Utilization Review

Fact Sheet



The utilization review (UR) process compares requests for medical services to appropriate evidence-based treatment guidelines and includes a recommendation based on that comparison. Utilization reviews support the mission to provide only proper and necessary care for injured workers.

What requires UR

- All inpatient hospitilizations
- Selected outpatient surgical procedures
- Physical and occupational therapy after the 24th visit
- Advanced imaging studies
- Spinal injections
- Behavioral health interventions by master's level mental health therapists after the eighth visit

Avoid treatment delays

- Treatment delays lead to increased work disability.
- Refer to L&I's Medical Treatment Guidelines
 (www.lni.wa.gov/patient-care/treating-patients/treatment-guidelines-and-resources)
 for information on what specific clinical
 documentation is required for selected procedures.
- Allow 14 days from submission to Comagine Health for UR to be completed.
- Reviews are delayed when incomplete information is submitted.
- Providers are encouraged to request discussion or peer-match re-review immediately if they disagree with denial.
- Providers should develop an alternate curative, time-limited treatment plan if the requested procedure is denied.

For more information, contact Comagine at 1-800-541-2894 or email L&I at UtilizationReviewExchange@Lni.wa.gov.

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Working with Comagine Health (formerly Qualis health)

Provider submits request to Comagine Health

Request Screening and Setup

Nonclinical staff evaluate requests and, if necessary, request information required for review (chart notes, X-rays, MRIs, etc.)

Clinical Review

- Clinical review criteria applied
- Medical necessity reviewed
- If not met, request is forwarded to a Physician Reviewer
- If criteria met, procedure is recommended for approval

Physician Reviewer

- Clinical information reviewed
- Determination made and rationale for decision documented if criteria not met

Approval

- L&I notified
- L&I claim manager notifies providers and workers

Denial

- Offer of discussion faxed to requesting provider
- L&I notified
- Peer-matched re-review offered
- If discussion occurs or re-review done, updated recommendations are sent to L&I
- L&I claim manager notifies providers and workers



Upon request, foreign language support and formats for persons with disabilities are available. Call 1-800-547-8367. TDD users, call 711. L&I is an equal opportunity employer.