



American Orthotic & Prosthetic Association

www.AOPAnet.org

AOPA In Advance SmartBrief
Breaking News
November 28, 2017

AOPA Headlines:

[AOPA Submits Comments on the CMS Proposed Rule](#)

[The First AOPA Coding & Billing Seminar of 2018 is in Atlanta, GA](#)

[AOPA Funded Research Now Published](#)

[AOPA Submits Comments on the AHRQ Systematic Review Draft Report](#)

[2018 AOPA Webinars Announced](#)

[HCPCS Code Changes for 2018](#)

[CMS Responds to AOPA Concerns Regarding Custom Fabricated Diabetic Inserts](#)

[CMS Publishes Proposed Rule That Would Provide States with Flexibility in Defining Essential Health Benefits](#)

[Take Action Now to Stop the Department of Veterans Affairs from Limiting Your Veteran Patients' Right to Choose](#)

[Patents for Humanity Awards Now Open for Applications](#)

[Promote your Brand with AOPA's new Apparel Program](#)

[Upcoming Events](#)

<p>AOPA Submits Comments on the CMS Proposed Rule That Would Provide States with Additional Flexibility in Defining Essential Health Benefits</p>
--

On November 2, 2017, the Centers for Medicare and Medicaid Services (CMS) published a proposed rule in the *Federal Register* entitled "Patient Protection and Affordable Care Act; HHS Notice of Benefit and Payment Parameters for 2019." Among the provisions in the proposed rule is a section that would provide individual states with increased flexibility in defining essential health benefits (EHB) for purposes of establishing benchmark plans required by the Affordable Care Act.

AOPA submitted official comments on the proposed rule on November 27, 2017. Our comments reflected AOPA's consistent position that orthoses and prostheses must remain essential health benefits and any action by CMS that restricts or reduces access to O&P services is not in the best interest of quality patient care.

AOPA's comments may be accessed by [clicking here](#).

The First AOPA Coding & Billing Seminar of 2018 is in Atlanta, GA

The AOPA Coding & Billing Experts are Heading to Atlanta February 26-27, 2018!

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.

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



[Register Now](#)

Questions regarding the seminar may be directed to Joe McTernan at (571) 431-0811 or Devon Bernard at (571) 431-0854.

AOPA Funded Research Now Published

We are pleased to share that the AOPA funded research by Dr. Michael Dillon amputation has now been published in the journal, *Systematic Reviews*. The article, “A systematic review describing incidence rate and prevalence of dysvascular partial foot amputation; how both have changed over time and compare to transtibial amputation” is available through open access. [Read the article.](#)

AOPA is committed to research - [see our other funded projects.](#)

AOPA Submits Comments on the AHRQ Systematic Review Draft Report

In late October 2017, the Agency for Healthcare Quality Research (AHRQ), in conjunction with a contractor known as an Evidence-based Practice Center (EPC) released a draft report on its systematic review of current scientific literature that address the use of lower limb prostheses in the United States.

AOPA reviewed the draft report published by the EPC and unfortunately did not agree with much in the conclusions, particularly its final abstract conclusion that “there is not evidence to support the selection of specific components for patient subgroups to maximize ambulation, function, and quality of life or to minimize abandonment or limited use.” AOPA believes that there is **clear** evidence, apparently not considered by AHRQ or its contractor, to support specific components for

patient subgroups for maximizing favorable patient outcomes. The draft systematic review did not consider recent research by the RAND Corporation and the health economics firm Dobson DaVanzo that specifically studied both the clinical and cost effectiveness of the provision of higher technology prosthetic limbs. In addition, the systematic review either ignored or dismissed the vast majority of research identified by AOPA in its December 2016 comments regarding the key questions that would be explored in the systematic review.

AOPA has submitted extensive comments to the AHRQ urging them to continue work on its systematic review and to consider valuable studies such as the RAND study and the Dobson DaVanzo study in their final report.

[AOPA's comments may be viewed by clicking here.](#)

2018 AOPA Webinars Announced

AOPA is pleased to announce the topics for its 2018 Webinars, which take place on the second Wednesday of each month at 1:00 P.M. Eastern Time. [Register here.](#)

January 10- Lower Limb Prostheses Policy: A Comprehensive Review

February 14-Inpatient Billing

March 14 - Medicare Coding Guidelines: MUEs, PTPs, PDAC, etc.

April 11-Enhancing Cash Flow & Increasing Your Accounts Receivable

May 9 - Coding: Understanding the Basics

June 13- Audits: Know the Types, Know the Players, and Know the Rules

July 11-Administrative Documentation

August 8 --Outcomes & Patient Satisfaction Surveys

September 12-Medicare as Secondary Payer: Knowing the Rules

October 10- Year End Review: How to Wrap-Up & Get Ready for the New Year

November 14: Evaluating Your Compliance Plan & Procedures: How to Audit Your Practice

December 12: New Codes, Medicare Changes & Updates

During these one-hour sessions, AOPA experts provide the most up-to-date information on a specific topic. Perfect for the entire staff-- a great team-building, money-saving, educational experience! Sign up for the entire series and get two conferences FREE. Entire Series (\$990 Members/\$1,990 Non-Members). [Register here.](#)

HCPCS Code Changes for 2018

The Centers for Medicare and Medicaid Services (CMS) has released the new HCPCS codes for 2018, and there were only a few minor changes. Below is a complete breakdown of the code changes which will be effective for claims with a date of service on or after January 1, 2018.

New Codes

Code	Descriptor
L3761	Elbow orthosis with adjustable position locking joint(s), prefabricated, off-the-shelf
L7700	Gasket or seal, for use with prosthetic socket insert, any type, each

Changes in Code Descriptors

Code	New Descriptor	Old Descriptor
L3760	Elbow orthosis, with adjustable position locking joint(s), prefabricated, item that has been trimmed, bent, molded, assembled, or otherwise customized to fit a specific patient by an individual with expertise	Elbow orthosis, with adjustable position locking joint(s), prefabricated, includes fitting and adjustments, any type

AOPA's Coding and Reimbursement Committee will review the list of changes and provide appropriate comments to CMS.

As a reminder registration is still open for the December 13, 2017 AOPAversity webinar, [New Codes & Other Updates for 2018](#), which will focus on the changes to the HCPCS code set and any other upcoming Medicare changes which may impact your business in 2018.

Questions regarding the code changes may be directed to Joe McTernan at jmcternan@AOPAnet.org, or Devon Bernard at dbernard@AOPAnet.org.

CMS Responds to AOPA Concerns Regarding Custom Fabricated Diabetic Inserts

AOPA is pleased to announce that the Centers for Medicare and Medicaid Services (CMS) has proposed a change to the DMEPOS Quality Standards that addresses AOPA's concern regarding the recent DME MAC/PDAC interpretation of the term "molded to patient model" when used to describe custom fabricated diabetic shoe inserts. The proposed change to the quality standards allows for the creation of a digital positive model of the patient's foot using CAD/CAM technology that is then used to direct mill a custom fabricated insert based on the digital model.

In July, 2017, the DME MACs and PDAC issued a joint bulletin that stated that in order to meet the definition of "molded to patient model" contained in the descriptor for A5513, diabetic inserts must be fabricated over a physical model of the patient's foot. The bulletin went on to state that digital or virtual models that were used to direct mill custom inserts are not considered a positive model and inserts fabricated using this technique do not meet the code requirements of A5513 and therefore must be billed as A9270, a statutorily non-covered HCPCS code. On September 28, 2017, AOPA and the American Podiatric Medical Association (APMA) submitted a joint letter to CMS expressing their concern over this bulletin as it represented a significant threat to the use of advanced technology to provide better clinical service. In addition to working directly with the APMA, AOPA worked closely with the O&P Alliance, Representative Wenstrup's (R-OH) office, his staff, and the House VA Subcommittee on Health to make sure that this issue remained at the forefront of the discussion.

On November 2, 2017, CMS announced a proposed change to the DMEPOS Quality standards that would include the use of digital or virtual models to direct mill custom diabetic inserts as an acceptable method to meet the definition of "molded to patient model" contained in the code language for A5513. CMS will hold an Open Door Forum call on November 28, 2017 at 2:00 pm EST to allow experts to discuss the proposed changes to the DMEPOS Quality Standards and will

accept comments on the proposed changes through December 11, 2017. Comments on the proposed changes may be sent to CMS via e-mail at ReducingProviderBurden@cms.hhs.gov.

CMS has indicated that it intends to finalize the proposed changes by January 1, 2018.

AOPA will participate in the Open Door Forum call and will be preparing comments for submission to CMS. Review the proposed changes [here](#).

CMS Publishes Proposed Rule That Would Provide States with Flexibility in Defining Essential Health Benefits

On November 2, 2017, the Centers for Medicare and Medicaid Services (CMS) published a proposed rule in the *Federal Register* entitled "Patient Protection and Affordable Care Act; HHS Notice of Benefit and Payment Parameters for 2019." Among the provisions in the proposed rule is a section that would provide individual states with increased flexibility in defining essential health benefits (EHB) for purposes of establishing benchmark plans required by the Affordable Care Act.

The proposed rule introduces a new regulation that would allow individual states to either (a) select the EHB-benchmark plan of another state as its own; (b) replace one or more EHB categories of benefits in its EHB-benchmark plan with the same categories of benefits from another state's EHB-benchmark plan; or (c) otherwise select a set of benefits that would become the EHB-benchmark plan so long as the benchmark plan does not exceed the generosity of the most generous of among a set of comparison plans.

AOPA is currently reviewing the 365 page proposed rule but is obviously concerned about the potential impact on beneficiaries of any relaxation of the regulations requiring coverage of essential health benefits, including orthotics and prosthetics. AOPA will be providing comments on the proposed rule by CMS prior to the November 27, 2017 deadline.

The proposed rule may be accessed by [clicking here](#).

Questions regarding this issue may be directed to Joe McTernan at (571) 431-0811 or Devon Bernard at (571) 431-0854.

Take Action Now to Stop the Department of Veterans Affairs from Limiting Your Veteran Patients' Right to Choose

The October 16, 2017 *Federal Register* included a proposed rule published by the Department of Veterans Affairs (VA) that intends to "reorganize and update the current regulations related to prosthetic and rehabilitative items, primarily to clarify eligibility for prosthetic and other rehabilitative items and services, and to define the types of items and services available to eligible veterans."

There is a provision in the proposed rule that significantly threatens longstanding VA policy that allows the veteran to decide whether they receive O&P services directly from the VA or from a VA contracted provider. This provision requires an immediate and powerful response. The proposed language states the following:

"VA will determine whether VA or a VA-authorized vendor will furnish authorized items and services under § 17.3230 to eligible veterans. When VA has the capacity or inventory, VA directly provides items and services to veterans. However, VA also may use, on a case-by case basis, VA authorized vendors to provide greater access, lower cost, and/or a wider range of items and services. We would clarify in regulation that this administrative business decision is made solely by VA to eliminate any possible confusion as to whether a veteran has a right to request items or services generally, or to request specific items or services from a provider other than VA, and to clarify for the benefit of VA-authorized vendors that VA retains this discretion as part of our duty to administer this program in a legally sufficient, fiscally responsible manner."

This language, if finalized, is in direct conflict with the current VA policy as well as the Veteran's Access, Choice, and Accountability Act of 2014 and will significantly restrict the ability of a veteran to see the VA contracted provider of their choice for prosthetic and orthotic care.

AOPA has established a convenient pathway that will allow you to quickly express your concern regarding the VA proposed rule. Simply visit www.AOPAVotes.org, enter some basic information, and a customized letter will be generated and sent to the VA to express your concern over the unnecessary and unreasonable provisions of the proposed rule. [Send comments now.](#)

Patents for Humanity Awards Now Open for Applications

Patents for Humanity, the USPTO's top honor for patent owners and licensees who use game-changing technology to meet humanitarian needs, is now accepting applications for the 2017 - 2018 cycle. Anyone who owns or licenses a U.S. patent or patent application is eligible. Winners receive an acceleration certificate to expedite proceedings at the USPTO, as well as public recognition of their work.



Patents for Humanity recognizes inventions that address global development issues such as medicine, nutrition, sanitation, energy, and living standards. The USPTO invites innovators of all kinds to tell their stories of helping underserved communities through the power of technology. Individuals, corporations, nonprofits, small businesses, academic institutions, and government agencies are all welcome to apply.

This year marks the fourth cycle of the Patents for Humanity program. Previous awardees have improved lives worldwide. [Winners from the last round](#) include Case Western Reserve University, for a low-cost malaria detection device, and startup company GestVision, Inc., for a quick diagnostic test for preeclampsia, a potentially life-threatening pregnancy complication.

If your organization uses patented technology to help address basic human needs, we encourage you to participate. The USPTO will accept applications through Dec. 8. Please submit your completed application online through the [Patents for Humanity page of the USPTO website](#). For more information, contact patentsforhumanity@uspto.gov [\(link sends e-mail\)](#) or join us for an [informational webinar on Tuesday, Nov. 7](#) [\(link is external\)](#) from 2-4 p.m. ET.

Promote your Brand with AOPA's new Apparel Program



AOPA is partnering with Encompass Group, a leading provider of health care apparel to offer members special prices on customized polos, scrub tops and lab coats. Customized embroidery is available.

For more information on products and available colors, go to www.iconscrubs.com. Enter access code: ICON-AOPA. Then enter your AOPA member id, and create your user profile. Contact bleppin@AOPAnet.org for additional information or call 571-431-0810.

Upcoming AOPA Events

- | | |
|----------------------|---|
| December 13, 2017 | <i>New Codes & Other Updates for 2018</i>
AOPA Webinar
Learn more and register here |
| January 5-7, 2018 | AOPA Leadership Conference (Invitation Only)
Palm Beach, FL |
| February 26-27, 2018 | Coding & Billing Seminar
Atlanta, Georgia
Learn more and register here |