Prepayment Review Results for L1832 and L1843

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

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

The top four denial reasons were listed as:

- Documentation submitted didn’t justify the need for a custom fitted brace
- Documentation did not support the presence of knee instability or that the beneficiary is ambulatory.
- Documentation was not submitted in response to the Additional Documentation Request
- Invalid/Incomplete/Missing proof of delivery.
Based on the high denial/error rates Noridian will continue with the prepayment review for claims submitted with the HCPCS codes L1832 and L1843.

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

### Prepayment Review Results for L0648 and L0650

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

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

Some of the top denial reasons listed included:

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

Based on these denial/error rates Noridian will continue with their prepayment review of L0648 and L0650.

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

### RAC Audits Placed on Hiatus Again

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

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

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

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

August 10 Webinar: Supplier Standards – Are You Compliant?

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

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

REGISTER

Cost
- $99 for AOPA Members/
- $199 for Non-Members
- (Members use promo code ‘member’)

Date
- Wed, July 13
- 1:00 PM EST

Bureau of Labor and Statistics Releases CPI-U Update

On July 15, 2016, the Bureau of Labor and Statistics (BLS) released its latest update on the Consumer Pricing Index for Urban Areas (CPI-U). From June 2015 through June 2016 the CPI-U increased by 1.0%. This figure is relevant to O&P providers because it is used as the base for determining the adjustment for the 2017 Medicare DMEPOS fee schedule. While the CPI-U increased by 1.0%, the Affordable Care Act, beginning in 2011, introduced a second factor that is used to determine the annual DMEPOS fee schedule, the Multi-Factor Productivity (MFP) Adjustment. The MFP is not expected to be released until later in the year, usually in November.

The combination of the CPI-U increase or decrease and the MPF adjustment determines the annual update to the Medicare DMEPOS fee schedule. What this means is that the CPI-U of 1.0% minus the yet to be determined MPF adjustment will result in the update to the DMEPOS fee schedule that will be implemented for Medicare claims with a date of service on or after January 1, 2017. The MPF adjustment was -1.2% in 2011, 0.9% in 2012, 0.8% in 2013, 0.6% in 2014, and 0.5% in 2015. While the MPF adjustment has been trending downward, there is no guarantee that it will continue to do so in 2016.

AOPA will monitor the BLS website for news regarding the MPF adjustment and will notify AOPA members as soon as it is released.
Contact Your Representative to Support the Medicare O&P Improvement Act

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

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

Save $30 off the 2016 Illustrated Guide

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

AOPA Announces Winners of 2016-2017 Pilot Grant Awards

The Center for O&P Learning (COPL), in conjunction with AOPA, solicited proposals to fund O&P research with grants of up to $15,000. A record 27 proposals were received in response to the request for proposals, and the board took the extraordinary step of choosing seven projects to fund, instead of the usual 3-4 projects. The previous years’ projects, dating back to 2009, are available for review on AOPA’s website.

The 2016-2017 Grant Winners are as follows:
- Walter Lee Childers, PhD, MSPO, CP, Stumble recovery mechanisms utilized by people using different types of microprocessor knees
- Kenton Kaufman, PhD, PE, Risk factors and costs associated with secondary health conditions of individuals with above-knee amputations
- Staci Shearin, PT, NCS, Impact of Carbon Fibre AFOs on gait and resulting changes in quality of life across time in persons with PD
- Nicholas LeCursi, CO, Relative influence of orthotic support features within an open frame AFO versus a total contact AFO on function, endurance, and activity level in patients with spastic equinovarus secondary to chronic stroke
- Ignacio Gaunaurd, PhD, MSPT, Utilizing an innovative Timed-Up-and-Go test for fall risk detection in people with unilateral lower limb loss
- Sai Vikas Yalla, PhD, Activity Based Quality Life Assessment to Compare Prostheses with and without Microcontrollers in Transfemoral Amputees
Shane Wurdeman, PhD, MSPO, CP, FAAOP, *Improved mobility with lower limb prostheses: the establishment of a national multi-site outcomes database*

**Sign Up to Exhibit at the 2016 National Assembly**

AOPA is still accepting exhibit applications for the 2016 AOPA National Assembly, which takes place in Boston, MA on September 8-11, 2016. Sign up by **Friday, July 29th** to be included in the show's *Final Program of Activities* and the *Assembly Mobile APP*. If you are looking to introduce your products and services to an expanded group of decision makers—this is the meeting for you! The National Assembly is the country’s oldest and largest meeting for the orthotics, prosthetics and pedorthics profession. [Click here](#) for more information.

Contact Kelly O’Neill [koneill@aopanet.org](mailto:koneill@aopanet.org) or (571) 431-0852 with any questions.

**Book Your Early Bird Registration by August 1st!**

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

**Save $100 by Booking By August 1st!**

**Top 5 Reasons to Attend**

- 36+ CEs
- Our best program yet...Osseointegration, Boston Strong Grand Rounds, Treating “O” More like “P,” The Future of Pedorthics, and more!
- Five concurrent education tracks so everyone keep a full schedule
- The country’s largest O&P Exhibit Hall
- Fun networking events and the Alumni Connection

Join AOPA and 2300+ prosthetists, orthotists, pedorthists, therapists, physicians, technicians and other health care professionals in historic downtown Boston. [Click here to browse through the preliminary program.](#)
Join the Coding & Billing Experts in Las Vegas!

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

Join your Colleagues November 14-15 in Las Vegas!

At this seminar you will:

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

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

Upcoming AOPA Events

August 1, 2016  
Early Bird Registration **Deadline** for 2016 National Assembly  
Boston, MA  
Learn more and register here

August 10, 2016  
**Supplier Standards: Are You Compliant?**  
AOPA Webinar  
Learn more and register here

September 8-11, 2016  
**AOPA National Assembly**  
Boston, MA  
Learn more and register here