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LETTER FROM THE PRESIDENT

MEDI-CAL FEE INCREASE REQUIRES A TEAM EFFORT

Dear COPA Members & Colleagues,

Welcome to this year’s first issue of COPA Connection which focuses on the progress COPA is making toward getting California lawmakers to approve an increase to Medi-Cal reimbursement rates. I hope you will read this timely information about the status of COPA’s stakeholder budget request and our new legislative bill that calls for changes to existing fees which are among the lowest in the United States. COPA is driving this effort on behalf of its members that will also benefit non-members if we are successful. Over the past year, about a dozen O&P professionals in our state (the majority are COPA board members) have volunteered their time to work with COPA’s lobbyist to organize Zoom conferences and clinic tours with elected officials. As we press forward in the coming weeks and months, we will need more O&P businesses and employees who work for providers and suppliers to get engaged in grassroots efforts to encourage their elected legislators to support a long-overdue increase to these fees.

COPA is a volunteer-driven association. The only people COPA pays are the association management company and lobbyist who work on behalf of our members – and they do an amazing job at a very fair cost. COPA is the only collective and organized “voice” in California for individuals and businesses that derive some or all their income from the O&P industry. We are grateful to the businesses that have been long-term members, those who joined last year for the first time, and several new members who have paid dues for 2022. Member dues, our annual meeting, and advertising in this newsletter are the primary sources of revenue for COPA. We need every existing member to renew their membership, and we need more O&P providers and suppliers to join COPA, so we have the necessary funding and resources for this cause — and other issues that impact our businesses and our patients.

For more than two decades, California’s state government — elected members of the state Assembly and

Senate, heads of state agencies, and governors — have failed to provide ANY increase to Medi-Cal L-code fees. Among all 50 states, California is ranked 49th with a paltry average fee of 53% of the Medicare allowable.

If we don’t do this now, if we don’t do this together, there is no other organization waiting in the wings to take on this challenge. The opportunity is here. The state has a significant budget surplus. There are new state mandates and initiatives to improve equity and access to medical care for disadvantaged populations.

Thanks to the relationships COPA members have built with a handful of state legislators, we have elected legislators like Assemblymember Vince Fong (R-Bakersfield) and Assemblymember Heath Flora (R-Ripon) who are helping COPA pursue two potential paths to increased reimbursement and improved access for Medi-Cal patients to prosthetic and orthotic care.

We need your support. Volunteer hours and financial contributions made through membership dues and direct donations to COPA’s PAC. We can do this.

HELP COPA HELP YOU!
Click here to contribute \$500 To COPA PAC.

Spencer Greene
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CONGRATULATIONS! WE HAVE A BILL!

COPA's board and other members who are engaged in legislative activities were excited when the organization's stand-alone Medi-Cal legislation, AB 1892, was recently introduced into the State Assembly. The bill was authored by Heath Flora, Republican Assemblymember who represents San Joaquin County.

COPA's lobbyist, in conjunction with key COPA members, are working to secure additional legislators to co-author for this legislation that would ensure increased access to vulnerable patients in need of O&P care in the Medi-Cal Program. This access is declining due to historically low reimbursements as the "prosthetic and orthotic appliances" category has not received any reimbursement increase in more than 25 years. Lack of access to O&P care leads to the incorrect use of devices and puts disadvantaged Medi-Cal patients at greater risk for health complications, decreased community engagement and decreased independence.

With reimbursement rates fixed for more than two decades, the costs of materials, labor and overhead often exceeds the amount Medi-Cal pays for prosthetic and orthotic devices. As such, Medi-Cal is no longer accepted by some O&P providers, causing Medi-Cal enrollees to travel a longer distance to receive O&P care, or are left using an older or ill-fitting device. In some cases, amputees become solely dependent on crutches or wheelchairs for mobility. Without a reasonable reimbursement methodology for establishing and updating payment rates for prosthetic and orthotic appliances, socially vulnerable Medi-Cal patients will continue to struggle with accessing O&P care and suffer from ongoing mobility constraints and quality of life issues.

"We are currently honing-in our arguments for a Medi-Cal fee increase that will focus on data analytics on O&P care that emphasize cost-savings, quality, access to care, and equity, as AB 1892 has already been referred to the Assembly Health Committee," said Bryce Docherty, COPA's contracted lobbyist. "We will need COPA members who are

constituents of Assemblymembers serving on this committee to support our efforts in Sacramento. That's the first wave of our grassroots campaign. If the bill passes out of that committee in April, it will go to the Assembly Appropriations Committee for a fiscal analysis hearing in May and June regarding the impact to the state General Fund."

The goal is for AB 1892 to make it to a vote of the full Assembly. The second wave, if the full Assembly is voting on COPA's legislation, will involve grassroots support from all COPA members and their non-member colleagues throughout the state. As such, there is a lot of coordination and pieces to the puzzle to achieve changes to the existing Medi-Cal laws. COPA is also pursuing a companion effort to increase O&P Medi-Cal Reimbursement through the State Budget.

For the grassroots advocacy campaigns, the American Orthotic and Prosthetic Association (AOPA) has a software tool that AOPA and COPA members can use to easily email messages to their district's Senator and Assemblymember.

"AOPA is working closely with our COPA Government Affairs Committee and Sacramento lobbyist. Ashlie White, who oversees government affairs and national legislative initiatives for AOPA, and serves as their in-house registered lobbyist, is attending our committee's Zoom meetings and is helping develop the communication that members can use," said Rick Riley, a COPA board member who chairs the Government Affairs Committee and is serving his sixth year on AOPA's Board of Directors. "AOPA's grassroots tool has been used effectively by other O&P state associations. This will be the first time we have tapped into this resource, and we hope our members will actively engage in this process as we try to move our legislation and budget proposals through various committees to qualify for a full vote in the Assembly and Senate. We will need COPA members and other non-member providers, who are constituents of various lawmakers, to help us communicate the need for higher reimbursement to ensure equitable access for Medi-Cal beneficiaries. The voice of constituents matters, as they have the power at the ballot box to hold the legislator accountable."

"More details will come into focus as these processes unfold. Congratulations and thanks to all the board members who personally met their Assembly Member and Senator in their district. That project last summer and fall was critical in procuring support and legislative champions like Assemblymembers Fong, Flora, and Carlos Villapudua (D-Stockton), and Senators Susan Eggman from Stockton and Shannon Grove who represents Bakersfield," said Docherty.



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MEDI-CAL REIMBURSEMENT IMPACTS PROVIDERS AND SUPPLIERS

Do you own, manage or work for an O&P provider? Or do you own, manage or work for a supplier business that provides goods and services to O&P providers in California (which can include suppliers not based in California)? If so, an increase to Medi-Cal reimbursement rates will have a positive impact on your business and your income.

California's government has not treated O&P businesses as fairly as they do other industries and professionals that do business with the state. How many other businesses or health care providers in California are getting paid the same amount as the state paid them in the 1990s for goods and services? The answer could be none.

"For more than two decades, our state government has required O&P providers to absorb all the increasing costs for employee salaries and benefits, materials, facilities, insurance, shipping and other routine business expenses. The state government has forced us to lose money or provide care, at best, for virtually no margin," said Spencer Greene, COPA President and a regional manager for Hanger. "California has the second lowest Medicaid (Medi-Cal) rates in the country. If it wasn't for the goodwill of California's O&P providers, who have continued to treat Medi-Cal beneficiaries despite the economic realities, these disadvantaged and marginalized populations would have no access to prosthetic and orthotic care."

O&P businesses in California need the resources and collective efforts of COPA's board and its members to educate and solicit "legislative champions" to support budget increases and appropriate reimbursement. Individual businesses cannot do it on their own. They need an association and a lobbyist to gain the attention of legislators and state agency administrators. To have a voice in Sacramento also requires Political Action Committee funds that COPA can donate, as needed, to legislators who support our efforts.

HELP COPA HELP YOU!
Click here to contribute \$500 To COPA PAC.

"The California Department of Healthcare Services recently announced a Request for Proposal (RFP) to commercial Medi-Cal managed care plan contractors that is intended to redefine how care is delivered to more than 12 million Californians who are covered by Medi-Cal," said Greene. "The press release, which quoted Governor Newsom, noted that managed care plans, selected as contractors through the RFP, must commit to new requirements intended to advance health equity and improve population health. The state's priorities include the delivery of high-quality, culturally competent care and access to providers. From COPA's perspective, this should make it difficult for the state to justify having the lowest Medicaid reimbursement for O&P care in the United States. It is a social injustice to these Medi-Cal patients who need prosthetic limbs and braces."

Over the past two years, COPA has taken on the task of gathering data to show how rising volumes of

Medi-Cal patients and extraordinarily low fees have combined to decrease access to care. In some areas of the state with the highest density of Medi-Cal beneficiaries, access to O&P care continues to decline. COPA has created "heat maps" with data that compares patient volumes to the number of providers in various counties throughout the state.

Already representing nearly one out of every three residents of California, state officials expect 99% of state-funded beneficiaries will be enrolled in a Medi-Cal managed care program by 2024.

Currently, O&P providers risk losing money if they don't reduce the number of visits and time spent with Medi-Cal patients, or in some cases providers must fit patients with less expensive technology. It isn't financially sustainable for a clinic to dispense a \$400 knee brace to a Medi-Cal beneficiary and then get reimbursed less than their actual costs. Ironically, and a fact that supports COPA's case that rates are ambiguous and outdated, is the reimbursement for the newer OTS bracing codes. When these new codes were created, the

reimbursement rates were appropriately set closer to 80% of the Medicare allowable that is written into existing Medi-Cal laws. But for older codes, the state chooses to maintain rates that are unsustainably low. As such, the reimbursement for the OTS code L1852 is higher than the custom-fit L1845 code.

"A board certified, highly qualified O&P professional who makes substantial adjustments to a knee brace and uses the custom-fit code is penalized with a lower rate of reimbursement. Yet a DME provider without expertise who may not make any adjustments to the brace or even fit the brace is using the OTS code that pays more," said Greene. "The lawmakers we have talked to seem unaware of how the reimbursement rates are determined or why decades have passed with no increase. Legislators don't know O&P care or that fees cover the device, fitting and continued obligations to provide care, often with no additional reimbursement. Getting their attention is hard when there are other issues with bigger budget impacts or are of greater interest to their constituents as legislators are always looking ahead to their next election."

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WHAT IS THE IMPACT ON MEDI-CAL PATIENTS?

What happens if more O&P patient care businesses reduce or stop providing care to Medi-Cal beneficiaries? What happens when providers can't afford to dispense the technology that is most advantageous to their Medi-Cal patient?

"It's a dilemma for O&P providers. Do they deliver care that ends up costing more than the reimbursement? It's not sustainable, and it has caused O&P providers to pursue less expensive ways to treat these patients and to be cautious about treating too many Medi-Cal patients. Pacific Medical is still treating Medi-Cal patients but many other O&P providers have simply stopped providing service to these patient due to the payor," said Riley Liddell, Director of Orthotics and Prosthetics at Pacific Medical, a COPA member that operates over 25 O&P clinics and generously hosted COPA's annual education symposium last October.

Riley, who serves on COPA's board, has been actively working with COPA's registered lobbyist, Bryce Docherty of TDG Strategies, and other board members to meet with state legislators this past year. These efforts have helped create relationships and optimism that fees will be increased due to COPA's efforts. The goal is to have more money allocated from the state's budget, for approval of changes to existing Medi-Cal laws that would raise fees to be much closer to the 80 percent of the Medicare allowable and require annual reviews and

adjustments as is routinely the case with reimbursements for other healthcare services.

"We started by educating and enlightening elected officials and their staff. It helps when we tell the story through the experience of actual patients. Meetings by Zoom are beneficial, but where we really found traction was getting these lawmakers into our world, into our patient care clinics, where they get to see what we do, the impact of technology and professional expertise. It gives them more perspective about the cost and complexity of delivering O&P care," said Liddell. "If every member of the state Assembly and Senate could tour a patient care facility, talk to our clinicians, and meet with patients we've helped, there would be a vast increase of knowledge about our profession."

Those in our industry, both COPA members and nonmembers, play an important part in our goals by offering legislators a tour of your clinic.

When our budget proposal and legislation are discussed by committees of jurisdiction, or come up for a vote, it helps when lawmakers are knowledgeable about the topic. Grassroots efforts and having a relationship with elected officials and their staff members can have a critical influence on the outcome of COPA's efforts to raise reimbursements and protect the rights of Medi-Cal beneficiaries to have access to appropriate care and technology.



O&P LEADERSHIP CONFERENCE EXPLORES THE INTERSECTION OF HUMANITY AND TECHNOLOGY

Several O&P executives from California, including members of COPA's Board of Directors, started 2022 by attending the American Orthotic and Prosthetic Association's annual Leadership Conference held in Arizona January 7-9.

Introduced by AOPA more than a decade ago as an invitation-only forum for owners and executives of O&P businesses, the annual event is intended to engage leaders in discussions about current issues and market evolutions that are influenced by new technologies, government policies, research and reimbursements. The 2021 event was cancelled due to the pandemic and attendance at this year's meeting was also impacted -- with about 20 percent of registered attendees cancelling their trip due to the post-holiday surge of the Omicron variant. AOPA and the host hotel created a safe environment for attendees to discuss relevant issues that impact providers and suppliers of O&P care, with most meals and social gatherings held outdoors.

"This meeting is always well organized, informative and a worthwhile opportunity to engage with O&P business leaders who recognize the value of sharing information and hearing the perspectives of healthcare policy experts who are invited as keynote speakers," said Maynard Carkhuff, President and CEO of Medical Creations and a member of COPA's board. "While we are working in different states, and in some cases active competitors, we all benefit from discussing national issues and how the delivery of healthcare is changing."

Industry leaders who attended this year's conference were asked to re-imagine the delivery of O&P care in a value-based healthcare market where payors want to pay for outcomes instead of paying for treatments and devices. The keynote

presentation highlighted efforts by the government and private payors to modify reimbursement models for all types of healthcare, including payments for DMEPOS.

There were breakout sessions for businesses that provide clinical care and separate sessions geared for manufacturers and suppliers. A session about the government approval processes associated with bringing new technology to market highlighted the frustration experienced by innovators and manufacturers that have applied for coding approvals or tried to secure fair reimbursement for emerging technologies.

The topic of separating O&P from DME, which many members support and want AOPA to continue to pursue, has been an elusive target in past years. AOPA continues to work with its members and other O&P associations, including state associations like COPA, to pursue legislation and policy changes to differentiate the O&P profession from the suppliers of DME who don't have the same education requirements or technical expertise.

"Similar to what occurs at COPA's annual meeting, this forum also provides opportunities for informal conversations and professional networking that can be very beneficial," Carkhuff added. "Even though many of us have been in the industry for decades, it is important to stay cognizant of how technology, pandemic-related labor shortages and supply chain issues, and new payment methods will impact our businesses this year and in the future."





How Do We Get This Across The Finish Line?

Medi-Cal rates have been an issue for a long time. This isn't a new fight. But the conditions for seeking a fee increase are more favorable than in the past as California has a significant budget surplus along with new social mandates related to equity, quality and access.

There are many steps to getting a budget allocation approved, and it is even more difficult to get stand-alone legislation passed by both the Assembly and Senate. A key to success is targeting the legislators who sit on committees of jurisdiction that oversee the budgets and standards of care in California.

Over the past three years, COPA has gathered data from a variety of sources, including recent assistance from the American Orthotic and Prosthetic Association (AOPA) and Hanger. COPA is also using peer reviewed clinical studies and actual patient experiences to showcase the impact of O&P care. Last year's grassroots advocacy and education efforts have paved the way for COPA to take its best shot at securing an increase to Medi-Cal fees.

"It takes a strategic action plan, it takes well thought out tactics, it takes relationships, and it takes PAC money. COPA needs a robust PAC to politically support our assertive legislative and budget priorities Under the Dome," said Bryce Docherty, Founder & CEO of TDG Strategies, a lobbying firm in Sacramento that has been representing COPA for 17 years. "We are also using the state's own public declarations about advancing health equity and improving population health to get traction, this year, that could result in a significant increase to the reimbursement for all or most L-codes."

COPA was literally on the cusp of introducing legislation and preparing to host an advocacy event at the Capitol in Sacramento when the COVID lockdown started in March 2020.

"We had to press pause for the rest of 2020, but last year we regrouped and started hosting Zoom meetings and clinic tours for elected lawmakers and their staff members. COPA board members were asked to take the lead in organizing meetings with their local Assembly-member and State Senator. The goal was to focus on telling the story of O&P care and how Medi-Cal beneficiaries deserve to have equitable access to qualified providers and technology that can optimize their health and quality of life," said Docherty.

"We set a goal for 2021 to have more than 20 face-to-face meetings with legislators and staff members, and we surpassed that goal," said Rick Riley, a board member from Bakersfield who chairs COPA's Government Affairs Committee. "Here in Bakersfield, I was able to tag-team with Trevor Townsend, CPO, a fellow board member and owner of Valley Institute of Prosthetics and Orthotics (VIPO). We are constituents of Assemblymember Vince Fong and State Senator Shannon Grove. It's a close community and we've had relationships with these lawmakers since they were first elected."

"We had Assemblymember Fong and his staff come meet with one of our Medi-Cal patients. She is a young amputee and mother who couldn't get approval for a new socket when she experienced weight gain during her pregnancy. Her story was compelling and showcased the issue of lack of access experienced by Medi-Cal and Medi-Cal managed care patients," said Townsend. "We also gave Assemblymember Fong and his staff a comprehensive tour of the patient care areas and lab where casts are modified, sockets are laminated, and prostheses are assembled. We did a similar meeting and tour with a staff member for Senator Grove. It was impactful for them to get a real-world perspective about O&P care."

"These critical O&P facility grassroots tours will continue, only this year our focus is getting lawmakers to sponsor and support our budget proposal and new legislative bill. This wouldn't be possible if we didn't organize these tours and build relationships with lawmakers," added Docherty. "Assemblymember Fong submitted a budget proposal for COPA last year, but there were too many pressing issues going on related to COVID. He came through for COPA again, resubmitting a stakeholder budget proposal for COPA." (Please read separate article about Assemblymember Fong's proposal).

Docherty and board member Riley Liddell also recently had a productive follow-up session with a staff member for Assemblymember Carlos Villapudua, who visited Pacific Medical last year. As a constituent of Assemblymember Villapudua, Liddell is helping Docherty solicit Villapudua's support for Fong's budget proposal and COPA's new bill, AB 1892.

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ASSEMBLYMEMBER FONG PROPOSES SUBSTANTIAL INCREASE TO MEDI-CAL FEES

On behalf of COPA, businesses in his district (Valley Institute of Prosthetics and Orthotics, O&P Boost, and Townsend Design/Thuasne USA), and Medi-Cal patients, Assemblymember Vince Fong (Republican, Bakersfield) will be making a formal request to the chairs of the Senate and Assembly Budget Committees, as well as the respective chairs of the Budget Subcommittees on Health and Human Services that oversee Medi-Cal funding to “require that reimbursement for prosthetic and orthotic appliances be increased to 80 percent of the prevailing Medicare allowable rate.”

Fong’s proposal will bring attention to the reality that California’s fee schedule, lowest in the country except for Florida, is unsustainable and has led to a decrease in access to care for Medi-Cal amputees. Fong’s proposal will contrast California’s current O&P Medi-Cal rates, which is barely above 50% of the Medicare allowable, to the national average for state Medicaid fees which is about 75-80% of the Medicare allowable.

Fong also believes the language of the existing law is ambiguous and allows Medi-Cal to reimburse providers well below the actual cost of providing medically necessary care to beneficiaries. Fong stated that this budget proposal would help ensure the socially vulnerable Medi-Cal population will benefit from improved access to critical O&P care, leading to independent, productive lives while at the same time decreasing the financial impact of more expensive care and services when beneficiaries don’t have access to prostheses and orthopedic braces.

Committee members responsible for health and human services in California will review budget requests over the next three months. COPA will be asking its members to reach out to their local legislators who sit on these committees. A lawmaker is more likely to support legislation and budget requests when they hear from local constituents (voters and donors) in their district.



DO YOU LIVE IN A DISTRICT REPRESENTED BY THESE ASSEMBLYMEMBERS AND SENATORS?

The lists below include the names and districts of lawmakers who will be involved in the initial discussions regarding budget proposals and legislation COPA has introduced in Sacramento. If you live in one of these districts and are a CONSTITUENT of one of these elected representatives, COPA is counting on you to support its grassroots advocacy campaign. You can reach out by email to COPA’s home office in Pasadena, or any board member, to indicate your willingness to participate in advocacy activities.

MEMBERS OF THE ASSEMBLY HEALTH COMMITTEE

Member	District	Contact:
Aguiar-Curry, Cecilia (D)	4	https://a04.asmdc.org/
Arambula, Joaquin (D)	31	https://a31.asmdc.org/
Bigelow, Franklin (R)	5	https://ad05.asmrc.org/
Carrillo, Wendy (D)	51	https://a51.asmdc.org/
Flora, Heath (R)	12	https://ad12.asmrc.org/
Maienschein, Brian (D)	77	https://a77.asmdc.org/
Mayes, Chad Vice-Chair (I)	42	https://www.assembly.ca.gov/assemblymemberchadmayer
McCarty, Kevin (D)	7	https://a07.asmdc.org/
Nazarian, Adrin (D)	46	https://a46.asmdc.org/
Rivas, Luz (D)	39	https://a39.asmdc.org/
Rodriguez, Freddie (D)	52	https://a52.asmdc.org/
Santiago, Miguel (D)	53	https://a53.asmdc.org/
Waldron, Marie	75	https://ad75.asmrc.org/
Wood, Jim (Chair)	2	https://a02.asmdc.org/

ASSEMBLY BUDGET SUBCOMMITTEE NO. 1 ON HEALTH AND HUMAN SERVICES

Member	District	Contact:
Arambula, Joaquin Chair (D)	31	https://a31.asmdc.org/
Mathis, Devon (R)	26	https://ad26.asmrc.org/
Patterson, Jim (R)	23	https://ad23.asmrc.org/
Ramos, James (D)	40	https://a40.asmdc.org/
Rubio, Blanca (D)	48	https://a48.asmdc.org/
Wood, Jim (D)	2	https://a02.asmdc.org/

SENATE BUDGET AND FISCAL REVIEW SUBCOMMITTEE NO. 3 ON HEALTH AND HUMAN SERVICES

Member	District	Contact:
Eggman, Susan Talamantes Chair (D)	5	https://sd05.senate.ca.gov/
Melendez, Melissa (R)	28	https://melendez.cssrc.us/
Pan, Richard (D)	6	https://sd06.senate.ca.gov/

NEW MEMBERS THAT JOINED COPA IN 2021

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 Prosthetic Solutions

Willowood – Supplier
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 O&P Boost
 Naked Prosthetics - Supplier
 Kickstart Orthotics and Prosthetics
 Howard Orthopedics Inc

COPA is pleased to report its success in recruiting new members in 2021 and strong participation in education events and advocacy activities. There is a positive outlook for setting another record for membership in 2022.

“As the COPA Membership Committee Chairman, I am pleased to report a very fruitful 2021 and to share our excitement about members who are committed to supporting COPA’s education and advocacy efforts in 2022,” said Brendan Erickson, Regional Manager for SPS. “COPA has a tremendous amount of momentum, and our association is well positioned to bring value to our members and patients receiving O&P care in California. Thank you for being a valuable member. We cannot do it without you.”

During 2021, Erickson and other members of the Membership Committee successfully recruited providers and suppliers to join COPA. There were ten new provider facilities and four new manufacturers that joined the association. COPA has its most members, ever, and is still growing.

“Our voice grows louder as we expand,” added Erickson.

Last year COPA continued its efforts to seek a long overdue increase to Medi-Cal reimbursements. While the association’s stakeholder budget proposal was overshadowed by COVID response priorities, grassroots advocacy and education activities helped build relationships with lawmakers who are now more informed about O&P care and access issues experienced by Medi-Cal enrollees.

COPA also welcomed approximately 100 attendees to its annual Education Symposium. There were 17 exhibitors and a diversity of CE credit courses intended to expose attendees to new technologies and business resources. The event, cancelled in 2020, was generously host by Pacific Medical. The PacMed campus, including a large conference room and areas for meals and meeting breaks, provided opportunities for attendees to space out and follow state COVID guidelines.

“We received excellent reviews and positive comments about the program, the meals and the facilities,” said board member Kenya Desautels, who as chair of COPA’s Education Committee co-organized the event with board member Riley Liddell. “It was Riley’s suggestion to host the meeting at Pacific Medical. We were very pleased to have a

location relatively close to members working in Northern California and the Central Valley. COPA was given free access to the facilities and the primary group dinner was hosted by PacMed, which enabled COPA to save money and boost funds for other budgetary needs.”

Desautels also noted COPA’s success in organizing six educational webinars that averaged over 50 attendees, and one webinar had nearly 100 attendees. These webinars were recorded and available for viewing on COPA’s website – which was also redesigned and improved last year. The site has more content and a fresh look.

“Members are seeing the activity, seeing the value, and they share a sense of responsibility to contribute, especially as it relates to advocacy efforts where our outreach to members of the State Assembly and State Senate is starting to have an impact,” said Erickson. “There has been a tremendous amount of volunteer time put into data analysis and relationship-building as we work to get justifiable and substantial increases to the fees our members are paid when treating patients enrolled in Medi-Cal or a Medi-Cal managed care program.”

COPA also introduced this COPA Connection newsletter, that is emailed to members and people working in the O&P industry. This enables COPA to routinely communicate with members, prospective members, and professional colleagues throughout California and from other states as well. The electronic newsletter is published with support from COPA’s association management company, Huntington Association Management, with articles written by board members. The newsletter also provides additional funding for the association, through income generated from advertising.

“We are off to a good start this year, having already hosted our first webinar, ‘Making the Transition to a Digital Workflow,’ that can be viewed on our website. We also have a contest going among a few board members where we picked from a list of companies that we are actively soliciting for renewals or first-time membership,” said Erickson. “There is also a lot of activity related to our Medi-Cal fee increase strategies, so please continue to be involved in our activities and our successes.”

