



Utilization Management Services





Genex delivers a UR decision
in 1.7 days, much faster than
state requirements

Extend Your Medical Strategy to Every Desk

Whether mandated or not, utilization management (UM) is a key medical cost-containment tool that ensures delivery of approved, appropriate treatment. Administrative burdens and decision-making hurdles can cause your workflow to come to a standstill.

Genex's Utilization Management Services help accelerate and improve decision-making and delivery of appropriate care for injured workers. Only Genex can extend your overall medical strategy to every desk through our highly-specialized, automated technology and configurable processes. Now you can ensure appropriate, consistent decisions on every claim while eliminating administrative burden and streamlining workflows.

Genex's Utilization Management Services integrated with case management, bill review, and pharmacy benefit management gives you greater control over care for injured workers and resulting medical spend across the continuum of care.

Key Features & Differentiators

- › Customized administrative approvals using advanced algorithms
- › Guidelines-based medical necessity decision delivery
- › Comprehensive network of direct-contracted physicians
- › Automatic transmission of approvals/denials to integrated systems
- › Immediate referral of approvals to specialty networks for scheduling
- › Licensed in all states with legal UM mandates
- › HIPAA-compliant reporting system provides customizable reports

Is Your UM Program?

Fast

- › Simplifies the medical decision-making process
- › Provides treatment-request decisions in 30 seconds
- › Integrates seamlessly into your claims process

Precise

- › Ensures payment only for authorized medical treatment
- › Provides defensible recommendations
- › Delivers predictable, transparent, and scalable results

Effective

- › Meets your company's unique UM requirements
- › Minimizes administration costs associated with UM
- › Establishes credibility with specialty-matched reviews
- › Simplifies medical decision-making

Decision Pathway



**Claims
Process**



APEX
Automated
Guideline Analysis



UM & Peer
Traditional
Clinical Management



**Case
Management**
Early Intervention



A large employer of 100k+
had 98% of decisions upheld
using Genex UM versus the
91% industry average



Fast, Accurate, Medical Determinations

APEX-automated UM software provides clinical decisions on treatment requests in 30 seconds or less. If you're frustrated with excessive medical management expenses, rubber-stamped health care decisions, unnecessary utilization reviews, and vendor referral leakage, APEX will alleviate all of these costly concerns.

How Does It Work?

The APEX software solution considers the statistical analysis of 50 million processed bills with multiple evidence-based guidelines and applies your medical management strategy to deliver an accurate and immediate treatment decision. At little to no cost, APEX can review every request on every claim and identify which ones to send for utilization review.

The APEX Difference

- › APEX specialized software can make medical decisions up to 40x faster than traditional processes
- › Prevents rubber-stamping of treatment requests
- › Renders quick evidence-based medical decisions in a hands-off process
- › Evaluates provider treatment request patterns

APEX's automated referral process helps improve overall network penetration by more than 25%



Genex Services
440 East Swedesford Road, Suite 1000 › Wayne, PA 19087
888.GO.GENEX › genexservices.com/utilizationmanagement

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Workers' Compensation Utilization Management
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