

Case 1

- Date Received: 04/16/2010
 - 13yo female with sensoral-neurol hearing loss in one ear and cochlear implant in the other. Request for continued speech therapy. Clinical information received did not provide enough information that member was making progress toward any goals. Requested latest speech evaluation from member's school and requesting therapist refused stating that the information would not indicate member requires additional services.
- Date Denied: 04/19/2010
 - Request denied for lack of information documented continued need for services.

Case 2

- Date Received: 05/07/2010
 - 5yo male diagnosed with developmental disorders including delayed speech. Request for continued speech therapy. Member is Husky B, Income Band 1. Referred to Husky B + Physical Program and Aetna Better Health Case Management Department.
- Date Denied: 05/11/2010
 - Request denied and referral made.

Case 3

- Date Received: 05/13/2010
 - 15 year old female diagnosed with morbid obesity and muscle weakness. Past medical history has no documentation of muscle weakness. Request for continued Physical Therapy. Clinical obtained stated that member has partially met her goals, and that her past participation has been inconsistent. Member enrolled in Fit 5 program.
- Date Denied: 05/14/2010
 - Denied due to inconsistent attendance, and no clear documentation of muscular weakness, it appears that member is attending physical therapy for morbid obesity and does not meet medical necessity criteria for physical therapy.

Case 4

- Date Received: 05/19/2010
 - 4yo male diagnosed with developmental disorder, and lack of coordination requesting Occupational Therapy, with low muscle tone and fine motor/handwriting skills, which affects his functioning in the home and school settings. Attends preschool where he receives school-based speech therapy (2x/week), occupational therapy (2x/week), and physical therapy (1x/week).
 - He started school at the end of November 2009. This therapist conducted standardized testing to assess Stephen's fine motor skills, in addition parent report was provided and clinical observations were completed. Able to undress himself-donning clothes is difficult, clothing fasteners are difficult- able to use fork & spoon functionally at meals.
- Date Denied: 05/21/2010
 - Denied as duplication of services.

Case 5

- Date Received: 08/13/2010
 - 5yo male diagnosed with muscle weakness and muscle spasm requesting continuing Occupational Therapy. Member currently receiving these services in school.
- Date Denied: 08/26/2010
 - Denied as a duplication of services.

Case 6

- Date Received: 06/16/2010
 - 37yo female requesting perineoplasty independently of physician. Per clinical information received: surgery is not being ordered by MD since it is not medically necessary.
 - Member is insisting on sending in request to insurance even though it is a cosmetic procedure for perineoplasty due to member feeling her vaginal opening is too large and does not like appearance. Also in notes member has cancelled and re-scheduled procedure several times.
- Date Denied: 06/16/2010
 - Denied as cosmetic in nature.

Case 7

- Date Received: 06/17/2010
 - 15yo female diagnosed with hypothyroidism and closed fracture of septum. Requesting rhinoplasty and otoplasty. Member has history of fracture of nose, and is displeased with appearance of both her nose and ears. No history of pain or infection described.
- Date Denied: 6/18/2010
 - Denied as cosmetic in nature.

Case 8

- Date Received: Original Receipt of Request: 07/08/2009
- Date of Re-request: 05/03/2010
 - 15 yo female diagnosed with macromastia and shoulder pain requesting bilateral breast reduction. Per information obtained, no conservative treatment tried like pain medications and/or special bras. In addition, no evidence that member has stopped growing due to age of 15 years.
- Original denial performed 07/14/2009
- Same clinical presented again in 2010, denial upheld
- Date Denied: 07/02/2010
 - Denied as inappropriate due to age. Additional information submitted to Medical Director after peer to peer meeting. Per Medical Director, no new information obtained, denial upheld.

Case 9

- Date Received: 06/18/2010
 - 27yo female diagnosed with hypertrophy of breast requesting bilateral breast reduction surgery. The amount of breast tissue to be removed did not meet medical necessity criteria, amount too low per criteria.
- Date Denied: 06/21/2010
 - Denied based on Medical Necessity criteria.

Case 10

- Date Received: 06/02/2010
 - 47yo female diagnosed with venous insufficiency requesting stab phlebectomy for varicose veins. Per clinical information received member did not meet medical necessity criteria as the saphenofemoral vein was not incompetent.
- Date Denied: 06/03/2010
 - Denied, did not meet medical necessity criteria.

Case 1

Pertinent Member Information

- 29 year old Husky A female with diagnosis of hypertrophy of breast (enlarged breasts)
- Member requested bilateral breast reduction (both sides)
- Member weighs 175 lbs and is 5'3, garment size 38D
- Request denied as the mass of the breast does not appear excessive as noted from photos. There is no shoulder grooving, no rash or infection. The surgeon plans to remove 200 grams of tissue per breast.
- The criteria used to make this decision was InterQual (Hand, Plastic and Reconstruction and does not meet 110 symptoms. (See Case 1 Criteria file.)

Case 2

Pertinent Member Information

- 6 year old Husky A male with diagnosis of developmental speech disorder with mild articulation deficit characterized by frontal protrusion of the tongue when saying "s", "z" and "s" blends (difficulty pronouncing words with "s" and "z")
- Members conversation illustrates excellent understanding of auditory comprehension and verbal expression for his age level.
- Request denied as there is no medical diagnosis given that shows the need for speech therapy

Case 3

Pertinent Member Information

- 6 year old Husky A male with diagnosis of stuttering.
- Member's evaluation showed mild stuttering and repetition of some short words and syllables. There are no other speech problems noted and he presents as age appropriate for his speech.
- Member evaluated by local public schools system and found to be ineligible for speech therapy services.
- Request denied due to no medical diagnosis to support the need for speech therapy.

Case 4

Pertinent Member Information

- 4 year old Husky B female with diagnosis of articulation/phonological disorder (annunciation of words/vocal sounds)
- Member's evaluation showed she fell into the 8th percentile which is one and a half standard deviations below the mean.
- Member's hearing and vision are normal.
- Member has a moderate delay in acquisition of speech sounds.
- Request denied due to no medical diagnosis to support the need for speech therapy.

Case 5

Pertinent Member Information

- 4 year old Husky A male with diagnosis of mixed receptive expressive language disorder
- Member has delayed development of speech and language and also has difficulty speaking in the class room and social settings.
- Request denied due to no medical diagnosis to support the need for speech therapy.

Case 7

Pertinent Member Information

- 5 month old Husky A male with past medical history of pneumonia, asthma and eczema who presents with a diagnosis of muscle spasm of the back of his head, right upper to mid chest and right back muscles.
- Requested chiropractic services.
- Request denied as the clinical notes did not show the medical need for chiropractic services.
- The infant may be seen by a physical therapist.

Case 8

Pertinent Member Information

- 31 year old Husky A female diagnosis of morbid obesity. She has a past medical history of bipolar psychiatric disorder, high blood pressure and back pain.
- Her past surgeries include gall bladder removal, multiple back surgeries and eye surgery.
- Requested gastric bypass surgery
- Request denied as the psychiatric evaluation did not state the member is a good candidate for surgery.
- Criteria used to make decision is the General Surgery-Bariatric Surgery InterQual criteria. Indication 133 not met. (See Case 8 criteria file.)

Case 1

Request for hysterectomy

Member information: 37 year old with menorrhagia (excessive or frequent menstruation).

Information reviewed; gynecology surgeon's office notes, ultrasound report, prior surgery report from 2005, follow up calls to the surgeon's office re: prior treatment.

How the decision was reached: the physician reviewer consulted "Milliman Care Guidelines S-650, Abdominal Hysterectomy" specific to the member's conditions of "abnormal uterine bleeding."

Hysterectomy is indicated for abnormal uterine bleeding with all of the following:

- Endometrial sampling or hysteroscopy performed, and no specific etiology (e.g. endometrial hyperplasia) identified.
- Hormonal treatment as appropriate
- Failure of conservative surgical management with curettage, hysteroscopy, or endometrial ablation (18) (19)
- No desire for future fertility

There were no results of endometrial samplings (surgical pathology report of results of endometrial biopsy), the member did not want to try hormone replacement therapy, and there was no notation of conservative treatment. Three of the four required criteria were not met, therefore the procedure was denied.

Case 2

Request for Gastric bypass surgery

Member information: 37 year old female.

Appears there was confusion regarding the procedure requested; removal of gastric band vs gastric bypass surgery,, and the clinical information supplied.

Denial letter sent 7/8/10, with subsequent approval 8/11/10.

7/8 request reviewed by Dr. He will approve outpt surgery for removal of lap band at Danbury Hospital. Susan at mdo advised and will fax approval to her. Faxed 7/9

8/10 received request for Laparoscopy, surgical, gastric restrictive procedure; with gastric bypass and Roux-en-Y gastroenterostomy (roux limb 150 cm or less) (43644) and Laparoscopy, surgical, gastric restrictive device and subcutaneous port components (43774).

Gastric bypass has been denied as member had not had medical, pulmonary, nutritional or psych consultations. Member had lap band placed over 2 years ago and no new clinicals obtained. Office will be obtaining new records.

New clinicals received from medical, pulmonary, psych and nutritional consults on 8/10. Criteria reviewed: ORG:S-513 (ISC) Milliman guidelines 14th Ed. Appears to meet Miliman guidelines with new medical information.

8/11 approved gastric bypass based on recent clinical information.

Case 3

Request for physical therapy- 24 weekly visits were requested. 20 were approved and 4 were denied.

6 year old boy with gross motor delay, trunk and leg weakness.

Information reviewed: clinical information from ongoing PT visits; weekly visits were approved in May 2009, October 2009 and March 2010.

How the decision was reached: Physician reviewer looked o Milliman Care Guidelines ACG-A-0364 Spine Soft Tissue Dysfunctional Rehabilitation. Based upon the review, it was determined that the therapy was warranted. Our guidelines are to approve 20 visits and have ongoing communication with the provider to determine if additional visits are needed and will be beneficial.

Case 4

Request for frenoplasty (clipping the frenulum under the tongue, treatment of "tongue tied")

12 year old boy, unable to stick tongue out past lips, some difficulty with speech.

Information reviewed: Surgeon's office note

How the decision was reached; in order to establish medical necessity, the physician reviewer consulted "Milliman care Guidelines ACG A-0186 (AC) Lingual Frenoloplasty and Frenotomy (Frenectomy and Frenulectomy)."

Lingual frenuloplasty or frenotomy (frenectomy or frenulectomy) may be indicated for Speech articulation difficulties if due to ankyloglossia (tongue-tie), as determined by liscensed speech language pathologist.

There was no speech language pathologist assessment of speech articulation difficulties, so the procedure was denied.

Case 5

Request for Panniculectomy (removal of hanging fat and skin over the abdomen which can occur after significant weight loss).

Member information: 37 year old female, 160 lb weight loss after bariatric (gastric bypass) surgery.

Information reviewed; surgeon's office note, followup phone call to the office, photographs of the member's arms.

How the decision was reached: Request from the surgeon is for "body contouring" which is primarily cosmetic. In order to establish medical necessity, the physician consulted "milliman Care Guidelines ACG A-0498 (AC) Panniculectomy."

Panniculectomy is most commonly performed after massive weight loss associated with bariatric surgery. Panniculectomy is usually performed for chronic intertrigo, other skin infection, ulceration, or mechanical irritation that has not responded to medical treatment.

The progress note did not mention chronic intertrigo. A follow up call was made to the office to specifically ask this question. Reviewer was informed that the member had used an over the counter medicine but had not seen her physician for intertrigo. There was no evidence of medical condition (chronic intertrigo) so the procedure was denied.

Case 6

Request for Jaw Surgery

Reconstruction of manibular rami and/or body, sagittal split; with internal rigid fixation (21196) and econstruction midface, LeFort I; single piece, segment movement in any direction (21141).

Member information: 19 year old female with jaw deformities (mandibular hyperplasia and manibular hypoplasia). Her physician notes that she said, "I don't like how my gums show too much and my two front teeth look like buck-teeth."

How the decision was reached: surgeon notes were reviewed in order to understand the specific deformity and how it affected the member. Of note, "19 year old female with significant dental findings include excessive gingival display on maxilla, Bilateral class I molar and Class I canine on right and Class II canine on left."

Photographs take at age 17 were sent for review. The reviewing MD requested current photographs. Photographs were not received, and a 14-day extension was granted on 8/4. Photographs were again requested, but were not sent. The reviewing physician did not have updated information upon which to make a decision, so the procedure was denied.