



American Orthotic & Prosthetic Association

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AOPA In Advance SmartBrief

Breaking News

March 28, 2017

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<p>Alarming Changes to Connecticut Medicaid Policies on Cranial Orthoses and other L Codes - Take action by March 30th</p>

Go to AOPAvotes.org by **March 30th** to make sure your voice is heard!

AOPA is alerting all its Connecticut Members about two recent announcements from Connecticut Medicaid announcing new policies. Proposed changes include the elimination of some L-Codes from the Connecticut Medicaid fee schedule due to lack of utilization, as well as a 10% reduction in the fee schedule for several custom fitted or custom fabricated orthosis HCPCS codes.

One proposed reimbursement change that is of particular concern is a 40% reduction in Connecticut Medicaid reimbursement for cranial remolding orthoses described by HCPCS code S1040. The notice from Connecticut Medicaid states that the 40% reduction is to "ensure consistency with reimbursement rates of other states and to contain costs." In addition to the proposed 40% reduction in reimbursement for cranial remolding orthoses, there are also proposed changes to the prior authorization process for cranial remolding orthoses that may lead to unnecessary and inappropriate delays in the provision of quality care.

Connecticut Medicaid is accepting comments regarding these policy changes through the close of business on Thursday, March 30, 2017. AOPA members in Connecticut are encouraged

to click through to the [AOPAVotes website](#), where you will find details of how to submit comments, as well as a sample letter you can use easily to express your concerns.

[Read the announcement from the Connecticut Medicaid.](#)

If you have any questions, please contact Joe McTernan at jmcternan@AOPAnet.org or 571/431-0811.

House Positioning on H.R. 1628, the 'American Health Care Act'

As you are aware from the major news outlets, after a substantial 'run-up' and negotiations, the House leadership cancelled votes that had been slated for both Thursday and Friday on the House legislation to repeal and replace the Affordable Care Act (ACA), entitled H.R. 1628, the "American Health Care Act" (AHCA). What will this mean, at least in the short term, for O&P patients and providers?

While not in the original bill, one turn in the negotiations was announced as an amendment to the bill so that H.R. 1628 would have resulted in repeal of the ACA's "essential health benefits." There is a general consensus that this action would have posed potentially significant challenges for some, perhaps many of our patients and would likely have been detrimental for O&P. The assurance that "habilitative and rehabilitative services" (it was one of the ten categories is the ACA that every federally-approved health plan was required to include) must be included in health plans would have been eliminated.

This action, coupled with the bill's plan to change the federal Medicaid matching funds provided to the states could have been expected to prompt a renewal of more state efforts to slice Medicaid, similar to AZ a few years back dictating 'no microprocessors, and no orthotic coverage for anyone over 18.' When Medicaid was enacted decades ago, the law did not articulate an explicit assurance of an O&P benefit for these patients... the ACA's 'essential health benefits' did serve as a fairly explicit assurance for O&P care, which largely blocked such state Medicaid O&P cutback efforts.

Another component of the House repeal and replace plan was authorization for the sale of health insurance policies across state lines, a step that concerned many in the patient community. It would have resulted in requiring 'falling back' largely on what protections are offered via state-by-state parity law protections. The much-discussed selling of insurance across state lines would also have an important impact, as it would create a 'least common denominator' effect. Hypothetically, if CA has a strong parity law with patient protections, and UT does not, when that UT carrier sells a policy in CA, it will not have to measure up to the stricter CA parity provisions.

With no vote having occurred on H.R. 1628, there is at present not a bill on any fast track in either House or Senate to repeal and/or replace the Affordable Care Act, so in the short term, the status quo prevails, albeit with limitations as to the number of options enjoyed on the insurance exchanges by patients in many areas of the country, and other shortcomings of the ACA. Obviously, this is a complicated picture, with lots of uncertainties as to if and when other legislative initiatives may move on this. AOPA will continue to keep you informed of significant developments. Those who tracked the House proceedings, and who have attended recent AOPA Policy Fora saw a couple of familiar faces often referenced in the H.R. 1628 deliberations. Both Rep. Mark Meadows (R-NC) the Chair of the House Freedom Caucus, and Rep. Charlie Dent (R-PA) have spoken at the AOPA Policy Forum in recent years. Both were interviewed frequently, and their views often mentioned in accounts of the House process and proceedings. Don't be left out -

come to the AOPA Policy Forum, in Washington D.C., May 24-25. Become an insider on what is happening in health care, and assure that your voice is heard! [Learn more about the Policy Forum.](#)

ABC to Sponsor *Presidential Papers* at 2017 AOPA World Congress

AOPA is pleased to announce that the American Board for Certification in Orthotics, Prosthetics & Pedorthics (ABC) will sponsor the 2017 World Congress' *Presidential Papers* – representing the top-ten clinical education submissions of original research and backed by a full manuscript. The *Presidential Papers* will be published in a special supplement of the *Journal of NeuroEngineering and Rehabilitation*. ABC's commitment and support will make this research available worldwide through the journal and accompanying search indexes such as Medline.

ABC will also be an official partner of the 2017 AOPA World Congress along with other international partner organizations. The World Congress will be September 6-9, 2017 in Las Vegas, NV, USA. "We are pleased to have a role in positively impacting the dissemination of scientific O&P research, clinical care and methodologies, not only to ABC certifiers but also to those who will utilize this research to impact the future of the profession," said ABC's President Eric Ramcharan, CPO.

"ABC has once again proven its commitment to O&P education and supporting professionals in the field. We are excited to present the *Presidential Papers* at the 2017 World Congress, and are honored by ABC's sponsorship," said AOPA's President Michael Oros, FAAOP, CPO, LPO.

ABC joins the following organizations as World Congress partners: Orthotics and Prosthetics Association of India (OPAI), the Charcot-Marie-Tooth Association (CMTA), Amputee Coalition, ConFairMed, Mexico-National Member Society of ISPO, Orthotics Prosthetics Canada, US Member Society of ISPO, and Uniting Frontiers.

Questions? Please contact Lauren Anderson, AOPA's Manager of Communications, Policy, and Strategic Initiatives at 571/431-0843 or landerson@aopanet.org.

DME MACs Update Policies for AFO/KAFOs, Knee Orthoses, and Spinal Orthoses

On March 16, 2017, the four Durable Medical Equipment Medicare Administrative Contractors (DME MACs) published updated Local Coverage Determinations (LCDs) and Policy Articles for AFO/KAFOs, Knee Orthoses, and Spinal Orthoses. While the changes are mostly format based, there were some minor changes that may impact how you bill Medicare for these services.

The format change that applies to all three policies and will be implemented for other policies in the future is the removal of the "standard documentation" sections of the LCD and Policy Article. This section has been removed from each of the LCDs and Policy Articles and moved to a standalone document that is included as an addendum to each policy. This was done to eliminate the need to update and revise multiple policies whenever a slight change was made to standard documentation requirements. Creating a single standard documentation document that applies to all LCDs and Policy Articles, the DME MACs will only need to update a single document rather than countless individual policies. It is important to note that standard documentation requirements remain in effect and are not diminished in any way as a result of their removal from the body of the LCD and Policy Article. It is important to make sure that standard documentation

requirements are reviewed regularly and that all of the standard documentation requirements continue to be met. Policy specific revisions include the addition of ICD-10 codes that describe acquire genu recurvatum of the knee as eligible for coverage of L1850, the deletion of codes that were discontinued as of December 31, 2016, the addition of codes that were effective January 1, 2017, and the removal of diagnoses codes that describe charcot deformity of the knee as eligible for coverage of L4631.

An interesting revision to all three policies is a clarification regarding the use of HCPCS codes that do not differentiate between custom fitted by an individual with expertise and OTS. These codes simply state “prefabricated, includes fitting and adjustment.” There was some question regarding the proper use of these codes since they did not distinguish whether a device was custom fitted or provided OTS. The policy revisions clearly state that these codes should be used to describe prefabricated devices regardless of whether they are provided as custom fitted or OTS. This clarification only applies to those HCPCS codes that are not part of a split code set. The revised policies may be viewed on the medical policy page of each of the four DME MAC websites.

Questions regarding the policy revisions may be directed to Joe McTernan at jmcternan@AOPAnet.org or Devon Bernard at dbernard@AOPAnet.org.

Jurisdiction D DME MAC Releases Quarterly Audit Results for L1832, L1843 & L4361

Noridian, the DME MAC for Jurisdiction D, recently released the results of their ongoing service specific review of Knee Orthoses (KO). Between October 2016 and January 2017 Noridian reviewed claims for KOs L1832 and L1843. Here were the results:

- L1832: 139 claims reviewed and 137 claims were denied (99% improper payment rate)
- L1843: 111 claims reviewed and 111 claims were denied (100% improper payment rate)

One of the more common denial reason was that the documentation submitted for review didn't support the need for a custom fit brace. Suppliers are reminded that for braces with the description “customized to fit a specific patient by an individual with expertise,” documentation must include a detailed description of the modifications made at the time of fitting the brace to the beneficiary; and who completed the modifications. Based on these results Noridian will continue its widespread prepayment reviews for L1832, L1843.

Noridian also recently released the results of their ongoing service specific review of the Ankle Foot Knee Orthosis, L4361. Between October 2016 and January 2017 Noridian reviewed 618 claims and 355 were denied; a 58% improper payment rate. This was a drop from the previous 66% improper payment rate, however Noridian will continue its widespread prepayment reviews for L4361.

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

AOPA Pilot Research Grants Announced

The American Orthotic & Prosthetic Association, in partnership with the Center for O&P Learning & Evidence-Based Practice (COPL), is proud to announce a Request for Pilot Grant Proposals in 16 potential areas of orthotic and prosthetic research including an open topic.

There are 16 topics total with a few examples listed below:

- Study community outcomes of patients, such as activity, social interactions, depression and anxiety
- Understand the effects of prosthetic component selection on community activity levels rather than in the lab
- Study the origins/clinical goals and prevalence of prosthesis prescribing patterns
- Link biomechanical performance measures to functional levels
- Open Topics - Beyond the Above Priorities, Top Quality Clinical O&P Research Topics Considered
- [See the rest of the topics in the full RFP.](#)

AOPA and COPL will give preference to grants that address evidence-based clinical application in orthotics and prosthetics. Please post this RFP and share it with your colleagues. *The deadline for proposals is April 28, 2017.*

[Read the full eligibility and application process.](#)

Register Now for the AOPA 2017 Policy Forum

Registration is now open for the 2017 AOPA Policy Forum! The Policy Forum will take place May 24-25 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. [Learn More and Register Now.](#)



Check out AOPA's Commemorative Centennial Website!

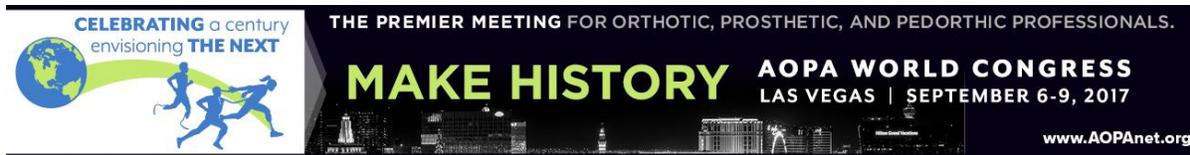
We are pleased to present our new website commemorating our 100 year anniversary – www.AOPA100.org. The website features AOPA's history, an interactive timeline, photo gallery, O&P stories from AOPA members, and AOPA's plans for the future. Listen to stories from other AOPA members and submit your own, and share photos for our photo gallery.



Don't forget to follow AOPA on social media for Throwback Thursday posts all year long! #aopa100!



Exhibit at the 2017 AOPA O&P World Congress in Las Vegas



AOPA is currently accepting exhibit applications for the 2017 AOPA O&P World Congress, which is to be held September 6-9, 2017 in Las Vegas, Nevada in conjunction with AOPA's 100th Anniversary Celebration. Now is your chance to sign up and showcase your products at the largest O&P tradeshow in the Western Hemisphere. This world-wide convention opportunity features 4 days of high-level networking, exhibits, the latest techniques in O&P treatment, and the finest industry specific business and clinical training programs. We hope you make plans to join us. The first Congress was a great learning experience for all and with your participation we can create a larger and even more successful event.

Why you should attend:

- Research and Development expenditures in the United States are more than \$95 billion, making the United States the leader in medical innovation and creating the ideal location for a unique gathering of high visibility and importance.
- Superior Clinical Education featuring the best speakers from around the world. Hear from physicians, researchers and top-notch practitioners.
- Practical Learning and live demonstrations
- Learn how U.S. Health Care reform continues to influence patient care and global health policy.
- Networking with an elite and influential group of professionals.
- Largest Display of exhibits in the United States for the orthotic, prosthetic and pedorthic profession.
- Ideal U.S. Location chosen for travel ease and popularity.

Exhibiting at this important global event will give you the opportunity to:

- Build your customer base and increase sales;
- Experience face-to-face time with existing customers to answer questions and build relationships;
- Enjoy sponsored networking opportunities, including an opening reception in the exhibit hall;
- Take advantage of fun traffic building opportunities;
- Increase visibility for your company/organization in a targeted market;
- Host a Manufacturers Workshop and/or Product Preview Theater;
- Take advantage of education sessions to learn what's happening with health care reform, Medicare, and other regulatory agencies that affect your bottom line;
- Speak to AOPA coding experts to learn what's happening with U.S. government sponsored healthcare programs and what you need to do to sell your products in the U.S.

[Sign up today to exhibit at the 2017 AOPA O&P World Congress.](#) Contact Kelly O'Neill with any questions at koneill@AOPAnet.org or call (571) 431-0852.

Register for the April Coding & Billing Seminar in Denver, CO

The AOPA Coding & Billing Experts are Heading to Denver, Colorado, April 10-11

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

April 10-11, 2017	<i>Coding & Billing Seminar</i> Denver, CO Learn more and register here
April 12, 2017	<i>Grassroots Advocacy</i> AOPA Webinar Learn more and register here
May 24-25, 2017	AOPA Policy Forum Washington, DC Learn more and register here