# Office of Medicaid BOARD OF HEARINGS

### Appellant Name and Address:



**Appeal Decision:** Approved **Appeal Number:** 2175922

**Decision Date:** 9/27/2021 **Hearing Date:** 09/17/2021

Hearing Officer: Christine Therrien

Appearance for Appellant:

Pro se

 ${\bf Appearance\ for\ Mass Health:}$ 

Dr. Cynthia Yered, DentaQuest



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: Approved Issue: Dental

**Decision Date:** 9/27/2021 **Hearing Date:** 09/17/2021

MassHealth's Rep.: Dr. Cynthia Yered, Appellant's Rep.: Pro se

**Hearing Location:** Quincy Harbor South

## Authority

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

## Jurisdiction

Through a notice dated 7/9/2021, MassHealth denied the appellant's prior authorization for a maxillary partial dentures because MassHealth determined that this is not a covered service (130 CMR 420.427(F) and Exhibit 1). The appellant filed this appeal in a timely manner on 7/27/2021(130 CMR 610.015(B) and Exhibit 2). Denial of a prior authorization is valid grounds for appeal (130 CMR 610.032).

### Action Taken by MassHealth

MassHealth denied the appellant's request for prior authorization for a maxillary partial denture.

#### **Issue**

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 420.427(F)(5), in determining that the replacement maxillary partial denture is not a covered service.

# Summary of Evidence

The DentaQuest representative, MassHealth's contractor responsible for review of prior authorization requests, testified that DentaQuest received a Prior Authorization for a maxillary partial denture on 7/9/2021 and a determination was made the same day. The DentaQuest representative testified that the PA was denied because the appellant received a maxillary partial denture in 2019 and the regulation 130 CMR 420.428(F)(5) states MassHealth will only pay for dentures every 84 months (7 years) and it

Page 1 of Appeal No.: 2175922

has been less than 84 months. The DentaQuest representative testified that that there are exceptions to the 84 month time frame, but she was not sure the appellant fell into any of the exceptions based on the PA submitted. The treating dentist submitted a letter stating that the appellant has had three teeth extracted and she needed a new partial because the current partial did not fit.

The appellant testified that she had three teeth extracted and now she has eight teeth missing on the top. The appellant testified that the current partial denture does not stay in her mouth because there are no teeth for it to hold on to. The appellant testified that she has trouble chewing because her back teeth are missing.

## Findings of Fact

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

- 1. DentaQuest received a Prior Authorization for a full set of dentures on 7/9/2021 and a determination was made the same day (Testimony and Exhibit 1).
- 2. The PA was denied because the appellant had received a maxillary partial denture in 2019 (Testimony).
- 3. Regulation 130 CMR 420.428(F)(5) states MassHealth will only pay for dentures every 84 months (7 years) and it has been less than 84 months (Testimony).
- 4. There are exceptions to the 84 month time frame (Testimony).

### Analysis and Conclusions of Law

130 CMR 420.428(A) <u>General Conditions</u> states that MassHealth will pay for dentures once per seven calendar years per member, subject to the age limitations specified in 130 CMR 420.428(B). <sup>1</sup>

130 CMR 420.428(F) Replacement of Dentures governs the replacement of dentures. MassHealth will pay for the necessary replacement of dentures. The member is responsible for denture care and maintenance. The member, or persons responsible for the member's custodial care, must take all possible steps to prevent the loss of the member's dentures. MassHealth does not pay for the replacement of dentures if the member's denture history reveals any of the following:

- (1) repair or reline will make the existing denture usable;
- (2) any of the dentures made previously have been unsatisfactory due to physiological causes that cannot be remedied;
- (3) a clinical evaluation suggests that the member will not adapt satisfactorily to the new denture:
- (4) no medical or surgical condition in the member necessitates a change in the denture or a requirement for a new denture;

<sup>&</sup>lt;sup>1</sup> 420.428(B) refers to members under the age of 21.

- (5) the existing denture is less than seven years old and no other condition in this list applies;
- (6) the denture has been relined within the previous two years, unless the existing denture is at least seven years old;
- (7) there has been marked physiological change in the member's oral cavity, any further reline has a poor prognosis for success; or
- (8) the loss of the denture was not due to extraordinary circumstances such as a fire in the home.

MassHealth provides coverage for dentures. 130 CMR 420.428(F) lists reasons why MassHealth would not pay for dentures. 130 CMR 420.428(F)(5) states that MassHealth will not pay for dentures if it is less than 84 months since the last time MassHealth paid for dentures. MassHealth last paid for dentures for the appellant in 2019; which is within the past 84 months. 130 CMR 420.428(F)(4) states that MassHealth will not pay for dentures unless there is a medical or surgical condition in the member necessitating a change in the denture or a requirement for a new denture. The regulation does not offer any examples of a medical or surgical condition, but given that the appellant had three teeth extracted and no longer has the teeth in which to anchor the partial denture the appellant clearly falls within the exception under 130 CMR 420.428(F)(4). This appeal is approved.

#### Order for MassHealth

Approve the PA submitted on 7/9/2021

## Implementation of this Decision

If this decision is not implemented within 30 days after the date of this decision, you should contact your MassHealth Enrollment Center. If you experience problems with the implementation of this decision, you should report this in writing to the Director of the Board of Hearings, at the address on the first page of this decision.

Christine Therrien Hearing Officer Board of Hearings

cc: DentaQuest

Page 3 of Appeal No.: 2175922