

State of West Virginia DEPARTMENT OF HEALTH AND HUMAN RESOURCES Office of Inspector General Board of Review 1400 Virginia Street Oak Hill, WV 25901

Joe Manchin III Governor Martha Yeager Walker Secretary

September 26, 2008

Dear Ms. ____:

Attached is a copy of the findings of fact and conclusions of law on your hearing held September 23, 2008. Your hearing request was based on the Department of Health and Human Resources' decision to deny prior authorization for Medicaid payment for a Magnetic Resonance Imaging (MRI) of your right knee.

In arriving at a decision, the State Hearings 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 the Medicaid is based on current policy and regulations. Some of these regulations state as follows: Some of these regulations state as follows: Prior authorization must be obtained for all outpatient radiological services (Hospital Manual § 508.1).

The information which was submitted at your hearing was insufficient for a determination of medical necessity to be made for a MRI of the right knee.

It is the decision of the State Hearings Officer to **uphold** the decision of the Department to deny prior authorization of a MRI of your right knee.

Sincerely,

Kristi Logan State Hearings Officer Member, State Board of Review

Cc: Erika Young, Chairman, Board of Review Lorna Harris, Bureau of Medical Services

WEST VIRGINIA DEPARTMENT OF HEALTH & HUMAN RESOURCES BOARD OF REVIEW

Claimant,

v.

Action Number: 08-BOR-1845

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 September 23, 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 September 23, 2008 on a timely appeal, filed July 22, 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

_____, Bureau of Medical Services (by phone) _____, West Virginia Medical Institute (by phone)

Presiding at the Hearing was Kristi Logan, 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's decision to deny prior authorization of Medicaid payment for an MRI of Claimant's right knee.

V. APPLICABLE POLICY:

Hospital Manual § 508.1

VI. LISTING OF DOCUMENTARY EVIDENCE ADMITTED:

Department's Exhibits:

- D-1 Hospital Manual § 508.1
- D-2 Prior Authorization Request Form dated July 1, 2008
- D-3 Physician's Notes dated June 25, 2008 from Dr.
- D-4 InterQual SmartSheet Imaging Criteria for MRI Knees, page 1
- D-5 InterQual SmartSheet Imaging Criteria for MRI Knees, page 2
- D-6 InterQual SmartSheet Imaging Criteria for MRI Knees, page 3
- D-7 InterQual SmartSheet Imaging Criteria for MRI Knees, page 4
- D-8 Notification Letter dated July 3, 2008 to Claimant
- D-9 Notification Letter dated July 3, 2008 to Dr.
- D-10 Notification Letter dated July 3, 2008 to

Claimants' Exhibits:

C-1 None

VII. FINDINGS OF FACT:

1) A request for prior authorization for a Magnetic Resonance Imagining (MRI) for Claimant's right knee was submitted to West Virginia Medical Institute (WVMI) on July 1, 2008 by Dr. The for approval. A notification letter dated July 3, 2008 was issued to Claimant and Dr. Which read in part (D-8 and D-9):

> A request for prior authorization was submitted for imaging services. Based on the medical information provided, the request has been denied.

InterQual criteria not met: MRI of the right knee. There were no conservative treatment durations or outcomes noted. The clinical indications for this study were not met.

2) Lisa Goodall of WVMI testified as to the reason for the denial of the MRI. On the prior authorization request that was submitted to WVMI, the diagnosis was listed was right knee pain. Under clinical reasons for study, Dr. **Charge** had attached his notes from Claimant's exam on June 25, 2008. The notes indicated a suspected tear of the medial meniscus (D-3).

This information was then compared to the criteria as listed on the InterQual Smartsheet (D-4). A meniscal tear is listed under 300: suspected stable meniscal tear by Sx/findings. The flow chart under 300 is as follows:

310 Knee Sx/findings (TWO)
311 Effusion by PE
312 Joint line tenderness
313 Pain with flexion and rotation
320 Continued Sx/findings after Rx (ALL)
321 Anti-inflammatories (NSAID) (ONE)
Rx more than 3 weeks
Contradicted/not tolerated
322 Physical Therapy (PT) more than 4 weeks
323 Activity modification more than 4 weeks

Ms. Goodall stated that Dr. **Construction** notes indicated Claimant did have effusion and joint line tenderness. However, moving along the flow chart to 320, there was no mention in Dream notes of Claimant ever using anti-inflammatories, being in physical therapy or modifying her activities (D-3).

The authorization request form was then submitted to a physician reviewer for approval. The request was denied because the medical documentation was insufficient to support the medical necessity of an MRI.

- 3) Claimant testified that her family physician had suggested physical therapy or medication and was surprised that Dream had not tried those methods first. Claimant is still experiencing knee pain.
- 4) Hospital Manual Chapter § 508.1 states:

Effective October 1, 2005 prior authorization will be required on all outpatient radiological services that include Magnetic Resonance Imaging (MRI). Prior authorization must be obtained from WVMI prior to the provision of the service. Failure to obtain prior authorization will result in denial of the service.

VIII. CONCLUSIONS OF LAW:

- 1) The authorization form completed by Dr. failed to provide enough medical information and documentation for WVMI to make a determination of the medical necessity of a MRI on the right knee as shown on the InterQual SmartSheet.
- 2) Dr. The bad the opportunity to submit the information required for reconsideration and his failure to do so supports the decision of denial based on lack of current physical and/or neurological findings by the physician.

IX. DECISION:

It is the decision of the State Hearing Officer to **uphold** the decision of the Department to deny prior authorization of an MRI of the right knee.

X. RIGHT OF APPEAL:

See Attachment

XI. ATTACHMENTS:

The Claimant's Recourse to Hearing Decision

Form IG-BR-29

ENTERED this 26th Day of September, 2008.

Kristi Logan State Hearing Officer