

BRMS Utilization Management

BRMS is focused exclusively on providing easy-to-use, fully compliant services to employers of all sizes.

Utilization Management

BRMS has an established utilization management (UM) program to help ensure that our members receive quality health care. The UM program looks at the healthcare services provided to our members and evaluates whether they are medically necessary, timely, and in keeping with both BRMS established guidelines and community standards. This program is structured around the belief that medical decisions should be made by qualified individuals using nationally recognized clinical criteria.

Inpatient/outpatient precertification

- Precertification is the process of determining in advance whether a procedure, treatment or service is medically necessary. This helps customers to get the right care in the right setting – saving them from costly and unnecessary services.
- BRMS looks for ways to save customers money by reviewing inpatient and outpatient services.
- BRMS can help to lower out-of-pocket costs by recommending one of our preferred facilities, transitioning inpatient care to outpatient treatment, or helping to identify treatments or procedures that may be avoidable or unnecessary.
- Inpatient services include procedures, treatments and services received in a hospital or related facility that require an overnight stay.

Concurrent review (inpatient case management)

- Review inpatient stay to encourage appropriate care.
- Work with an individual during his or her hospital stay to help ensure the right care and services are in place for a strong recovery process following discharge.

Discharge planning

- Focuses on identifying and removing any barriers to a smooth, safe and timely discharge to home or to a less intense inpatient setting.
- Helps ensure that individuals can quickly and safely transition to home or a lower level of care without unnecessary delay.

