



STATE OF WISCONSIN
Division of Hearings and Appeals

In the Matter of

[REDACTED]

DECISION

MPA/143782

PRELIMINARY RECITALS

Pursuant to a petition filed September 11, 2012, under Wis. Stat. § 49.45(5), and Wis. Admin. Code § HA 3.03(1), to review a decision by the Division of Health Care Access and Accountability in regard to Medical Assistance, a telephone hearing was held on October 11, 2012.

The issue for determination is whether the request for an MRI met the Division of Health Care Access and Accountability (DHCAA) criteria for authorization.

There appeared at that time and place the following persons:

PARTIES IN INTEREST:

Petitioner:

[REDACTED]

Respondent:

Department of Health Services
1 West Wilson Street
Madison, Wisconsin 53703

Written Appearance by: Lora Wiggins, M.D.
Division of Health Care Access and Accountability
1 West Wilson Street, Room 272
P.O. Box 309
Madison, WI 53707-0309

ADMINISTRATIVE LAW JUDGE:

Peter McCombs
Division of Hearings and Appeals

FINDINGS OF FACT

1. Petitioner is a resident of Dane County.
2. Dr. Brian Reeder requested prior authorization for an MRI on petitioner's left shoulder, PA [REDACTED]. The DHCAA denied the request on August 29, 2012.

3. The request did not include sufficient required information regarding treatment prior to the request.

DISCUSSION

Physician-prescribed diagnostic services can be covered by MA, if they are consistent with good medical practice. Wis. Admin. Code, §§DHS 107.06(1) and 107.25. The Division has now decided to make payment of CT, MRI, and PET scans subject to prior authorization, in an effort to determine if they are being ordered consistent with good medical practice. This prior authorization requirement was announced to providers in an *MA Update*, #2010-92, issued to all providers in October, 2010.

To get an MRI authorized, the prior authorization request must show that a recent physical exam has been completed with x-rays, and that there has been a 6-8 week period of conservative treatment that might include NSAIDS, oral steroids or steroid injection, and a physician directed home exercise program or physical therapy. See MedSolutions authorization guidelines attached to the September 19, 2012 DHCAA response (Exhibit B).

Petitioner testified that she has had treatment on her shoulder for years, including two separate physical therapy regimens. She reports having undergone two arm surgeries as well as neck surgery. She further testified that over the last two years she has had shots, worked with the pain clinic, and used a topical gel, all in attempts to deal with the pain. She has previously undergone gastric bypass surgery, and reports that she is consequently unable to take Alleve or Ibuprofen for her pain. This is all very pertinent information. The problem is that such information was not included in the prior authorization request.

At this point it has been several weeks since the MRI request was made. If petitioner continues to experience the problem, the doctor's office can request prior authorization of the MRI again, showing her recent course of treatment and noting petitioner's history pertaining to the chronic pain. I am not finding that the MRI will not be useful or that it is not appropriate; I am only finding that the doctor's office did not include necessary information in making the prior authorization request. As such, I cannot find that the respondent erred in denying the prior authorization request.

CONCLUSIONS OF LAW

The DHCAA correctly denied a request for an MRI because the petitioner's medical provider did not include necessary information in making the prior authorization request

THEREFORE, it is

ORDERED

That the petition for review herein be and the same is hereby dismissed.

REQUEST FOR A REHEARING

This is a final administrative decision. If you think this decision is based on a serious mistake in the facts or the law, you may request a rehearing. You may also ask for a rehearing if you have found new evidence which would change the decision. Your request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and tell why you did not have it at your first hearing. If you do not explain these things, your request will have to be denied.

To ask for a rehearing, send a written request to the Division of Hearings and Appeals, P.O. Box 7875, Madison, WI 53707-7875. Send a copy of your request to the other people named in this decision as

"PARTIES IN INTEREST." Your request for a rehearing must be received no later than 20 days after the date of the decision. Late requests cannot be granted.

The process for asking for a rehearing is in Wis. Stat. § 227.49. A copy of the statutes can be found at your local library or courthouse.

APPEAL TO COURT

You may also appeal this decision to Circuit Court in the county where you live. Appeals must be served and filed with the appropriate court no more than 30 days after the date of this hearing decision (or 30 days after a denial of rehearing, if you ask for one).

For purposes of appeal to circuit court, the Respondent in this matter is the Department of Health Services. After filing the appeal with the appropriate court, it must be served on the Secretary of that Department, either personally or by certified mail. The address of the Department is: 1 West Wilson Street, Madison, Wisconsin 53703. A copy should also be sent to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400.

The appeal must also be served on the other "PARTIES IN INTEREST" named in this decision. The process for appeals to the Circuit Court is in Wis. Stat. §§ 227.52 and 227.53.

Given under my hand at the City of Madison,
Wisconsin, this 14th day of November, 2012

Peter McCombs
Administrative Law Judge
Division of Hearings and Appeals



State of Wisconsin \DIVISION OF HEARINGS AND APPEALS

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The preceding decision was sent to the following parties on November 14, 2012.

Division of Health Care Access And Accountability