AOPA 1st Quarter 2016 Staff Report

To: AOPA Membership
From: Thomas F. Fise, Executive Director
Date: April 10, 2016

Subject: Election year politics may appear to temper Washington activities but we’ve learned the hard way to be ready for another bombshell. The upcoming April 26-27th Policy Forum will offer the opportunity to build the relationships that can help forestall any catastrophic impact that harmful legislation or regulation may have on your patients and your business. Election years also provide the best opportunity for every O&P professional to participate in campaigns, get to know your legislators and encourage your staff and other colleagues to take an active role in hosting fundraisers, door to door canvassing and other opportunities to be a player on behalf of O&P.

Prosthetics 2020 Program on Solid Pathway

Prosthetics 2020 launched last year may be the most significant game changing, cutting edge undertaking the O&P community could possibly pursue in establishing the economic value proposition for O&P care. To ensure clinical efficacy a Medical Advisory Board (MAB) was created to provide the necessary clinical knowledge to oversee research development and communicate the findings to patients, providers and payers, including CMS. In addition to AOPA’s financial contribution, support thus far has come from six O&P companies including Endolite, Freedom Innovations, Hanger, Ossur, Ottobock, and WillowWood. AOPA’s president appointed a Steering Committee comprised of representatives from the stakeholders thus far to provide input to the MAB and develop the research and communication strategies.

The group felt it was important to communicate the project’s long term objective of creating an economic basis for the value of clinical care and the initial effort has focused on scheduling meetings with the Medical Directors of the DME MAC Jurisdictions and PDAC to also obtain their views on how that value can best be validated by what research criteria. The MAB’s four members, Michael Jaff, MD, DO, Kenton R. Kaufman, PhD, Paul F. Pasquina, MD and Douglas G. Smith, MD, along with members of the Steering Committee are now scheduling meetings with the Medical Directors. The first meeting was held February 29th with Robert D. Hoover, Jr., MD, MPH, FACP, Chief Medical Officer, Jurisdiction C in Nashville and Prosthetic 2020 representatives, Dr. Kaufman and Andreas Kannenberg, MD, PhD. In the conversation Dr. Hoover emphasized the need for evidence and that it be high quality evidence appearing in peer-reviewed suitable journals. Dr. Hoover commented that studies regarding function and secondary health conditions such as morbidity and mortality with both lab and fields studies of function would be of interest.

Steps are also being taken to engage a top health economics consulting firm to prepare an estimate of the economic impact of advanced prosthetics. The MAB and Steering Committee have reviewed proposals from Rand Corporation, Quorum and Covance, all highly regarded players in the field of healthcare economic, to
provide a recommendation to AOPA’s Board of Directors. A selection decision is expected to be announced in mid-April.

**Legislative Update**

**Legislative Update**
AOPA continues to champion the passage of the most comprehensive legislation aimed at resolving most of the problems facing O&P providers today (e.g. ALJ delays, proper recognition of your notes, the separation of O&P from DME, etc.). The Medicare O&P Improvement Act of 2015 (S. 829 and H.R. 1530). To double down and hedge our bets AOPA has also made sure that the key provisions of the Medicare O&P Improvement Act of 2015 are also found in several other pieces of legislation including but not limited to The Medicare Audit Improvement Act of 2015 (H.R. 1526), Protecting Access through Competitive-pricing Transition Act of 2015 (H.R. 4185). AOPA has also been very active in ensuring that key provisions of S. 829 and H.R. 1530 find their way into the influential Senate Finance Committee’s Audit & Appeals Fairness, Integrity, and Reforms in Medicare (AFIRM) Act of 2015 (S. 2368), which was approved and passed by the Senate Finance Committee in June 2015.

Currently the following Representatives & Senators have signed on in support of The Medicare O&P Improvement Act of 2015: Sen Grassley (R-IA), Sen. Warner (D-VA), Rep. Thompson (R-PA), Rep. Thompson (D-CA), Rep. Stivers (R-OH), Rep. King (R-NY), Rep. Duckworth (D-IL), Rep. Beatty (D-OH), Rep. Heck (R-NV) and Rep. Ruppersberger (D-MD). If you don’t see your Senator or Representative listed please contact them and ask them to sign on and show their support. Please contact us here at AOPA and we may provide you with some tools and information that may help you persuade your congressional representatives to join the O&P fight.

Lastly, AOPA and the attendees of the 2016 Policy Forum will be drafting a new piece of legislation, with the help of former Senator Bob Kerrey, which we hope will be introduced into the 114th session of Congress.

**O&P PAC Update**
The O&P PAC Update provides information on the activities of the O&P PAC, including the names of individuals who have made recent donations to the O&P PAC and the names of candidates the O&P PAC has supported. The O&P PAC, between January 1, 2016 and March 31, 2016, recently received donations from the following AOPA members: George Breece and Rick Fleetwood, MPA.

The purpose of the O&P PAC is to advocate for legislative or political interests at the federal level, which have an impact on the orthotic and prosthetic community. The O&P PAC achieves this goal by working closely with members of the House, Senate and other officials running for office to educate them about the issues, and help elect those individuals who support the orthotic and prosthetic community.

During the same timespan the O&P PAC made contributions to the following members of Congress: Rep. Tammy Duckworth (D-IL), Rep. Renee Ellmers (R-NC), Rep. Dutch Ruppersberger (D-MD), Rep. Gus Bilirakis (R-FL), and Sen. Brian Schatz (D-HI).

**Coding and Reimbursement Update**

**DME MAC Proof of Delivery Requirement Revised Per AOPA Recommendation**
As you may recall, last year the four Durable Medical Equipment Medicare Administrative Contractors (DME MACs) released a clarification on the type of information which must be included on a valid Proof of Delivery (POD). The DME MACs stated that the inclusion of the official L-code descriptor, which had been the accepted norm for years, was not sufficient enough and that suppliers/providers had to include extensive narrative descriptions and/or manufacturer information (serial number, part number, model number, manufacturer name, brand name, etc.). As a result of this sudden shift in policy numerous
providers/suppliers began to have their claims denied due to invalid PODs, which had been valid prior to the DME MAC clarification.

AOPA challenged the excessive specificity of that new proof of delivery policy and the problems it posed for O&P patient care providers, and the challenges paid off. CMS has reversed course and will now accept the official L-code descriptors on PODs. Effective March 4, 2016 the Program Integrity Manual, specifically Chapter 4; Section 4.26.1- Proof of Delivery and Delivery Methods, has been updated and includes the following statement:

“The long description of the HCPCS code, for example, may be used as a means to provide a detailed description of the item being delivered; though suppliers are encouraged to include as much information as necessary to adequately describe the delivered item.”

While the complete PIM indicates that “suppliers are encouraged to include as much information as necessary to adequately describe the delivered item,” PODs that include the complete HCPCS code descriptors can no longer be considered invalid resulting in a denial of the claim.

AOPA is very pleased to see a direct result of its communication efforts with top CMS officials regarding Proof of Delivery requirements and will continue to advocate for the equitable treatment of its members.

Medicare Final Rule on Prior Authorization for Certain Prosthetic Items
On December 30, 2015, the Centers for Medicare and Medicaid Services (CMS) released the long anticipated final rule regarding Medicare prior authorization of certain DMEPOS, including most lower limb prostheses. The final rule was effective 60 days after publication. AOPA’s continued concerns regarding Medicare’s implementation of the prior authorization final rule were summarized in the last AOPA staff report but several developments have occurred over the last few months that are relevant for discussion.

AOPA has had multiple conversations with CMS officials that indicate that actual implementation of prior authorization is not imminent and will most likely not occur until later in 2016 or early in 2017. In addition, CMS has indicated that it intends to implement prior authorization on a smaller scale initially, most likely choosing a small subset of the master list published in the final rule, and implementing prior authorization in select regional markets in order to better evaluate the impact the program may have on beneficiary access to care.

The time to prepare for prior authorization is now. AOPA has developed a comprehensive member education campaign consisting of a free introductory webinar that was held over two dates in February, 2016, another webinar available for purchase that was held over two dates in March, 2016, and a product based prior authorization resource for AOPA members that will be available for purchase shortly. In addition, AOPA staff has written several articles on the subject that have been published in the O&P Almanac, the AOPA Smart Brief newsletter, and on the AOPA’s Take blog.

AOPA’s primary concern with prior authorization of prostheses remains that it will critically delay timely access to the provision of prosthetic devices that are crucial to the rehabilitation needs of Medicare beneficiaries. AOPA continues to meet with CMS officials and members of Congress to make sure that prior authorization of any kind will not adversely affect a Medicare beneficiary’s access to medically necessary care.

Update on Comprehensive Care for Joint Replacement (CCJR) Payment Model Final Rule
On September 8, 2015, AOPA submitted written comments on the CMS proposed rule entitled: Comprehensive Care for Joint Replacement Payment Model for Acute Care Hospitals Furnishing Lower Extremity Joint Replacement Services. This proposed rule would establish a model in select areas that would track payments made for joint replacement services including the original surgery as well as all related
services for 90 days after discharge. The CCJR final rule was published on November 16, 2015 and remained essentially unchanged from the proposed rule with the exception that implementation of the program was delayed until April 1, 2016. There are legislative efforts under way that could further delay implementation.

On Wednesday, March 23, 2106, Rep. Price (R-GA) and Rep. Scott (D-GA) introduced a bipartisan bill that would delay implementation of the CCJR program until January 2018. In an interview, Rep Price stated, “at the very least, a delay in implementation is warranted to give all involved time to better assess, review, and weigh the impact and consequences of this proposal and more adequately prepare so patients are protected.”

AOPA believes a delay in implementation is warranted to allow for more analysis of the potential impact of this payment model on all parties involved, especially patients.

Draft Local Coverage Determination and Policy Article for Lower Limb Prostheses
On November 2, 2015, both the White House and CMS published a notice that based on a preliminary review of the public comments on the draft LCD, Medicare would not be implementing the draft LCD. The third entity making an announcement was the DME MAC Medical Directors who said they would “delay” implementation of the LCD. These conflicting announcements underscored the problem whereby CMS has been told by the OIG and HHS General Counsel that CMS does not have authority to instruct the DME MACs on what to do. AOPA has led with outreach efforts to key Congressional committees for exposing and clarifying this anomaly. AOPA has also been working with the legislators toward possible enactment of a one year moratorium to assure that there could be no final action on the LCD before Spring, 2017. CMS announced that it would form an interagency workgroup in 2016 to “develop a consensus statement that informs Medicare policy by reviewing the available clinical evidence that defines best practices in the care of beneficiaries who require lower limb prostheses.”

The inter-agency workgroup has been established and, as was previously stated, is made up of only employees of federal agencies. To date, the workgroup has met on two occasions and expects to take significant time to formulate a strategy to properly address the LCD and related issues. While AOPA cannot be sure how long this process will take, the general consensus is that it will take at least a year or more to complete. AOPA continues to make every effort to ensure that any future LCD for lower limb prostheses does not hinder Medicare beneficiary access to medically necessary and appropriate prosthetic services.

Orthotics and Prosthetics Definition Updated in the Uniform Glossary of Medical Terms
AOPA recently submitted comments applauding the decision to include a separate and distinct definition of the term “Orthotics and Prosthetics” as part of the Uniform Glossary of Medical Terms. AOPA’s position largely paralleled a similar submission by the O&P Alliance. This document, which was established through provisions of the Affordable Care Act, is intended to provide guidance to private insurance companies when defining and establishing coverage for essential health benefits.

Recently, the Department of Labor, in conjunction with the Centers for Medicare and Medicaid Services (CMS), requested public comment on the latest revision to the Uniform Glossary of Medical Terms, which, for the first time, included a proposed definition of the term Orthotics and Prosthetics. The Uniform Glossary proposed the following definition, which matched the suggested definition that was submitted for consideration by AOPA and the O&P Alliance as part of their previous comments:

Leg, arm, back, and neck braces, and artificial legs, arms, and eyes, and external breast prostheses incident to mastectomy resulting from breast cancer. These services include: adjustments, repairs, and replacements required because of breakage, wear, loss, or a change in the patient’s physical condition.

AOPA’s comments endorsing the decision to include a separate definition of the term Orthotics and Prosthetics as part of the Uniform Glossary also suggested a minor change to eliminate the requirement of
breast cancer as the sole cause for mastectomy in the definition of a breast prostheses. AOPA’s suggested revision to the definition reads as follows:

\textit{Leg, arm, back, and neck braces, and artificial legs, arms, and eyes, and external breast prostheses incident to mastectomy. These services include: adjustments, repairs, and replacements required because of breakage, wear, loss, or a change in the patient’s physical condition.}

AOPA and its partners, such as the O&P Alliance were pleased that the final revision included their recommendations and will continue to advocate for fair and equitable treatment of O&P providers. The inclusion of the separate definition of the term orthotics and prosthetics in the Uniform Glossary provides additional distinction of O&P services from the universe of Durable Medical Equipment and represents a significant advancement in acknowledging the unique skill set that properly trained and educated O&P practitioners offer to patients.

**DME MAC Contractor Transition**

CMS has recently published updates regarding the transition of DME MAC Contractor responsibilities in Jurisdiction A and Jurisdiction B.

The recent denial of the NGS protest of the Jurisdiction B DME MAC contract award clears the way for CGS to begin transition work in preparation for its July 1, 2016 start date as the new Jurisdiction B DME MAC. CGS has announced that as of July 1, 2016, Jurisdiction B claims will be processed out of CGS existing operations center in Nashville, TN. CGS has announced that it intends to hire at least 150 staff members in Nashville to ensure that they have adequate capability to begin processing claims as of June 27th. In addition, CGS has announced that Doran Edwards, MD will serve as the Jurisdiction B Medical Director once CGS takes over responsibility for Jurisdiction B. Dr. Edwards currently serves as an associate medical director for the Jurisdiction C DME MAC and has previously served as the medical director of the SADMERC. CGS has established a transition website where providers may learn more about the transition process. The transition website may be accessed at www.cgsmedicare.com/jb.

In other news, Medicare NHIC has elected not to file a protest of the recent award of the Jurisdiction A DME MAC contract to Noridian Health Services, LLC, the current contractor responsible for Jurisdiction D and the PDAC. The implementation date for Noridian to begin processing Jurisdiction A claims is also July 1, 2016.

**RAC Audit Update**

In December, 2014 CMS announced the award of the national DMEPOS, Home Health, and Hospice Recovery Audit Contractor (RAC) contract to Connolly Healthcare, LLC. The start date for work on this contract was delayed after a protest was filed by Performant Recovery. Subsequently, CMS cancelled all RAC contract awards and announced that new RFPs would be developed for future RAC contracts. On November 16, 2015, CMS announced that while new bids for RAC contracts are being accepted and reviewed, the existing four RACs may continue to perform RAC reviews and may begin to issue additional ADR requests. This signals an effective end to the moratorium that was placed on new RAC activity in February of 2014. While there may be a slight delay to allow the current RACs to put in place the resources to re-start full scale activities, there is no reason to expect that they will not do so as soon as possible. AOPA will continue to follow developments on the status of RAC audits and provide updates to its members.

**AOPA’s Take. Wherever You Go…..When You need to Know!**

AOPA’s blog site, www.aopastake.org continues to grow in popularity. 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.
OTS Orthoses and Competitive Bidding
Off the Shelf (OTS) orthoses remain eligible for inclusion in future rounds of Medicare competitive bidding but have not been selected as a product category for the most recently announced phase, known as Round 1 2017, scheduled to be implemented for January 2017. AOPA will continue to monitor this issue closely, particularly since the President’s Budget Message submitted to Congress included the recommendation that all O&P devices be competitively bid. Although the recommendation was described as being “dead on arrival” by Congressional experts, the fact that it surfaced again underscores the need for constant vigilance. AOPA members may recall the joint letter signed by AOPA and the Amputee Coalition sent to members of Congress December 14, 2012 outlining the harm to patients if competitive bidding were instituted for all O&P devices and refuting the alleged savings claimed by the Center for American Progress. The letter also pointed out that only off the shelf orthotics requiring minimal self-adjustment only made by the patient under current law qualifies for competitive bidding. Congressional action would be required to expand competitive bidding to all O&P devices.

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.

Mastering Medicare Webinars
The AOPA Mastering Medicare Webinar series continues to be a useful resource for AOPA members and others in the O&P community. The webinars are scheduled for 1:00 PM eastern time 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 2016 series for only $990 and get three free, including the March Prior Authorization Preparation webinar. 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), provide needed education and CE Credits. The remaining 2016 Mastering Medicare webinar series schedule is listed below.

<table>
<thead>
<tr>
<th>Date</th>
<th>Topic</th>
</tr>
</thead>
<tbody>
<tr>
<td>April 13</td>
<td>Understanding Shoes, Mastectomy, &amp; Other Policies</td>
</tr>
<tr>
<td>May 11</td>
<td>When Things Go Wrong: Making Lemonade out of Lemons</td>
</tr>
<tr>
<td>June 8</td>
<td>Physician Documentation: How to Get It &amp; How to Use It</td>
</tr>
<tr>
<td>July 13</td>
<td>Strategies and Levels: How to Play the Appeals Game</td>
</tr>
<tr>
<td>August 10</td>
<td>The Supplier Standards: Are You Compliant?</td>
</tr>
<tr>
<td>September 14</td>
<td>Fill in the Blanks: Know Your Forms</td>
</tr>
<tr>
<td>October 12</td>
<td>KO Policy: The ABCs of the LCD and PA</td>
</tr>
<tr>
<td>November 9</td>
<td>Don't Miss Out: Are You Billing For Everything You Can?</td>
</tr>
<tr>
<td>December 14</td>
<td>New Codes and What Lies Ahead for 2017</td>
</tr>
</tbody>
</table>
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 seminar of 2016 was held in Tampa, FL on January 25-26. The remaining three seminars will be held in Portland, OR (April 11-12), San Antonio, TX (June 13-14), and Las Vegas, NV (dates TBA). Learn more at http://www.aopanet.org/education/coding-billing-seminar/

Communications Update

Mobility Saves Updates
Mobility Saves is growing on social media, with over 11,300 likes on Facebook (“like” us at www.facebook.com/mobilitysaves), 2000 Twitter Followers (www.twitter.com/MobilitySaves), and 135 connections on LinkedIn (www.linkedin.com/company/mobility-saves). The website is kept updated with issues affecting O&P patients and with news of interest.

Mobility Saves continues its partnership with the Amputee Coalition, who commissioned the original cost-effectiveness study funded by AOPA that started the Mobility Saves initiative. AOPA staff will attend the Amputee Coalition National Conference June 9-11 in Greensboro, NC to share information and to invite attendees to share their stories of O&P with us to use on the MobilitySaves.org website. AOPA provides the Amputee Coalition with material every month to share with its readers of inMotion magazine and the e-newsletter Limbline.

The Mobility Saves campaign has now partnered with the Endeavor Games, an annual event at the University of Central Oklahoma (UCO) where adults and military service members with physical disabilities have an opportunity to display their talents and compete against individuals with similar disabilities in 10 sports. UCO was selected as a U.S. Paralympic training site in 2005 and has since been named a U.S. Olympic training site. The 2016 Endeavor Games, held June 9-12, will be a platform for Mobility Saves to reach participants and spectators about the Mobility Saves research showing the cost-effectiveness of O&P.

O&P Almanac
The O&P Almanac has been honored with a Bronze award for the Association TRENDS’ 2015 All Media Contest for the monthly trade association publication category. The TRENDS All Media Contest is an annual competition held exclusively for associations, recognizing the most creative and effective communication vehicles developed in the industry over the prior year. The 2015 competition included 400 entries in 22 categories of association communications. Association TRENDS is a national news source for association executives and suppliers, spotlighting the latest news, information and trends in association management for the professional staff of international, national, state, regional and local voluntary organizations.

The O&P Almanac is scheduled to be co-mailed with the Amputee Coalition’s bi-monthly publication inMotion three times over the next year, following the positive feedback from the first co-mailing in 2015. Readers of the O&P Almanac should expect to receive the May/June 2016, Sept/Oct 2016 and Mar/Apr 2017 issues of inMotion.

Beginning this year, the “President’s View” column transitioned to “Views from AOPA Leadership” as President Jim Campbell, PhD, CO, FAAOOP welcomed other members of the AOPA Board of Directors to author columns. A three-part series “Leveraging Data for O&P Business Management”, ran from February to April on the financial aspects of running an O&P facility, where the O&P Almanac explored the topic of how to use data in managing successful O&P facilities. The January issue featured Muscular Care for IBM
Patients, and other topics such as Consumerism and Patient Care. The February issue featured Securing Data in the Digital Age, and March highlighted an interesting approach to Research & Development being used by Ottobock in its Open Innovation Space in Berlin. April featured creative solutions for treating pediatric patients, and the upcoming publications feature International & Humanitarian Work in May, Upper Limb in June, Foot Care in July, and Data Management for Facilities in August.

AOPA 365
AOPA’s app, “AOPA 365”, which was launched in 2015, continues to be downloaded by our loyal members. The app is immensely useful when attending the Annual Assembly, as a source to view the agenda and set up your own personal schedule, interact with colleagues, share photos and comments, search for speakers and specific topics, navigate the exhibit hall, and review speaker bios. Beyond the Assembly, this app is also your source to read the O&P Almanac, review membership benefits, get current with Hot Issues, see how Mobility Saves, shop in the AOPA Bookstore, access the AOPA Membership Directory, and connect with AOPA through social media. Search “AOPA 365” in the App store or Google Play today!

AOPA Clinical O&P Research Support

AOPA Announces RFP
AOPA, in partnership with the Center for O&P Learning & Evidence-Based Practice (COPL), announced a Request for Pilot Grant Proposals in 16 potential areas of orthotic and prosthetic research including an open topic. Researchers will be funded by one time grants up to $15,000 to support original pilot research that will lead to larger projects that may qualify for government or other research funding. The deadline for proposals is April 30, 2016. The RFP is available to view at www.aopanet.org/resources/research. Successful applicants will be notified on or about July 1, 2016.

The 2015 Projects that are currently underway with support from AOPA are listed below.

COPL Pilot Grants
Fan Gao, PhD, UT Southwestern Medical Center at Dallas. “Does Vacuum Assisted Socket System Improve Knee Proprioception and Dynamic Balance in Transtibial Amputees?”
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”
Jason Kahle, MSMS, CPO, FAAOP, The University of South Florida, School of PT and Rehab. “Transfemoral interfaces with vacuum assisted suspension comparison of biomechanics using the CAREn: Ischial containment versus brimless”

Systematic Review Projects:
Jason Highsmith, DPT, PhD, CP, FAAOP, Morsani College of Medicine, University of South Florida “Cost Efficacy of Transtibial Interventions”
Jason Kahle, CPO, MSMS, FAAOP, “Prosthetic Design and Research: A Systematic Review of Established Treatment Guidelines to Determine Post Amputation Functional Performance Level and Develop a Prosthetic Candidacy Treatment Algorithm”
Michael Dillon, PhD, La Trobe University, Department of Rehabilitation, Nutrition and Sport, “Evaluating Outcomes of Dysvascular Partial Foot and Transtibial Amputation: A Systematic Review and Development of Shared Decision Making Resources”

Special Projects
Kenton Kaufman, PhD, PE, Mayo Clinic, “Risk factors and costs associated with accidental falls among adults with above-knee amputations: a populations-based study”
AOPA has commissioned Dobson/DaVanzo to analyze 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 prior cost-effectiveness report and the Mobility Saves Initiative.

Research Updates
All AOPA members were mailed the February issue of the Military Medicine Supplement. Military Medicine is the official journal publication of the Association of Military Surgeons of the United States (AMSUS), and this edition arises in conjunction with the topics covered at the December annual meeting of AMSUS.

There are two articles that are very important to all AOPA members which are included in the edition. Most members are aware of the Dobson-DaVanzo study on cost-effectiveness, which demonstrates, using four years of Medicare data, that timely O&P intervention saves payers’ money (the study has been a central feature of the www.MobilitySaves.org website, and you may wish to take a look there also). Dr. Allen Dobson, the author of this research, presented his work at the AMSUS meeting, and the manuscript will make this work widely available for citation for use by payers (including both Medicare and private sector providers), and others to show the value of O&P care.

This edition also includes the manuscript developed by a Multi-Disciplinary Task Force AOPA convened headed by John Fisk, M.D., with clinical representatives from both physical medicine and rehabilitation, an orthopedic surgeon, a physical therapist, and certified O&P professionals focusing on key issues confronting the orthotic treatment team. The White Paper developed by the Task Force made distinctions between OTS and customized orthotics, the importance of the orthotist’s notes and records, and other critical clinical issues. This publication is particularly timely in establishing this valuable consensus viewpoint at a time when orthotic care, and its reimbursement are attracting greater attention and scrutiny.

There are also several reasons why we are especially pleased to see both of these articles appearing in Military Medicine. This journal is a peer-reviewed medical journal, listed in the Index Medicus, which conveys substantial credibility for these papers, placing it in the top tier for purposes of medical citations. Because of the importance of topics covered in this journal to Congressional Appropriations and Department of Defense matters, Military Medicine is circulated to all Congressional Offices, giving these two messages great reach to our lawmakers. Access the articles online at www.aopanet.org/resources/research.

The 2016 O&P Leadership Conference: Another Success
O&P industry leaders returned from the second O&P Leadership Conference, January 8-10 in Palm Beach, with comments such as “by far, the most valuable event I’ve had the privilege to attend in my career”, “truly a great session”, and “extremely helpful”. With a lineup including former Senator Bob Kerrey, Political Analyst Charles E. Cook, Jr. and Healthcare Futurist Michael L. Lovdal, PhD, it is no surprise that this event topped the impressive inaugural 2015 event.

More than 130 AOPA members representing patient care, supplier, and educational members gathered to mix and mingle and learn from knowledgeable insiders about the topics that are most pressing in today’s challenging business environment. Former Senator, Governor, and lower limb amputee Bob Kerrey, who made headlines when he challenged the lower limb LCD draft policy in 2015, inspired the audience to engage in grassroots advocacy in Washington and beyond. Charlie Cook, Editor and Publisher of the Cook Political Report, and considered one of the nation’s leading authorities on American politics and U.S. election forecasting, explained the current political climate and brought his insight on what to expect after the 2016 election. Michael Lovdal tapped into his 3 decades of strategic planning and health care experience
to provide his top ten predictions for the future of health care and encouraged the audience to consider the impact on their current business models.

The audience heard from authorities such as Hanger, Inc., CEO Vinit Asar, MBA, and Scheck & Siress President Michael Oros, CPO, FAAOP who shared their insight on Clinical Services. Blatchford & Sons CEO Stephen Blatchford and Scott Schneider of Ottobock discussed technology. The audience took away “Lessons on the LCD” from O&P Alliance General Counsel Peter W. Thomas, JD; AOPA Executive Director Thomas Fise, JD; and Tom Watson’s Prosthetic & Orthotic Lab President and Advocate Thomas H. Watson, CP. Teri Kuffel, owner of Arise O&P and board member of the Minnesota Society of Orthotists, Prosthetists and Pedorthists and Jeff Collins, AOPA Treasurer, President of the Cascade Orthopedic Supply and the California O&P Association, offered lessons in state advocacy based on their personal experience.

The closing program on Prosthetics 2020 left attendees inspired with the work AOPA and its partners are doing to create a patient registry and initiate outcomes studies intended to protect, fortify, and enhance the value of prosthetic care in the minds of payers, patients and the general public.

**AOPAversity Online Learning Center Updates**

AOPA has added more than 70 videos to our improved online learning portal, AOPAversity. Topics include orthotics, prosthetics, pedorthics, technician training, marketing, growing your practice, reimbursement, and more.

The new AOPAversity features an upgraded platform and more user-friendly technology. Users get instant quiz results and can create an account for 24/7 access. The AOPAversity CEs earned are sent automatically to ABC and BOC quarterly. AOPA members get discounted rates and everyone is able to preview videos before purchase. Earn CEs at www.aopanetonline.org/aopaversity.

**National Assembly, Boston – September 8-11, 2016**

The 2016 AOPA National Assembly Planning Committee has been hard at work to ensure that all attendees have an educational and memorable experience at the 99th National Assembly to be held September 8-11, 2016 at the Hynes Convention Center in hip and historic Boston, MA.

The theme for the 2016 convention is Lighting the Way to Future Success--The orthotic and prosthetic community has experienced stormy seas for the past several years. Buffeted by legislative challenges, rising costs, and reimbursement pressures, O&P professionals are looking for a port in a storm, a beacon or lighthouse to keep us sailing straight and true. The goal of the Assembly is to bring us together to build a strong future, with the symbolism of lighting our path being a strong connection to the New England lighthouse of old. What better place to set your future course than the National Assembly in Boston—a city that stands for history, success and higher education. Attend for the education you will receive today and the future success of your profession.

The committee concluded the “call for papers” on March 31 and received an overwhelming response from researchers, physicians, top-practitioners and business managers. The program will be finalized and distributed by May 1—so be on the lookout and get ready to be awed by remarkable programming on topics such as Limb Salvage, Tone Management, Treating “O” more like “P,” Osseointegration, Scoliosis, 3-D Printing, Boston Strong Grand Rounds and of course the best in business management such as how to obtain documentation, living with Prior Authorization and managing other Threats to your O&P Business.
As has been the tradition for the past three years— the Assembly will offer five concurrent tracks to provide the most relevant programming for orthotists, prosthetists, pedorthists, technicians and business managers. The centerpiece of the Assembly is the massive exhibit hall jammed packed with every technology, product, device, service, tool or piece of equipment any OP&P professional could ever imagine.

Registration will not open until May 1, but it is not too early to begin making your travel plans.

**Air Travel** - The Hynes Convention Center is conveniently located just 15 minutes from Boston’s Logan Airport.

**Ground Transportation** - etaxis are readily available and of course there is the world famous “T” public transit, but why not consider the new Back Bay Express when traveling to and from the airport? This easy and convenient to use round trip shuttle runs from Logan Airport to the Hynes Convention Center for only $5.00 each way. Visit the Assembly travel page at [www.AOPAnet.org](http://www.AOPAnet.org) for more information.

**Amtrak** - Amtrak is offering Assembly attendees a 10% discount off the best available rail fare to Boston, MA from September 05 –14, 2016. To book your reservation call Amtrak at 1 (800) 872-7245 or contact your local travel agent.

**Hotel Reservations** - AOPA has reserved room blocks at three different hotels all conveniently located within walking distance of the convention center. Full details are located at [http://www.aopanet.org/education/2016-national-assembly/hotel-accomodations-2/](http://www.aopanet.org/education/2016-national-assembly/hotel-accomodations-2/)

### Member Benefits Update

**Welcome New Members Joining January 1, 2016 to March 31, 2016**
AOPA welcomes the following new patient care facility members in the first quarter of 2016: Buckner Prosthetics and Orthotics of Jackson MS; Amputee Associates, LLC of Nashville, TN, O&P Options, LLC of Montgomery OH; Compass Limb & Brace, LLC of Ogden, UT; Prosthetic Orthotic Specialists of Monroe, Monroe, NC; Florida O&P Services, Inc. of Jacksonville, FL; Innovative Prosthetic & Orthotic Professionals of Denver, CO; Garrison’s Prosthetic Services of North Miami, FL; Westlake Orthotics & Prosthetics of St. Paul, MN; Austin Prosthetic Center, Inc., of Austin, TX, OP Solutions of San Antonio, TX and O&P Designs of Dallas, TX.

New supplier members joining AOPA this quarter are: Orthotic Holdings of Happauge, NY; Standard Cyborg of San Francisco, CA; Coapt, LLC of Chicago, IL; and Mile High Orthotics Lab, Inc. of Commerce City, CO.

**2015 Operating Performance and Compensation Survey Coming Your Way**
AOPA’s Operating Performance and Compensation Survey Working Group met this quarter to refine the annual survey instrument to be 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. Participating members also receive a free customized individual Company Performance Report comparing your performance with other like size O&P businesses. The survey also helps AOPA develop a more accurate picture of the financial trends in the industry and is used by bankers and investors to benchmark clients and acquisition targets. Final 2016 reports are expected to be published late summer/early fall. Watch for your survey in the mail around May 1, or go to: [www.aopa-survey.com](http://www.aopa-survey.com)

**Coding Products Updated for 2016 Now Available**
AOPA’s coding products have been updated to include the coding and reimbursement changes for 2016 and are now available in AOPA’s bookstore at [https://www.aopanetonline.org/store](https://www.aopanetonline.org/store).
2016 CODING PRO (SINGLE USER OR NETWORK VERSION)
O&P’s comprehensive guide to Medicare codes, reimbursement and medical policies. This is the single-source reference for all your coding needs. The CodingPro CD-ROM provides updated Medicare fee schedules for all 50 states and allows you to customize and import other fee schedules used by your office. Illustrations of the codes allow you to quickly sort codes. Writing prescriptions just got easier with the prescription-writing tool.

2016 ILLUSTRATED GUIDE
This easy-to-use reference manual provides an illustrated guide to the coding system in use for orthotics, prosthetics, and shoes, including the HCPCS code, the official Medicare descriptor and an illustration for each code.

2016 QUICK CODER
Stop searching through numerous pages to find a code! AOPA’s redesigned Quick Coder provides a speedy reference to the HCPCS orthotic, shoe and prosthetic codes and modifiers. These laminated cards are durable, long-lasting and convenient to store.

AOPA’s Resource Guide – At Your Fingertips
Renewing AOPA members will find some new items in their 2016 AOPA membership certificate mailing. We hope you will proudly display the 2016 AOPA member static cling decal, Mobility Saves static cling decal and the updated membership certificate in your office. Also enclosed is AOPA’s Resource Guide. We hope you will laminate it or tuck it somewhere near your desk for quick and easy reference. It has all the information you need to access ALL of your AOPA membership benefits plus contact information for AOPA staff, who are here to assist you.

And finally, a big thank you for renewing your AOPA membership in 2016. We work hard every day to ensure fair treatment of O&P by legislators and regulators, so that your business has the resources it needs to survive and grow. AOPA membership makes your business more viable and profitable and we thank you for your support.

Sincerely,

Thomas F. Fise, JD
Executive Director