



**REDUCE THE COPAY.
REDUCE MSK COSTS.**

Reducing financial barriers to Physical Therapy steers members into conservative, guideline supported care on day one. That shift is associated with fewer advanced imaging tests, injections/surgeries, and physician visits—the very categories that increase musculoskeletal (MSK) spend!

Greater Access = Greater Savings

EMPLOYERS IN OUR DUKE-VALIDATED STUDY REDUCED COPAYS AND FOUND:



in imaging & inpatient utilization
vs. a traditional medical pathway



in surgery & injection
utilization



physician services
utilization

WHY EARLY PT WORKS

- ✓ Early intervention and removing barriers to access conservative care
- ✓ Decreased reliance on imaging, opioids, surgeries and injections
- ✓ 70% of MSK episodes can be resolved with physical therapy alone
- ✓ Better patient experience and improved outcomes
- ✓ Proven ROI with scalable implementation



LET'S TALK ABOUT LOWERING YOUR MSK COSTS

Scan the QR Code or visit PTfirst.com today!

Case Study Details

A no-copay physical therapy (PT) benefit implemented with a large Midwestern self-insured employer, was associated with significant reductions in downstream medical utilization for adults with musculoskeletal (MSK) conditions.

EPISODES INITIATED UNDER THE NO-COPAY PT PROGRAM SHOWED:

Fewer high cost downstream services (core cost drivers)

Episodes initiated in the no copay PT program had **7% lower imaging & inpatient care**, **16% lower surgery/injection**, and **57% lower physician services** versus a traditional medical pathway. These are the very categories that inflate MSK spend, so shifting them down is directly aligned with total cost-of-care control.

The benefit design itself moves the needle (not just “doing PT”)

Compared with PT episodes **outside** the no copay program, episodes **inside** the program still showed **9% lower imaging** and **38% lower physician services**—evidence that **removing the copay** changes behavior and lowers utilization beyond simply referring people to PT.

Rapid, guideline coordinated entry into conservative care

>70% of members who used the program accessed PT **on day 1** of the episode. Earlier, conservative care is a core feature of MSK guidelines and is a practical lever employers can influence via plan design.

Scalable in a large, working age population

The program covered **>50,000 adult beneficiaries** and has been in place since **fall 2018**, demonstrating feasibility at scale in a real world employer environment.



**DOWNLOAD A COPY
OF THE STUDY HERE**

LINK