



American Orthotic & Prosthetic Association

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AOPA In Advance SmartBrief

Breaking News

August 18, 2016

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Jurisdiction D DME MAC Published Audit Results

Noridian Healthcare Solutions, LLC, who serves as the Jurisdiction D DME MAC, has recently released results of some of its ongoing pre-payment audits for O&P services. The published results include those related to spinal orthoses, knee orthoses, AFOs, and therapeutic shoes billed during the second quarter of 2016. Summaries of the audit findings are below:

Spinal Orthoses

Pre-payment review of spinal orthoses described by HCPCS codes L0631 and L0637 resulted in an overall error rate of 99%. Common reasons for denial included lack of documentation of the need for a custom fitted orthosis, improper proof of delivery documentation, and failure to respond to requests for additional documentation.

Knee Orthoses

Pre-payment review of knee orthoses described by HCPCS code L1833 resulted in an overall denial rate of 92%. Common reasons for denial included lack of objective documentation of knee instability, improper reporting of a correct diagnosis code, improper proof of delivery documentation, and failure to respond to requests for additional documentation.

AFOs

Pre-payment review of AFOs described by L1960 resulted in an overall denial rate of 73%. Pre-payment review of AFOs described by L1970 resulted in an overall denial rate of 78%. Pre-

payment review of AFOs described by L4360 resulted in an overall denial rate of 98%. Common denial reasons included lack of documentation of a need for a custom device rather than a prefabricated device (L1960 and L1970), lack of documentation regarding modifications that were made to custom fit the device (L4360), failure to respond to requests for additional documentation, and no proof of delivery documentation.

Therapeutic Shoes

Pre-payment review of therapeutic shoe claims resulted in an overall denial rate of 76%. Common reasons for denial included lack of documentation from the certifying physician, lack of proof of an in-person fitting visit with the supplier of the shoes, and failure to respond to additional documentation requests.

The high denial rates for all of these pre-payment reviews mean that claims for these HCPCS codes will remain under pre-payment review going forward. It is important to remember that many of these denials may have been avoided by responding to requests for additional documentation or ensuring that proof of delivery documentation meets Medicare's published requirements.

Questions regarding pre-payment reviews may be directed to Joe McTernan at jmcternan@aopanet.org or Devon Bernard at dbernard@aopanet.org.

Contact Your Representative to Support the Medicare O&P Improvement Act

We need your 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.

AOPA Submits Comments to the FDA on 3-D Printing

AOPA has submitted comments on the publication entitled *Technical Considerations for Additive Manufactured Devices: Draft Guidance for Industry and Food and Drug Administration Staff* which was published in the Federal Register on May 10, 2016. [\(Read that publication.\)](#)

AOPA submitted comments pertaining only to additive manufacturing in the design and fabrication of external prosthetic components and orthotic devices, specifically through the use of 3-D printing. The comments submitted reflect that AOPA does not believe that either additional or

lesser regulatory burdens should be placed on manufacturers of prosthetic components and orthotic devices solely based on the decision to utilize an additive manufacturing process into their fabrication protocols.

An excerpt of the comments:

"AOPA firmly believes that the manufacture of a prosthetic component or orthotic device is only a small part of the creation of an artificial limb or orthoses that meets the individual needs of a particular patient. The components that are included in the completed prosthesis or orthosis must be adjusted, and aligned by a properly educated, trained, and certified or licensed healthcare professional such as an orthotist or prosthetist.

AOPA fully supports the role of the FDA in ensuring that medical devices, including prosthetic and orthotic devices remain safe and effective, but believes the current direction of the FDA, as outlined in the draft guidance document, to not alter regulatory requirements solely as a result of the use of additive manufacturing is appropriate.... (FDA's stated position) "will encourage the development of technology while assuring that devices created through additive manufacturing remain safe and effective for use by the general public, and maintaining consistency and a level regulatory playing field for the devices without regard to the specific method of fabrication employed by the manufacturer."

[Read the comments submitted.](#)

CMS Reminds DMEPOS Providers to Report Changes Within 30 Days

The Centers for Medicare and Medicaid Services (CMS) recently published a Medlearn Matters article reminding Medicare providers and suppliers of their responsibility to report any changes to their provider file in order to maintain Medicare billing privileges.

For DMEPOS suppliers, which include O&P providers, any changes to the information reported on the CMS 855S enrollment form must be reported within 30 days of the change. Reporting these changes is achieved by completing the relevant sections of the CMS 855S enrollment form and returning it to the National Supplier Clearinghouse.

A copy of the Medlearn Matters article may be viewed by [clicking here](#).

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

Don't Miss the Fun: Pre-Register for the 9th Annual Wine Tasting & Auction

If you haven't already done so, it is not too late to pre-register for the 9th Annual Wine Tasting & Auction being held on September 9 at 6:00 pm during the 2016 AOPA National Assembly in Boston, MA. For more information [click here](#).

Don't let the name fool you, the auction includes more than just wine. We have bourbon, scotch, beer, cigars and special surprise items, plus a stocked open bar. But don't worry we also have several lots of world class wines. Take a peek at last year's catalog for an idea of the type of items you may bid on. [View the previous catalog here](#).

NINTH ANNUAL AOPA 2016 WINE TASTING & Auction

This year's event will also feature a few special Boston inspired items, including private tour packages of local New England vineyards/distilleries and signed Red Sox and Patriots memorabilia.

You may pre-register for the 9th Annual Wine Tasting & Auction [here](#) or you may pre-register when you register for the 2016 AOPA National Assembly. This event is the perfect way to enjoy an evening with your friends and colleagues.

Attend the Boston Strong Grand Rounds at the National Assembly



Featured Programming – Boston Strong Grand Rounds (C 16) Saturday, Sept. 10, 2:00 – 5:00 PM

The Boston Marathon bombing on April 15, 2013 shocked the country and created a jaw-dropping 16 amputees. All the amputees have been fitted with prostheses, and several have returned to complete the Boston Marathon. In this two-part program, first hear the inspirational stories of recovery from survivors Heather Abbott and Adrienne Haslet-Davis. Then review three actual case studies with the surgeons, prosthetists and physical therapists who cared for amputee survivors.

The multidisciplinary panel includes these esteemed professionals:

Jeffrey Kalish, MD Boston Medical Center

Brian Heckathorn, CP Hanger Clinic

Peter S. Kim, MD Atrius Health

Art Molnar, CPO Medical Center O&P

Beth Cornforth, PT Spaulding Rehabilitation Hospital

Eric M. Bluman, MD, PhD Brigham & Women's

Dara Casparian, DPT, PT Spaulding Rehabilitation Hospital

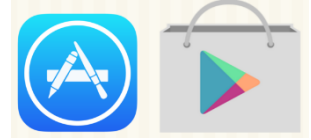
Moderator **David Crandell, MD** Spaulding Rehabilitation Hospital



99th AOPA National Assembly ~ Sept 8-11 ~ Boston

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.

Download **AOPA 365** to peruse sessions, save your schedule, connect with alumni and more, PLUS stay connected with AOPA all year round.



Register Now

DME MACs Release New Coding Guidelines for O&P Suppliers

The four DME MACs recently released a joint correct coding bulletin reminding DMEPOS suppliers that it is each supplier's responsibility to select the proper HCPCS codes for billing. The full bulletin may be found [here](#).

To aid suppliers in their selection of the proper HCPCS code(s) the DME MACs provided the following tips:

- Check the [PDAC Product Classification Lists](#)
- Review DME MAC publications for coding bulletins and coding guidelines
- Refer to the long code descriptor and select the code with the descriptor that most closely describes the item you are providing.
- Most code narratives are written broadly to be all-inclusive. You may not find a specific code that perfectly matches a product. Use the code that most closely describes the item rather than a NOC (not otherwise classified) or miscellaneous code.
- Review LCDs & Policy Articles for coding guidelines for additional information on the characteristics of products that meet a specific HCPCS code.
- Don't select a code based upon the fee schedule amount. HCPCS codes describe the product not the price.
- Check with the PDAC. The PDAC may provide information, outside of a formal product review, that will assist you in code selection.

The bulletin also stressed that the DME MACs and the PDAC are the only entities that have the authority to assign HCPCS codes to specific products and if a supplier chooses to follow coding recommendations from outside sources; that these recommendations will have no "official standing" during a possible claim review/audit.

AOPA is currently analyzing the joint bulletin and is working with the DME MACs to obtain some clarification and guidance on specific points raised in the bulletin. We will keep you posted of any new information.

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.

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.](#)

Register Now

Upcoming AOPA Events

- September 8-11, 2016 *AOPA National Assembly*
Boston, MA
[Learn more and register here](#)
- September 14, 2016 *Fill in the Blanks: Know Your Forms*
AOPA Webinar
[Learn more and register here](#)
- November 14-15, 2016 *Coding & Billing Seminar*
Las Vegas, NV
[Learn more and register here](#)