

Manager/Supervisor Risk Management

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A twice weekly e-mail training for YCPARMIA members

TOPIC: WORKERS' COMPENSATION – UTILIZATION REVIEW

Utilization Review is an active area for claims examiners, but is a topic that probably needs limited discussion in training for supervisors or managers. The issue most commonly arises when your injured worker complains to you about delays in getting their medical treatment approved or authorized.

As discussed previously, under the workers' compensation system an injured worker is entitled to all care reasonably required to cure or relieve the worker from the effects of the injury. To this end, the State has adopted specific treatment guidelines from the American College of Occupational and Environmental Medicine's Practice Guidelines (ACOEM). These guidelines govern the frequency, duration, intensity, and appropriateness of all treatment procedures and modalities commonly performed in workers' compensation cases.

The State requires every employer to establish a utilization review process (UR) for screening and processing requests for diagnostic and treatment authorizations. The program is intended to manage medical care by approving, modifying, delaying or denying treatment requested by the treating doctor. The claims examiner can authorize treatment, but only a licensed physician can make a decision to modify, delay or deny requested treatment. In the simplest of terms, when there is a treatment issue the treating doctor's request is submitted by the claims examiner to an independent UR physician that determines whether the requested treatment complies with the ACOEM guidelines. There is a 5 day time limit for decisions that can be extended – usually caused by the need for more medical information from the treating doctor – for up to a total of 14 days. There is an appeal process.

Injured workers sometimes attempt to avoid the authorization process by "self-procuring" medical treatment. The employee normally cannot recover the cost of treatment provided outside the WC system, but there are exceptions. When the employer has notice that a worker has been injured, they must specifically instruct the worker what to do and who to see. If the employer fails in this duty they become liable for the reasonable value of the workers' self-procured treatment.

The bottom line is that if one of your injured workers feels that the authorization process is not working for them they should discuss this with their examiner. They also have the option of calling the YCPARMIA WC nurse for her assistance. YCPARMIA encourages our claims examiners to make their own decisions (authorize treatment) without going through the UR process. With virtually all of our injured workers treating within YCPARMIA's MPN we estimate that far less than 10% of treatment requests go through UR and the majority of those requests for treatment are authorized.

Next topic: Workers' Compensation – Dispute Resolution