

MISSOURI PT ALERT!!

URGENT ACTION NEEDED

CONTACT YOUR STATE REPRESENTATIVE IN JEFFERSON CITY TODAY!

Missouri House Bill 109 was introduced in the Missouri House by state Representative Rob Schaaf (R-St. Joseph).

This bill would REPEAL the current POPTS law and could return Missouri to the days of over-utilization, potential fraud and abuse, and increased healthcare costs for all Missourians.

What you can do:

0. Click on the following internet link to e-mail your state representative urging them to oppose HB 109:
http://capwiz.com/amerpta/mail/oneclick_compose/?alertid=6788526
0. Call your state representative in Jefferson City and urge them to oppose HB 109.

Following are talking points to use when talking to your legislators about HB 109:

Physician Owned Physical Therapy Services Fact Sheet

Both the American Medical Association (1992)(1) and the American Physical Therapy Association strongly denounce the practice of physicians referring patients to facilities in which they have a financial interest. Opposition to these situations is based on the following:

0. Such arrangements have a high potential for abuse:
 0. Physician owned physical therapy practices had 43% more per patient visits than patients referred to non-physician owned PT practices.
 0. These referrals accounted for a 31% increase in revenue over referrals to non-physician owned practices.(2)
0. Physical therapists in physician owned practices treat an

- average of 20 patients per day while those in non-physician owned facilities average 12 patients per day⁽³⁾.
0. Simple disclosure of ownership does nothing to stem the tide of physician ownership of physical therapy facilities. In fact, between 1989 and 1992 some physicians in the state used disclosure as a way of marketing their practice by telling patients "my physical therapy office is so good I invested in it myself." These tactics increased utilization and costs to patients, third party payors and taxpayers via the state Medicaid program.
 0. Such arrangements limit access to health care and eliminate free market values (i.e.: competition for quality, cost or access).
 0. These arrangements allow the physician to create the demand for PT services and then allow this same physician to position themselves to exclusively supply that same demand thus creating a monopoly at the expense of patients and third party payors.
 0. Such arrangements eliminate competition, no matter how it is structured, conceived or concealed, it is what it is — a kickback.
 0. Such arrangements do nothing to enhance the quality of care for the patient.

Footnotes

⁽¹⁾ American Medical Association House of Delegates, Nashville, Tenn. Dec. 8, 1992.

⁽²⁾ Opus Communication, December, 2002 as quoted from a 1995 study run by the enforcement arm of the Centers for Medicare and Medicaid Services-Office of Inspector General.

⁽³⁾ Florida Health Care Cost Containment Board Report on Physician ownership and joint ventures among Health Care Providers. (August 9, 1991)