MEDICAL CASE MANAGEMENT
COMMON REFERRAL CRITERIA

DIAGNOSIS
● Severe burns
● Amputations
● Multiple trauma
● Repetitive Motion Injury
● Head injury
● Thoracic Outlet Syndrome
● Complications follow surgery
● Wound care (non-healing wounds)
● Spinal cord injury
● Psychiatric diagnosis

PRE-EXISTING CONDITIONS
● Diabetes
● Cancer
● HIV/AIDS
● Failed or repeated surgeries
● Multiple back claims/injuries
● Neuromuscular diseases

PROCEDURES
● Pain Management Programs
● Fusions, Laminectomy, Discectomy
● IDET
● Injection therapy
● Discograms

OTHER
● Potential Catastrophic Injury (Mandatory – See Claims Procedure 114)
● Chronic Pain Program (Mandatory – See Claims Procedure 309)
● Treatment occurring outside of ND (within 2 days of claims registration)
● Live in rural community; small hospital/facility
● Elderly injured worker
● Inappropriate physician related to diagnosis
● Unclear diagnosis; no established treatment plan
● Understanding barriers – language, education
● Injured worker requesting 2nd/3rd opinions
● Redirecting care
● Use narcotics past the acute phase/drug abuse patterns
● Referral to out-of-state physicians
● Psychological issues become a barrier in the recovery process
● Home Care Services
● Complications while hospitalized
● Cost of claim
● Prior compliance issues
● Multiple providers/drugs