



Managed Care Services

Utilization Management

The ABS Utilization Management (UM) Program is designed to ensure that patients receive optimal care and support over a required period of time to achieve positive clinical outcomes and containment of cost. ABS utilizes evidence-based treatment guidelines and standardized clinical pathways to determine medical necessity, and as a result, enhance the quality and effectiveness of patient care.

Using nationally accepted guidelines, ABS delivers a solution which provides:

- Pre-authorization Review of proposed surgeries and other health care services– inpatient and outpatient– in order to ensure appropriate treatment and effectively eliminate unnecessary surgery and procedures, and redundant examination costs.
- Referral Coordination to ensure members avail themselves of services within their network. Staff will provide assistance in directing patients to more cost effective facilities.
- Specific Therapy Management, i.e. physical therapy, can be managed to ensure appropriate care and utilization post injury or surgery.
- Concurrent Review of all inpatient stays, from the time of admission until discharge, to determine medical necessity, appropriateness and timeliness of medical care.
- Discharge Planning to ensure appropriate preparedness of the patient and care giver for discharge from the facility. The process includes reviewing alternate levels of care, the need for ancillary services, and the potential benefits of home support.
- Retrospective Review includes review and analysis after treatment has been administered to ensure appropriateness and medical necessity within the benefit structure.