



**American Orthotic &
Prosthetic Association**

AOPA in Advance

Breaking News for O&P Professionals

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Newsletter Feedback

We invite your comments and questions. Please contact Steven Rybicki at srybicki@AOPAnet.org or (571) 431-0835.

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O&P NEWS

Important Notice to Members: Annual Business Meeting Will Take Place on Wednesday, September 21 at the 2011 AOPA National Assembly

In compliance with **AOPA** bylaws, **AOPA** announces that the 2011 Annual Business Meeting will be held on Wednesday, September 21, 2011 at the Mirage hotel during the **AOPA** National Assembly. Voting instructions and forms will be mailed to each member's last recorded address within the next two weeks. Voting eligibility for **AOPA** members is set forth in **AOPA's** Bylaws. In accordance with Article II, Section 3 of the Bylaws:

Voting Members-Each Patient Care Facility, Supplier, Education and Research member firm shall be entitled to one vote, and shall appoint and certify to the Association an officer or designated employee to be its representative to vote.

Annual business meeting voting guidelines are set forth in **AOPA's** Bylaws. In accordance with Article V, Section 3 of the Bylaws:

Voting-Voting at the annual business meeting may be in-person or by proxy.

Proxy guidelines are set forth in **AOPA's** Bylaws. In accordance with Article V, Section 5 of the Bylaws:

Proxies-The representative of a voting member (as defined in Article II, Section 3) may designate a principal or employee of another member as proxy to act on behalf of the designating voting member at any specific annual or special meeting of the Association. No member may hold more than ten proxies in addition to its own vote. The Board shall prescribe the form and method for submitting proxies.

In the next issue of the *A/A*, **AOPA** will enable members to give their proxy to a member of the Board of Directors in order to ensure that the Annual Business Meeting secures its necessary quorum in order to conduct business.

Question? Contact Steven Rybicki at srybicki@AOPAnet.org or (571) 431-0835.

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2011 National Assembly: Announcing the Otto and Lucille Becker Orthotic Presentation Research Award and the Edwin and Katherine Arbogast Prosthetic Research Award, Two New Awards for Students and Residents

AOPA is proud to unveil at the 2011 National Assembly two new awards available for students and

residents. O&P Students and Residents are invited to present research findings or a particular case study via a poster presentation. The top orthotic and prosthetic presentations will be honored with the following awards:

- The Otto and Lucille Becker Award will be presented for the best orthotic abstract submitted for a poster presentation; and
- The Edwin and Katherine Arbogast Award will be presented for the best prosthetic abstract submitted for a poster presentation.

These awards, made possible by a special endowment by Becker Orthopedic and WillowWood, will honor two meritorious scientific papers submitted for presentation as a poster at the **AOPA** National Assembly. The purpose of these awards is to encourage students and residents to display outstanding posters at the **AOPA** National Assembly. The poster must be exhibited and presented at the **AOPA** National Assembly for the award recipient to receive the prize. The prizes include:

- A \$500 Cash Award
- Complimentary Registration to the Meeting
- Coach Class Airfare
- Three nights lodging
- Paper published in the O&P Almanac and the **AOPA** Website
- Recognition during the National Show

To qualify to present a poster in this category and eligible for consideration for this award, the main author must be a student (baccalaureate or master level) or a resident at a qualified patient care facility. Abstracts will not be considered for either award if they have been previously presented, published, or are currently submitted with pending decision on acceptance elsewhere. The winners will be selected on the basis of abstracts submitted by an independent committee. Abstracts should relate to clinical or research oriented work in the field of orthotics and prosthetics.

[Click here to submit an abstract.](#)

Deadline for submission is August 30. Winners will be notified on or before September 2. Awards will be presented on Wednesday, September 21 General Session during the 2011 **AOPA** National Assembly.

Questions? Contact Stephen Custer at scuster@AOPAnet.org or (571) 431-0876.

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2011 National Assembly Important Announcement: Mirage Room Block Sold Out, Rooms Now Available Across the Street at Harrah's Las Vegas

Due to the overwhelming response **AOPA** has received for National Assembly registration, the **AOPA** room block at the Mirage property has sold out entirely. **AOPA** has made sure, though, to secure additional hotel space for our members. **AOPA** has booked a new room block at Harrah's Las Vegas, across the street and within walking distance from the Mirage, for the low rate of \$124 per night. To take advantage of this offer, call (888) 458-8471 and provide group code SHAPA1.

The **AOPA** National Assembly is "The Place to Be" September 19-22 for an O&P meeting experience like no other. Win great prizes, attend interactive education programs, participate in roundtable discussions, network with peers, take part in fun events, earn CE credits and learn at hands-on workshops, and more.

[Click here to access the 2011 National Assembly Preliminary Program.](#)

[Click here to register for the 2011 National Assembly online.](#)

Questions? Contact Stephen Custer at scuster@AOPAnet.org or (571) 431- 9876.

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U.S. Debt Limit Raised: Negotiated Settlement Suggests Significant Cuts to Medicare Provider Reimbursements Potentially on the Horizon

Last week Congress finally approved and the President signed a bill raising the United States' debt limit in order to meet the nation's fiscal obligations. Due to the terms of the negotiations that occurred, the immediate impact of enactment is a commitment to reductions in discretionary spending programs of \$900 billion over 10 years--but Defense, Medicare, Social Security and Medicaid are all off-the-table for this phase. Under this phase, the President and the Department of the Treasury will receive a two-step capacity to raise debt limit--\$400 billion immediately, and another \$500 billion later this year. Then, the Congressional Committee will be appointed, and they will be charged to identify, reports vary from between \$1.2 billion and \$1.5 billion of, additional deficit reduction. This could be through any combination of spending cuts and revenue increases that the Committee decides, and is supposed to be completed by around Thanksgiving of this year, again with targets to be reached over ten years.

In reality, they will probably be looking to identify savings of an additional \$1.2 trillion, since the savings in interest from not borrowing that amount comes to another \$300 billion saved, which brings the total to the promised \$1.5 trillion. If this Committee fails to reach an accord (or if their accord is rejected by lawmakers) then the \$1.2 trillion in cuts would be extracted from across-the board cuts to government spending, supposedly in proportion to the portion each category of costs accounts for as a percentage of the federal budget. But, Medicaid and Social Security are off-the-table for these "back-up," across-the-board cuts.

Estimates vary, but a consensus is emerging that: (1) it will be hard for this committee to come to an agreement, and that (2) if they don't agree, roughly 50% of the across-the-board savings, or \$600 billion, would come from Defense, with Medicare being the next largest target--being somewhere from 23% to 40% of the total cuts (meaning Medicare could be hit for between \$276 billion to \$480 billion in spending cuts over the ten year period). In all cases, since the Congressional Committee may agree on some portion of savings, but not reach the \$1.2 billion target, the across-the-board would apply to any shortfall, so the amounts noted above for defense and Medicare would be reduced proportionately.

The theory is that Democrats will fight for more taxes and fewer spending cuts, and that Republicans will also keep their shoulders to the wheel to try to avoid having defense cuts be invoked. The bad news as to the potential Medicare cuts, is that it seems that things like premium changes, or other savings chargeable to beneficiaries will be off the table in the across-the-board structure, so the amount extracted from Medicare would be made up virtually entirely in provider payment cuts. This is not a happy picture under any circumstances, but particularly so if you recognize that we already have a "tab" of \$500 billion in Medicare cuts scheduled to pay a portion of the cost for health care reform legislation, so the combined Medicare "tab" in Medicare provider cuts could approach \$1 trillion over the next ten years.

- However they get to the \$1.2 trillion of savings, it will allow the President to authorize essentially a matching amount, i.e., another \$1.2 trillion of increase in the debt ceiling before the 2012 election, which sticks unless it is voted down by at least two-thirds vote of BOTH House of Congress, and even then such disapproval would be subject to Presidential veto. Odds are very steep that Congress would override a Presidential veto because it would require a 2/3 vote in the Democratically-controlled U.S. Senate.

AOPA will continue to keep members apprised of how these ongoing budget cut negotiations develop.

Question? Contact Steven Rybicki at srybicki@AOPAnet.org or (571) 431-0835.

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AOPA Receives Response from HHS Secretary Sebelius Regarding Flawed DOL Report

In May, **AOPA** delivered a letter and packet of materials to Kathleen Sebelius, Secretary of Health and Human Services (HHS), and to Hilda Solis, Secretary of Labor. The packet was a response by **AOPA** to a report from the Department of Labor (DOL) issued to HHS as part of the HHS effort to define what is an "essential health benefit" under the new health care reform law. The report from the DOL speculated that approximately 50 percent of employer plans provided coverage for orthotics and prosthetics. **AOPA** argued to both departments that the number of plans which offer coverage for prosthetics and customized orthotics is, in fact, much higher.

The **AOPA** response raised questions about the flawed Department of Labor report on the basis of it having two major problems. First, the report conducted a search for the coverage of orthotics and prosthetics by using a superficial and limited set of search terms. **AOPA** argued a more robust and accurate set of search terms would have made it more apparent that a high number of private employer health plans cover O&P. Second, **AOPA** pointed out that the Department of Labor did not conduct, as it was instructed, a current survey of employer health plans in order to compile this report. Instead, it relied on only the historical data it possessed. Furthermore, this historical data was collected only from employers (and not from insurers) on a voluntary basis and so there is no way to know the extent to which their data is complete or of representative plans in general.

The packet also contained a background study on this same question conducted by the Society for Human Resource Management that showed approximately 75 percent of employer plans offer O&P coverage. Also included was a letter from Rep. Rob Andrews (D-NJ) supporting inclusion of O&P as an essential health benefit, and similar supportive statements in the Congressional Record by Reps. Miller and Pascrell.

[Click here to access the entire packet AOPA sent to HHS and Labor.](#)

AOPA has received a response from HHS Secretary Sebelius, acknowledging that she understands **AOPA's** concerns and informing **AOPA** that "HHS will launch an effort to collect input from the public, including groups such as the American Orthotic & Prosthetic Association, regarding how to define the essential health benefits."

[Click here to read the response from HHS Secretary Sebelius.](#)

AOPA will continue to keep members updated about this important issue.

Questions? Contact Steven Rybicki at srybicki@AOPAnet.org or (571) 431-0835.

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Potential FDA Changes May Affect Manufacturers

Currently, many O&P devices are exempt from the FDA 510(K) clearance process, also known as Premarket Notification. Nonetheless, in light of recent developments within the FDA which is considering potential changes to the 510(K) clearance process, these exemptions may be subject to change either through (1) internal agency rule changes or modifications to the current 510(k) clearance process or alternatively, (2) by legislative changes, e.g. mandating the creation of an integrated premarket and post-market regulatory framework that serves to replace the current 510 (k) clearance process.

Under option one, FDA may choose to modify the existing regulations to make the 510(k) clearance process requirements more stringent. If FDA pursues this route it is possible FDA may move to revoke many of the exemptions from Premarket Notification that were granted under provisions of the existing law. While this approach may complicate matters, it still allows an avenue to get devices to market without requiring proof of safety or effectiveness and may still allow for exemptions for certain

devices from the 510(k) clearance process.

With regard to option two, as part of the FDA's efforts to assess the current 510(K) clearance process, FDA requested that the Institute of Medicine (IOM) conduct a report on the process. The IOM report was issued on July 29, 2011. On August 1, 2011, FDA released a request for comments titled "the Center for Devices and Radiological Health 510(k) Clearance Process; Institutes of Medicine Report: 'Medical Devices and the Public's Health, The FDA 510(k) Clearance Process at 35 Years.'" FDA specifically requested comments on the IOM Report. The IOM report found that the 510(k) process is "flawed based on its legislative foundation." Further, the IOM report recommended that rather than modifying the 510(k) process, FDA should develop an integrated premarket and post-market regulatory framework that provides "a reasonable assurance of safety and effectiveness throughout the device life cycle." The purported goal of this recommendation is for FDA to increase predictability, transparency, and consistency in all regulatory decisions for devices. The IOM report also heavily stressed the importance of post-market surveillance (e.g., requiring manufacturers to track and report patient data, success rates, complications) and post-market enforcement by the FDA. FDA will not adopt any of the IOM recommendations prior to the close of the comment period, set for September 30, 2011. This proposed approach represents a different route to get a device to market, and would likely require Congress to enact changes to the statutes governing FDA's regulation of medical devices, and may require additional data for Premarket Notification, thus increasing the challenges of getting a device to market.

If FDA chooses to either re-work the existing 510(k) clearance process or, to follow the IOM recommendations and adopt a new premarket and post-market regulatory framework, this has the potential to affect not only devices currently covered under the 510(k) clearance process, but also devices, such as most O&P devices currently marketed, that are exempt from 510(k) clearance.

Questions? Contact Catherine Graf at cgraf@AOPAnet.org or (571) 431-0807.

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Updates from the States on Medicaid Reimbursements for O&P

AOPA has been keeping members apprised of the news from the states on Medicaid reimbursement cuts to O&P that have been under consideration. In May, **AOPA** aided members in Minnesota who had been threatened with the prospect of the state legislature eliminating "'optional' services, including therapies, eyeglasses and prosthetics." This past week **AOPA** received news from member Teri Kuffel, Esq., Vice President of Arise Orthotics & Prosthetics, Inc. that the elimination of prosthetics coverage had been beaten back. The news was mixed, however, because the Minnesota bill includes O&P in an overall 3% rate reduction starting in September of this year.

In Alabama, the news was more positive. **AOPA** member Glenn Crumpton of Alabama Artificial Limb & Orthopedic Service, Inc. sent **AOPA** an after action report of his efforts:

The 2011 legislative session concluded on June 9, 2011 with a late flurry of activity across the board and including the approval of the state's general fund budget which included the line item for P&O services for the 2012 fiscal year. Between 2009 and 2010, we saw a drastic decrease in the benefit which was coupled with an expansion of covered codes such as gel liners. As a result, it was projected that the benefit would reach its maximum payout in the 2011 fiscal year. The Alabama Prosthetic and Orthotic Association (APOA) realized the seriousness of this and to add further insult to injury, the general fund budget was zeroed out deleting every line item which included the P&O funding leaving us to lobby for inclusion in 2012 general fund budget or being left out completely. At that point, the APOA under the leadership of Stephen Blackwell, President, Glenn Crumpton, Government Relations Chairman, and Fred Crawford, Association Manager, established a campaign to raise funds from P&O practices and practitioners in the state to secure the services of a team of lobbyists to address this very critical issue. We were fortunate to have a response that allowed us to move forward. Thanks to the contributions from a number of facilities across the

state, we were successful in preserving the Medicaid benefit for the coming 2012 fiscal year at level funding, with a marginal decrease. Once again, we anticipate reaching maximum payout sometime before the end of the 2012 fiscal year, but on the whole, this was deemed a successful effort because with the coming changes to our nation's health care benefits, it is considered beneficial to be included in states benefits as national policy is established. We would like to thank those who generously stepped to the plate with financial support and devoted time to the effort during the session.

AOPA congratulates Mr. Crumpton and the Alabama Prosthetic & Orthotic Association for their hard work and success in Alabama. **AOPA** encourages all members to keep apprised of state-level budget matters as they affect O&P. **AOPA** will provide assistance to members in threatened states in ways similar to how it has supported members in California, Arizona, Nevada, Minnesota, and Texas.

Questions? Contact Steven Rybicki at srybicki@AOPAnet.org or (571) 431-0835.

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Correction for PDAC Verification of Products Described by L0174

AOPA recently reported that cervical orthoses described by L0174 must be listed on the PDAC product classification list in order to be eligible for Medicare reimbursement. The deadline for manufacturers to have their products reviewed by PDAC and included on the product classification list was inaccurately reported as August 1, 2011. The actual date is August 31, 2011. **AOPA** apologizes for any confusion caused by reporting the incorrect date.

Questions? Contact Devon Bernard at dbernard@AOPAnet.org or (571) 431-0854, or Joe McTernan at jmcternan@AOPAnet.org or (571) 431-0811.

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DME MACs Acknowledge Incorrect Denial of Claims for Prosthetic Does Exempt from the SNF PPS Payment System

All four DME MAC jurisdictions have recently published articles indicating that they have been incorrectly denying claims involving prostheses delivered during a Medicare Part A covered SNF stay. Most prosthetic codes have been exempted from the SNF PPS payment system, meaning you may submit them directly to the DME MAC for payment. The DME MACs have acknowledged that an error in their claim edit process has been incorrectly denying claims for codes that are on the SNF PPS exempt list. While the error will be permanently corrected as part of the January 2012 system update, providers may continue to receive denials for these codes until the solution is implemented. If you have claims denied under these circumstances, the DME MACs have indicated that you should contact their customer service department to have the claims reprocessed. The current list of SNF PPS exempt codes may be found by [clicking here](#) and selecting "File 1" from the list at the bottom of the page.

As a reminder, if a code does not appear on the SNF PPS exemption list, payment for it must be negotiated directly with the SNF.

Questions? Contact Devon Bernard at dbernard@AOPAnet.org or (571) 431-0854, or Joe McTernan at jmcternan@AOPAnet.org or (571) 431-0811.

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Jurisdiction B DME MAC Releases Pre-Payment Review Results for Diabetic Shoes

National Government Services (NGS), who serves as the Jurisdiction B DME MAC recently released a report on the results of pre-payment audits on claims for diabetic shoes. In the 2nd quarter of 2011, NGS reviewed a total of 246 claims for diabetic shoes and reported an overall denial rate of 0.2%.

NGS reviewed a total of 240 claims for diabetic shoes and reported an overall denial rate of 93% including a 53% denial rate due to "no documentation received". This extremely high denial rate indicates that suppliers are either not responding to pre-payment review requests or are unable to obtain the documentation required for coverage of diabetic shoes by Medicare. It is extremely important to make sure that you have access to all required documentation for any claim before you submit it to Medicare for consideration.

Questions? Contact Devon Bernard at dbernard@AOPAnet.org or (571) 431-0854, or Joe McTernan at jmcternan@AOPAnet.org or (571) 431-0811.

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ABN Reminder and Update

In order for an Advanced Beneficiary Notice (ABN) to be considered valid by Medicare it is mandatory that you use the approved Center for Medicare & Medicaid Services (CMS) ABN form, CMS-R-131. The current version of the ABN form was revised and released in March 2008 and its mandatory usage began in March 2009. To verify that you are using the approved ABN form, check the lower left hand corner of your ABN form, it should read Form CMS-R-131 (03/08).

However, beginning November 1, 2011 the current version of the ABN, CMS-R-131 (03/08), will no longer be considered valid by Medicare. You will need to use the revised ABN form, CMS-R-131 (3/11). The new form is available for download from the CMS website.

[Click here to access the form.](#)

Please note that the content or the instructions for the use of the ABN have not changed.

Questions? Contact Devon Bernard at dbernard@AOPAnet.org or (571) 431-0854, or Joe McTernan at jmcternan@AOPAnet.org or (571) 431-0811

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CEDI Trading Partner ID Re-Certification

If you have not already done so, be sure to re-certify your Trading Partner ID with the Common Electronic Data Interchange (CEDI) before August 31, 2011. The Trading Partner ID, or your Submitter ID, is used to log into the CEDI and allows you to submit your claims to Medicare.

If you submit your own claims to Medicare directly and you have not recertified your Trading Partner ID, you should download the CEDI Recertification Form and fax it to the CEDI. [Click here to download a copy of the form.](#)

If you use a Billing Service and/or a Clearinghouse to submit your claims to Medicare or to process any other electronic transactions (remittance advice or claims status inquiries/responses) you don't have to recertify the Trading Partner ID. The recertification of the Trading ID will be the responsibility of the Billing Service or the Clearinghouse. If the recertification is not completed by August 31, 2011 your Trading Partner ID will be made inactive, and you will not be able to submit claims to Medicare.

Questions? Contact Devon Bernard at dbernard@AOPAnet.org or (571) 431-0854, or Joe McTernan at jmcternan@AOPAnet.org or (571) 431-0811.

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O&P PAC Corner

The O&P PAC Corner provides updates on the activities of the O&P PAC, including the names of individuals who have made recent donations to the O&P PAC and the names of candidates the O&P PAC has supported. The O&P PAC recently received donations from the following **AOPA** members (Due to publishing deadlines this list was created on 8/04/2011 and includes only donations received

(Due to publishing deadlines this list was created on 8/7/2011 and includes only donations received between 7/20/2011 and 8/04/2011. Any donations received on or after 8/04/2011 will be published in the next issue of the *AIA*):

- Kel Bergmann, CPO
- Don DeBolt
- Thomas DiBello, CO, LO, FAAOP
- Kathy Dodson
- Mike Fenner CPO, BOCPO, LPO
- Bert Harman
- Russell Hornfisher
- Eileen Levis
- Ralph Nobbe, CPO
- Tom Wessel

The purpose of the O&P PAC is to advocate for legislative or political interests at the federal level, which have an impact on the orthotic and prosthetic community. The O&P PAC achieves this goal by working closely with members of the House and Senate to educate them about the issues, and help elect those individuals who support the orthotic and prosthetic community.

In order to participate in and receive information about the O&P PAC, federal law mandates that you must first sign an authorization form.

[Click here to view and sign an O&P PAC authorization form.](#)

Questions? Contact Devon Bernard at dbernard@AOPAnet.org or (571) 431-0854, or Catherine Graff at cgraff@AOPAnet.org or (571) 431-0807.

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2011 National Assembly News: Donations Needed for the AOPA Wine Tasting and Auction

For the fourth year, **AOPA** is hosting a wine tasting and auction to benefit **AOPA's** Government Relations outreach. Quickly becoming one of the most anticipated Assembly events, the auction offers a chance to learn about and taste a variety of wines, including some made by your fellow members.

AOPA would like to thank the following individuals for their donations to this event:

- Kel Bergmann, CPO
- Frank Bostock, CO
- Cascade Orthopedic Supply
- Don DeBolt
- Thomas DiBello, CO, FAAOP & Leslie DiBello
- Kathy Dodson
- Dave Edwards, CPO, FAAOP & Kathy Edwards, CFm
- Rick Fleetwood
- Richard Gingras, CPO, BOCOP & Marbee Gingras
- Michael Hamontree
- Bert Harman
- Russell Hornfisher
- James Kaiser, CP & Dianne Kaiser
- Anita Liberman-Lamphear, MA & Alan Lamphear
- Jon Leimkuehler, CPO, FAAOP & Ellen Leimkuehler
- Eileen Levis
- Tina Moran
- Ralph Nobbe, CPO & Sharadi Nobbe
- Michael Ors, CPO, LPO & Ann Ors

- Michael Gros, CPO, FAAOP & Ann Gros
- Lisa Schoonmaker, CPO, FAAOP
- Frank Vero, CPO
- Jim Weber, MA & Diane Weber
- Tom Wessel
- Steve Whiteside, CO & Allison Whiteside
- Claudia Zacharias, MBA, CAE

We look forward to seeing you Tuesday, September 20, from 6:30 - 8:00 PM for a friendly bidding war or two!

[Click here to register for the Wine Tasting and Auction.](#)

Questions? Contact Steven Rybicki at srybicki@AOPAnet.org or (571) 431-0835.

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Register for AOPA's August 10 Audio Conference, "How to Get Paid for Miscellaneous and Repair Codes"

Whoever said you can't get paid for miscellaneous codes is not trying hard enough. While securing reimbursement for miscellaneous and repair codes can often be difficult, providing the right information can help you to obtain reimbursement that you deserve. Join **AOPA** on August 10, 2011 for an **AOPA**versity Mastering Medicare Audio Conference that will help you to learn strategies for obtaining reimbursement for miscellaneous codes and repairs. Attendees will learn the following:

- How to maximize the use of the electronic narrative field
- How to provide proper documentation to support your claim
- When to use miscellaneous codes instead of repair codes
- How to differentiate "minor" parts from labor
- How to deal with requests for invoices

The cost of participating is \$99 per line for **AOPA** members (\$199 for non-members) and any number of employees may listen on a given line. Listeners can earn 1.5 continuing education credits by returning the provided quiz within 30 days and scoring at least 80 percent. Contact Devon Bernard at dbernard@AOPAnet.org or (571) 431-0854 with content questions.

[Click here to register online.](#)

Questions? Contact Stephen Custer at scuster@AOPAnet.org (571) 431-0876.

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Announcing AOPA's Final Coding & Billing Seminar of 2011: October 24-25 in Baltimore

Don't miss out on the third and final Coding & Billing seminar of 2011 on October 24-25 at the [Sheraton Inner Harbor](#) in Baltimore, Maryland. Be sure to register early and take advantage of the early bird registration savings and the special low room rate of \$159 per night.

At this seminar, **AOPA** experts will 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 and your colleagues and much more. This two day event will feature break-out sessions for both practitioners and office staff.

In the breakout session Practitioners will cover:

- General Coding Principles
- "Hands on" coding of specific devices

- Hands on coding of specific devices
- Proper coding for repairs and adjustments
- Reimbursement for unlisted codes
- Codes that are mutually exclusive and should not be billed together

In the breakout session Administrators will cover:

- Updated Quality and Supplier Standards
- Strategies for handling appeals and denials
- How to handle unique billing situations
- Documentation Requirements
- Medicare as Secondary Payer

[Click here to register for the Baltimore Coding & Billing Seminar.](#)

[Click here to reserve your room at the Sheraton Inner Harbor and take advantage of the low Coding & Billing Seminar rate of \\$159 per night or call \(410\) 962-8300. Be sure to mention the AOPA Seminar to receive the \\$159 per night rate.](#)

Questions? Contact Stephen Custer at scuster@AOPAnet.org (571) 431-0876.

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2011 National Assembly: The 2011 Fall Thranhardt Golf Classic

Missed your invitation to play in the British Open? Not to worry. On Monday, September 19 you can still play 18 of the best holes from 11 different British Open rotation courses, including two holes from this year's British Open. Better still, they are all on one golf course located less than 9 miles from the heart of the Las Vegas Strip. This is not your typical round of golf. You will play at the Royal Links Golf Club in Las Vegas, NV, and whether you are into the history of the game or just want a shot at Tiger Woods' course record of 67 (Feb., 2001), Royal Links and your O&P friends will provide you with some great golfing memories.

The tournament will be held in conjunction with the **AOPA** National Assembly and will benefit two Great Causes and one great course make it not just golf, but a golf experience. For the third year in a row **AOPA's** Capitol Connection and OPAF have joined forces to co-sponsor this great event to benefit the inspiring efforts of OPAF and the legislative, research and education efforts of the Capitol Connection to further the O&P policy agenda.

[Click here to register for the 2011 Fall Thranhardt Golf Classic.](#)

For further information, contact Tina Moran at (571) 431-0808 or tmoran@AOPAnet.org.

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O&P RESOURCES FROM AOPA

Check Out the AOPA Job Board for New Opportunities in O&P

If you need a position filled at your business or are interested in looking at other job possibilities within the O&P field, check out the [AOPA Online Job Board](#). The online job board sports a freshly updated look and an easy-to-navigate profile creation system.

In the past month the Job Board has been viewed over 8,000 times by more than 1,500 unique users. If you want people to find out about a job opening at your facility or are interested in posting your resume for employers to view for potential openings, visit the [AOPA Online Job Board](#) today.

And remember: if you advertise on the Online Job Board and decide to also advertise in the *O&P Almanac*, then you'll receive a 5 percent discount on the cost of advertising in the *Almanac* and on the

Job Board.

Questions? Contact Steven Rybicki at srybicki@AOPAnet.org or (571) 431-0835.

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O&P INSIDER'S TRACK

The Only Up-to-the Minute O&P Newsline

People in the News

[The Orthotic & Prosthetic Assistance Fund](#) (OPAF) and the First Clinics announced the certification of two new First Volley instructors, **Fred Johnson** and **Frank Adams**.

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Businesses in the News

[Hanger Orthopedic Group](#) announced that it will be celebrating its 150th anniversary. The event will be marked starting on Wednesday August 10, 2011 as Hanger leadership, practitioners, and patients ring The Closing Bell® at the New York Stock Exchange and Hanger will also launch www.Hanger150.com.

[National Pedorthic Services](#) (NPS) announced the opening of two newly-located facilities, one in Milwaukee, WI and one in St. Louis, MO.

[The Orthotic & Prosthetic Assistance Fund](#) (OPAF), the First Clinics, [Active Life Orthotics and Prosthetics](#) and [Aqua Life Wellness Center](#) hosted two adaptive aquatic programs for those with physical challenges at their facilities in Albuquerque, New Mexico. And OPAF and the First Clinics announced that they have again partnered with [Shriners Hospitals for Children](#) across the country to offer First Volley Adaptive Tennis Clinics for their patients and families.

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Send Us Your News!

The next **AOPA** *in Advance* will arrive in your inbox on August 23. So if you have a new employee or a new office, tell us! Share your news with the over 15,000 readers of the *O&P Almanac* and **AOPA** *In Advance* newsletter. Contact Steven Rybicki at srybicki@AOPAnet.org

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