

Unrestricted PT Direct Access: Smart, Efficient Healthcare for California

--Health Services Research (2011)-Pendergast J et al- A comparison of health care use for physician-referred and self-referred outpatient physical therapy services- "The Iowa Study"

"Our findings do not support the assertion that self-referral leads to overuse or discontinuity of care, based on a very large population of individuals (n= 62,707) in a common private insurance plan with no prohibition on self-referral. We consistently found lower use in the self-referred group after adjusting for key demographic variables, diagnosis group, and case mix. In addition, overall health care use before and during PT episodes was lower for those who self-referred."

--Physical Therapy Journal (1997)- Mitchell JM and de Lissoy G- A Comparison of Resource Use and Cost in Direct Access Versus Physician Referral Episodes of Physical Therapy

Direct access episodes were shorter (mean 7.6 visits versus 12.2 physical therapy office visits), encompassed fewer numbers of services, and were less costly than physical therapy episodes initiated by a physician (\$1,004 versus \$2,236).

--BMC Musculoskeletal Disorders (2005)- Childs et al- A description of physical therapists' knowledge in managing musculoskeletal conditions

"Physical therapists had higher levels of knowledge in managing musculoskeletal conditions than physician interns and residents, and all physician specialties except orthopedists."

--Spine 2010- Gellhorn AC et al- Management patterns in acute lower back pain: the role of physical therapy

There was a significantly lower risk of subsequent medical service usage (imaging, injections, surgery, opiate use, and physician visits) among patients who received physical therapy within 30 days after an episode of acute lower back pain relative to those who received PT at later times.

--Annals of Internal Medicine (2012)-Bronfort G et al

Following a 12-week treatment regimen for neck pain, about 30% of patients receiving typical PT reported complete relief of pain, as compared to only 13% of those receiving treatment with medications.

--*Hot Manuscript submitted to top medical journals***- Fritz JM et al, 2012- Referral of patients with a new consultation for lower back pain to physical therapy: The impact of timing and content of care on future healthcare utilization and cost**

Total medical costs were \$2736.23 lower for patients receiving early physical therapy for lower back pain (within 14 days of onset) versus delayed physical therapy (early PT \$1810.67, late PT \$3661.78).

--USA Today Features Intel's Early Access to Physical Therapy Model (January 2012)

Workers with routine back pain at Intel's plant in Oregon are "much happier" these days due to collaboration among Intel, 2 local health care systems, and a health insurer that has reduced the waiting time to see a physical therapist from 19 days to 48 hours, reports [USA Today](#). According to the article, Intel workers are completing their treatment in 21 days, compared with 52 days in the past. The cost per patient has dropped 10% to 30% due to fewer unnecessary physician visits and diagnostic imaging tests. The workers are also "more satisfied and return to work faster."