



STATE OF WEST VIRGINIA
THE DEPARTMENT OF HEALTH AND HUMAN
RESOURCES

OFFICE OF INSPECTOR GENERAL

Earl Ray Tomblin
Governor

BOARD OF REVIEW
203 East Third Avenue
Williamson, WV 25661

Karen L. Bowling
Cabinet Secretary

Phone: (304) 235-4680

Fax (304) 235-4667

July 6, 2015



RE: [REDACTED] v. WV DHHR
ACTION NO.: 15-BOR-1831

Dear Ms. [REDACTED]

Enclosed is a copy of the decision resulting from the hearing held in the above-referenced matter.

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.

You will find attached an explanation of possible actions you may take if you disagree with the decision reached in this matter.

Sincerely,

Stephen M. Baisden
State Hearing Officer
Member, State Board of Review

Encl: Appellant's Recourse to Hearing Decision
Form IG-BR-29

cc: Stacy Broce, WV Bureau for Medical Services

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

████████████████████,

Appellant,

v.

ACTION NO.: 15-BOR-1831

**WEST VIRGINIA DEPARTMENT OF
HEALTH AND HUMAN RESOURCES,**

Respondent.

DECISION OF STATE HEARING OFFICER

INTRODUCTION

This is the decision of the State Hearing Officer resulting from a fair hearing for ██████████. This hearing was held in accordance with the provisions found in Chapter 700 of the West Virginia Department of Health and Human Resources' Common Chapters Manual. This fair hearing was convened on June 30, 2015, on an appeal filed April 15, 2015.

The matter before the Hearing Officer arises from the April 7, 2015 decision by the Respondent to deny Medicaid payment for a Computed Tomography (CT) scan of the Appellant's thoracic spine.

At the hearing, the Respondent appeared by Representative Stacy Hanshaw of the WV Bureau of Medical Services. Appearing as a witness for the Department was ██████████, RN, of the WV Medical Institute (WVMI). The Appellant appeared *pro se*. The participants were sworn and the following documents were admitted into evidence.

Department's Exhibits:

- D-1 Bureau for Medical Services' Provider Manual, Chapter 528.7
- D-2 InterQual Smart Sheets, 2014 Imaging Criteria for CT scan of the Thoracic Spine
- D-3 Imaging Services Authorization Request, submitted by Appellant's physician, ██████████, DO, on March 20, 2015
- D-4 Initial Denial Notifications from APS Healthcare, dated April 7, 2015

Appellant's Exhibits:

None

After a review of the record, including testimony, exhibits, and stipulations admitted into evidence at the hearing, and after assessing the credibility of all witnesses and weighing the evidence in consideration of the same, the Hearing Officer sets forth the following Findings of Fact.

FINDINGS OF FACT

- 1) The Appellant's physician, [REDACTED], DO, submitted to the WV Medical Institute (WVMI) a request for a CT scan of the Appellant's thoracic spine on March 20, 2015 (Exhibit D-3). The physician's request indicated that the Appellant's primary diagnosis was "neck, lower back pain."
- 2) The Department denied the physician's request for imaging services, and issued a denial letter (Exhibit D-4), dated April 7, 2015. The Department denied the request because medical necessity had not been established. The denial indicated the request did not include documentation of radiculopathy or neurological deficit.
- 3) The imaging study request (Exhibit D-3) included a number of progress notes from the requesting physician's office, [REDACTED]. One such note, dated March 10, 2015, indicates the Appellant complained of "left side of neck hurting down into arm and lower back, has been hurting more." The progress note indicates the Appellant had continued pain that began in her neck, went down her back, down her left shoulder and into her elbow. The progress note does not indicate whether the Appellant experienced numbness or weakness in her limbs, fingers or toes.

APPLICABLE POLICY

WV Medicaid Provider Manual, §528.7 – "For radiology services requiring prior authorization for medical necessity by the Utilization Management Contractor (UMC), the referring/treating provider must submit the appropriate CPT code with clinical documentation and any other pertinent information to be used for clinical justification of services provided by the UMC. The information must be provided to the UMC, and the prior authorization granted, prior to services being rendered . . . When the medical documentation does not meet medical necessity criteria or additional information is not received, a denial letter is sent to the member or his/her legal representative, the requesting provider and facility."

InterQual 2014 Imaging Criteria for CT scan of the Thoracic spine –A request for a CT scan of the thoracic spine must document a clinical presentation or scenario that the imaging study is intended to address. The clinical presentation the request for the Appellant meant to address was suspected thoracic disc herniation or foraminal stenosis. For such a presentation, a request must document that the patient is experiencing unilateral radiculopathy (pain that radiates down one side of his or her body), with motor deficit (limb weakness) or sensory deficit (numbness).

DISCUSSION

The Appellant testified that she did not understand why her physician did not include all of the information regarding her case. She testified that she had experienced back pain for years, and she had pain in her upper and lower back “most of the time.” She stated that her fingers go numb from her fingertips to the second joint.

The Department’s witness, the WVMI nurse who evaluated the request, testified that the physician’s request (Exhibit D-3) did not document any findings that the Appellant experienced radiculopathy or a neurological deficit, either motor or sensory. She stated she forwarded the request to WVMI’s physician-reviewer, who issued the denial.

The March 10, 2015, progress note from the physician’s request (Exhibit D-3) documents findings of radiculopathy. It describes the Appellant’s pain which begins in her neck and radiates down her back and into her shoulder and elbow. However, neither the March 10 progress note nor the rest of the physician’s request documents neurological, either sensory or motor, deficit.

CONCLUSION OF LAW

The Appellant’s physician did not provide sufficient information to meet the InterQual 2014 Imaging Criteria in the March 20, 2015, request for a CT scan of the thoracic spine on the Appellant’s behalf. Because the medical documentation did not meet the necessity criteria, the Department acted correctly to deny the services, pursuant to WV Medicaid Provider Manual, §528.7

DECISION

It is the decision of the State Hearing Officer to **UPHOLD** the Department’s decision to deny pre-authorization for a CT scan of the Appellant’s thoracic spine.

ENTERED this 6th Day of July, 2015.

**Stephen M. Baisden
State Hearing Officer**