



MANAGEMENT SERVICES

WORKERS COMPENSATION IN HOUSE AUTHORIZATION PROGRAM (WCIHAP)

The goal of the Workers Compensation In House Authorization Program (WCIHAP) is to expedite our employees medical treatment needs. To streamline the Utilization Review (UR) process the below listed **initial treatment** items shall be authorized by the City's Workers Compensation Department (WCD).

Once the above listed treatment has been authorized by WCD **all treatment requested is subject to UR except** the following:

1. Follow up appointments.
2. Future medical claims wherein medication that has been reviewed by UR within the last six months. Ongoing medication will be reviewed every six months from the last UR certification.
3. Transfer of care to a specialist - on approved body parts.
 - MRI
 - CT Scan
 - X-rays
 - EMG/NCS
 - Ultrasound
 - Physical Therapy - 6 sessions
 - Occupational Therapy - 6 sessions
 - Acupuncture - 6 sessions
 - Chiropractic - 6 sessions
 - Aquatic Therapy - 6 sessions
 - Transfer of care - on approved body parts

 - **Corticosteroid Injections (Non-diabetic patients):**
 - Elbow - 1 injection
 - Knee - 1 injection
 - Shoulder - 1 injection
 - Back - 1 injection

** Except Medrol, per 8 CCR §9792.27.15 Medrol can be performed in office without an RFA

- **Durable Medical Equipment:** Non-surgical, basic equipment less than
 - Crutches
 - Braces/Splints - Off the Shelf

- Canes
- Walkers
- Standard wheelchair rental
- Walking boots
- Slings
- Hot and cold packs

- **Lab work to establish baselines**
 - Complete Blood Count (CBC)
 - Basic Metabolic Panel (BMP)
 - Urinary Analysis (UA)
 - Electrocardiogram (ECG or EKG) - only if heart claim)
 - Partial Thromboplastin (PTT or aPTT)
 - Tetanus Shot if over 10 years from the last injection

WCD staff is to approve the above listed treatment within 24 hours of receipt, the same day if possible.

**** If your provider submits an RFA that has treatment listed that is outside of the treatment listed above the request is subject to UR.**

** If you have a gap in treatment and the above listed treatment has previously been authorized the requested treatment is subject to UR.

PROVIDERS ARE TO

1. All treatment requests are to be submitted to the City on an RFA, including medication.
2. Medical reports shall show the medical necessity of the treatment provided.
3. Providers are to follow the Medical Treatment Utilization Review Schedule (MTUS): <http://www.dir.ca.gov/dwc/DWCPropRegs/Medical-Treatment-Utilization-Schedule/Medical-Treatment-Utilization-Schedule.htm>
4. RFA's are to be emailed to workcomp@burbankca.gov or faxed to 818-238-5019.
5. Status request are to be emailed to workcomp@burbankca.gov

FOR ALL DATES OF INJURY - ALL EMERGENCY TREATMENT SHOULD BE PROVIDED AS APPROPRIATE AND NOT DELAYED OBTAINING PREAUTHORIZATION. In cases where the treating provider deems the treatment needed is emergent (life threatening, limb threatening, the absence of immediate medical treatment could place the health of the injured worker in serious jeopardy), the provider should provide the necessary treatment and then follow up to obtain retro authorization.