



STATE OF WEST VIRGINIA
THE DEPARTMENT OF HEALTH AND HUMAN
RESOURCES

OFFICE OF INSPECTOR GENERAL

Earl Ray Tomblin
Governor

BOARD OF REVIEW
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January 26, 2015



RE: [REDACTED] v. WV DHHR
ACTION NO.: 14-BOR-3538

Dear Mr. [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: Claimant'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**

██████████,

Claimant,

v.

ACTION NO.: 14-BOR-3538

**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 January 15, 2015, on an appeal filed October 29, 2014.

The matter before the Hearing Officer arises from the October 20, 2014 decision by the Respondent to deny Medicaid payment for imaging services, a Computed Tomography (CT) scan of the Claimant's chest.

At the hearing, the Respondent appeared by Representative Stacy Hanshaw, RN, of the WV Bureau for Medical Services. Appearing as a witness for the Department was ██████████, RN, of the WV Medical Institute (WVMI). The Claimant 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, Chest (Non-cardiac)
- D-3 Request for imaging services from ██████████, MD, ██████████, dated September 29, 2014
- D-4 Initial Denial Notifications from APS Healthcare, dated October 20, 2014

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 O F FACT

- 1) The Claimant's physician, [REDACTED], MD, [REDACTED], submitted to the WV Medical Institute (WVMI) a request for a CT scan of the Claimant's chest on September 29, 2014 (Exhibit D-3). The facility indicated on the request that the Claimant's primary diagnosis was "mild to moderate shortness of breath on exertion associated with wheezing and dry cough."
- 2) The Department denied the physician's request for imaging services, and issued a denial letter (Exhibit D-4), dated October 20, 2014. The denial letter reads as follows in part:

Service Description: CT Cardiac/Chest

The service listed above has been denied based on the following: The request for the CT Chest cannot be approved due to InterQual criteria has not been met. There was no documentation provided with the request to indicate a chronic cough, pulmonary function test (PFT) abnormality, or progressive dyspnea.

- 3) The Department's witness, the WVMI nurse who evaluated the imaging services request, testified that she evaluated the request using the 2014 InterQual Smart Sheets Imaging Criteria for CT scan of the chest (Exhibit D-2). She testified that based upon the information she obtained from the authorization request, she evaluated the Claimant for "suspected interstitial lung disease." She pointed out that in addition to the information from the denial letter as indicated above, the CT scan request documented that the Claimant underwent an earlier CT scan in August 2013. She stated that the earlier CT scan ruled out lung fibrosis and that the requesting physician did not include a rationale for a repeat study. She added that she forwarded the request to WVMI's physician reviewer, who issued the denial of service.
- 4) The CT scan request (Exhibit D-3, page 2) includes the following information under the "General" subject heading: "The patient . . . had mild to moderate shortness of breath on exertion associated with wheezing and dry cough that started 5 years ago but after he took his inhalers he feels much better." There is no information included in the request regarding a chest x-ray.
- 5) The Claimant testified that he was attempting to obtain a CT scan in order to understand his breathing problems. He stated that he could not breathe and he could not go outside or do any type of activity. He stated that he wanted to determine "what is going on in my lungs."

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 chest – For the clinical indication of suspected interstitial lung disease, an imaging study request must document that the patient has progressive or persistent dyspnea (shortness of breath) or a chronic cough, and a chest x-ray that is suggestive of interstitial lung disease or is non-diagnostic for the etiology of the patient’s symptoms.

DISCUSSION

Although the service denial letter (Exhibit D-4) reported that the Claimant’s request did not document a chronic cough, that information may be found in the service request (Exhibit D-3) under the “General” subject heading. However, there was no documentation regarding the results of any chest x-rays. Therefore, the Claimant’s request for a CT scan of the chest did not meet the criteria for the study, as listed on the InterQual 2014 Imaging Criteria (Exhibit D-2).

CONCLUSION OF LAW

The Claimant’s physician did not provide sufficient information to meet the InterQual 2014 Imaging Criteria in the September 2014 request for a CT scan of the chest. 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 Claimant’s chest.

ENTERED this 26th Day of January, 2015.

Stephen M. Baisden
State Hearing Officer