copies of the 2015 reports at https://www.aopanetonline.org/store. Member: Electronic Version \$185, Hard copy \$285; Nonmember: Electronic Version \$325; Hard copy \$425.

AOPA's Bookstore

Everybody likes saving money. Did you know that you have discount coupons for products in AOPA's bookstore? AOPA's 2015 calendar mailed to members in January has discount coupons for each month on the inside back cover. Here are featured products in the coming months: July, September and December 10% off any bookstore item of your Choice; August Get Your Free San Antonio Visitors Guide; October 15% off any cash and carry bookstore item at the Assembly, and November 25% of the Electronic version of the 2015 Operating Performance and Compensation Reports. Use the promo code "calendar" to receive the online discounts.

Almanac Quizzes. Over 750 Almanac readers submitted quizzes for the Compliance Corner and Reimbursement Page articles in the second quarter. Each quiz scoring over 80% was worth 2 CE credits with ABC and BOC. Participation is FREE for members and nonmembers. More information is here: http://www.aopanet.org/publications/op-almanac-magazine/quiz-archive/.

And Finally

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

Sincerely,

Thomas F. Fise, JD Executive Director

MB + Ju