

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2155756
Decision Date:	10/01/2021	Hearing Date:	09/08/2021
Hearing Officer:	Marc Tonaszuck		

Appearance for Appellant:

Pro se

Appearance for CCA ICO:

Cassandra Horne, Appeals and
Grievances Supervisor

Appellant Witness:



*The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
Board of Hearings
100 Hancock Street, Quincy, Massachusetts 02171*

APPEAL DECISION

Appeal Decision:	Denied	Issue:	ICO - Dental
Decision Date:	10/01/2021	Hearing Date:	09/08/2021
CCA ICO Rep.:	Cassandra Horne	Appellant's Rep.:	Pro se
Hearing Location:	Quincy Harbor South		

Authority

This hearing was conducted pursuant to Massachusetts General Laws Chapter 118E, Chapter 30 and the rules and regulations promulgated thereunder.

Jurisdiction

Through a notice dated 07/02/2021, Commonwealth Care Alliance (CCA), a MassHealth integrated care organization (ICO), informed the appellant that it denied her request for a surgical dental implant, abutment and crown on tooth 31 and bone replacement graft on tooth 31 (Exhibit 1). The appellant filed this appeal with the Board of Hearings in a timely manner on 07/15/2021 (130 CMR 610.015(B); Exhibit 2).

Members enrolled in an integrated care contractor have a right to request a fair hearing for a decision to deny or provide limited authorization of a requested service, provided the member has exhausted all remedies available through the managed care contractor's internal appeals process (130 CMR 610.018). The appellant exhausted CCA's internal appeals process.

Action Taken by MassHealth

CCA, a MassHealth ICO, denied the appellant's request for a surgical dental implant, abutment and crown on tooth 31 and a bone replacement graft on tooth 31.

Issue

Was CCA, a MassHealth ICO, correct in denying the appellant's request for a surgical dental implant, abutment and crown on tooth 31 and a bone replacement graft on tooth 31?

Summary of Evidence

Cassandra Horne, CCA appeals and grievances supervisor, testified that the appellant is a MassHealth member enrolled in CCA's integrated care organization (ICO). She testified that a request from appellant's dental provider was submitted to CCA for dental codes D6010 (surgical placement of a dental implant), D6057 (custom abutment and placement), D6058 (abutment supported porcelain/ceramic crown) for tooth 31, a posterior tooth. Also requested for the same tooth was dental code D4263 (bone replacement graft). Ms. Horne testified that codes D6010, D6057, and D6058 are not covered codes/services for tooth 31; specifically, that CCA does not cover implants and associated services for a posterior tooth. Ms. Horne testified that dental code D4263 was denied because the submitted materials do not show evidence of a bone defect, which is necessary for CCA to approve the bone graft (Exhibit 4). The appellant filed a level 1 appeal with CCA on 06/28/2021, which was denied on 07/02/2021. Ms. Horne testified that some dental implants are covered by CCA, for a maximum of two implants on either arc, on an anterior tooth only to support an upper or lower denture. This is not the case here. As a result, the request was denied. Ms. Horne concluded her testimony by stating that the request to extract tooth 31 was approved by CCA.

The appellant appeared at the fair hearing. Her witness was Dr. Omar Dwider, a dentist who practices in Massachusetts. Dr. Dwider testified telephonically that he understood CCA's testimony and stated that if the dental implants are not covered, then he would recommend extracting tooth 31 and applying a bridge. He also stated that appellant's tooth 31 has a root fracture, even though a root canal and crown had been placed on the tooth. The root has "split in half," requiring that the tooth be extracted. Once it is removed, there will be a deficit in the back of the bone about the size of a quarter. He did not testify as to whether there was medical necessity for a bone graft.

The appellant testified that there is a medical urgency to perform this procedure as quickly as possible. She has not had the tooth extracted because of her concerns. She takes good care of her teeth and now has to blend her food in order to eat because of

the pain and the resulting migraines.

Findings of Fact

Based on a preponderance of the evidence, I find the following:

1. The appellant is between 19 and 64 years of age and is a member of CCA, a MassHealth ICO (Testimony).
2. CCA complies with the CCA benefit structure and MassHealth regulations (Testimony).
3. On 06/15/2021, the appellant's dental provider submitted a request to CCA for a treatment plan for extraction of tooth 31, surgical dental implant, abutment and crown on tooth 31 and bone replacement graft on tooth 31 (Testimony; Exhibit 4).
4. On 06/17/2021, CCA approved the request to extract tooth 31 (Testimony; Exhibit 4).
5. On 06/17/2021, CCA denied the request for a surgical dental implant, abutment and crown on tooth 31 and bone replacement graft on tooth 31 (Testimony; Exhibit 4).
6. The appellant has not provided evidence of a bone deficit for tooth 31.
7. Tooth 31 is a posterior tooth (Testimony).
8. On 06/28/2021, appellant appealed CCA's denial at a level 1 internal review.
9. On 07/02/2021, CCA denied appellant's level 1 appeal. CCA informed the appellant that the surgical dental implant, abutment and crown on tooth 31 were denied because they are not a covered benefit for that tooth. CCA informed the appellant that the bone graft was denied because there was no evidence in the document provided that there a bone deficit (Testimony; Exhibit 4).
10. On 07/15/2021, appellant appealed CCA's denial to the Board of Hearings (Testimony; Exhibit 2).

Analysis and Conclusions of Law

MassHealth regulations at 130 CMR 508.007(C) address obtaining services when enrolled in an integrated care organization (ICO) as follows:

When a member is enrolled in an ICO in accordance with the requirements under 130 CMR 508.007(A), the ICO will authorize, arrange, integrate, and coordinate

the provision of all covered services for the member. Upon enrollment, the ICO is required to provide evidence of its coverage, the range of available covered services, what to do for emergency conditions and urgent care needs, and how to obtain access to specialty, behavioral health, and long-term services and supports.

MassHealth dental provider regulations at 130 CMR 420.421(B) address noncovered services as follows:

The MassHealth agency does not pay for the following services for any member, except when MassHealth determines the service to be medically necessary and the member is under age 21. Prior authorization must be submitted for any medically necessary noncovered services for members under age 21.

- (1) cosmetic services;
- (2) certain dentures including unilateral partials, overdentures and their attachments, temporary dentures, CuSil-type dentures, other dentures of specialized designs or techniques, and preformed dentures with mounted teeth (teeth that have been set in acrylic before the initial impressions);
- (3) counseling or member-education services;
- (4) habit-breaking appliances;
- (5) implants of any type or description;**
- (6) laminate veneers;
- (7) oral hygiene devices and appliances, dentifrices, and mouth rinses;
- (8) orthotic splints, including mandibular orthopedic repositioning appliances;
- (9) panoramic films for crowns, endodontics, periodontics, and interproximal caries;
- (10) root canals filled by silver point technique, or paste only;
- (11) tooth splinting for periodontal purposes; and
- (12) any other service not listed in Subchapter 6 of the *Dental Manual*.

(Emphasis added.)

The appellant has the burden "to demonstrate the invalidity of the administrative determination." See *Andrews vs. Division of Medical Assistance*, 68 Mass. App. Ct. 228. Moreover, the burden is on the appealing party to demonstrate the invalidity of the administrative determination. See *Fisch v. Board of Registration in Med.*, 437 Mass. 128, 131 (2002); *Faith Assembly of God of S. Dennis & Hyannis, Inc. v. State Bldg. Code Commn.*, 11 Mass. App. Ct. 333 , 334 (1981); *Haverhill Mun. Hosp. v. Commissioner of the Div. of Med. Assistance*, 45 Mass. App. Ct. 386 , 390 (1998).

The appellant, a member of CCA, a MassHealth ICO, requested dental services to extract tooth 31, a bone replacement graft, surgical placement of a dental implant, abutment and crown on tooth 31 to replace the extracted tooth. The request to extract the tooth was approved by CCA; however, the remaining services were denied. CCA, as a MassHealth ICO must provide at least those services covered by MassHealth.

CCA's denial of the surgical placement of the implant, abutment and crown on tooth 31 is supported by the above regulations. Additionally, CCA's denial of the bone graft is also supported by the facts as found herein. Specifically, neither the appellant nor her witness, a dentist, provided evidence that the appellant has a bone deficit at tooth 31. CCA covers dental implants on a limited basis for anterior teeth, none of which apply here, because tooth 31 is a posterior tooth. CCA's denial is supported by the material facts and the regulations and policies. Accordingly, this appeal is denied.

Order for ICO

None.

Notification of Your Right to Appeal to Court

If you disagree with this decision, you have the right to appeal to Court in accordance with Chapter 30A of the Massachusetts General Laws. To appeal, you must file a complaint with the Superior Court for the county where you reside, or Suffolk County Superior Court, within 30 days of your receipt of this decision.

Marc Tonaszuck
Hearing Officer
Board of Hearings

cc: Commonwealth Care Alliance SCO, Attn: Cassandra Horne, 30 Winter Street,
Boston, MA 02108