Utilization Management

Guarantee the Appropriate Use of Health Care Services

Utilization management is not about preventing treatment, but about promoting the appropriate use of health care services. Our URAC and NCQA-Accredited medical and behavioral health utilization management services are built on this philosophy. Our highly flexible solution can be configured to meet any requirements, whether a plan needs a full suite of utilization management services or just specific components to fill gaps.

Customize

With 20 years of experience in utilization management, we understand there is no one-size-fits-all solution. Our highly flexible program can be customized to meet unique requirements, whether a plan requires a fully outsourced solution or just specific components. We seamlessly integrate with plans to best serve members and providers, all while we contain costs and ensure quality.

A highly flexible solution providing services tailored to a plan's requirements.

- Medical/Behavioral Health
- Inpatient/Outpatient
- Pre-auth/Initial/Concurrent/Retro
- Physician Review
- Appeals (First- and Second-level)
- Facilities/Geographies
- Full Coverage/After Hours
Safeguard
Health Integrated clinicians safeguard against unnecessary procedures and redundant services by closely monitoring the appropriateness of care throughout its delivery. Instead of relying on diagnostic codes alone to make determinations, our team evaluates all aspects of medical necessity, quality and relevance in applying national criteria and guidelines. Our highly qualified medical directors offer ongoing clinical guidance and support to assure we adhere to evidence-based practices. We rely on our board-certified physicians and psychiatrists for physician reviews, peer-to-peer consultations and first- and second-level appeals.

Refer
Utilization management is where the earliest indicators appear that members may need to be referred into other care management programs. With established workflows and triggers, we proactively make these real-time referrals to helpful programs in case management, Multichronic Care Management and disease management.

Members receive the right care, at the right time, in the right setting.

Contact Us
Learn more about how our utilization management services can benefit your health plan and its members.
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About Health Integrated*
Health Integrated, an EXL company, leads the industry with Precision Empowered Care Management*, enabling health plans to precisely manage their most vulnerable members. By combining actionable big data with a proven biopsychosocial model, we address the physical, psychological and social drivers that impact member health and satisfaction. As a result, plans enhance quality, achieve compliance and strengthen their financial performance, while empowering members to achieve better outcomes.