

Overview of AOPA Action Plan on LCD Publication (and summary of actions taken in pursuing this plan)*

- (1) AOPA Coding & Reimbursement Committee will be meeting in our Office on August 3 (Charlie and Jim plan to attend). One aspect of our Prosthetics 2020 strategy has been to look at re-structuring the coding, eliminating some codes and revaluing others. The DME MACs have jumped in with their own views on consolidating codes (with no upgrades, and some confusion about payment amounts). ***The CRC contributed magnificently to the AOPA comments. It is clear that Prosthetics 2020 will be the lens through which we develop a consolidated approach to deliver a proposal vis-à-vis the LCD, Prior Authorization that is evidence-based, improved patient quality and value-based in nature. The LCD Component is Complete!***
- (2) We will need to look at accelerating Prosthetics 2020 at least on: (a) assuring that MAB members are prepared to be spokespersons for our positions; (b) Since some consolidation and re-valuing of codes was part of the near term Prosthetics 2020 plan, invite Hanger folks (Al, Mitch, Phil or others) have ideas for where we might want to go under Prosthetic 2020, we ought to try to ‘hothouse’ those and bring them into a framework that ideally could be factored in with 8/3 AOPA Coding Committee as an alternative that we proffer in our comments (even if there are unresolved questions that need a bit more work—better to counter with something close during the comment period); (c) consider data on K2/K3 for appropriate engagement. ***AOPA engaged the Prosthetics 2020 MAB as spokespersons on the LCD, and in our two CMS meetings we promised an ongoing engagement, particularly via a pilot project via the CMS Innovation Center, so Prosthetics 2020 is integral to moving beyond the LCD. Complete as to LCD, but Much Work Ahead for Prosthetics 2020.***
- (3) I have indicated to our folks at Alston & Bird that AOPA will likely want to have a meeting at very senior level of CMS (whether Laurence Wilson, Sean Cavanagh or Andy Slavitt—proper level for conversation still to be decided) and that we will want Tom Scully’s involvement in prepping and conveying our message. ***AOPA outreach resulted in an August 11 meeting with CMS Deputy Administrator Sean Cavanaugh, as well as the August 26 Meeting with Slavitt, Conway, Cavanaugh, Thurm, and Lewis in conjunction with the Amputee Rally on August 26. Completed as to LCD.***
- (4) We need to move swiftly to roll out the “glass ceiling” presentation, not only for the Mobility Saves website, but in the form of print and broadcast messaging for short-term run around the timing of any amputee demonstration/patient presence per below. ***The creative for the ‘glass ceiling’ message was completed, and both broadcast and print advertising messages appeared over the August 23-September 9 period. The messaging is evergreen, so that we have also accomplished the objective of message placement for ongoing use on the Mobility Saves website. Completed both as to LCD and for Mobility Saves longer-term messaging.***
- (5) AOPA’s Officers will consider whether this is the time to mount an active and visible patient presence around these issues, in light of concerns that patient care for Medicare beneficiaries will likely be delayed, and overall quality care diminished if the new Lower Extremity policy is adopted in current form. ***AOPA organized and executed the very successful Amputee Rally at HHS HQ. This event, coupled with the press conference both set up and promoted by AOPA’s media team, resulted in extraordinary media coverage. Energizing patients remains key, and having accomplished this will be important for future endeavors beyond the LCD.***

O&P Alliance partners provided financial contributions in support of the Amputee Rally. The Chairman of the Amputee Coalition participated in the Press Conference. Amputee rally/demonstration successfully completed.

- (6) We have prepared a preliminary plan to activate patients. Via our Mobility Saves Task Force, after our Exec Cte meeting on 7/21 AOPA staff will (a) prepare a few introductory slides on the LCD changes and patient impact, to be incorporated into a presentation at the Amputee Coalition meeting later this week; (b) a patient alert will be inserted onto the Mobility Saves homepage to take patients to a one-pager on the topic and a portal through which they can express their views which AOPA will translate into patient comments to be submitted to the DME MAC rulemaking. ***Ashlie White made the slide presentation and the Amputee Coalition meeting, and the patient alert on Mobility Saves lead to two patient messaging opportunities to the DME MACs. These, as well as the Amputee Rally assured channels for patient voices. These tasks completed for LCD.***
- (7) I will be consulting with our attorneys on the process being used to modify the LCD, to make sure all is proper. ***Legal input was secured and incorporated into AOPA's comments on the LCD. This task completed for LCD.***
- (8) AOPA will, most probably, want to activate all mechanisms for heavy responses of comments from O&P professionals and patients (similar to that used in the prior authorization and OTS Orthotics rulemakings last year). ***AOPA provided the initial mechanisms for both profession and patient communications via the AOPA Votes website within the first week after the LCD was released—these resulted in over 2,500 patient letters and 1,300 from the profession (all went to DME MACs + copies to each writer's two reps in the U.S. Senate and their House member—so nearly 4,000 communications in all through this channel, which followed the format of the 2014 Prior Authorization proposed rule). AOPA also joined with the Amputee Coalition for a patient card which was developed and made available through O&P facilities—a total of 1,138 cards were completed and submitted to the DME MACs. These efforts were successful, resulting in a very formidable and comprehensive rulemaking record for the LCD.***
- (9) WE already have had in preparation details comments on Medicare's Proof of Delivery rules, now incorporated into the draft LCD. We will have that ready for the recommended meeting with CMS hierarchy. ***AOPA generated a request to CMS' Dr. Shantanu Agrawal and Laurence Wilson accompanied by legal memoranda challenging the Proof of Delivery policy. This was delivered to the CMS officials separate from the LCD, but it was also attached to AOPA's LCD comments. This action step was successfully completed for the ALC***

*There may also be some possible overlaps in regard to the other major new rulemaking, the CMS Proposal for a Comprehensive Care for Joint Replacement (Knees and Hips). ***AOPA submitted on September 8 very substantive comments on CMS's CCJR proposal.***