# **Workers Compensation and Chiropractic Care**

**COST COMPARISON, EFFECTIVENESS, and PATIENT SATISFACTION STUDIES** 

Cohen & Haydu Chiropractic Clinic

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#### **Archives of Internal Medicine**

A 4-year retrospective review of claims from 1.7 million health plan members analyzed the cost effects of having a chiropractic benefit in their HMO insurance plan. The data revealed that members with the chiropractic benefit had lower overall total annual health care costs. Back pain patients with chiropractic coverage also realized lower utilization of plain radiographs, low back surgery, hospitalizations and MRI's. Back pain episode-related costs were also 25 percent lower for those with chiropractic coverage (\$289 vs. \$399). (1)

#### **British Medical Journal**

Patients who saw general practitioners for neck pain were randomly allocated to manual therapy (spinal mobilization), physiotherapy (mainly exercise) or general practitioner care (counseling, education and drugs). Throughout this 52-week study, patients rated their perceived recovery, intensity of pain and functional disability. **Manual therapy proved to be the most effective treatment for neck pain.** The clinical outcome measures showed that manual therapy resulted in faster recovery than physiotherapy and general practitioner care. While achieving this superior outcome, the total costs of the manual therapy-treated patients were about one third of the costs of physiotherapy or general practitioner care. (2)

# The Manga Report II

This paper reviews the cost effectiveness of chiropractic care and estimates the amount of money that the Ontario province would save if chiropractic services were covered as part of the Ontario Health Insurance Plan, which covers all of Ontario's residents. It estimates that savings to the health care system would be at least \$380 million and could be as much as \$770 million. It states that since <a href="three is considerable empirical evidence as to the cost effectiveness and safety of chiropractic management of musculoskeletal disorders">three is considerable empirical evidence as to the cost effectiveness and safety of chiropractic management of musculoskeletal disorders</a>, the addition of chiropractic services to Ontario's health care system will assure gains in both efficiency and effectiveness for these types of conditions. (3)

# Spine, 2003: Manual Therapy, Manipulation, and Exercise

Aure, et al., published a longitudinal study with a one-year follow-up in a group of 49 chronic low back pain patients, all of whom were on 100 percent sick leave for more than eight weeks but less than six months due to their low back problems. The patients were randomized into two groups. Both groups received 16 visits over eight weeks to physical therapists who provided either 45 minutes of general and stabilizing exercises or 15 minutes of high-velocity, low-amplitude manipulation and mobilization and 30 minutes of general and stabilizing exercises. There were significant differences between groups at the end of eight weeks, which were sustained at both six-month and 12-month follow-up. The authors concluded that manual therapy plus exercise showed significantly greater improvements than exercise alone on all outcome measures both on short and long-term follow-up. (4)

## **New England Journal of Medicine**

Through a three year study published in the New England Journal of Medicine, researchers at the University of North Carolina at Chapel Hill School of Medicine monitored 1,633 North Carolina patients

who had experienced acute back pain for less than 2 months and then compared the outcomes and charges for care provided by doctors

of chiropractic, orthopedic surgeons, and primary care physicians. Researchers found that there was <u>"a significantly higher degree of satisfaction" among patients seeing doctors of chiropractic</u> and that satisfaction was the lowest among primary care physicians. The NEJM study pointed out that patients preferred the quality and comprehensiveness of the doctor of chiropractic's approach to the examination. Patients found that D.C.'s provide better history-taking and clinical examinations and felt they spent more time explaining the problems that can cause acute low back pain, the study concluded. (5)

## **Consumer Reports – Health Ratings Center Study**

A 2009 study of 14,000 subscribers <u>rated chiropractic the highest level of patient satisfaction and</u> treatment effectiveness compared to primary care, physical therapy, and acupuncture for back pain. (6)

## Spine, 2001: Manipulation and Exercise for Neck Pain

The highly regarded and widely cited longitudinal, randomized controlled trial by Bronfort, et al., concluded that <u>in chronic neck pain patients</u>, there was at least twice as <u>much improvement in spinal manipulation plus low-tech exercise on all performance measures including range of motion</u>. In addition, spinal manipulation plus exercise was superior to spinal manipulation alone in terms of pain relief and patient satisfaction at one-year follow-up. The two-year follow-up study concluded that there is an advantage of spinal manipulation plus low-tech rehab exercise and high-tech rehab exercise vs. spinal manipulation alone over two years in terms of pain reduction. Results suggest treatment including supervised rehab exercise should be considered for chronic neck pain. (7)

#### Wellmark Blue Cross and Blue Shield

Findings from the Wellmark Blue Cross and Blue Shield 2008 Physical Medicine Pilot on Quality, a one-year pilot program designed to measure patient quality of care, suggest significant clinical outcomes and health care cost reductions attributable to the use of chiropractic and other physical medicine services.

Patients who received chiropractic or manual therapy had lower total health care costs and were less likely to have surgery than demographically similar Wellmark members who did not receive such services, and overall, 89 percent of all patients receiving physical medicine services reported improvement of at least 30 percent within 30 days.

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