

Utilization Review in Workers' Compensation

How to get a "Yes" from UR

Objectives: Upon completion of this course, participants should be able to:

1. Understand how to apply mandated medical treatment guidelines (ACOEM, MTUS/ODG) based on diagnoses to obtain UR approvals.
2. Be able to submit treatment requests that will be approved by UR through objective evidence (outcome measure tools, diagnosis related to guideline requirements, functional improvement, improved ADLs, diagnostics, and so forth).
3. "I have reached the maximum visits allowed. What's so important about 'functional improvement'?" Understand why effectively substantiating functional improvement allows for additional treatment.
4. Be able to procedurally code (CPT) your treatment requests to optimize payment reimbursement (OMFS; attended vs. non-attendant modalities)
5. Understand the regulatory requirements of each URO & the Utilization Review Process.
6. Identify and define the types of reviews (prospective, concurrent, retrospective, expedited, reconsiderations, extensions, and appeals) and the mandatory timeframes for each to receive a determination.
7. Understand the major UR Regulatory changes associated with SB863.
8. Understand recent case law that affects UR decisions and timeliness (Dubon I & II)
9. Understand how causation is addressed in UR treatment requests (Simmons Case Law repealed with SB863).
10. Understand the Qualifications of Physician Reviewers vs. Claims Examiners & First Level Reviewer Health care Professionals (Nurses/PTs). Understand who can deny your treatment requests.
11. Common treatments approved and denied by UR.
12. The regulatory requirement on how a UR determination must be delivered and what constitutes timeliness (receiving a verbal determination vs. the UR report).
13. Penalties subject to UR (out of scope denial, not in MTUS, responding late, not including IMR application form, etc.)

14. How to properly include the DWC form RFA with your treatment request (CCR 9792.9.1(t).
15. How your request for treatment may be marked incomplete without review (CCR 9792.9.1(C)(B).
16. Understand how to contest all denied/modified treatment requests (voluntary appeal, peer to peer & IMR) independently or concurrently.
17. Is my UR denial really valid for 12 months? What is a Duplicate treatment request & what is “Material Change?”
18. Understand the differences between the IMRO Physician Reviewer vs. the URO Physician Reviewer.
19. Review how Maximus IMR Final Determinations stack up against URO decisions.
20. What are the chances of an adverse UR decision being overturned by IMR?
21. Is it worth sending your denied treatment to IMR?
22. Does IMR cost anything to the injured worker, doctor, or claims administrator?
23. Understand what the criteria is for an Expedited Request for Authorization; Imminent & Serious Threat to His or Her Health (CCR 9792.9.1(C)(4).
24. Review algorithm of UR-IMR process with timelines and required elements.

Hourly Breakdown:

Hours	Topic
1	<ul style="list-style-type: none"> A. Application of Mandated Treatment Guidelines (ACOEM/MTUS) in association with the specific diagnoses. B. Define “Functional Improvement” and identify tools to support functional gains; outcome measure tools, ADLs, Physical Examination. C. Procedural coding (CPT) in correlation with the diagnosis and recommended guideline treatments allowed. D. Attended vs. Non-Attendant modalities billed (OMFS). E. UR regulatory requirements.
2	<ul style="list-style-type: none"> A. Identify all UR service types of review (prospective, retrospective, concurrent, expedited, appeals, reconsiderations, extensions, etc.) B. Review major changes with SB 863 C. Discuss recent case law (Dubon I & II); Timeliness & Relevant Records D. Discuss how causation is addressed in UR (Simmons case law repealed)
3	<ul style="list-style-type: none"> A. Who is qualified to be a UR physician reviewer vs. a non-physician first level reviewer (adjustor/nurse) B. Common treatments approved/denied by UR C. What makes a UR decision timely? D. Penalties subject to UR (out of scope, not in MTUS, late decision, no IMR application) E. Why it's important to include the DWC form RFA with every treatment request. F. How to avoid having your treatment request marked "incomplete" and not reviewed.
4	<ul style="list-style-type: none"> A. Understand how to contest all denied/modified UR decisions (appeal, peer to peer, IMR) B. Can a UR denial really stand for 12 months? C. Why is “Material Change in Fact” so important? D. How are IMRO physician reviewers different than URO physician reviewers? E. How do UR decisions hold up in IMR? F. Are there any fees for IMR? G. What is an expedited request? H. Review UR-IMR algorithms