

Early physical therapy for low back pain associated with less subsequent health care utilization

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The American Physical Therapy Association (APTA) is pointing to a new study on low back pain in Medicare patients in its efforts to encourage the newly established Center for Medicare and Medicaid Innovation to promptly launch a demonstration project on direct access to physical therapist services that was recommended in the recent health reform law.

The study, published in the journal *Spine*, showed [Medicare patients](#) who received [physical therapy](#) in the acute phase following an episode of low back pain were less likely to receive epidural steroid injections, lumbar surgery, or frequent physician office visits in the year following their initial physician visit as compared with patients who received physical therapist treatment later.

"This study has demonstrated a decreased usage of medical services in patients who receive physical therapy early after an acute low back pain episode," remarked APTA President R. Scott Ward, PT, PhD. "Therefore, we encourage the Center for Medicare and Medicaid Innovation to swiftly undertake the direct access for physical therapy demonstration project recommended by the [health care reform](#) law. The results of this project could significantly change the way physical therapy services are delivered to our nation's seniors-putting them on a path to recovery sooner and decreasing future costs."

Researchers examined a nationally representative, 20% sample of physician outpatient billing claims from the Centers for Medicare and Medicaid Services. The 431,195 enrollees were categorized into acute (having received physical therapy in less than 4 weeks after an episode); sub-acute (having received physical therapy between 4 weeks and 3 months after an episode), and chronic (receiving physical therapy between 3 and 12 months after

an episode) treatment groups. There was also a category of patients who did not receive physical therapist treatment.

Researchers also found that patients who were initially evaluated by a generalist specialist (internal medicine, family practice, emergency medicine, and general practice) were least likely to receive physical therapy within a year as compared with patients who were evaluated by physiatrists (physical medicine and rehabilitation), whose patients were most likely to receive physical therapy in the acute phase and also within 1 year of their initial evaluation.

"The study has also shown us that treatment practices among those who are utilizing less physical therapy, namely generalist specialties, may need to be modified since these providers also are responsible for evaluating the largest proportion of patients with acute [low back pain](#)," said Ward.

The most common condition experienced by the patients was nonspecific backache (63.6%), followed by sciatica (14.5%), degenerative disc disease (10.5%), and spinal stenosis (6.2%).

In November, the Centers for Medicare and Medicaid Services formally established the Center for Medicare and Medicaid Innovation, which will examine new ways of delivering health care and paying health care providers who can save money on behalf of Medicare and Medicaid while improving the quality of care. Included in the Innovation Center's initiatives is a demonstration project on direct access to physical therapists that was outlined in Section 3201 of the new health reform law, the Affordable Care Act, but no deadline was established regarding its implementation.

Provided by American Physical Therapy
Association

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