

**Dr. Edward McCormick DPT OCS**

Physical Therapist and Regional Director at PappasOPT  
75 Sockanosset Crossroads Cranston, RI 02920  
April 13, 2026

**To:**

Senate Committee on Health & Human Services  
Rhode Island General Assembly

**Re:** Testimony in Support of SB2468

Chairperson, Vice Chairs, and Members of the Committee:

My name is Edward McCormick, and I am submitting testimony in strong support of this bill relating to Physical Therapy copay parity. I have over a decade of experience practicing as a physical therapist in Rhode Island and regularly see how insurance design impacts access to care for working families.

This legislation seeks to address a well-documented issue: patients are often charged a significantly higher copay for physical therapy visits compared to other front-line healthcare visits at a primary care office. These higher copays discourage patients from beginning or completing their recommended physical therapy plan, especially when multiple visits per week are required. When people stop physical therapy treatment early due to cost, their conditions worsen, leading to avoidable surgeries, specialist visits, imaging, or long-term medication use — all of which carry far greater financial and health consequences than timely physical therapy.

I am sensitive to the fact that pushback against this bill could cite a ballooning of health insurance administrative costs and a decrease in insurance industry profit margins, but I strongly believe that the passage of this bill would be a win-win-win for patients, practitioners and the insurance industry. A large study of over 52,000 patients published in November of 2025 found that patients who had their physical therapy co-payments removed utilized imaging and other inpatient tests by 7%, saw a 16% decrease of surgery and injections, and a 57% reduction in follow up physician visits compared with patients with PT co-pays and other forms of managed care<sup>1</sup>. Co-pay parity can not only improve access to front-line musculoskeletal care but can decrease health insurance costs by decreasing expensive and sometimes invasive procedures. It can also free up primary care physicians who are already feeling the strain of a heavy patient caseload in a state that currently has a known primary care deficit.

By ensuring that copays for physical therapy cannot exceed those of primary care office visits, this bill promotes fairness, improves access to frontline musculoskeletal care, and helps Rhode Islanders receive the conservative, cost-effective care their providers recommend. It also encourages earlier intervention, which benefits patients, employers, and insurers alike.

For these reasons, I respectfully urge the Committee to support and advance this legislation. Thank you for your time and consideration.

**Sincerely,**

Edward McCormick  
Regional Director PappasOPT  
Cranston, RI

1: Trevor A Lentz, Adam Lutz, Uchechukwu Ikeaba, Brooke Alhanti, Steven Z George, Chad Cook, Charles Thigpen, Episode of Care Characteristics Following Implementation of a No Copay Physical Therapy Program for Musculoskeletal Conditions, *Physical Therapy*, Volume 105, Issue 11, November 2025, pzaf129, <https://doi.org/10.1093/ptj/pzaf129>