



Minnesota House of Representatives  
Health Finance and Policy Committee  
Re: HF 3240 Physical Therapy Access Bill

March 4, 2022

Dear Committee members:

On behalf of the Minnesota Chapter of the American Physical Therapy Association (APTA MN), thank you for this opportunity to respond to the position of opposition by the Minnesota Medical Association (MMA) to HF 3240, the Access to PT Bill.

MMA “believes” that removing access barriers to physical therapists (PT) increases the risk of harm. Despite this ongoing claim, the evidence is to the contrary. These barriers are arbitrary in nature and are the result of many years of compromise with physician groups who hold these beliefs.

An important fact is that for nearly 40 years in Minnesota, PTs have been permitted to make a physical therapy diagnosis and deliver interventions without physician referral, and to identify those situations where the expertise of physicians is required. In all of those years, there has been no evidence of harm to patients. This fact was confirmed in a report by the MN Board of Physical Therapy. Liability insurers do not risk adjust their premiums for PTs who practice in the 20 states that have full access to PT without these arbitrary restrictions as compared to those PTs who practice in states with various forms of restrictions. **There is no reason why patients in MN should be forced to seek unnecessary medical visits at any point in their course of care.**

In fact, a 2020 study published in Military Medicine found that patients with musculoskeletal (MSK) conditions who saw a primary care physician first had twice the risk of experiencing an actual or near miss safety event as compared to seeing a PT first.

A 2005 report by the American Association of Medical Colleges pertaining to Musculoskeletal Medicine Education concluded that patients who have MSK conditions were more likely to receive inadequate treatment by physicians. The authors recommended more training than the two weeks average training in medical schools on this topic.

Also in 2005, a study published in BMC Musculoskeletal Disorders revealed that PTs and even students of PT had higher levels of knowledge in MSK medicine than medical students, physician interns and residents, and all physician specialties except orthopedics.

MMA questions the work duties of physical therapists, which was in the context of a specific item on the Questionnaire. While physical therapists do not practice medicine, they do engage in the same work duties that include examination evaluation, diagnosis, prognosis and care planning and/or referral for the patients before them. Physical therapists are expected to be competent in these duties at entry level and there are more than twice the number of exam items on these duties than on treatment interventions in the National PT Examination that is required for licensure. **There is no credible evidence being offered by MMA to support their concerns for the safety of patients.**

The benefits of full and unencumbered access by patients to PTs includes cost savings which is important to those individuals but also to the healthcare system in which an estimated 30% of expenditures are considered waste. There is a strong body of evidence that shows full access to PT results in lower odds that patients will receive opioids, excessive imaging, injections and surgeries. Direct access without restrictions has not been found to correlate with overuse, nor is it associated with a loss of quality or continuity of care within the healthcare system.

APTA-MN agrees with MMA that patients should be referred if they are not getting better. That is already happening and has been the law for nearly 40 years. In fact, it is not uncommon that PTs recognize signs and symptoms that were overlooked by physicians. Our duty to refer is embedded in our Code of Ethics whether it's the first day or the 90<sup>th</sup> day.

Let us remain focused on the patients who face these arbitrary barriers and who must pause their care even if they are getting better, to affirm that they are on the right track. **Patients should not be subject to unnecessary regulations that limit their choices and cost them money. No harm to patients. No reason to maintain access barriers to Physical Therapists.**

APTA MN welcomes the opportunity to further discuss MMA's concerns should they be willing to do so.

Please do not hesitate to contact APTA MN if you have questions regarding our comments.

Thank you,



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