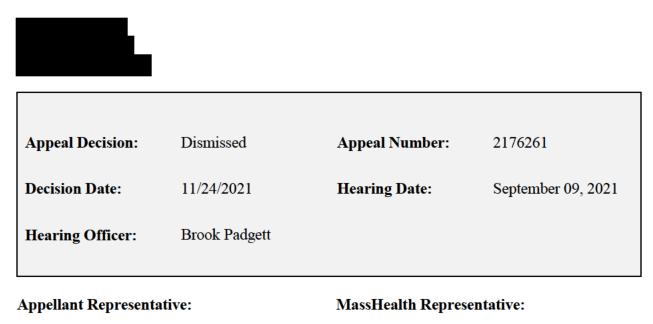
Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Pro se

Cassandra Horne, CCA



Commonwealth of Massachusetts Executive Office of Health and Human Services Office of Medicaid Board of Hearings 100 Hancock Street, 6th floor Quincy, MA 02171

APPEAL DECISION

Appeal Decision:	Dismissed	Issue:	130 CMR 610.051
Decision Date:	11/24/2021	Hearing Date:	September 09, 2021
MassHealth Rep.:	C. Home, CCA	Appellant Rep.:	Pro se
Hearing Location:	Quincy		

Authority

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

Jurisdiction

The appellant received a notice dated July 15, 2021, stating: Your requested service for a retainer crown is denied as the treatment proposed is beyond the scope of coverage and does not meet the criteria for medical necessity. (Exhibit 1).

The appellant filed this appeal timely on August 13, 2021. (130 CMR 610.015(B); Exhibit 2).

The appellant attended a hearing on October 12, 2021 and submitted a letter of medical necessity for review. (Exhibit 4). The record was extended until October 26, 2021, for CCA to review the appellant's submission. (Exhibit 5). CCA subsequently responded that after review of the additional medical information the decision was reversed, and the appellant's request was approved. (Exhibit 6).

The Fair Hearing regulation concerning Adjustment Procedures and Mediation is set forth at 130 CMR 610.051. 130 CMR 610.051(B) states, in relevant part, as follows:

MassHealth may make an adjustment in the matters at issue before or during a hearing. If the parties agree that the adjustment resolves one or more of the issues in dispute, the hearing officer, by written order, will dismiss the appeal as to all resolved issues, noting as the reason for such dismissal that the parties have reached agreement. MassHealth/CCA reversed its initial denial and approved the appellant's request for the requested dental services. The MassHealth/CCA adjustment resolves all of the disputed issued in this case. The parties have reached agreement pursuant to 130 CMR 610.051(B), therefore this appeal is dismissed.

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.

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, MassHealth of Medical Assistance, at the address on the first page of this decision.

Brook Padgett Hearing Officer Board of Hearings

cc: Cassandra Horne, CCA.