



Yvonne Swanson, PT, DPT
Chair, Payment and Policy Committee, APTA Rhode Island
Compliance Officer, Highbar Physical Therapy

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RE: Support for Bill S-2561 – Limiting Prior Authorization for Rehabilitative and Habilitative Services

Dear Chairperson and Members of the Committee,

I appreciate the opportunity to provide testimony in strong support of Bill 2025 -- S 2561, which aims to reform the prior authorization process for rehabilitative and habilitative services in Rhode Island. As a physical therapist for over 25 years in the state of RI, Chair of the Payment and Policy Committee APTA-RI and Compliance Officer at Highbar Physical Therapy, I have witnessed firsthand how excessive administrative barriers delay necessary care, increase costs, and negatively impact patient outcomes.

Prior authorization requirements were originally intended to ensure appropriate utilization of healthcare services. However, in practice, they create unnecessary roadblocks to timely and effective treatment. The burden these processes impose on patients and Rhode Island providers alike cannot be ignored, and Bill S 2561 offers a meaningful solution.

Why This Legislation Is Needed

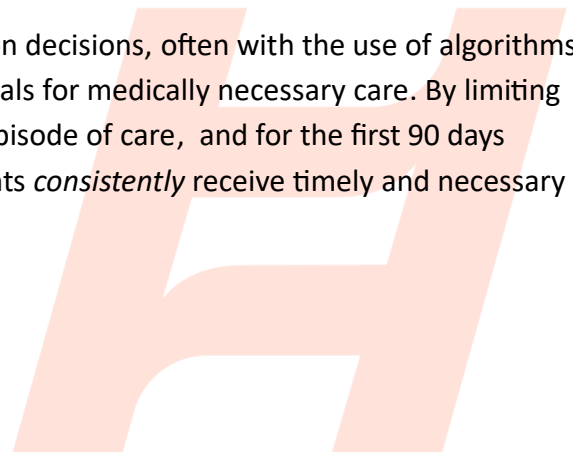
Reducing Delays in Care:

Under current payor policies and regulations, patients often wait days for approval after an initial evaluation or for approval of concurrent care. This results in therapists being forced to delay services while the authorization process is ongoing, particularly creating unnecessary stress for families and disrupting continuity of care.

These delays lead to prolonged pain, worsened function, and increased reliance on costly interventions such as imaging, surgery, or prescription medications—including opioids.

Ensuring Predictable and Consistent Access to Treatment:

Many payers impose inconsistent and arbitrary prior authorization decisions, often with the use of algorithms, resulting in treatment interruptions or worse, unpredictable denials for medically necessary care. By limiting prior authorization requirements for the first 12 visits of a new episode of care, and for the first 90 days following a chronic pain diagnosis, Bill S 2561 ensures that patients *consistently* receive timely and necessary rehabilitative care.



Lowering Healthcare Costs Through Early Intervention:

Research shows that early access to physical therapy reduces long-term healthcare costs. A study in The Spine Journal (2019) found that early physical therapy for lower back pain decreased healthcare expenses by 60% compared to patients who pursued surgery or long-term medication use. Removing barriers to care allows patient access to medically necessary services that are cost effective compared to more expensive, often less effective interventions, that ultimately increase the total cost of care.

Reducing Administrative Burdens on Healthcare Providers:

Physical therapists spend an average of nine hours per week on prior authorization paperwork, letters of medical necessity, and peer to peer reviews instead of treating patients. This valuable time should be spent on patient care. Practices have had to divert funds from patient-centered and quality initiatives to hire additional administrative staff to support authorization submissions. This trend contributes to therapist burnout and ultimately harms patients due to the loss of access to care from therapists working less hours or worse, leaving the workforce altogether. Bill S 2561 reduces this inefficiency, allowing clinicians to focus on patient care rather than bureaucratic hurdles.

A Balanced Approach to Reform

Bill S 2561 does not eliminate prior authorization entirely; rather, it introduces common-sense guardrails that ensure timely intervention while maintaining appropriate oversight. It also mandates 24-hour response time from insurers for authorization requests, preventing unnecessary delays in care.

For the sake of our patients, providers, and the financial sustainability of our healthcare system, I urge you to support this critical reform. By passing Bill 2025 -- S 2561, Rhode Island can take a significant step toward improving patient access to timely, cost-effective rehabilitative care while reducing administrative waste.

Thank you for your time and consideration.

Sincerely,

Dr. Yvonne Swanson, PT, DPT
Compliance Officer, Highbar Physical Therapy
Chair, Payment and Policy Committee, APTA Rhode Island
Yswanson@highbarhealth.com





References

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