

Utilization Review: The Role of Independent Expertise

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How expert opinions can bridge the gap between clinical necessity and insurance determinations.

Healthcare today operates at the intersection of patient care, evidence-based medicine, regulatory requirements, and cost containment. While these interests are often aligned, there are situations where disagreements arise regarding what constitutes medically necessary care. It is within this space that independent clinical expertise becomes particularly valuable. Throughout my career as a physical therapist, clinic director, and expert reviewer, I have observed a growing need for objective analysis when evaluating treatment recommendations, utilization patterns, and medical necessity determinations. Whether reviewing physical therapy services, rehabilitation plans, chiropractic treatment, durable medical equipment, or future care recommendations, the goal should remain consistent: ensuring patients receive care that is both clinically appropriate and supported by the available evidence.

Understanding Medical Necessity

Medical necessity is frequently discussed but often misunderstood. A service is not medically necessary simply because it was provided. Likewise, a treatment is not medically necessary merely because a patient reports improvement. Medical necessity generally requires demonstrating that the service addresses a diagnosed condition or impairment, is expected to improve, maintain, or prevent deterioration in function, is supported by accepted clinical standards, requires the skill of a licensed healthcare professional, and is reasonable in frequency, duration, and intensity.

The Challenge of Utilization Review

Utilization review exists to evaluate whether healthcare services are reasonable, necessary, and supported by evidence. Most utilization reviews involve questions regarding treatment appropriateness, frequency, duration, objective progress, and whether continued skilled intervention remains justified. The question is not simply whether symptoms remain. The question is whether ongoing skilled treatment is likely to produce meaningful functional benefit.

Why Independent Reviews Matter

Independent reviewers occupy a unique position within the healthcare system. Unlike treating providers, they do not have an ongoing therapeutic relationship with the patient. Unlike insurance companies, they do not have a financial obligation to approve or deny claims. Their responsibility is to objectively evaluate the available evidence and determine whether treatment aligns with accepted standards and current clinical guidelines.

Evidence Should Drive Decision-Making

One of the most important responsibilities of an independent reviewer is distinguishing evidence-based care from preference-based care. Clinical practice guidelines, systematic reviews, randomized controlled trials, and consensus statements provide important frameworks for evaluating treatment recommendations. Evidence does not replace clinical judgment, but it should guide it.

The Importance of Objective Measures

Objective findings remain one of the strongest indicators of medical necessity. Documentation should clearly demonstrate baseline impairments, functional limitations, measurable progress, remaining deficits, and the rationale for continued intervention. When objective improvement is absent, reviewers must determine whether treatment remains appropriate or whether alternative strategies should be considered.

Rehabilitation Is Not One-Size-Fits-All

Clinical recovery rarely occurs in a perfectly linear fashion. Co-morbidities, age, surgical history, chronicity, neurological involvement, occupational demands, and psychosocial factors all influence outcomes. Independent reviewers must balance evidence-based circumstances. Good reviews recognize nuance while remaining grounded in objective evidence.

The Role of Expert Witnesses

In legal settings, utilization review principles become even more important. Attorneys, insurers, healthcare providers, and courts frequently seek independent expert opinions regarding medical necessity, reasonableness of treatment, future care recommendations, standard of care, and rehabilitation costs. The expert's responsibility is not advocacy. The expert's responsibility is education. A qualified expert helps decision-makers understand the clinical evidence and determine whether treatment aligns with accepted standards.

Balancing Patient Care and Resource Stewardship

Healthcare resources are finite. Patients deserve access to appropriate care, while providers and payers have a responsibility to ensure resources are utilized effectively. These goals are not mutually exclusive. Evidence-based utilization review supports both by identifying treatments likely to improve outcomes while discouraging ineffective or unnecessary interventions.

Looking Forward

As healthcare becomes increasingly complex, the need for thoughtful, evidence-based utilization review will continue to grow. Independent experts play an important role in bridging the gap between treating providers, insurance carriers, attorneys, and patients. Their value lies in providing objective analysis grounded in clinical evidence and professional standards. Medical necessity should never be determined solely by opinion, financial interests, or administrative processes. It should be determined through careful review of the medical record, current evidence, accepted standards, and the individual circumstances of the patient.