



American Orthotic & Prosthetic Association

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AOPA In Advance SmartBrief

Breaking News

September 10, 2015

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Jurisdiction B DME MAC Contract Awarded to CGS Administrators, LLC

On September 4, 2015, the Centers for Medicare & Medicaid Services (CMS) announced that the contract to serve as the Jurisdiction B DME MAC has been awarded to CGS Administrators, LLC. The Jurisdiction B DME MAC processes Medicare claims for the states of Illinois, Indiana, Kentucky, Michigan, Minnesota, Ohio, and Wisconsin. CGS currently serves as the Jurisdiction C DME MAC. The Jurisdiction B contract award puts both Jurisdiction B and Jurisdiction C under the CGS umbrella until at least the expiration of the Jurisdiction C contract in December 2017.

While the effective date of the contract award is September 7, 2015, CMS has announced that it will oversee the transfer of DME MAC work from the former contractor, National Government Services (NGS), to CGS over the next several months and anticipates that CGS will begin processing claims in late February of 2016. Until further notice, DMEPOS suppliers should continue to submit claims to NGS through current channels.

It is not clear what, if any impact, the transition of contractor responsibility for Jurisdiction B, from NGS to CGS, will have on the recently released draft LCD and Policy Article for lower limb prostheses. AOPA will be following the transition closely and will provide any further updates as they become available.

A fact sheet regarding the transition is available on the CMS website at:

<https://www.cms.gov/Medicare/Medicare-Contracting/Medicare-Administrative-Contractors/Downloads/Award-Background-DME-B-Sept-2015.pdf>

Questions regarding the contract award may be directed to Joe McTernan at jmcternan@aopanet.org or Devon Bernard at dbernard@aopanet.org.

Get ICD-10 Compliance Ready

There is less than thirty days remaining until the October 1, 2015 deadline, when the nation switches from ICD-9 to ICD-10 coding for medical diagnoses and inpatient hospital procedures. To help ensure a smooth transition for you and your staff AOPA is providing an ICD-10 conversion tool to AOPA members. This free membership benefit allows you to quickly find a corresponding ICD-10 code(s) simply by typing in any ICD-9 code. Access the [conversion tool](#) now!

Here are some quick reminders and compliance tips about the ICD-10 conversion:

- 1) The use of an ICD-10 code over an ICD-9 code will be based on your date of service. Any claim for an item/service with a date of service of October 1, 2015 and after must include the appropriate ICD-10 code. Any claim for an item/service with a date of service of September 30, 2015 and prior may still be submitted with the ICD-9 code.

- 2) The ICD-10 code that is reported on your claim must match the one assigned by the referring/ordering physician and is supported by their documentation. This includes the indication of whether or not the service being provided by you is part of an initial encounter, a subsequent encounter or a sequel. You must not change or report a different ICD-10 code than the one that is provided to you.

- 2) Be sure to review future copies of the medical policies to see how the transition to ICD-10 may affect each policy. Below are some policies and links that are directly affected by the transition to ICD-10 codes, or those policies which require the use of specific diagnoses codes:
 - [Future AFO/KAFO policy](#)
 - [Future External Breast Protheses Policy](#)
 - [Knee Orthoses Policy](#)
 - [Therapeutic Shoe Policy](#)

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

Read the September Issue of the *O&P Almanac* Online

LCD Pushback | Page 24

AOPA and the O&P Alliance swiftly respond with letter to HHS detailing grave concerns. [Read More](#)

Cover Story: High-Touch for High-Impact O&P | Page 30

Determining patients' pre-and postamputation activity levels and goals is vital to creating an effective treatment plan. [Read More](#)

Leadership Series: A Place in the Consolidation Continuum? | Page 38

Experts weigh in on the future of independent O&P facilities amid evolving economics. [Read More](#)



Support O&P with this Year's Wine Auction



During the 2015 National Assembly in San Antonio, AOPA will be hosting the 8th Annual Wine Tasting & Auction. Join the fun, the good cause, and add to the continued success of the Wine Tasting & Auction by donating something special today! Don't want to part with your wine? We welcome other items of interest, such as jewelry, wine glasses, artwork, cigars, craft beer, other spirits, etc. You may also make a monetary contribution (from a personal or business account) and one of our personal shoppers will make a purchase on your behalf, and our shoppers do take suggestions!

[Please consider donating today! The donation form is available here.](#)



Thomas Jefferson said: "**Good wine is a necessity of life for me.**" and you are a necessity for this event. We cannot make it happen without your help! This exciting event provides attendees with a unique opportunity to mingle, network, learn about and taste a variety of wines, but most importantly raise awareness of and funds for AOPA's Government Relations outreach.

Your special donations are what make this event unique and successful. Your attendance is what makes it fun! At this time we would like to thank the following individuals for their generous donations to the 8th Annual Wine Tasting & Auction:

- Rick Fleetwood
- Joe Martin

Thank you in advance and we look forward to seeing you at the 2015 National Assembly and the 8th Annual Wine Tasting & Auction.

How to Thrive through the Coding & Regulatory Maze in 2016



How will you work through the Coding and Regulatory Maze in 2016 and beyond? How about through quality education and concrete knowledge you will only find at the AOPA National Assembly, featuring the following:

Documentation—Create Audit Proof Patient Charts

Learn to prepare documentation in a way that will lessen the impact of audits down the road.

Lessons Learned – Audits and Appeals

Review examples of both good and bad documentation and understand how it can mean the difference between a paid claim and a denied claim.

2015 Compliance Update: Best Business Practices and How to Comply with Your Standards

Learn best business practices and ways to help your practice be compliant with the standards you're required to follow.

DME MAC Medicare Update Session

Representatives from the four DME MACs will outline recent Medicare updates and changes to the Medicare program that affect you. There will be time for questions at the end of the session.

Coding and Reimbursement

Learn the principles that govern Medicare coding and reimbursement, including the difference between Local Coverage Determinations and Policy Articles, common coding errors and omissions, and strategies to maximize Medicare reimbursement without sacrificing Medicare compliance.

2013-2014 CERT Errors and Medicare Documentation Requirements

A Medicare CERT Coordinator will discuss the most frequent documentation errors identified in an audit. Learn the applicable Medicare guidelines associated with the errors and receive tips on best practices to avoid and decrease repetitive errors on future claims.

Identification of Four Common Clinical Documentation Errors by Practitioners Leading to Billing Claim Denials

Learn documentation techniques on how to gather and format correct information during patient interaction. Documentation from 48 real cases, involved in audits by Medicare, will be reviewed.

Upcoming AOPA Events

- September 30, 2015 Last day to Register Online for the 2015 National Assembly
[Learn more or register online here](#)
- October 7-10, 2015 *AOPA 2015 National Assembly*
San Antonio, TX
[Learn more or register online here](#)
- October 14, 2015 *Understanding the LSO/ TLSO Policy*
Webinar Conference
[Learn more or register online here](#)