

Utilization Guide for Initial Time to Produce Effect

The Colorado Division of Workers' Compensation (DOWC) Medical Treatment Guidelines were developed for health care providers to treat patients with work-related injuries or conditions. In cases where prescribed treatment falls within the scope of a guideline, prior authorization for payment is not required.

To be eligible for payment, treatment must be medically necessary, reasonable and directly related to the workers' compensation injury for which Pinnacol Assurance is liable. Please be sure to verify that the claim is open, active and eligible for medical benefits.

The chart below summarizes the initial time to produce effect for common treatments deemed appropriate within the treatment guidelines.* If the initial number of treatments does not produce meaningful, quantifiable functional gains, please consider whether the treatment should be discontinued. (Note that pain relief by itself is not a functional gain.)

For these initial treatments, providers do not need to contact Pinnacol for prior authorization for payment. For reimbursements of treatments beyond an initial time-to-produce-effect amount, Pinnacol may ask that providers request prior authorization, with clear documentation in the medical record that meaningful, measurable, functional gains have been realized and that additional functional gains are likely with ongoing therapy. Absent such documentation, Pinnacol may decline to authorize payment for additional treatment. Otherwise, Pinnacol will only authorize an amount of additional treatment that corresponds to the subsequent time-to-produce-effect interval specified in the relevant medical treatment guideline.

	Low Back Pain	Thoracic Outlet Syndrome	Shoulder Injury	Cumulative Trauma Condition	Lower Extremity Injury	Complex Regional Pain Syndrome/Reflex Sympathetic Dystrophy	Cervical Spine	Chronic Pain Disorder
Acupuncture	up to 6 treatments	up to 6 treatments	up to 6 treatments	up to 6 treatments	up to 6 treatments	~	up to 6 treatments	up to 6 treatments
Aquatic Therapy	up to 5 treatments	up to 5 treatments	up to 5 treatments	~	up to 5 treatments	up to 5 treatments	N/A	up to 5 treatments
Biofeedback	up to 4 sessions	up to 4 sessions	up to 4 sessions	up to 4 sessions	up to 4 sessions	~	up to 4 sessions	up to 4 sessions
Diagnostics and Injections	Prior authorization is not necessary for diagnostic testing or injections when the use is consistent with the DOWC Medical Treatment Guidelines. Therapeutic injections do require prior authorization.							
Manipulation (e.g., chiro, OMT)	up to 6 treatments	up to 6 treatments	up to 6 treatments	up to 6 treatments	up to 6 treatments	~	up to 6 treatments	up to 9 treatments
Massage	immediate	immediate	immediate	immediate	immediate	~	immediate	immediate
Neuromuscular Re-Education	up to 8 treatments	up to 6 treatments	up to 6 treatments	up to 6 treatments	up to 6 treatments	up to 6 treatments	up to 8 treatments	up to 6 treatments
Psychiatric and Psychological	Initial evaluation authorized. See DOWC Medical Treatment Guidelines for policies related to ongoing treatment.							
Physical/Occupational Therapy	up to 6 visits	up to 6 treatments	up to 6 treatments	up to 6 treatments	up to 6 treatments	up to 6 treatments	up to 6 treatments	up to 6 treatments
Work Conditioning	up to 2 hrs/day x 2-5 visits/wk, up to 4 wks	~	~	up to 2 hrs/day x 2-5 visits/wk, up to 4 wks	~	up to 2 hrs/day x 2-5 visits/wk, up to 4 wks	up to 2 hrs/day x 2-5 visits/wk, up to 4 wks	up to 2 hrs/day x 2-5 visits/wk, up to 4 wks
Work Hardening	up to 6 hrs/day x 2-5 visits/wk, up to 4 wks	up to 8 hrs/day x 2-5 visits/wk, up to 2 wks	up to 8 hrs/day x 2-5 visits/wk, up to 2 wks	up to 6 hrs/day x 2-5 visits/wk, up to 4 wks	up to 8 hrs/day for 2-5 days/wk, up to 2 wks	up to 6 hrs/day x 2-5 visits/wk, up to 4 wks	up to 6 hrs/day x 2-5 visits/wk, up to 4 wks	up to 6 hrs/day x 2-5 visits/wk, up to 4 wks

* Note: Exhibit 10, Traumatic Brain Injury (TBI), is not referenced in this document. Due to the nature of TBI, the TBI Treatment Guideline states that providers should consult the claims team for treatment priorities and goals. It is highly recommended that the injured worker — in collaboration with his/her family/support system, insurance carrier and case manager — participate in care planning.

(~) If a service or treatment is not listed or not quantified, refer to the treatment guidelines on the DOWC website at <https://www.colorado.gov/pacific/cdle/workers-compensation-rules-procedure>.