AOPA In Advance SmartBrief
Breaking News
January 23, 2018

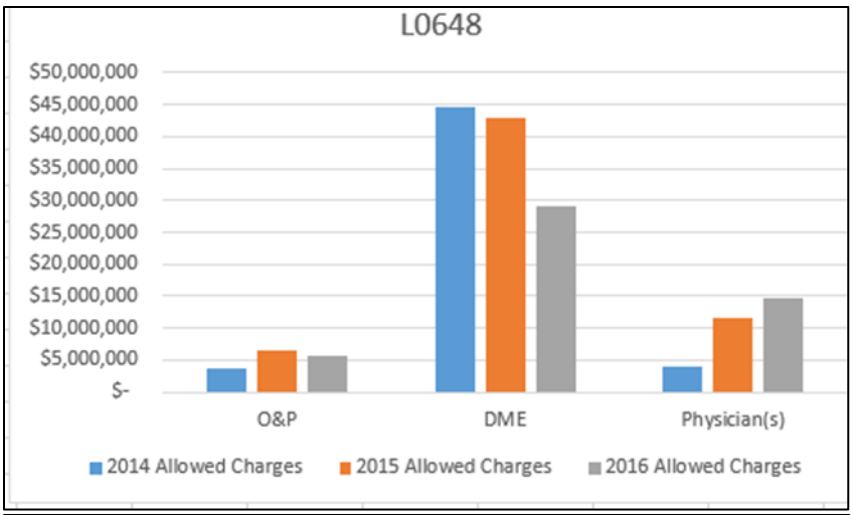
AOPA Headlines:

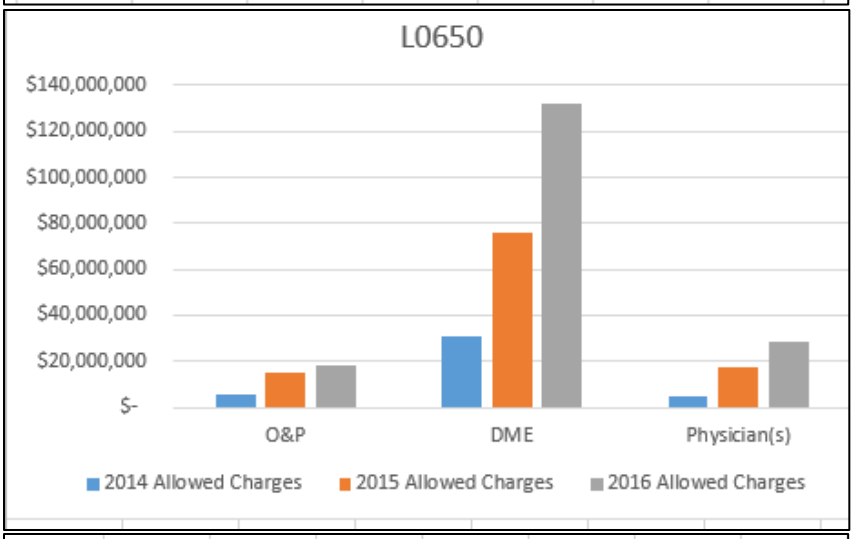
OIG Work Plan Targets OTS Spinal and OTS Knee Orthoses

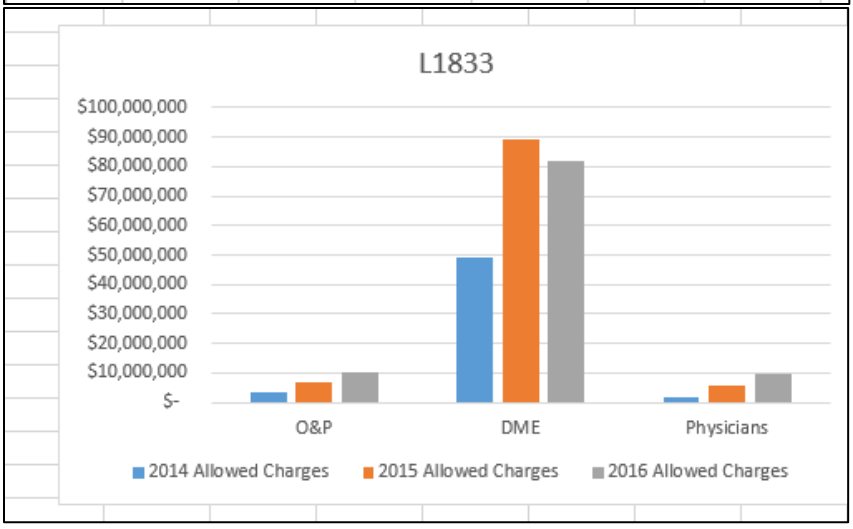
As part of its update to its 2018 work plan, the Department of Health and Human Services Office of Inspector General (OIG) announced that, based on abnormally high utilization and unusually high improper payment rates, two off the shelf (OTS) HCPCS codes that describe lumbar sacral orthoses (L0648 and L0650) and one OTS knee orthosis code (L1833) will be added as an area of focus for investigation by the OIG. All three codes identified by the OIG are part of the split code set created by CMS in 2014 that differentiated OTS orthoses from those that require the expertise of a certified orthotist or an equivalently trained professional.

In its announcement the OIG reported that, since 2014, claims for the three OTS codes have grown by 97% with allowed charges rising to $349 million in 2016. The OIG plans to explore questionable billing practices for these three codes including the lack of medical necessity documentation from referring providers and instances where no patient/physician encounter occurred within the 12 months prior to provision of the orthosis.

Based on Medicare utilization data from 2014 until 2016 AOPA has determined that less than 10% of the OTS devices described by L0648, L0650, and L1833 were provided by traditional O&P companies. The vast majority of these devices, over 65%, were provided by DME suppliers without certified O&P professionals on staff. The graphs below show the overall utilization of each code by O&P providers, DME providers, and physicians.







While traditional O&P providers represent a small percentage of the overall utilization of these three codes, it remains wise to make sure that, when providing OTS orthoses described by these codes and any other codes, proper medical necessity documentation is maintained by the ordering physician and all Medicare policy requirements have been met. While L0648, L0650, and L1833 have not previously been identified as approved for RAC review, the outcome of the OIG review may possibly lead to additional audit activity by the RAC and other contractors. See the OIG Work Plan.

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

Shirley Ryan AbilityLab Survey for Custom AFOs

The Shirley Ryan AbilityLab (formerly the Rehabilitation Institute of Chicago), is conducting a research study to obtain input from certified orthotists and physical therapists about quality of care indicators for custom AFO users for the project "Enhancing Quality of Orthotic Services with Process and Outcome Information" (Northwestern University IRB # STU00203034). This project aims to improve the quality of services for custom ankle-foot-orthosis (AFO) users by identifying indicators of high quality services.

The survey will take about 15-25 minutes to complete.. Contact Jamal Spraggins at 312-238-4856 (jspraggins@sralab.org) or Ontonio Jackson-Lucas at 312-238-3050 (ojacksonlu@sralab.org) with any questions. Take the Survey.

Scheck & Siress Welcomes Two New Shareholders

Scheck & Siress is pleased to announce Jason Wening, CPO, and Lakshmi Narayan Shandilya, CPO, as the newest shareholders of the firm. Jason Wening, CPO/LPO, MS, FAAOP, completed his prosthetics and orthotics training at Northwestern University and joined Scheck & Siress in 2005. Jason is an American Board Certified and Illinois Licensed Prosthetist & Orthotist, and brings a unique perspective to patient care. He is both a bilateral amputee and a biomechanist.

With over 15 years of experience in the orthotics and prosthetics field, Lakshmi Narayan is an American Board Certified and Illinois Licensed Prosthetist & Orthotist at Scheck & Siress' University of Illinois at Chicago center. He attends the Ambulatory Rehab Amputee, Neuro-Rehab, Spine-Scoliosis, and Pediatric Orthopedic clinics each week at the University of Illinois Hospital & Health Sciences System in Chicago.

CMS Issues Temporary "K" Code to Describe Direct Milled, Custom Fabricated Diabetic Inserts

On January 11, 2018, as part of its quarterly HCPCS update, the Centers for Medicare and Medicaid Services (CMS) issued a new HCPCS code to describe direct milled, custom fabricated diabetic inserts. The new code is effective April 1, 2018 reads as follows:

> K0903--For Diabetics Only, Multiple Density Insert, Made By Direct Carving With CAM Technology From A Rectified CAD Model Created From A Digitized Scan Of The Patient, Total Contact With Patient's Foot, Including Arch, Base Layer Minimum Of 3/16 Inch Material Of Shore A 35 Durometer (Or Higher), Includes Arch Filler And Other Shaping Material, Custom Fabricated, Each

The new code is categorized as a "K" code which is technically a temporary code designed to allow CMS to track utilization prior to deciding whether to issue a permanent HCPCS code, in this case an "A" code. Any codes that are created mid-year must be issued as "K" codes.

The purpose of the K code is to differentiate between custom fabricated diabetic inserts that are molded over a physical model of the patient's foot (A5513) from those that are direct milled based on a digital or virtual model of the patient's foot. While both manufacturing processes result in functionally identical custom fabricated, total contact inserts, CMS has indicated that direct milled inserts, while qualified to meet the DMEPOS Supplier Standards definition of molded to patient model, do not meet the requirements of A5513. AOPA has challenged this premise and is continuing to discuss this issue with high ranking CMS officials.

A fee schedule for K0903 has not been released. CMS has previously indicated that Medicare reimbursement for direct milled inserts would be 14% lower than the current reimbursement rate for custom molded inserts described by A5513 due to the lack of creation of a physical model of the patient's foot. AOPA disagrees with CMS on this issue and provided extensive comments regarding reimbursement for direct milled inserts in its formal submission to CMS.
AOPA will continue to follow this issue closely and will provide additional information upon its release by CMS.

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

2018 Quick Coders are Now Available

Stop searching through numerous pages to find a code! AOPA's 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.

Only $30 for members/$80 for non-members

Shop in the bookstore.

AOPA 2018 Policy Forum Dates Announced – March 7 & 8

The 2018 AOPA Policy Forum will be in March 7-8 in Washington, DC. The Policy Forum is your best opportunity to learn the latest legislative and regulatory details and how they will affect you, your business and your patients. Once you are armed with the facts, we as a profession will educate our members of Congress to offer common sense solutions and share how the O&P profession restores lives and puts people back to work. More details and registration will be coming soon. Learn more.

Present at the 2018 AOPA National Assembly in Vancouver, Canada

Gain International Recognition * Advance Your Career * Improve Patient Care

AOPA is seeking high-quality educational and research content for the 2018 AOPA National Assembly, September 26-29 in Vancouver, BC, Canada. **All submissions are due March 1, 2018.**

Your submissions will set the stage for a broad curriculum of high-value clinical and scientific offerings at the National Assembly. All free paper abstracts must be submitted electronically. Abstracts submitted by e-mail or fax will not be considered. All abstracts will be considered for both podium and poster presentations. The review committee will grade each submission via a blind review process, based on the criteria below and reach a decision regarding acceptance of abstracts.

- Relevance, level of interest in topic
- Quality of Scientific Content
- Quality of Clinical Content

AOPA NATIONAL ASSEMBLY 2018
SEPT. 26-29 | VANCOUVER | CANADA

Clinical Free Papers - Present an Orthotic, Prosthetic or Pedorthic Free Paper. The top scoring papers will compete for the prestigious Thranhardt Award.
Technician Program - Submit your Technical education paper for submission the Technical Track.
Symposia - If you are interested in organizing a Symposium.
Business Education Program - The top papers will be considered for the prestigious Sam E. Hamontree, CP (E) Business Education Award.
Pedorthic Program - Healthcare professionals with an interest in Pedorthics should use this form.

Learn more.

Upcoming AOPA Events

February 14, 2018	*Inpatient Billing* AOPA Webinar Learn more and register here
February 26-27, 2018	Coding & Billing Seminar Atlanta, Georgia Learn more and register here
March 7-8, 2018	AOPA Policy Forum Washington, D.C. Learn more here