



Honorable Chair Donovan of the
House Committee on Health & Human Services
State House
Providence, RI 02903

Re: Support for H5082

March 27, 2025

Dear Chair Donovan and Members of the Health & Human Services Committee,

I write to you on behalf of the Rhode Island Academy of Family Physicians (RIAFP) in **strong support of H5082**.

As Family Physicians, who make up a large segment of the primary care workforce of Rhode Island, we are the first point of contact for medical care for many Rhode Islanders and we are a major source of referrals for physical therapy (PT). Physical therapy is a critical tool in recovering from injury and healing after surgery, but remains out of reach for many Rhode Islanders because of steep copays and cost remains one of the leading reasons why patients do not pursue PT or end treatment early.

The average copay for physical therapy is \$30 but many people's copays are as high as \$65-95 per session. Most people are recommended to receive 6-12 weeks of physical therapy, with sessions 1-2 times per week. So the average person is paying between \$180-720 out of pocket to go to physical therapy. This is simply out of reach for many Rhode Islanders.

What is more, physical therapy is a critical tool in preventing acute pain and dysfunction from becoming chronic pain and dysfunction. By investing in physical therapy, we can help prevent long term disability and suffering. Physical therapy is a safe and low risk intervention, and when it is not accessible to people they often end up seeing more specialists, pursuing more invasive treatments, and using more medications for pain, which can all carry significant risk and cost.

Low back pain is the leading cause of disability in the United States, with approximately 13% of the population suffering from chronic low back pain. Physical therapy is a crucial tool in addressing many forms of low back pain. By making physical therapy more accessible to people, think how much chronic low back pain could be prevented or better managed without more high risk interventions?

Preventing an acute problem from becoming a chronic one is not just good medicine, but also important for reducing costs within our increasingly expensive healthcare system. When physical therapy succeeds in preventing chronic pain and disability, we avoid years of specialty referrals, and invasive and high-risk treatments, including but not limited to: recurring steroid injections, surgeries, or chronic pain medication use.

By making physical therapy more accessible to patients, we can both improve people's quality of life, but also achieve cost savings for the system.

We therefore encourage the Committee to **support House Bill 5082** and vote this important bill out of Committee. We appreciate the opportunity to provide this testimony and welcome any follow up discussion.

Sincerely,

Katharina de Klerk, DO
RIAFP President-Elect and Advocacy Committee Chair