



## Zenith Health Care Network

### ***Services Requiring Preauthorization***

The primary Zenith utilization review agent is UniMed and Preauthorization requests must be reviewed by UniMed.

The following non-emergency health care **requires preauthorization** by Zenith's utilization review agent:

1. Inpatient hospital admissions including the principal scheduled procedure(s) and length of stay;
2. All outpatient surgical or ambulatory surgical services including all epidural steroid injections, facet injections, trigger point injections, sacroiliac joint injections, prolotherapy injections, radiological cryotherapy, and manipulations under anesthesia, and including the specific site or facility where the service will be performed;
3. Spinal surgery;
4. All psychological or psychiatric testing and psychotherapy, repeat interview, and biofeedback except for an initial psychological or psychiatric evaluation;
5. All external and implantable bone growth stimulators;
6. All chemonucleolysis, vertebral axial decompressions (Vax-D), radio frequency thermocoagulation of facet joints (RFTC), and IDET procedures;
7. All myelograms, discograms, venograms, surface electromyograms, EMGs, and nerve conduction studies;
8. Unless otherwise specified, repeat individual diagnostic study with a fee established in the current TDI Division of Workers' Compensation fee guideline of greater than \$350.00 or documentation of procedure. ("Diagnostic study" is defined as any test used to help establish or exclude the presence of disease/injury in symptomatic persons; the test can help determine the diagnosis, screen for specific diseases/injury, guide the management of an established disease/injury and help formulate a prognosis.);
9. All work hardening and work conditioning services (regardless of whether or not the facility has program accreditation by the Commission on Accreditation of Rehabilitation Facilities). (A comprehensive occupational rehabilitation program or a general occupational rehabilitation program constitute work hardening or work conditioning.);
10. Rehabilitation programs including outpatient medical rehabilitation, chronic pain management/interdisciplinary pain rehabilitation;
11. All durable medical equipment (DME) in excess of \$500.00 per item (either purchase or expected cumulative rental), all neuromuscular stimulators, all inferential units, all neuromuscular stimulators and all transcutaneous electrical nerve stimulators (TENS) units;
12. All nursing home, convalescent, residential, and all home health care services and treatments;
13. Chemical dependence, weight loss programs, and gym memberships;
14. Any investigational or experimental service or device for which there is early, developing, scientific or clinical evidence demonstrating the potential efficacy of the treatment, service, or device but that is not yet accepted by the Centers for Medicare & Medicaid Services (CMS); and
15. All physical therapy, occupational therapy, chiropractic therapy, and chiropractic manipulations except the first six physical therapy, or occupational therapy, or chiropractic therapy, or chiropractic manipulations occurring within the first two weeks following the date of injury or following a preauthorized or pre-certified inpatient or outpatient surgery approved by Zenith or its URA vendor;



16. If Zenith has pre-certified a treatment plan then any treatment not covered by that treatment plan must be preauthorized. If there is no Zenith pre-certified treatment plan then any treatment outside the range of treatments recommended by the adopted treatment guidelines must be preauthorized; and
17. Any treatment for body parts or medical conditions that have been disputed by Zenith as being part of the compensable injury must be preauthorized.

### ***Services Requiring Concurrent Review***

The health care requiring concurrent review for an extension for previously preauthorized or precertified services includes:

1. Inpatient length of stay;
2. Work hardening or work conditioning services;
3. Investigational or experimental services or use of devices;
4. Rehabilitation programs;
5. DME in excess of \$500.00 per item, neuromuscular stimulator usage and TENS usage;
6. Nursing home, convalescent, residential, and home health care services;
7. Chemical dependency or weight loss programs; and
8. Physical, occupational, chiropractic therapy, and chiropractic manipulation services.