



State of West Virginia
DEPARTMENT OF HEALTH AND HUMAN RESOURCES
Office of Inspector General
Board of Review
P. O. Box 468
Hamlin, WV 25523

Joe Manchin III
Governor

Martha Yeager Walker
Secretary

December 5, 2008

Dear _____:

Attached is a copy of the findings of fact and conclusions of law on your hearing held November 20, 2008. Your hearing request was based on the Department of Health and Human Resources' decision to deny prior authorization for payment of a Roll-about Chair.

In arriving at a decision, the State Hearing Officer is governed by the Public Welfare Laws of West Virginia and the rules and regulations established by the Department of Health and Human Resources. These same laws and regulations are used in all cases to assure that all persons are treated alike.

Eligibility for Medicaid services is based on current policy and regulations. Some of these regulations state that prior authorization (PA) must be obtained for Durable Medical Equipment (DME) when service limits are exceeded. It is the responsibility of the prescribing practitioner to submit the appropriate clinical documentation i.e., ICD-9 code(s), all information required on the written prescription and any other relevant information. When documentation fails to meet criteria, WVMI may request additional information to be submitted within seven (7) days. If information is not received by WVMI within seven (7) days, the request will be denied for lack of documentation to support medical necessity. (WVDHHR Medicaid Policy Manual, Chapter 500-8)

The information presented at your hearing reveals that prior authorization for a Roll-about Chair was not approved due to the fact that policy limits approval for this type of wheelchair to one per five years, and you received a power wheelchair (K0011) February 27, 2004. Five years has not elapsed since the prior wheelchair was approved.

It is the decision of the State Hearing Officer to **uphold** the action of the Department in denying your request for prior authorization of a Roll-about chair.

Sincerely,

Cheryl Henson
State Hearing Officer
Member, State Board of Review

cc: Erika H. Young, Chairman, Board of Review
Lorna Harris, BMS / Virginia Evans, BMS

**WEST VIRGINIA DEPARTMENT OF HEALTH & HUMAN RESOURCES
BOARD OF REVIEW**

_____,

Claimant,

v.

Action Number: 08-BOR-2339

**West Virginia Department of
Health and Human Resources,**

Respondent.

DECISION OF STATE HEARING OFFICER

I. INTRODUCTION:

This is a report of the State Hearing Officer resulting from a fair hearing concluded on November 20, 2008 for _____. This hearing was held in accordance with the provisions found in the Common Chapters Manual, Chapter 700 of the West Virginia Department of Health and Human Resources. This fair hearing was convened on November 20, 2008 on a timely appeal filed October 23, 2008.

II. PROGRAM PURPOSE:

The program entitled Medicaid is set up cooperatively between the Federal and State governments and administered by the West Virginia Department of Health & Human Resources.

The 1965 Amendments to the Social Security Act established, under Title XIX, a Federal-State medical assistance program commonly known as Medicaid. The Department of Health and Human Resources administers the Medicaid Program in West Virginia in accordance with Federal Regulations. The Bureau for Medical Services is responsible for development of regulations to implement Federal and State requirements for the program. The Department of Health and Human Resources processes claims for reimbursements to providers participating in the program.

III. PARTICIPANTS:

_____, Claimant, by telephone
_____, Claimant's Social Worker, by telephone

Virginia Evans, BMS, by telephone
Joann Ranson, BMS, by telephone
Liz Miller, RN with WVMI, by telephone

Presiding at the hearing was Cheryl Henson, State Hearing Officer and a member of the State Board of Review.

IV. QUESTIONS TO BE DECIDED:

The question(s) to be decided is whether the Department was correct in its decision to deny prior authorization (PA) for a Roll-about chair.

V. APPLICABLE POLICY:

Chapter 506, Durable Medical Equipment/Medical Supply Manual

VI. LISTING OF DOCUMENTARY EVIDENCE ADMITTED:

Department's Exhibits:

- D-A Chapter 506, Durable Medical Equipment/Medical Supply Manual
- D-B Information from Dr. _____ and _____
- D-C Denial Notice Determination dated October 15, 2008

Claimant's Exhibits:

None

VII. FINDINGS OF FACT:

- 1) On or about October 15, 2008 the Claimant was notified via a Notice of Denial (D-C) that the request for prior authorization (PA) for Medicaid payment for a Roll-about Chair was denied. The denial letter included the following pertinent information:

Reason for Denial:

Exceeds service limit of 1 in 5 years. The request for a roll-about chair (geri-chair) was denied due to

our records show that the patient has a K0011 power wheelchair provided by [REDACTED] and paid for by WV Medicaid 2/27/04. WV Medicaid's allowable is 1 mobility aide in 5 years.

- 2) Evidence presented by the Department reveals that PA (prior authorization) is required for Medicaid payment for a Roll-about Chair. West Virginia Medical Institute (WVMI) is the agency contracted to review PA requests and determine eligibility. The Claimant's request (D-B) was reviewed by West Virginia Medical Institute (WVMI) and the determination was made that the Claimant has already received one power wheelchair within the past five (5) years. WVMI determined the Claimant was not eligible due to the timeframe of the request. The Claimant was not denied based on medical eligibility.
- 3) Witnesses for the Claimant testified that she has not had a change in medical condition and she does still have a functioning power chair that she uses every day. However, she needs the new chair when she goes out to certain businesses because some, including grocery stores, do not have the ability to accommodate her larger power chair.
- 4) Durable Medical Equipment/Medical Supply Manual Section 506 states in pertinent part:

For DME services and items requiring prior authorization review for medical necessity by WVMI, it is the responsibility of the prescribing practitioner to submit the appropriate clinical documentation i.e., ICD-9 code(s), all information required on the written prescription and any other relevant information.

When documentation fails to meet criteria, WVMI may request additional information to be submitted within seven (7) days. If information is not received by WVMI within seven (7) days, the request will be denied for lack of documentation to support medical necessity.

ATTACHMENT I – COVERED/NON-COVERED DME/MEDICAL SUPPLY SERVICES WITH ASSIGNED HCPCS CODES

HCPCS CODES	DESCRIPTION	SERVICE LIMIT
E1031	Rollabout chair, any and all types w/castors 5" or greater	1 Per 5 Rolling years

VIII. CONCLUSIONS OF LAW:

- 1) WVDHHR Medicaid Durable Medical Equipment Manual states that prior authorization (PA) is required for approval of a Rollabout Chair. Policy is clear in that a service limit of "one per five rolling years" is applied to approval for wheelchairs.

- 2) The Claimant received a power wheelchair February 27, 2004, which was paid for by Medicaid. The Claimant has had no change in medical status, therefore is not eligible for medical consideration for another wheelchair until five years after February 27, 2004.
- 3) Evidence is clear in that the Department followed policy in its evaluation and subsequent denial of the physician's request for prior authorization for the Roll-about Chair.

IX. DECISION:

It is the ruling of the State Hearing Officer to **uphold** the Department's decision to deny prior authorization of payment for a Roll-about Chair.

X. RIGHT OF APPEAL:

See Attachment

XI. ATTACHMENTS:

The Claimant's Recourse to Hearing Decision

Form IG-BR-29

ENTERED this 5th day of December, 2008

**Cheryl Henson
State Hearing Officer**