



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

Patsy A. Hardy, FACHE, MSN, MBA  
Cabinet Secretary

September 22, 2009

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Dear -----:

Attached is a copy of the findings of fact and conclusions of law on your hearing held September 17, 2009. Your hearing request was based on the Department of Health and Human Resources' decision to deny prior authorization of a MRI of the 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 program is based on current policy and regulations. These regulations provide that effective October 1, 2005 prior authorization will be required on all outpatient radiological services that include Magnetic Resonance Imaging (MRI). Failure to obtain prior authorization will result in denial of the service (Hospital Manual § 510.8.1).

The information submitted at your hearing failed to support the medical necessity of a MRI of the right knee.

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

Sincerely,

Kristi Logan  
State Hearings Officer  
Member, State Board of Review

cc: Board of Review  
Bureau of Medical Services

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

-----,

**Claimant,**

**v.**

**Action Number: 09-BOR-1344**

**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 17, 2009 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 17, 2009 on a timely appeal, filed June 11, 2009.

**II. PROGRAM PURPOSE:**

The Program entitled Medicaid is 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

Stacy Hanshaw, Bureau of Medical Services  
Karen Keaton, RN, West Virginia Medical Institute

Presiding at the Hearing was Kristi Logan , State Hearing Officer and a member of the Board of Review.

All participants testified by phone.

**IV. QUESTIONS TO BE DECIDED:**

The question to be decided is whether or not the Department correctly denied prior authorization of Claimant's MRI of the right knee.

**V. APPLICABLE POLICY:**

Hospital Manual § 510.8.1

**VI. LISTING OF DOCUMENTARY EVIDENCE ADMITTED:**

**Department's Exhibits:**

- D-1 Hospital Manual § 510.8.1
- D-2 Authorization Request Form dated April 18, 2009
- D-3 InterQual SmartSheet Imaging Criteria for MRI of the Knee
- D-4 Denial Notification Letter dated April 14, 2009 to Claimant, Dr. [REDACTED] and [REDACTED]

**Claimants' Exhibits:**

None

**VII. FINDINGS OF FACT:**

- 1) A request for prior authorization for a MRI of the right knee was submitted to the West Virginia Medical Institute (WVMI) by Dr. [REDACTED] on April 14, 2009 for approval (D-2). A denial notification letter was issued that date which read in pertinent parts (D-4):

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

The information submitted did not meet the clinical indications for the requested study. Specifically, lack of documented conservative treatment.

- 2) Karen Keaton, nurse reviewer with WVMI, testified to the reasons for the denial of Claimant's MRI. The diagnosis as provided on the authorization request form was

ligament tear. The request form listed the clinical reasons for the MRI as right knee pain, right knee unstable, moves side to side excessively, swelling and suggestive of ligament tear (D-2). Ms. Keaton compared this information to the InterQual SmartSheet for a MRI of the knee. Since Claimant's physician did not indicate the type of suspected ligament tear, she used indicator 800, Knee complaints, unknown etiology (D-3).

The information provided met the InterQual criteria of 810, Symptoms finding and 820, Knee x-ray nondiagnostic for etiology of symptoms/findings but there was no documentation of failed conservative treatments, which is the criteria of 830 (D-3). It was this lack of documentation that resulted in the denial of the MRI for Claimant.

- 3) Claimant testified his knee swells constantly and he needs the MRI to discover the cause. He recently had an ultrasound on his knee but has not received the results.
- 4) Hospital Manual § 510.8.1 states:

Effective 10/01/05, prior authorization will be required on all outpatient radiological services that include Computerized Tomography (CT), Magnetic Resonance Angiography (MRA), Magnetic Resonance Imaging (MRI), Positron Emission Tomography Scans (PET), and Magnetic Resonance Cholangiopancreatography (MRCP). Prior authorization requirements governing the provisions of all West Virginia Medicaid services will apply pursuant to Chapter 300 General Provider Participation Requirements, provider manual. Diagnostic services required during an emergency room episode will not require prior authorization. It is the responsibility of the ordering provider to obtain the prior authorization. Failure to obtain prior authorization will result in denial of the service; the Medicaid member cannot be billed for failure to receive authorization for these services.

Prior authorization must be obtained from West Virginia Medical Institute (WVMI) prior to the provision of the service. Failure to obtain prior authorization will result in denial of the service; the Medicaid member cannot be billed for failure to receive authorization for these services.

## **VIII. CONCLUSIONS OF LAW:**

- 1) The authorization form completed by Claimant's physician lacked information regarding failed conservative treatments as required by the InterQual Imaging criteria.
- 2) The Department correctly denied prior authorization of Claimant's MRI for lack of medical documentation supporting the medical necessity of the procedure.

**IX. DECISION:**

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

**X. RIGHT OF APPEAL:**

See Attachment

**XI. ATTACHMENTS:**

The Claimant's Recourse to Hearing Decision

Form IG-BR-29

**ENTERED this 22<sup>nd</sup> day of September 2009.**

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**Kristi Logan**  
**State Hearing Officer**