

Comparing Costs of Care: DCs, MDs or PTs - Who Costs More?

Editorial Staff

In a health care era where evidence is increasingly the benchmark for insurance coverage, patient care and even cultural authority, we get plenty of it courtesy of a retrospective cost analysis spanning 10 years, more than 660,000 "covered lives" and nearly 7.5 million claims from Blue Cross Blue Shield of North Carolina.

Published as three studies in *JMPT*, the analysis compared patterns of utilization and charges by DCs, MDs and PTs for the treatment of headache, neck pain and low back pain in the state from 2000-2009, yielding intriguing findings with regard to costs of care when provided by a single provider type (i.e., DC vs. MD vs. PT), multiple provider types, and via direct vs. referral portals of entry:

Headache

"Utilization and expenditures for [headache](#) treatment increased from 2000 to 2009 across all provider groups. MD care represented the majority of total allowed charges in this study. MD care and DC care, alone or in combination, were overall the least expensive patterns of headache care. Risk-adjusted charges were significantly less for DC-only care."

Neck Pain

"Chiropractic care alone or DC with MD care incurred appreciably fewer charges for [uncomplicated [neck pain](#)] or [complicated] NP compared to MD care with or without PT care, when care included referral providers or services. This finding was reversed when care did not include referral providers or services. Risk-adjusted charges for UNP and CNP patients were lower for DC care patterns."

Low Back Pain

"Chiropractic care alone or DC with MD care incurred appreciably fewer charges for [uncomplicated [low back pain](#)] than MD care with or without PT care. This finding was reversed for [complicated] LBP. Adjusted charges for both ULBP and CLBP patients were significantly lower for DC patients."

All three studies, co-authored by Drs. Eric Hurwitz, Michael Schneider, Reed Phillips and other noted researchers, appear in the [May 2016](#) issue of *JMPT* and are available as full-text documents on the journal website.

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