When an employee has a musculoskeletal injury keeping the employee from returning to work, it is routine practice for orthopedic doctors to recommend a physical therapy program. The purpose of the physical therapy program is to assist the injured employee to restore function, to restore the pre-injury level of mobility, to control pain, and to limit or prevent permanent physical disability. This can be accomplished with physical therapy providing both range of motion exercises and strengthening exercises.

The orthopedic doctor treating the injured employee will prescribe the amount of physical therapy the employee should have. Some orthopedic doctors are very good at estimating the number of physical therapy sessions an injured employee will need and will prescribe accordingly. For instance, the doctor will prescribe physical therapy for the lumbar spine “3 x 4,” which tells the physical therapy facility to treat the injured employee three times per week for four weeks. The return appointment with the doctor’s office is normally scheduled after the anticipated date of the last physical therapy treatment. This allows the doctor to assess the benefits of the physical therapy treatment program, but it is after the fact. (WCxKit)

Unfortunately, some orthopedics will prescribe the same amount of physical therapy for just about every patient they see. If
every patient is “3 x 4” or “3 x 6,” some injured workers end up having too much physical therapy and some end up not having enough. When the injured employee does not get enough physical therapy, they return to the doctor before they have not recovered from their injury. The doctor then prescribes more physical therapy and sets up another return visit to the doctor’s office.

**When the orthopedic** describes physical therapy, the physical therapy facility wanting to insure payment, will normally call the workers compensation adjuster for approval to provide the treatment. The adjuster does not know whether the physical therapy is needed or not. Most adjusters will not question the need for physical therapy, figuring if the doctor requested it, it must be needed. This often results in the injured employee receiving more physical therapy then is needed.

**One approach to the adjuster's dilemma** of whether to approve physical therapy or not, is to refer the request for physical therapy to utilization review. Utilization review can eliminate some excess physical therapy treatment, but utilization review makes their judgment calls based on the information in the doctor's medical notes. Utilization review will not know if the injured employee recovers faster than normal resulting in the injured employee continuing to go to physical therapy when the physical therapy is not providing any further benefit.

**A recent innovation** in managing the physical therapy treatment is the development of results based treatment approach. Instead of the injured employee going to the physical therapy office 15 times because the doctor wrote a “3 x 5” script, the injured employee goes to the physical therapy office for as many or as few times needed for the employee to make a proper recovery from their musculoskeletal injury.

**In the traditional fee for services** model of physical therapy treatment, it is in the financial best interest of the physical therapy facility to continue physical therapy treatment until the doctor sees the injured employee again. This often results in excess treatment. The results based approach to physical therapy aligns the interest of the employer and the insurer with the physical therapy facility, where the timely recovery and return to work benefits all parties including the employee.

**A results based approach** to physical therapy allows a single flat fee for service. This reduces a lot of paper work for the adjuster, by having one bill to pay, rather than many physical therapy bills. (WCxKit)

**Results based physical therapy treatment** appears to be an innovative way for employers and insurers to manage the physical therapy treatment process and to provide the injured employee with the treatment needed in a timely manner. The management of physical therapy through results based treatment benefits everyone.

**Author Rebecca Shafer, JD**, President of Amaxx Risk Solutions, Inc. is a national expert in the field of workers compensation. She is a writer, speaker, and website publisher. Her expertise is working with employers to reduce workers compensation costs, and her clients include airlines, healthcare, printing/publishing, pharmaceuticals, retail, hospitality, and manufacturing. She is the author of the #1 selling book on cost containment, *Manage Your Workers Compensation: Reduce Costs 20-50%* [www.WCManual.com](http://www.WCManual.com). Contact: RShafer@ReduceYourWorkersComp.com

**Our WORKERS COMP BOOK:** [www.WCManual.com](http://www.WCManual.com)

**WORK COMP CALCULATOR:** [www.LowerWC.com/calculator.php](http://www.LowerWC.com/calculator.php)
**WC GROUP:** [www.linkedin.com/groups?homeNewMember=&gid=1922050/](http://www.linkedin.com/groups?homeNewMember=&gid=1922050/)
**SUBSCRIBE:** Workers Comp Resource Center Newsletter

Do not use this information without independent verification. All state laws vary. You should consult with your insurance broker or agent about workers comp issues.