

State of West Virginia DEPARTMENT OF HEALTH AND HUMAN RESOURCES Office of Inspector General Board of Review P. O. Box 970 Danville, WV 25053

Joe Manchin III Governor		Martha Yeager Walker Secretary
	January 31, 2008	
Dear Ms:		

Attached is a copy of the findings of fact and conclusions of law on your hearing held December 5, 2007. Your hearing request was based on the Department of Health and Human Resources' decision to deny prior authorization for payment of Incontinence supplies.

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) is required for incontinence garments. 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 incontinence supplies was not approved because the information your physician submitted does not include an approvable diagnosis to explain the cause of your incontinence. The WVMI nurse contacted your physician and was informed that your diagnosis is "urinary stress incontinence," which is not an approvable diagnosis.

It is the decision of the State Hearing Officer to **uphold** the action of the Department in denying your request for prior authorization of incontinence supplies.

Sincerely,

Cheryl McKinney (Henson) State Hearing Officer Member, State Board of Review

cc: Erika H. Young, Chairman, Board of Review

Evelyn Whidby, BMS

WEST VIRGINIA DEPARTMENT OF HEALTH & HUMAN RESOURCES BOARD OF REVIEW

	 ,	
	Claimant,	
v.		Action Number: 07-BOR-2396

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 December 12, 2007 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 December 5, 2007 on a timely appeal filed September 24, 2007.

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, participating by telephone Virginia Evans, BMS, participating by telephone Joann Ranson, BMS, participating by telephone Tina Green, RN with WVMI, participating by telephone

Presiding at the hearing was Cheryl McKinney (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 payment of incontinence supplies.

V. APPLICABLE POLICY:

WVDHHR Medicaid Policy Manual, Chapter 500

VI. LISTING OF DOCUMENTARY EVIDENCE ADMITTED:

Department's Exhibits:

- D-1 WVDHHR Medicaid Manual Chapter 500
- D-2 Guidelines for approval of Incontinence supplies
- D-3 WVMI Request Form
- D-4 Denial letter dated September 13, 2007
- D-5 Fax dated December 13, 2007

Claimant's Exhibits:

None

VII. FINDINGS OF FACT:

1) On or about September 13, 2007, the Claimant was notified via a Notice of Denial (D-4) that her request for prior authorization (PA) for Medicaid payment of Incontinence supplies was denied. The reason for denial is as follows:

Incontinence supplies: Documentation provided does not indicate medical necessity – specifically: There is no diagnosis that explains the cause of incontinence.

- Evidence presented by the Department reveals that PA is required for Medicaid payment of Incontinence supplies. West Virginia Medical Institute (WVMI) is the agency contracted to review PA requests and determine eligibility. The Claimant's request (D-3) was reviewed by West Virginia Medical Institute (WVMI) and the determination was made that the Claimant did not meet any of the clinical indications for approval. WVMI referred the Claimant's request to Physician Review and the decision was made that there was insufficient medical documentation for the physician reviewer to authorize payment of the Incontinence supplies. The WVMI nurse contacted the physician again (D-5) and obtained a diagnosis of "urinary stress incontinence" which is not an approvable diagnosis listed in the Incontinence Criteria.
- 3) The Claimant testified that she cannot "hold her water", and has had this problem for some time. She stated she used to get the pads, but now she is worse and she can't get them. She stated that she would not have asked for the supplies if she did not need them.
- 4) WVDHHR Medicaid Policy Manual Section 505 Prior Authorization 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.

VIII. CONCLUSIONS OF LAW:

- 1) WVDHHR Medicaid Policy Manual states that prior authorization (PA) is required for approval of Incontinence Supplies. If the individual fails to meet the clinical indications criteria during the nurse's review, the request is forwarded to a physician reviewer to determine medical appropriateness.
 - 2) The evidence reveals that the Department (through WVMI) received a request from the Claimant's physician for prior authorization (PA) of Medicaid payment for Incontinence Supplies. WVMI found they did not have enough information to determine medical necessity, and contacted the physician to obtain a diagnosis related to the cause of the claimant's incontinence. The physician indicated the claimant has "urinary stress incontinence", which is not an approvable diagnosis. WVMI forwarded the request to the physician reviewer and the request for prior authorization of Incontinence Supplies was denied.

	It is the ruling of the State Hearing Officer to uphold the Department's decision to deny prior authorization of payment for Incontinence Supplies.
х.	RIGHT OF APPEAL: See Attachment
XI.	ATTACHMENTS:
	The Claimant's Recourse to Hearing Decision
	Form IG-BR-29
	ENTERED this 31st day of January, 2008
	Cheryl McKinney (Henson) State Hearing Officer

IX.

DECISION: