



August 29, 2014

Marilyn Tavenner, Administrator  
Centers for Medicare & Medicaid Services  
Department of Health and Human Services  
ATTN: CMS-1614-P  
Hubert H. Humphrey Building  
200 Independence Avenue, S.W.  
Washington, D.C. 20201

Re: CMS-1614-P: Medicare Program; End-Stage Renal Disease Prospective Payment System, Quality Incentive Program, and Durable Medical Equipment, Prosthetics, Orthotics, and Supplies 79 Federal Register 40207 (July 11, 2014)

Dear Administrator Tavenner:

On behalf of the American Medical Society for Sports Medicine (AMSSM), representing 2,700 sports medicine physicians, we would like to call on CMS to amend or eliminate the section describing “specialized training” under the Minimum Self-Adjustment section of the proposed rule.

AMSSM steadfastly believes that a physician should be able to determine who can fit orthotics. Specifically, AMSSM believes that athletic trainers as well as other trained individuals operating under the supervision of a physician should be allowed to provide custom-fitting of orthotics for patients.

AMSSM shares the concern of the National Athletic Trainers’ Association (NATA) and other sports medicine professionals that this proposed rule would exclude athletic trainers (ATCs) from performing services for which they are qualified and have extensive experience. The rule would also be in direct conflict with athletic trainers’ scope of practice in certain states as defined by the respective state’s licensing board. Furthermore, this rule may have the unintended consequence of limiting health care access and negatively impacting the quality of health care for patients.

- In the world of sports medicine, athletic trainers and physicians are “experts” when it comes to custom-fitting orthotics. Athletic trainers play a critical front-line role within the sports medicine team, collaborating with physicians to provide preventative services, emergency care, clinical diagnosis, therapeutic intervention, and rehabilitation of injuries. Athletic trainers meet similar requirements as other health professionals who collaborate with physicians and should not be excluded from performing services that are directly related to their clinical expertise, education, training, and experience.

- Currently, all individuals fitting orthotics within a physician’s practice setting are considered to be under the direct supervision of a physician. The proposed rule would restrict what type of professional the physician could supervise for custom orthotic fitting.

- Besides restricting a physician’s ability to properly oversee care, implementing this proposed rule could add unnecessary costs to the health care system by requiring patients to obtain outside referrals to independent orthotists and other practitioners who meet the proposed definition of “specialized training” but may not be under the supervision of a physician or have the unique clinical perspective and training that physicians and athletic trainers have.

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AMSSM firmly believes that athletic trainers are trained and qualified to be amongst the health professionals that can provide custom fitting of orthotics to Medicare beneficiaries – and that licensed physicians should be able to determine who can fit orthotics.

Thank you for the opportunity to share AMSSM's comments on the Minimum Self-Adjustment rule. Should you have any questions, please contact AMSSM Executive Director Jim Griffith at [jgriffith@amssm.org](mailto:jgriffith@amssm.org) or (913) 327-1415.

Sincerely,

A handwritten signature in cursive script that reads "Chris Madden, MD".

Chris Madden, MD  
President, American Medical Society for Sports Medicine