

Utilization review



Unnecessary and inappropriate medical care can have detrimental effects on patients including delayed recovery, additional health issues, stress and anxiety. Our clinical team reviews treatment requests for injured employees to ensure care is medically necessary and helps them get back to work.

Delivering peace of mind

Using evidence-based medical guidelines, our utilization review nurses assess each situation from top to bottom to determine if care is appropriate. They examine treatment requests, where allowable by law, and can validate or negotiate the necessity, setting, frequency, intensity and duration of care. Because we understand that waiting to learn if treatment is approved can bring a lot of uncertainties, we'll ease any concerns by providing a prompt response, well within state timelines.

If the requested treatment falls outside of the medical guidelines, the nurse will engage a physician advisor who will consult with the treating provider on alternative strategies. Our physician advisors enhance the review process and provide medical and pharmaceutical expertise to ensure clients and their injured employees stay on the right path to achieve the best possible outcomes.

Expert solutions

Our experienced utilization review nurses complete the following types of reviews:

- **Prospective** — Assesses the proposed treatment to establish medical necessity, and to avoid inappropriate or ineffective treatment
- **Concurrent** — Includes ongoing reviews of inpatient hospitalizations to determine whether additional services (e.g., extended hospital stays, rehabilitation visits) are medically necessary

- **Retrospective** — Addresses potential care-related issues after treatment is rendered and before bills are paid; a key element in claim disputes or denials based on medical necessity

Electronic referral options and bill review details are integrated into our proprietary claims management system, allowing our examiners and nurses to quickly exchange information.

RESULTS

Our utilization review services achieve the following results on average:

54%
of treatment requests
were denied/withdrawn
following review

5:1
return on
investment

Focused on quality

You can be confident in the review services and support provided by Sedgwick's clinicians. Our team receives extensive, ongoing training and our organization is URAC accredited, attesting to the high quality of our review process.



To learn more about our utilization review services, contact:

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