

State of West Virginia DEPARTMENT OF HEALTH AND HUMAN RESOURCES Office of Inspector General

Office of Inspector General Board of Review 1400 Virginia Street Oak Hill, WV 25901

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

	January 6, 2010
Dear:	

Joe Manchin III

Governor

Attached is a copy of the findings of fact and conclusions of law on your hearing held January 5, 2010. Your hearing request was based on the Department of Health and Human Resources' decision to deny prior authorization of a MRI of the cervical, thoracic and lumbar spine.

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 10/01/05, 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 was insufficient to make a determination of the medical necessity of a MRI.

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 cervical, thoracic and lumbar spine.

Sincerely,

Kristi Logan State Hearings Officer Member, State Board of Review

cc: Chairman, Board of Review Bureau of Medical Services

WEST VIRGINIA DEPARTMENT OF HEALTH & HUMAN RESOURCES BOARD OF REVIEW

----,

Claimant,

V.

Action Number: 09-BOR-1971

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 January 5, 2010 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 January 5, 2010 on a timely appeal, filed September 29, 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 Casey, 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. QUESTION TO BE DECIDED:

The question to be decided is whether or not the Department's decision to deny prior authorization of a MRI of the cervical, thoracic and lumbar spine for Claimant was correct.

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 August 5, 2009
- D-3 InterQual SmartSheet Imaging Criteria
- D-4 Denial Notification Letters dated August 5, 2009 to Claimant, and Medical Center

Claimants' Exhibits:

None

VII. FINDINGS OF FACT:

A request for prior authorization for a MRI of the cervical, thoracic and lumbar spine for Claimant was sent to the West Virginia Medical Institute (WVMI) for approval by DO on August 5, 2009 (D-2). A denial notification letter was issued by the Department on August 5, 2009 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.

Criteria 142, there is no documentation that symptoms have continued after conservative treatment with NSAIDs for greater than 3 weeks and Activity Modification such as physical therapy for greater than 6 weeks.

2) Karen Casey, nurse reviewer with WVMI, testified to the reason for the denial of Claimant's MRI. The authorization request form sent in by Claimant's physician indicated Claimant was on Zanaflex. However, the request form failed to specify the

duration Claimant has been taking this medication. Ms. Casey stated there was no information regarding any activity modification or physical therapy on behalf of Claimant (D-2). The InterQual criteria for a MRI of the cervical, thoracic and lumbar spine require documentation of ineffective conservative treatments before a MRI can be approved (D-3).

3) Claimant testified that she has been on NSAIDs and in physical therapy for years. She has a long history of back problems and was advised by her physician that the NSAIDs and physical therapy would be ineffective in her case and the MRI was needed to establish a course of treatment.

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 submitted by Claimant's physician was insufficient for WVMI to make a determination of the medical necessity of the MRI of the cervical, thoracic and lumbar spine as shown on the InterQual SmartSheets.
- 2) The Department correctly denied prior authorization of the MRI for Claimant for lack of clinical 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 cervical, thoracic and lumbar spine for Claimant.

X.	RIGHT OF APPEAL:
	See Attachment
XI.	ATTACHMENTS:
	The Claimant's Recourse to Hearing Decision
	Form IG-BR-29
	ENTERED this 6 th day of January 2010.
	Kristi Logan State Hearing Officer