

UTILIZATION REVIEW

Presentation by
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UTILIZATION REVIEW COMPLAINTS

Complaint Allegations	Number Received	Percentage
Unlicensed (Alleged the physician performing Utilization Review was not licensed to practice medicine in California)	8	20%
Unprofessional Conduct (e.g., Alleged "false" information in the report, the review was biased, delay in submitting paperwork, etc.)	9	22%
Quality of Care (e.g., Alleged the physician's opinion resulted in delay or denial of benefits/treatment, altered care, etc.)	23	58%
TOTAL	40	

WORKERS' COMPENSATION

Complaint Allegations	Number Received	Percentage
Unlicensed (Alleged the physician performing Utilization Review was not licensed to practice medicine in California)	6	23%
Unprofessional Conduct (e.g., Alleged "false" information in the report, the review was biased, delay in submitting paperwork, etc.)	4	15%
Quality of Care (e.g., Alleged the physician's opinion resulted in delay or denial of benefits/treatment, altered care, etc.)	16	61%
TOTAL	26	

Department of Industrial Relations, Division of Workers' Compensation, Utilization Review process:

- ⦿ Treatment standards are defined in regulation.
- ⦿ There is no requirement that Utilization Review physicians be licensed in California, California Code of Regulations, Chapter 4.5, Section 9792.6(v).

INSURANCE COMPANIES

Complaint Allegation	Number Received	Percentage
Unlicensed (Alleged the physician performing Utilization Review was not licensed to practice medicine in California)	2	15%
Unprofessional Conduct (e.g., Alleged "false" information in the report, the review was biased, delay in submitting paperwork, etc.)	5	35%
Quality of Care (e.g., Alleged the physician's opinion resulted in delay or denial of benefits/treatment, altered care, etc.)	7	50%
TOTAL	14	

INDEPENDENT MEDICAL REVIEWS

QUESTIONS?