



**American Orthotic &  
Prosthetic Association**

June 14, 2007

#9  
Rec'd 6/28/07  
not marked 6/20/07

Centers for Medicare and Medicaid Services  
Officer of Strategic Operations and Regulatory Affairs  
Division of Regulations Development - C  
Attention: Bonnie L. Harkless  
Room C4-26-06  
7500 Security Blvd.  
Baltimore, MD 21244-1850

Dear Ms. Harkless:

The American Orthotic and Prosthetic Association (AOPA), the leading business trade group in the orthotics and prosthetics industry with a full-range of services that support patient care facilities and the companies that manufacture and distribute O&P products, would like to submit a comment to CMS-R-131, revision to Advanced Beneficiary Notice of Noncoverage (ABN).

AOPA understands the inclusion of the word "noncoverage" eliminates the need for suppliers to provide a separate notice of exclusion from Medicare benefits. However, we feel this may be confusing to the supplier community about when to use this document since its main purpose is used to define items that are deemed medically unnecessary. Suppliers are not required to specifically notify beneficiaries when an item or service is a statutorily noncovered benefit. The inclusion of the word noncovered in the revised ABN may lead to undue confusion regarding the proper use of the ABN.

If you need further information about our comments, please contact Joe McTernan, Director of Reimbursement Services, by phone (571) 431-0811, or by email [jmcternan@AOPAnet.org](mailto:jmcternan@AOPAnet.org).

Sincerely,

Kathy Dodson  
Senior Director, Government Affairs