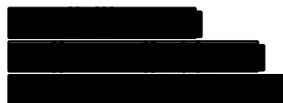




STATE OF WISCONSIN
Division of Hearings and Appeals

In the Matter of



DECISION
Case #: MPA - 176297

PRELIMINARY RECITALS

Pursuant to a petition filed on August 19, 2016, under Wis. Stat. § 49.45(5), and Wis. Admin. Code § HA 3.03(1), to review a decision by the Department of Health Services' Division of Health Care Access and Accountability regarding Medical Assistance (MA), a hearing was held on September 14, 2016, by telephone.

The issue for determination is whether petitioner is eligible for payment by the MA program for an MRI of her lumbar spine.

There appeared at that time the following persons:

PARTIES IN INTEREST:

Petitioner:



Respondent:

Department of Health Services
1 West Wilson Street, Room 651
Madison, WI 53703

Written submission by: , Nurse Consultant
Division of Health Care Access and Accountability
PO Box 309
Madison, WI 53701-0309

ADMINISTRATIVE LAW JUDGE:

Teresa A. Perez
Division of Hearings and Appeals

FINDINGS OF FACT

1. Petitioner (CARES # ) is a resident of La Crosse County.

2. Petitioner is a 66 year old woman who has had multiple back surgeries and who recently began experiencing back and groin pain. She sought treatment for this pain during a medical appointment with [REDACTED], PA-C on July 8, 2016.
3. On July 20, 2016, the petitioner's health care provider submitted a request for prior authorization to MedSolutions/eviCore, an entity that the Department of Health Services ("the department") has contracted with to review certain types of prior authorization requests. The prior authorization request sought MA coverage for the following service: MRI Lumbar Spine without contrast (CPT Code 72148).
4. After reviewing the prior authorization request and accompanying medical records submitted by the petitioner's health care provider, MedSolutions/eviCore determined that there was insufficient documentation to demonstrate "an x-ray and recent 6-week trial of physician-directed treatment".
5. On July 21, 2016, the department sent a notice to the petitioner notifying her that the request for prior authorization of the MRI Lumbar Spine without contrast had been denied because her provider did not submit sufficient documentation to show that the requested service is medically necessary.
6. Sometime after July 21, 2016, the petitioner spoke with staff at her provider's office who asked whether the petitioner would like to try undergoing some type of therapy. The petitioner declined at that time because she felt her pain was too severe to tolerate therapy.
7. On August 19, 2016, the petitioner filed an appeal with the Division of Hearings & Appeals contesting the denial of the requested coverage for an MRI Lumbar Spine without contrast.
8. On August 24, 2016, the department's nurse consultant, [REDACTED] reviewed the prior authorization request submitted by the petitioner's provider and concluded that the denial was made in accordance with applicable MA state regulations.

DISCUSSION

The department may only reimburse providers for medically necessary and appropriate health care services and equipment listed in Wis. Stat. §§ 49.46(2) and 49.47(6)(a), as implemented by Wis. Admin. Code, Chapter DHS 107. MA rules provide that the department may choose to require prior authorization for covered services. See Wis. Admin. Code, §DHS 107.02(3)(a) and (b). Since December 6, 2010, the department has chosen to require prior authorization for most advanced imaging services including but not limited to MRIs of the type requested by the petitioner's provider. See *ForwardHealth Update*, October 2010.

MedSolutions/eviCore, the entity with which the department has contracted to process prior authorization requests of advanced imaging services, applies certain guidelines to evaluate whether specific types of imaging services are medically necessary and appropriate. These guidelines can be found at <https://www.evicore.com/ReferenceGuidelines/SPINE%20Imaging%20Guidelines.pdf> and provide, in relevant part, that the following criteria must be satisfied before MedSolutions/eviCore will grant a prior authorization for an MRI of the lumbar spine prescribed to treat pain with neurological features:

- Initial clinical evaluation performed within the last 60 days
- Failure of recent (within 3 months) 6-week trial of physician-directed treatment and/or observation
- Clinical re-evaluation after treatment period (may consist of a face-to-face evaluation or other meaningful contact)

See *eviCore HealthCare Spine Imaging Guidelines* SP-6.1. The guidelines further provide that the initial clinical evaluation should include, among other things, “non-advanced imaging modalities”. See *eviCore HealthCare Spine Imaging Guidelines* SP-1.1.

The department and MedSolutions/eviCore concluded that the documentation submitted with the prior authorization did not include evidence of a recent X-ray and did not demonstrate that the petitioner had undergone a recent 6-week physician-directed treatment or observation. The petitioner did not provide additional documentation at the time of the hearing and acknowledged that she recently declined therapy recommended by her health care provider. Petitioner also explained that, despite her initial reluctance, she intended to contact her health care provider after the hearing to discuss initiating therapy as her primary goal is to obtain some relief of her pain. Given the petitioner’s testimony and the absence of additional documentation beyond that submitted by the department, there is insufficient evidence to establish that the petitioner satisfied the relevant coverage criteria. The denial of the prior authorization request was therefore proper.

As mentioned during the hearing, the petitioner may file a new prior authorization request at any time and may consider sharing with her health care provider a copy of the department’s August 24, 2016 letter which specifies the type of documentation the MA program requires before granting prior authorization.

CONCLUSIONS OF LAW

The department properly denied the petitioner’s request for prior authorization.

THEREFORE, it is

ORDERED

The petitioner’s appeal is dismissed.

REQUEST FOR A REHEARING

You may request a rehearing if you think this decision is based on a serious mistake in the facts or the law or if you have found new evidence that would change the decision. Your request must be **received within 20 days after the date of this decision**. Late requests cannot be granted.

Send your request for rehearing in writing to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400 **and** to those identified in this decision as "PARTIES IN INTEREST." Your rehearing request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and explain why you did not have it at your first hearing. If your request does not explain these things, it will be denied.

The process for requesting a rehearing may be found at Wis. Stat. § 227.49. A copy of the statutes may be found online or 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 filed with the Court **and** served either personally or by certified mail on the Secretary of the Department of Health Services, 1 West Wilson Street, Room 651, **and** on those identified in this decision as “PARTIES IN INTEREST” **no more than 30 days after the date of this decision** or 30 days after a denial of a timely rehearing (if you request one).

The process for Circuit Court Appeals may be found at Wis. Stat. §§ 227.52 and 227.53. A copy of the statutes may be found online or at your local library or courthouse.

Given under my hand at the City of Madison,
Wisconsin, this 19th day of September, 2016

\s _____
Teresa A. Perez
Administrative Law Judge
Division of Hearings and Appeals



State of Wisconsin \DIVISION OF HEARINGS AND APPEALS

Brian Hayes, Administrator
Suite 201
5005 University Avenue
Madison, WI 53705-5400

Telephone: (608) 266-3096
FAX: (608) 264-9885
email: DHAmail@wisconsin.gov
Internet: <http://dha.state.wi.us>

The preceding decision was sent to the following parties on September 19, 2016.

Division of Health Care Access and Accountability