



**PHYSICIANS**

Integrated Medical Group

(415) 643-9188

## **Physicians Integrated Medical Group**

### **Ensuring Appropriate Service for Our Members:**

#### **The Risks of Underutilization**

As the Physicians Integrated Medical Group (PIMG) moves into an expanded portfolio of business that includes Commercial, Medi-Cal and the future MediCare populations' capitation of providers takes a more prominent place within our Medical Group. Capitation and other forms of risk-based compensation may conceivably create certain incentives for groups, practitioners and providers to limit approval of needed care to the members it serves. Conversely, overutilization may indicate inadequate coordination of care, inappropriate use of services and faulty allocation of needed care. To prevent inappropriate decision making, the PIMG monitors for under and overutilization, analyzes data to identify the causes, and takes action to correct any instances of potential or actual under or over utilization. To make an assessment of utilization issues, the PIMG analyzes data from provider and practice sites, individual product lines and of the Group as a whole. The PIMG then implements appropriate interventions whenever it identifies potential quality problems affecting its members.

Any member, practitioner or the public can obtain a copy of the utilization review criteria that Physicians Integrated Medical Group uses to arrive to any authorization decisions, including the criteria used to modify, delay or deny services. Please call (415) 643-9188 to request any type of disclosures.

The PIMG has aligned its financial composition to encourage appropriate decision on the coverage of care and services. To this effect, **all** PIMG's utilization management decisions are **only** based on appropriateness of care and service, and existence of coverage. The PIMG does **not** specifically reward practitioners, or **any** other individual conducting utilization review for denials of coverage or service, nor for any modification or reduction in services, nor it encourages barriers to care and service. In other words, financial incentives for UM decision makers do not encourage decisions that result in underutilization of medical services. As a PIMG provider is important that all its delivery sites uphold these principles when assessing any aspect of the patient's care. As a non-for-profit managed care organization the PIMG strives to provide needed quality medical care and to do so with dignity for the members it serves.