

STATE OF WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES OFFICE OF INSPECTOR GENERAL

Earl Ray Tomblin Governor BOARD OF REVIEW 4190 Washington Street, West Charleston, West Virginia 25313 (304) 746-2360, ext. 2227 Karen L. Bowling Cabinet Secretary

June 16, 2015



RE: v. WV DHHR

ACTION NO.: 15-BOR-2186

Dear Mr.

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,

Donna L. Toler State Hearing Officer Member, State Board of Review

Encl: Appellant's Recourse to Hearing Decision

Form IG-BR-29

cc: Stacy Broce, BMS

WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES BOARD OF REVIEW

,

Appellant,

v. Action Number: 15-BOR-2186

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 16, 2015, on an appeal filed June 1, 2015.

The matter before the Hearing Officer arises from the May 15, 2015 decision by the Respondent to deny prior authorization of Medicaid payment for Shoulder Arthroscopy (Musculoskeletal, Endoscopy/Arthroscopy - Facility).

At the hearing, the Respondent appeared by Virginia Evans, Program Manager, Bureau for Medical Services (BMS). Appearing as a witness for the Department was RN, West Virginia Medical Institute (WVMI). The Appellant appeared *pro se*. All witnesses were sworn and the following documents were admitted into evidence.

Department's Exhibits:

- D-1 Bureau for Medical Services' Provider Manual §§507.2, 507.3, 507.3.1, 507.4, 510.8.1, 510.8.2, 519.8.7, 519.8.8, 519.9, 519.9.1 and 519.9.2
- D-2 InterQual 2014.2 Procedures Criteria, Arthroscopy, Surgical, Shoulder
- D-3 APS Healthcare Web Case Management computer screen prints, patient information submitted by Dr.
- D-4 Notices of Initial Denial, dated May 15, 2015

Appellant's Exhibits:

None

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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) On May 7, 2015, the Appellant's physician, Dr. (Dr. submitted to the Department medical documentation to support a request for prior authorization of a surgical shoulder arthroscopy on the Appellant's behalf. (Exhibit D-3)
- 2) On May 15, 2015, APS Healthcare, the agency authorized by the Bureau for Medical Services of the West Virginia Department of Health and Human Resources to review services provided by Medicaid, issued a Notice of Initial Denial indicating that the Appellant's request for shoulder arthroscopy was denied as the submitted documentation failed to meet InterQual criteria because the "imaging provided was negative". (Exhibit D-4)
- 3) Shoulder arthroscopy and rotator cuff repair are outpatient surgical procedures.
- 4) The acceptable criteria for prior approval of a shoulder arthroscopy utilized by the West Virginia Medical Institute, the agency contracted through the Bureau of Medical Services to make eligibility determinations, are listed on the InterQual Procedures Criteria. Medical necessity for shoulder arthroscopy cannot be established without imaging demonstrating a torn rotator cuff. (Exhibit D-2)
- 5) Dr. failed to provide the Department with documentation of imaging which demonstrated a torn rotator cuff in order to establish medical necessity for Medicaid payment of the requested shoulder arthroscopy. (Exhibit D-2)

APPLICABLE POLICY

West Virginia Medicaid Provider Manual, §§510.8.1 and 510.8.2, establish that there are prior authorization requirements for outpatient services. Services which have been denied as not being medically necessary are excluded from coverage in the outpatient service department. It is the responsibility of the prescribing practitioner to submit clinical documentation to establish medical necessity.

West Virginia Medicaid Provider Manual, §519, Practitioner Services, Attachment 17, includes shoulder arthroscopy/surgery and arthroscopy rotator cuff repair on the list of outpatient surgical procedures.

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DISCUSSION

The information submitted by the Appellant's physician was insufficient to establish medical necessity for Shoulder Arthroscopy - Musculoskeletal, Endoscopy/Arthroscopy - Facility, based on the criteria set forth in policy.

The Department's representative advised the Appellant that Dr. could submit a Level II Appeal/Reconsideration written request with supporting documentation until July 14, 2015, if he desired to do so.

CONCLUSION OF LAW

Whereas there was insufficient documentation to meet the medical criteria for a shoulder arthroscopy, medical necessity could not be established.

DECISION

It is the decision of the State Hearing Officer to uphold the Department's decision to deny the Appellant's request for prior authorization of Medicaid payment for Shoulder Arthroscopy - Musculoskeletal, Endoscopy/Arthroscopy - Facility.

ENTERED this ____Day of June 2015.

Donna L. Toler
State Hearing Officer

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