

Critical Element of Medicare Payment Reform is Introduced in the U.S. House



The RECOVER Act to repeal MPPR is introduced as hundreds of APTA members converge on Capitol Hill to advocate for Medicare payment reform.

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ALEXANDRIA, VA. — The American Physical Therapy Association applauds the introduction in Congress of the RECOVER Act, legislation to repeal the outdated Multiple Procedure Payment Reduction policy, also known as MPPR. Introduced in the U.S. House of Representatives by Rep. Deborah Ross, D-N.C., the bill targets a Medicare Part B payment policy that has unfairly targeted therapy providers and contributed to the current Medicare Physician Fee Schedule crisis, which is restricting access to essential rehabilitation services and threatening the viability of therapy providers. The legislation comes as hundreds of physical therapists, physical therapist assistants, and students of physical therapy convene in Washington, D.C., for APTA’s Capitol Hill Day.

“Clinicians in North Carolina and nationwide shouldn’t be penalized for trying to provide comprehensive therapy treatment to seniors in need,” said Congresswoman Ross. “For over a decade, this outdated rule has stood in the way of treating patients with the most effective forms of rehabilitation. Our therapy providers deserve payment rates that reflect the true value of their care. Congress is overdue to repeal this rule and ensure seniors get access to high-quality rehabilitation services.”

APTA emphasizes that this bill reflects long-standing concerns raised by rehabilitation and health care organizations about the [impact of MPPR](#) on patient access and coordinated rehabilitation care. For years, APTA has urged Congress to modernize Medicare payment policies that fail to reflect how high-quality, evidence-based rehabilitation services are delivered.

“Medicare beneficiaries deserve access to timely, coordinated rehabilitation care without payment policies that create unnecessary obstacles,” said APTA President Kyle Covington, PT, DPT, PhD. “MPPR undermines coordinated care and does not reflect clinical realities. The RECOVER Act gives Congress a clear opportunity to correct this outdated policy and put patients first.”

The RECOVER Act also builds on recent coalition outreach to congressional leadership led by rehabilitation providers and health care organizations. In letters sent to [the House Committee on Energy and Commerce](#) and [Senate Committee on Finance](#), committees with jurisdiction over Medicare payment policy, the coalition called for repeal of MPPR as part of broader reforms to the Medicare Physician Fee Schedule, citing the policy’s role in undermining care coordination and creating barriers to access, particularly for beneficiaries in rural and medically underserved communities.

“For many community-based providers, MPPR directly affects whether patients can receive care close to home,” said APTA Private Practice President Mike Horsfield, PT, MBA. “Repealing this

policy would help stabilize practices and ensure Medicare beneficiaries can access the rehabilitation services they need in their own communities.”

Understanding MPPR

First implemented more than a decade ago as a budgetary offset, [MPPR](#) applies to physical therapy, occupational therapy, and speech-language pathology services furnished under Medicare Part B. When more than one “always therapy” service is billed for the same beneficiary on the same day, the policy reduces the practice expense component of payment for subsequent services by 50%, regardless of whether the services are distinct or provided by different disciplines.

This approach does not align with the realities of rehabilitation care. Each service requires its own clinician time, equipment, supplies, and clinical expertise, and efficiencies associated with delivering care are already factored into payment valuation. Applying an additional reduction at claims processing results in duplicative payment cuts that undervalue care, disrupt coordination, and delay recovery.

The effects of MPPR are especially pronounced for patients with complex conditions and for Medicare beneficiaries in rural and medically underserved areas, where receiving multiple services on the same day is often clinically appropriate and logistically necessary.

Advocacy on Capitol Hill

Momentum behind the RECOVER Act receives a push this week as more than 250 APTA members gather in Washington, D.C., for APTA’s Capitol Hill Day. Physical therapists, physical therapist assistants, and students from across the country will meet directly with lawmakers and congressional staff to share first-hand perspectives on how MPPR affects patient access, care delivery, and practice sustainability in their communities, reinforcing that repeal of MPPR is a top advocacy priority for the profession.

APTA and its partners will continue working with Congress to advance the RECOVER Act and promote [Medicare payment reforms](#) that reflect clinical realities, support patient-centered care, and sustain the rehabilitation workforce.

Endorsing organizations include: ADVION; Alliance for Physical Therapy Quality and Innovation; American Health Care Association/National Center for Assisted Living; American Occupational Therapy Association; American Physical Therapy Association; American Speech-Language-Hearing Association; APTA Private Practice; Athletico; National Association of Rehabilitation Providers and Agencies; and Select Medical.

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About APTA

The American Physical Therapy Association represents 100,000 physical therapists, physical therapist assistants, and physical therapy students nationwide. Visit [the APTA website](#) to learn more.