

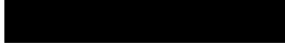
Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2176278
Decision Date:	10/15/2021	Hearing Date:	09/29/2021
Hearing Officer:	Christopher Jones		

Appearance for Appellant:



Appearance for MassHealth:

Dr. Harold Kaplan

Interpreter:



*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:	Prior Authorization – Orthodontia
Decision Date:	10/15/2021	Hearing Date:	09/29/2021
MassHealth’s Rep.:	Dr. Harold Kaplan	Appellant’s Rep.:	██████
Hearing Location:	Quincy Harbor South	Aid Pending:	No

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 July 12, 2021, MassHealth denied the appellant’s prior authorization request for orthodontia. Exhibit 3; 130 CMR 420.431. The appellant filed this appeal in a timely manner on August 14, 2021. Exhibit 2; 130 CMR 610.015(B). Denial of assistance is valid grounds for appeal. 130 CMR 610.032.

Action Taken by MassHealth

MassHealth denied the appellant’s request for comprehensive orthodontia.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR.420.431, in determining that the appellant did not qualify for braces.

Summary of Evidence

The appellant’s provider submitted a prior authorization request for comprehensive orthodontic treatment with photographs and x-rays. They submitted Handicapping Labio-Lingual Deviations (“HLD”) Form, with a total score of 30 points based upon the following measurements:

- Overjet of 7 mm, worth 7 points;

- Overbite of 7 mm, worth 7 points;
- Anterior crowding greater than 3.5 mm in both arches worth 5 points each; and
- Labio-lingual spread of 6 mm, worth 6 points.

DentaQuest, MassHealth's dental contractor, performed an initial evaluation based upon the submitted documentation. DentaQuest's review found that the appellant had an HLD score of 15 points. They saw 6 mm of both overjet and overbite and 3 points of labio-lingual spread, but they did not see crowding greater than 3.5 mm in either arch. At the hearing, it was explained that MassHealth only pays for orthodontia when it is "medically necessary" to correct a handicapping bite. MassHealth uses an HLD scale to measure various aspects of a person's bite to determine if the member has a "handicapping malocclusion." This scale looks at nine characteristics of a bite to measure how the teeth work. Many children may be appropriate for orthodontic care but do not meet MassHealth's definition of a physically handicapping bite.

Dr. Kaplan performed his own measurements on the submitted images and got a score of 19 points. He basically agreed with the provider's measurements, but he pointed out that there was no crowding in the anterior teeth. The appellant's problem is spacing, not crowding. Therefore, he could not understand where the provider got 10 points for crowding in both the upper and lower anterior teeth.

There were significant challenges during the hearing with interpreters dropping from the call. The appellant's mother expressed confusion regarding whether braces were actually needed. Dr. Kaplan explained that he would benefit from braces, but that he did not have a handicapping bite as MassHealth defines it. She was informed that he could be reevaluated in six months. If there are any changes in his teeth, then it is possible that he may qualify.

Findings of Fact

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

1. The appellant's provider submitted a prior authorization request for comprehensive orthodontic treatment with photographs and x-rays. The submitted HLD Form found a total score of 30, in part based upon anterior crowding greater than 3.5 mm in both the upper and lower anterior arches. Exhibit 3, pp. 6, 8-12.
2. MassHealth denied comprehensive orthodontia, finding only 15 points on the HLD scale. Exhibit 3, pp. 3-5, 7, 13.
3. For the appeal, another orthodontist performed an independent evaluation and found a score of 19 points. The appellant does not have crowding greater than 3.5 mm in his front teeth in either arch. Testimony by Dr. Kaplan.

Analysis and Conclusions of Law

MassHealth has chosen to provide orthodontic services when it determines them to be medically necessary. 130 CMR 420.431. Medical necessity for dental and orthodontic treatment must be shown in accordance with the regulations governing dental treatment, 130 CMR 420.000, and the MassHealth Dental Manual.¹ 130 CMR 450.204. Pursuant to 130 CMR 420.431(C)(3), MassHealth “pays for comprehensive orthodontic treatment ... only when the member has a severe and handicapping malocclusion. The MassHealth agency determines whether a malocclusion is severe and handicapping based on the clinical standards described in Appendix D of the Dental Manual.”

The HLD Form is a quantitative and objective method for measuring malocclusions. It is used to add up a single score based on a series of measurements that represent the degree to which a bite deviates from normal alignment and occlusion. MassHealth has made a policy decision that a score of 22 or higher signifies a “severe and handicapping malocclusion,” ostensibly a medical necessity for orthodontia. Certain exceptional malocclusions are deemed automatically severe and handicapping: cleft palate, deep impinging overbite, severe maxillary anterior crowding, anterior impaction, severe traumatic deviation, overjet greater than nine millimeters, or reverse overjet greater than 3.5 millimeters. The HLD Form now also allows medical providers to explain how orthodontia is medically necessary, despite not satisfying the measurement criteria otherwise captured on the form.

The instructions for the HLD form explain that “Anterior Crowding” refers to

Arch length insufficiency must exceed 3.5 mm. Do not score mild rotations that may react favorably to stripping or mild expansion procedures. Enter 5 points for maxillary and mandibular anterior crowding. If condition no. 12, ectopic eruption, is also present in the anterior portion of the mouth, score the most severe condition. Do not score both conditions.

The appellant largely has spacing issues in his front teeth, not “arch length insufficiency.” Without the 10 points the appellant’s provider gave for crowding in both arches, their HLD score is only 20 points. Therefore, this appeal must be DENIED. The appellant’s HLD score is below 22 points.

Order for MassHealth

None.

¹ The Dental Manual and Appendix D are available on MassHealth’s website, in the MassHealth Provider Library. (Available at <https://www.mass.gov/lists/dental-manual-for-masshealth-providers>, last visited September 30, 2021). Additional guidance is at the MassHealth Dental Program Office Reference Manual (“ORM”), available at: <https://www.masshealth-dental.net/MassHealth/media/Docs/MassHealth-ORM.pdf> (last visited September 30, 2021).

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.

Christopher Jones
Hearing Officer
Board of Hearings

cc:

MassHealth Representative: DentaQuest 1, MA