Workers' Comp

Specialty Solutions Spotlight: Using Quality Physical Therapy First for Low Back Pain Helps Reduce Costs and Improves Outcomes

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2 MIN READ
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Should an MRI be the first step in addressing work-related lower back pain injuries?

The U.S. health care system wastes an estimated $750 billion annually, with $200 billion attributed to overuse or unnecessary services. In workers' compensation, physical therapy can account for up to 20% of medical costs, making it crucial to ensure appropriateness and quality to manage claim costs effectively.

Low back pain is one of the most common workers' compensation injuries and the leading cause of years lived with disability. Current guidelines from reputable medical organizations, such as the American Academy of Family Physicians and the American Association of Neurological Surgeons, recommend against the use of early MRIs (within the first six weeks of symptoms) for acute low back pain symptoms. Studies have shown that early MRIs do not improve clinical decision-making and can lead to a cascade of unnecessary medical services, including spinal surgery, as well as poor patient outcomes, such as increased length of disability and work absence.

Despite the evidence and guidelines, physicians often order early MRIs in response to patient demands, particularly when symptoms are not adequately addressed in a timely manner. It is estimated that up to 25% of imaging tests may be unnecessary or inappropriate.

The key to successful recovery for many claims is addressing low back pain symptoms quickly with quality physical therapy.

Best practices for physical therapy include:

1. Initiating treatment within 3 to 5 days of the initial injury or onset of symptoms.
2. Focusing the initial evaluation on functional and work abilities, rather than on pain.
3. Providing a home exercise program and discussing expected recovery time.
4. Monitoring patient compliance with attendance and home exercises and considering alternative treatment options, such as tele-rehab or remote therapy monitoring, if compliance is a concern.
5. Measuring and documenting progress within 6 visits or 2 weeks and flagging any lack of progress for communication with the claims adjuster or case manager.
6. Emphasizing active therapy, such as therapeutic exercise, manual therapy, and neuromuscular re-training, rather than passive modalities.

It is important to note that most non-surgical musculoskeletal injuries, including low back pain, resolve within the first month. Prolonged therapy without documented improvement should be flagged for review.

Apricus Physical Medicine schedules timely physical therapy, monitors weekly attendance, and provides clinical oversight to ensure the delivery of appropriate, evidence-based care. Make a single call to 877.203.9899 for all your physical medicine needs.

This information is meant to serve as a general overview, and any specific questions should be fully reviewed with a healthcare professional or specialty service provider.

To learn more about Apricus specialty services for physical medicine, please visit www.apricusinc.com/physical-medicine. To make a referral for specialty solutions services, call us today at 877.203.9899 or send an email to referrals@apricusinc.com.

Resources:

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