



State of West Virginia
DEPARTMENT OF HEALTH AND HUMAN RESOURCES
Office of Inspector General
Board of Review
P.O. Box 1736
Romney, WV 26757

Earl Ray Tomblin
Governor

Rocco S. Fucillo
Cabinet Secretary

September 24, 2012

Dear -----:

Attached is a copy of the Findings of Fact and Conclusions of Law on your hearing held September 19, 2012. 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 the lumbar spine.

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. These regulations provide that 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.

The information which was submitted at your hearing revealed that the medical documentation submitted for review did not meet clinical indications to determine your eligibility for services; therefore, your imaging request could not be approved.

It is the decision of the State Hearing Officer to uphold the action of the Department in denying Medicaid authorization for a MRI of the lumbar spine.

Sincerely,

Eric L. Phillips
State Hearing Officer
Member, State Board of Review

cc: Erika Young-Chairman, Board of Review
Stacy Broce-Bureau for Medical Services

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

IN RE: -----,

Claimant,

v.

ACTION NO.: 12-BOR-1953

**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 for ----- . This hearing was held in accordance with the provisions found in the Chapter 700 of the West Virginia Department of Health and Human Resources' Common Chapters Manual. This hearing convened on September 19, 2012, on a timely appeal filed August 10, 2012.

II. PROGRAM PURPOSE:

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, Program Manager, Bureau for Medical Services (BMS)

Jens Wiik, Nurse Reviewer, West Virginia Medical Institute (WVMI)

Presiding at the hearing was Eric L. Phillips, 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 was correct in its decision to deny prior authorization for Medicaid payment of a MRI of the lumbar spine.

V. APPLICABLE POLICY:

WVDHHR Radiology Manual Chapter 528, Section 528.7

VI. LISTING OF DOCUMENTARY EVIDENCE ADMITTED:

Department's Exhibits:

- D-1 WVDHHR Radiology Manual Chapter 528, Section 528.7
- D-2 InterQual SmartSheets-2012
- D-3 WVMi Medicaid Imaging Authorization Request Form dated July 27, 2012
- D-4 Notice of Denial for Imaging Services dated July 30, 2012

VII. FINDINGS OF FACT:

- 1) On July 27, 2012, the Claimant's physician submitted Exhibit D-3, WVMi Imaging Authorization Request Form to West Virginia Medical Institute (WVMi), on behalf of the Claimant, requesting prior authorization for a Magnetic Resonance Image (MRI) of the Claimant's lumbar spine. The exhibit documents the clinical reasons for the study as, "peripheral neuropathy".
- 2) On July 30, 2012, WVMi issued a Notice of Denial for Imaging Services (Exhibit D-4) to the Claimant and his physician. This notice documents in pertinent part:

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

Reason for Denial: MRI of the lumbar spine. There is not enough clinical information provided to determine medical necessity. There was no documentation that symptoms have continued after conservative treatment with NSAID's [sic] for greater than 3 weeks and activity modification, such as physical therapy for greater than 6 weeks (InterQual Criteria 100-122).

Additionally, the Claimant's physician's notice of denial documents that a reconsideration of the determination could be made if a written request and supporting documentation was submitted to WVMi within sixty days of the receipt of notice. Testimony indicated that the Claimant's period of reconsideration has not expired; however, no reconsideration request has been submitted.

- 3) Jens Wiik, Nurse Reviewer with WVMi testified that he reviewed the prior authorization request and information submitted by the Claimant's physician. Mr. Wiik testified that he utilized the clinical information in Exhibit D-3 and compared it the criteria for approval of prior authorization outlined in the InterQual Smartsheets (Exhibit D-2); specifically suspected nerve root compression by cervical disc herniation/spondylosis (spinal stenosis). Mr. Wiik indicated that the information submitted by the Claimant's physician was forwarded to a Physician Reviewer within WVMi and it was determined that the information did not indicate a failed trial of conservative treatment including NSAIDs for less than three weeks or activity modification for less than six weeks.
- 4) The Claimant testified that he has not completed or been prescribed any form of physical therapy. The Claimant purported that he has experienced pain and a burning sensation in his feet for an extended period of time and his physician recommended the exam to determine the cause of the pain.
- 5) WVDHHR Radiology Manual chapter 528, Section 518.7 documents in pertinent part:

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) Policy stipulates that the referring physician must submit sufficient documentation for clinical justification of radiology services requiring prior authorization for Medicaid payment.
- 2) Evidence reveals that the Claimant's physician requested authorization for Medicaid coverage of a MRI of the Claimant's lumbar spine in July 2012, and WVMi denied such request based on the failure of the clinical data to meet InterQual criteria.
- 3) Because the Department could not determine that the prior authorization request met eligibility criteria, it acted correctly in denying Medicaid authorization for a MRI.

IX. DECISION:

It is the decision of the State Hearing Officer to uphold the Department's decision to deny Medicaid authorization for a MRI of the Claimant's lumbar spine.

X. RIGHT OF APPEAL:

See Attachment

XI. ATTACHMENTS:

The Claimant's Recourse to Hearing Decision

Form IG-BR-29

ENTERED this _____ day of September 2012.

Eric L. Phillips
State Hearing Officer