



State of West Virginia  
DEPARTMENT OF HEALTH AND HUMAN RESOURCES  
Office of Inspector General  
Board of Review  
1400 Virginia Street  
-----

Earl Ray Tomblin  
Governor

Michael J. Lewis, M.D. Ph.D  
Cabinet Secretary

December 16, 2010

-----  
-----  
-----

Dear -----:

Attached is a copy of the findings of fact and conclusions of law on your hearing held November 30, 2010. Your hearing request was based on the Department of Health and Human Resources' decision to deny prior authorization of a MRI of the lumbar and cervical 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 for radiology services requiring prior authorization, the referring provider must submit clinical documentation to justify the medical need for the service (Radiology Manual § 528.7).

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 lumbar and cervical 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: 10-BOR-1997  
10-BOR-2171**

**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 November 30, 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.

**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

-----, Witness for Claimant

Stacey Hanshaw, Bureau of Medical Services (testified by phone)

Natalie Tappe, RN, West Virginia Medical Institute (testified by phone)

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

**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 lumbar and cervical spine was correct.

**V. APPLICABLE POLICY:**

Radiology Manual § 528.7

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

**Department's Exhibits:**

- D-1 Radiology Manual § 528.7
- D-2 InterQual Imaging Criteria
- D-3 Prior Authorization Request Forms and Medical Documentation
- D-4 Denial Notification Letters dated September 12, 2010 and October 18, 2010

**Claimants' Exhibits:**

None

**VII. FINDINGS OF FACT:**

- 1) Requests for prior authorization of a MRI of the lumbar and cervical spine were received by the West Virginia Medical Institute (WVMI) for approval. Denial notification letters were issued by the Department 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, MRI Lumbar Spine. There was no information provided regarding objective abnormal neurological findings on examination or a completed and failed trial of conservative treatment with NSAIDs and activity modification.

InterQual Criteria 122 [cervical spine]: There was no documentation of any new symptoms or a physical exam with any abnormal focal neurological findings or that symptoms have continued after conservative treatment with NSAIDs for greater than 4 weeks and activity modification, such as physical therapy for greater than 6 weeks.

- 2) Natalie Tappe, nurse reviewer with WVMI, testified to the reasons for the denial of the MRIs for Claimant. Ms. Tappe stated there were no documentation of abnormal neurological findings upon examination for Claimant and no failed conservative treatments. Additionally, Ms. Tappe stated Claimant's physician did not indicate the length of time Claimant had been taking her medications (D-3). Ms. Tappe stated without the above information, the medical necessity of the MRIs could not be established according to the InterQual criteria.
- 3) Claimant testified that she is in physical therapy and has been advised by her therapist that she has a pinched nerve and a bulging disc in her neck. Her course of treatment in physical therapy is a TENS unit and traction.
- 4) Radiology Manual § 528.7 states:

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 by the UMC. The information must be provided to the UMC, and the prior authorization granted, prior to services being rendered. Prior authorization requests for radiological services must be submitted within the timeframe required by the UMC.

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

- 1) The authorization forms submitted by Claimant's physicians were insufficient for WVMI to make a determination of the medical necessity of a MRI of the cervical 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 and lumbar spine.

#### **X. RIGHT OF APPEAL:**

See Attachment

#### **XI. ATTACHMENTS:**

The Claimant's Recourse to Hearing Decision

Form IG-BR-29

**ENTERED this 16<sup>th</sup> day of December 2010.**

---

**Kristi Logan  
State Hearing Officer  
Member, Board of Review**