## Are you ready for URAC's **Health Utilization Management Accreditation?**





Your clinical administrative staff are prepared.

**CONFIRM** that only clinical staff are conducting any activities that require interpretation of clinical information, which includes selecting criteria to use for handling a request for health care services or treatment.



Clinicians are available for consultation with the initial clinical reviewers.

**ENSURE** that a licensed health professional is available to provide support to initial clinical reviewers.



The credentials for your clinical peer reviewers and appeal peer reviewers are confirmed in their files.

**AUDIT** your files to ensure credentials meet standard requirements.



Your staff can verbalize what actions to take when there is not enough information to process a request for certification.

**INTERVIEW** your staff and ask, "What actions are taken when inadequate information is submitted with a request for certification?"



You have ensured that for any given case, the clinical peer reviewer and the appeal reviewer are not the same person.

**PULL** a random selection of appeal cases and demonstrate that the same peer clinical reviewer did not do the appeal. Ensure that your process prevents this from happening.



## Your non-certification notices meet standard requirements.

**ANALYZE** notices to confirm that they contain the principal reason(s) for the determination not to certify, instructions for initiating an appeal, and instructions for requesting the clinical rationale.



Your attending physician or other ordering provider can request a conversation with the peer clinical reviewer reviewing the case.

**REVIEW** policies and procedures to ensure that a physician requesting certification can talk to the peer clinical reviewer assigned to the case.



Your appeal reviewer qualifications require them to have the clinical expertise to manage the medical or behavioral health condition or disease under review.

**REVIEW** appeal cases to confirm appeal reviewer qualifications.



Your organization is monitoring its utilization management program.

**CONFIRM** that there is ongoing summary reporting and analysis of critical areas of program performance.



Your appeals, both standard and expedited, meet time frames and notification requirements.

**REVIEW** a random selection of appeal cases for time frames and notification documentation.