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Study: Direct Consumer Access to Physical Therapists Associated with Lower Costs and Fewer Visits

A new study suggests that "the role of the physician gatekeeper in regard to physical therapy may be unnecessary in many cases," and that direct consumer access to physical therapists is associated with lower costs.

The new study provides further evidence to support direct access to physical therapists. The researchers found that:

- The average allowable amount for physical therapy claims was lower for patients who visited a physical therapist directly-- \$347 compared to \$420 on average for physician-referred patients;
- Patients who visited a physical therapist directly for outpatient care had fewer visits (86% of physician-referred) on average than those who were referred by a physician;
- The removal of a physician gatekeeper did not lead to overuse of care;
- There was no indication that patients who visited a physical therapist directly became disengaged from the overall health care system, and continuity of care was maintained.

The study, published ahead of print September 23 in the journal *Health Services Research (HSR)*, reviewed 62,707 episodes of physical therapy in Iowa and South Dakota, states that have allowed direct consumer access to physical therapists for more than 20 years. The researchers used non-Medicare claims data from a Midwest insurer over a 5-year period. Earlier research also has supported direct consumer access to physical therapists, but the *HSR* study is the most comprehensive to date, having examined a far more extensive number of episodes than previous studies, and controlling for illness severity and other factors that could have affected the patients' outcomes.

"In summary," the researchers write, "our findings do not support the assertion that self-referral leads to overuse of care or discontinuity in care, based on a very large population of individuals in a common private health insurance plan with no requirement for PT [physical therapy] referral or prohibition on patient self-referral. We consistently found lower use in the self-referral group, after adjusting for key demographic variables, diagnosis group, and case mix. We also found that individuals in both groups were similarly engaged with the medical care system during their course of care and afterwards."

For more information please visit www.apta.org/StateIssues/DirectAccess/ or contact Jennifer Walter, COO/CFO, at jwalter@tidewaterpt.com.

Reference

Pendergast J, Kliethermes SA, Freburger JK, Duffy PA. A comparison of health care use for physician-referred and self-referred episodes of outpatient physical therapy. *Health Services Research*. Published ahead of print September 23, 2011. DOI: 10.1111/j.1475-6773.2011.01324.x

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