



State of West Virginia
DEPARTMENT OF HEALTH AND HUMAN RESOURCES
Office of Inspector General
Board of Review
1027 N. Randolph Ave.
Elkins, WV 26241

Earl Ray Tomblin
Governor

Rocco S. Fucillo
Cabinet Secretary

December 19, 2012

RE: ---- v. WV DHHR
ACTION NO.: 12-BOR-2277

Dear Ms. ----:

Enclosed is a copy of the decision resulting from the hearing held in the above-referenced matter.

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.

If you believe the decision was reached in error, you may appeal. See the attached explanation of Claimant's Recourse.

Sincerely,

Pamela L. Hinzman
State Hearing Officer
Member, State Board of Review

cc: Erika H. Young, Chairman, Board of Review
Stacy Broce, BMS, WVDHHR

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

IN RE: ----,

Claimant,

v.

ACTION NO: 12-BOR-2277

**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 Common Chapters Manual, Chapter 700 of the West Virginia Department of Health and Human Resources. This fair hearing was convened telephonically on December 13, 2012, on a timely appeal filed October 1, 2012. The hearing was originally scheduled for November 1, 2012, but was rescheduled at the request of the Claimant.

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
Virginia Evans, HHR Specialist, Bureau for Medical Services, WVDHHR
Regina Adkins, RN, Nurse Reviewer, West Virginia Medical Institute

Presiding at the hearing was Pamela L. Hinzman, State Hearing Officer and a member of the State Board of Review.

IV. QUESTION TO BE DECIDED:

The question to be decided is whether the Department was correct in its decision to deny Medicaid authorization for a K0007 extra heavy duty wheelchair.

V. APPLICABLE POLICY:

WVDHHR Durable Medical Equipment Manual Chapter 506, Sections 506.3 and 506.3.1.c, 506.5 and Attachment 1

VI. LISTING OF DOCUMENTARY EVIDENCE ADMITTED:

Department's Exhibits:

- D-1 WVDHHR Durable Medical Equipment Manual Chapter 506, Sections 506.3, 506.3.1.c, and Attachment 1
- D-2 InterQual Durable Medical Criteria- Manual Wheelchairs
- D-3 WVMI Medicaid DME/Medical Supplies Authorization Request Form and information from ----, M.D., and ----Medical
- D-4 Notices of Denial Determination dated September 6, 2012
- D-5 Claimant's medical information

VII. FINDINGS OF FACT:

- 1) The Claimant's medical provider submitted a West Virginia Medical Institute (WVMI) Medicaid DME/Medical Supplies Authorization Form in September 2012 (D-3), requesting Medicaid authorization for a K0007 extra heavy duty wheelchair.
- 2) WVMI reviewed the information and sent Notices of Denial Determination (D-4) to the Claimant, ----, M.D., and ---- Medical on September 6, 2012, which state, in pertinent part:

Reason for Denial: Documentation provided does not indicate medical necessity- specifically:

The request for a K0007 Wheelchair cannot be approved. WV Medicaid/InterQual Criteria has not been met. There is documentation that the patient is able to use a walker. The proposed wheelchair K0007 is not appropriate for the patient's weight.

The letter to the physician indicates that the provider could request reconsideration of the decision within 60 days of receipt of the notice. WVMI Nurse Reviewer Regina Adkins indicated that a Request for Reconsideration was not submitted.

- 3) The WVMI Nurse Reviewer testified that information submitted from the provider (D-3) lists the Claimant's weight as 267 pounds. Policy in Exhibit D-1 classifies the K0007 wheelchair as an "extra heavy duty wheelchair," which can be authorized for Medicaid recipients weighing 300 pounds or more. This policy indicates that a K0006 heavy duty wheelchair is appropriate for Medicaid recipients weighing 250 pounds or more. The Department contended that the requested wheelchair is not the correct piece of medical equipment to meet the Claimant's needs because the Claimant does not meet the 300-pound weight requirement. The Nurse Reviewer testified that information was also provided to indicate the Claimant can use a walker.
- 4) The Claimant testified that she suffers from cellulitis and arthritis, and requires physical assistance when she uses a walker. She indicated that she would address the wheelchair authorization requirements with her provider.
- 5) WVDHHR Durable Medical Equipment Manual Chapter 506, Section 506.3 (D-1) states, in part:

A complete list of covered and non-covered DME/medical supplies and other related services/items provided through DME are seen in **Attachments I and II**. **Attachment I** describes the DME/medical supplies through current HCPCS codes, description of each code, replacement code for closed codes (as appropriate), service limits, prior authorization requirements and special coverage instructions.
- 6) WVDHHR Durable Medical Equipment Manual Chapter 506, Attachment 1 (D-1) states that a K0007 extra heavy duty wheelchair can be authorized for members weighing 300 pounds or more.
- 7) WVDHHR Durable Medical Equipment Manual Chapter 506.5 states that it is the responsibility of the prescribing practitioner to submit the appropriate clinical documentation for DME services requiring prior authorization.

VIII. CONCLUSIONS OF LAW:

- 1) West Virginia Medicaid policy requires prior authorization of Medicaid coverage for some durable medical equipment, and provides a complete list of covered and non-covered items. It is the responsibility of the ordering provider to submit the appropriate clinical documentation required for approval. Authorization for a K0007 extra heavy duty wheelchair can be granted if a Medicaid recipient weighs 300 pounds or more provided that all other eligibility requirements are met.
- 2) The Claimant's medical provider requested authorization of Medicaid coverage for a K0007 wheelchair in September 2012, indicating that the Claimant's weight is 267 pounds.
- 3) As the K0007 wheelchair cannot be authorized for individuals weighing less than 300 pounds, the Department's decision to deny authorization was correct.

IX. DECISION:

It is the ruling of the State Hearing Officer to **uphold** the Department's decision to deny Medicaid authorization for a K0007 extra heavy duty wheelchair.

X. RIGHT OF APPEAL:

See Attachment

XI. ATTACHMENTS:

The Claimant's Recourse to Hearing Decision

Form IG-BR-29

ENTERED this 19th Day of December 2012.

**Pamela L. Hinzman
State Hearing Officer**