

Provider Advocacy

Below are strategies to consider as you advocate against the implementation.

- Monitor payer websites and read insurer updates.
- Notify your chapter, PPS, or APTA at advocacy@apta.org if you learn of a payer planning to implement MPPR.
- If your chapter or APTA national is planning an advocacy campaign, participate. There is power in numbers. The chapter and APTA needs your support to succeed in reversing or mitigating the impact of the implementation.
- Advocate on behalf of your patients and practice by sending a letter to the payer using the APTA MPPR template. You will be more successful if you provide specifics showing how the payer's MPPR policy will adversely impact your practice and financial survival. While APTA as a professional association is prohibited from discussing rates, you may discuss payment rates under your contract.
- Increase your knowledge and understanding of your clinic's financials including critical information like cost per visit. Knowing cost per visit and other essential metrics will help you to evaluate the actual impact of an MPPR payment cut.
- Contact the payer's provider representative. The more the payer hears from providers the more they will be convinced of the policy's adverse impact. Payer representatives have expressed to APTA that if they do not hear an outcry from providers they assume that the changes or rate reductions are acceptable.
- After the MPPR implementation, review claims to ensure appropriate reductions. Appeal all incorrect payment or denials.

Keep Track of Your Contracts

- Review your payer contracts to determine if you are subject to MPPR or could be. The contract terms determine whether the payer is required to notify you prior to implementing a policy such as MPPR.
- Look for "material change" or "unilateral change" clauses in the contract along with the required notification method and time frame.
- Pay close attention to the contract terms as well as the rate structure.
- Read all amendments and contracts thoroughly before signing.

- As confusing and tedious as contracting can be, it is inadvisable to sign an insurer contract and place it in a file cabinet without continuous review. If your office staff does not keep a close eye on payments, they may not know which insurers are failing to reimburse according to the contract, resulting in lost income for your practice.
- Conduct a regular audit — at least annually — of charges and payments, especially after signing a new contract or implementation of a significant payment policy change. Insurers typically pay the lesser of the charged amount or contracted rate.
- Consider investing in practice management software that allows you to load the various contracted fee schedules into your system and can help identify any discrepancies in payment.

Other

- Collect your own data regarding the cost of providing services and your outcomes to share with payers at any opportunity.
- Consider periodic peer to peer documentation audits to provide feedback to providers on the adequacy of documentation and/or areas for potential improvement.
- Check payer websites and closely review insurer updates that identify specific requirements for coding - especially what services are covered and for which conditions or diagnoses.