

Please Support SB 164 by Senator Millar – Fair Copays for Physical Therapy

Background Problem:

Physical therapy (PT) has been proven to be as effective as surgery for conditions such as meniscal tears, knee osteoarthritis, rotator cuff tears, spinal stenosis, and degenerative disk disease.

Further, manual therapy, exercise and education provided by a physical therapist is a proven alternative to prescribing opioids. The Centers for Disease Control and Prevention (CDC) is urging health care providers to reduce the use of opioids in favor of safe alternatives such as physical therapy.

Physical therapy services typically falls into the category of “specialist” under most health insurance plans – a classification that is accompanied by higher copayments.

Some areas of specialized care only require a copayment on the first visit – with all follow-up visits covered under the initial copay. However, typical PT treatment plans requires multiple visits, and this higher copay must be paid at each visit – creating a barrier to access for patients.

The number of required visits within a PT treatment plan is highly variable, and often depends on factors such as diagnosis, severity of impairments, and past medical history – just to name a few. However, it is safe to say that most patients require multiple visits.

Imposing higher copays for PT is a problem for many patients. Insurers are limiting the frequency and duration of care a patient can afford. The Physical Therapy Association of Georgia (PTAG) gathered data to illustrate the financial burden of higher copays – revealing the lowest copay of \$30 – and some as high as \$75 – with the average copay for PT being \$51.25.

Based on this average, a patient required to visit a physical therapist 2 times a week for 4 weeks is paying \$410 in out of pocket health care expenses. This example is a conservative estimate – as there are many Georgians paying even greater out of pocket medical costs.

The Solution:

SB 164 seeks to remove the barrier to care created by high copays. This bill prohibits a health insurer from charging a co-pay for PT that is greater than that of a primary care physician. SB 164 will do the following to benefit Georgia’s health care consumers:

- Save money by reducing out-of-pocket medical expenses;
- Allow greater compliance with the plan of care leading to improved outcomes and less downstream health care costs for insurers
- Provide a safe alternative for the use of prescribed opioids

High co-pays are restricting patient access in Georgia. SB 164 will open access and allow Georgians to seek necessary care by reducing high co-pays.