



American Orthotic & Prosthetic Association

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AOPA In Advance SmartBrief
Breaking News
October 9, 2018

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Mark your Calendars for Healthcare Compliance & Ethic Week – Nov. 4-10

How is AOPA celebrating Healthcare Compliance & Ethics Week?

Next week AOPA and our members are celebrating the first annual Healthcare Compliance & Ethics Week, with daily activities. Every day AOPA will send out a Compliance Tip and question of the day. Answer each day's Compliance question for a chance to win one of 3 daily prizes:

- \$100 Visa card
- AOPA Compliance Guide
- Office fun pack (4 HCEW mugs, 4 HCEW pens, and 4 HCEW charger sets)

Follow us on [Facebook](#) and [Twitter](#) for daily updates. Other special events during the Week:

November 5	1:00 PM EST Webinar -FREE for AOPA members Creating a Compliant Office: Healthcare Compliance & Ethics Week
November 6	1:00 PM EST Webinar -FREE for AOPA members Texting and E-mail with Patients: Patient Requests and Complying with HIPAA: Healthcare Compliance & Ethics Week
November 7	1:00 PM EST Webinar -FREE for AOPA members Defining, Mitigating and Reducing Harassment in the Workplace: Healthcare Compliance & Ethics Week

November 8	1:00 PM EST Webinar -FREE for AOPA members Top Ten Things You Need to Know to Create a Chart Audit
November 9	1:00 PM EST Webinar -FREE for AOPA members Panel Discussion on Cyber Security

AOPA Submits Comments on Draft Lower Limb Prosthesis Policy Released by Blue Cross Blue Shield of IL, TX, MT, NM, and OK

On October 1, 2018, AOPA submitted comments on a draft policy governing coverage of lower limb prostheses, including microprocessor-controlled prostheses issued by Health Care Services Corporation (HCSC), which operates Blue Cross Blue Shield of Illinois, Texas, Montana, New Mexico, and Oklahoma. The draft policy, as written will significantly reduce access to advanced prosthetic technology for BCBS subscribers in these five states. AOPA expressed its concern regarding the draft policy in its comments which are summarized below and linked at the end of this article.

AOPA's first concern is that HCSC published the draft policy on September 15, 2018 with comments due no later than October 1, 2018. AOPA commented that 15 days was not sufficient time to perform a complete review of the draft policy and provide informed comments. AOPA suggested a minimum 60-day comment period to allow stakeholders adequate time to comment on the draft policy. Despite the unrealistic deadline, AOPA submitted comprehensive comments regarding the draft policy and negative impact it will have on BCBS subscribers.

AOPA commented that the draft policy is unnecessarily restrictive and will limit access to advanced technology, especially to BCBS subscribers who may be classified as limited community ambulators (K2) but may benefit more from receiving microprocessor-controlled prosthetic knees. AOPA referenced studies published by the RAND Corporation, the health economics firm Dobson-DaVanzo, and the Mayo Clinic that showed that the use of microprocessor-controlled knees by limited community ambulators reduced the rate of falls and fall related injuries. The draft policy would effectively eliminate BCBS coverage except for patients who were assessed as high functioning community ambulators (top percentage of K3 patients).

AOPA's comments also referenced the recent report of the inter-agency workgroup that was convened to provide a consensus statement on Medicare coverage of lower limb prostheses after the Medicare draft LCD was released several years ago. The inter-agency workgroup recommended the potential creation of a National Coverage Determination that would address Medicare coverage of microprocessor knee in K2 patients. AOPA's comments expressed concern that restricting access to advanced prosthetic technology was not in BCBS' best interest nor the best interest of their subscribers as it was contradictory to the consensus statement of the inter-agency workgroup and the overall health of their subscribers.

AOPA is hopeful that HCSC will seriously consider AOPA's comments before publishing the final version of the policy revision.

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

AOPA 101st National Assembly Highlights

AOPA's 101st National Assembly proved to be another success for AOPA and the O&P community. Exhibitors and attendees came from over twenty countries, making it an insightful global event.

The exhibit hall opened with an original performance from MUSQUEAM – “People of the River Grass.” The Musqueam people are the oldest known residents of Vancouver and have lived here for thousands of years.



The morning opening session featured key note speaker, Tobie Hatfield, senior director of athlete innovation for Nike. Following Hatfield's world class insights, were the Award Winning Thranhardt Lecture series.



The educational line-up included *Outcomes and Evidence-Based Practice in P&O: How are you Documenting Value in your Clinic and Using it to Improve Reimbursement?*

Presenters of this panel included James Campbell, PhD, CO, FAAOP, Brian Hafner, PhD, Andreas Hahn, PhD, PE, Russell Lundstrom, MS, Brittany Pousett, CP(c), MSc, and Scott Sabolich, CP.

Friday morning's AOPA Annual Membership Business Meeting presented the Lifetime Achievement Award to C. Michael Schuch, CPO, FAAOP, FISPO (deceased). Barbara Schuch accepted the award on behalf of her husband. The Ralph R. “Ronney” Snell, CPO, FAAOP, Legislative Advocacy Award was presented to both Denise Hoffmann and Pam Lupo, CO. The Edwin and Kathryn Arbogast Award for best prosthetic abstract was presented to Katherine Ching from the University of Pittsburgh for *An Analysis of Internal Consistency within OPUS in Upper Extremity*. The Otto and Lucille Becker Award for best orthotic abstract was presented to Peter Zenger from the University of Pittsburgh for *Self-Efficacy Related to Education Level in O&P*.



Popular education sessions included, *Technology for Geriatrics, WHO Standards for Prosthetics and Orthotics (Policy, Products, Personnel, & Provision), Multi-disciplinary Panel on Rehabilitation of the Paretic Arm, and Business Management for Today's O&P Facility*, to name a few.

Saturday featured a key note by Mike Schultz, two-time Paralympic medalist, followed by a summation of Orthotics 2020 – Defending the Future of Orthotic Care, presented by Tom Fise, JD, and Nicholas LeCursi, CO, which discussed the establishment of the Medical Advisory Board (MAB) who are working cooperatively to advance non-branded studies and data to assess outcomes across identified categories of treatment. Five workgroups



have been established to focus on the areas of stroke, osteoarthritis, cranial orthoses, scoliosis and spinal bracing.



Attendees enjoyed the various Special Events happening in the Exhibit Hall, such as the Slap Shot Hockey Game, sponsored by ALPS, with prizes up to \$100 and the annual Technical Fabrication Contest with twelve winners totaling prizes of \$4200. The Party with a Purpose fundraiser for AOPA's government relations efforts brought in over \$30,000, at an exclusive party featuring a 1970's theme.

A special and resounding THANK YOU to the sponsors of the 2018 AOPA National Assembly! AOPA could not create such a successful event without our incredible sponsors.

See all the photos on [Flickr](#) and search #AOPA2018 on Twitter.

NIH and DOD Seek to Develop Limb Loss and National Preservation Registry

A new database supported by the National Institutes of Health and the Department of Defense aims to establish the number of people in the United States living with limb loss and to provide insight on their challenges and needs. The Limb Loss and Preservation Registry, expected to be operational in 2020 will be the first national registry of people who have lost limbs and promises to collect data that will improve prevention, treatment and rehabilitation efforts for this population.

"The Limb Loss and Preservation Registry addresses a significant public health knowledge gap," said Dr. Alison Cernich, director of the National Center for Medical Rehabilitation Research (NCMRR) within NIH's Eunice Kennedy Shriver National Institute of Child Health and Human Development. "The information housed in this database will be vital to preventing limb loss, improving amputation surgeries, refining rehabilitation approaches and guiding the development of devices for people with limb loss."

NCMRR leads NIH efforts to study recovery and rehabilitation after limb loss. NICHD has awarded a five-year contract, capped at \$5 million, to the Mayo Clinic to develop and launch the registry. Registry data will include electronic health records of U.S. adults and children. Researchers studying diseases and conditions that can contribute to limb loss, such as vascular disease and diabetes, will have access to the registry, Dr. Cernich said.

Limb loss also can be caused by a traumatic injury, surgical procedure or through [congenital amputation](#). The registry aims to represent the U.S. population, demographically and geographically. Researchers will be able to sort the data by age, gender and type of limb loss.

NIH is partnering with DoD on developing the registry in an effort to improve the quality of care for active military personnel, veterans and civilian members of the population. According to Dr. Cernich, there aren't enough amputations within DoD alone to provide a sufficiently large sample from which to draw statistically valid conclusions. In addition, data available from DoD and the Department of Veterans Affairs do not include service members who leave the military and seek care in the private sector.

The Limb Loss and Preservation Registry highlights the ongoing coordination and collaboration among federal partners in rehabilitation research.

"The joint effort between federal agencies allows us to collect data that will inform research and improve the lives of all citizens coping with limb loss," Cernich said.

About the Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD): NICHD conducts and supports research in the United States and throughout the world on fetal, infant and child development; maternal, child and family health; reproductive biology and population issues; and medical rehabilitation. [For more information, click here.](#)

RAC Audits for Custom Fabricated Knee Orthoses Announced

Performant Recovery, the national Home Health, Hospice, and DMEPOS RAC contractor, has announced that it will be initiating a post-payment complex medical review for custom fabricated knee orthoses (KO) described by HCPCS codes L1844 and L1846. Performant Recovery added the review to its list of approved issues on September 14, 2018. Providers whose claims are selected for review will receive a letter from Performant Recovery requesting relevant documentation to support medical necessity for the orthoses that was provided.

If you receive an additional documentation request (ADR) from Performant Recovery, it is very important to respond - failure to do so will result in automatic claim denial and recovery of any payments previously made. As with all RAC reviews, specific rules are in place that limit the number of ADRs that O&P providers may receive to a maximum of 10 ADRs per Tax ID every 45 days, and the lookback period for reviews is three years.

The RAC audit for custom KOs is the third O&P specific approved issue since the award of the new RAC contract to Performant Recovery. The RAC announcement on the audit of custom KOs may be found by [clicking here](#) and searching for issue 0107.

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

AOPA Submits Comments Regarding Improving the Medicare Gap Filling Process

On September 10, 2018, AOPA submitted formal comments to CMS regarding suggestions on how to improve the "gap filling" process that is currently used to establish Medicare fee schedule amount for new HCPCS codes. The opportunity to provide comments was the result of the annual proposed rule regarding Medicare coverage of End Stage Renal Disease (ESRD) and DMEPOS competitive bidding. The proposed rule requested suggestions from interested parties on how to improve the gap filling process.

Gap filling is used to establish Medicare fee schedules for new HCPCS codes. Current statutory requirements mandate that when a new code is issued, CMS establishes a base price for the device, deflates the price to 1986-1987 rates by applying the annual consumer pricing index for urban areas (CPI-U) and then re-inflates it by applying the annual update to the Medicare O&P fee schedule. Since the O&P update has not always equaled the CPI-U, gap filling results in a slightly lower price than the base price that was established for the device.

The gap filling process has never been transparent and represents an archaic and outdated process that does not consider important factors such as professional service and clinical expertise when calculating Medicare fee schedules. AOPA welcomed the opportunity to provide comments and made several suggestions it believes will greatly improve the current system.

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

Attend the Las Vegas Coding & Billing Seminar November 12-13

***The Tropicana Las Vegas
3801 S Las Vegas Blvd
Las Vegas, NV 89109***

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

Upcoming AOPA Events

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| October 10, 2018 | <i>Year End Review: How to Wrap-Up & Get Ready for the New Year</i>
AOPA Webinar
Learn more and register here |
| November 4-10, 2018 | <i>AOPA Healthcare Compliance & Ethic's Week</i>
AOPA Sponsored Events
Learn more here |
| December 12, 2018 | <i>New Codes, Medicare Changes & Updates</i>
AOPA Webinar
Learn more and register here |