



STATE of RHODE ISLAND
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Legislative Impact Statement

To: Senator Murray, Chair
From: Elisabeth Hubbard, Executive Secretary
Re: 26 SENATE 2463 AN ACT RELATING TO INSURANCE -- ACCIDENT AND SICKNESS
INSURANCE POLICIES - PHYSICAL THERAPY COPAYS

Thursday, April 16, 2026

The Governor's Commission on Disabilities' Legislation Committee has developed a Legislative Impact Statement on the bill listed below. The Commission would be pleased to present testimony to the committee. Please contact me (462-0110) if testimony is desired or for additional information.

Legislation Committee finds this bill Beneficial

This bill would limit prior authorization requirements for rehabilitative and habilitative services.

Rehabilitative and habilitative services are specialized health care services that help a person regain or maintain physical, mental, and/or cognitive that are impaired as a result of disability, illness, injury, or treatment. These services assist the person improve their daily functioning and independence, as well as resolving pain. They may include physical therapy, occupational therapy, speech and language therapy, cognitive therapy, and mental health rehabilitation services.

For those with chronic pain, rehabilitative and habilitative services offer a way to improve pain. Patients can without the need for medication such as opiates which carry the risk of addiction among others, or other pain medications that can cause issues with the liver or digestive system.

One study found that patients who had prompt access to physical therapy had lower healthcare costs and were less likely to use opioids:

Compared to patients who saw a PT later or never, patients who saw a PT first had lower probability of having an opioid prescription (89.4 percent), any advanced imaging services (27.9 percent), and an Emergency Department visit (14.7 percent), yet 19.3 percent higher probability of hospitalization (all $p < .001$). These patients also had

significantly lower out-of-pocket costs, and costs appeared to shift away from outpatient and pharmacy toward provider settings.¹

Insurers should be authorizing rehabilitative therapy as a tool to assist those with chronic pain, as the outcome is far better for their patients. Removing the prior authorization requirement will help people improve their pain and functioning, less opiate dependence and save healthcare costs.

¹ Frogner BK, Harwood K, Andrilla CHA, Schwartz M, Pines JM. Physical Therapy as the First Point of Care to Treat Low Back Pain: An Instrumental Variables Approach to Estimate Impact on Opioid Prescription, Health Care Utilization, and Costs. *Health Serv Res.* 2018 Dec;53(6):4629-4646. doi: 10.1111/1475-6773.12984. Epub 2018 May 23. PMID: 29790166; PMCID: PMC6232429. <https://pubmed.ncbi.nlm.nih.gov/29790166/>
See also Fritz JM, Brennan GP, Hunter SJ, Magel JS. Initial management decisions after a new consultation for low back pain: implications of the usage of physical therapy for subsequent health care costs and utilization. *Arch Phys Med Rehabil.* 2013 May;94(5):808-16. doi: 10.1016/j.apmr.2013.01.008. Epub 2013 Jan 18. PMID: 23337426. <https://pubmed.ncbi.nlm.nih.gov/23337426/>