# Office of Medicaid BOARD OF HEARINGS

#### Appellant Name and Address:



**Appeal Decision:** Denied **Appeal Number:** 2177574

**Decision Date:** 12/29/2021 **Hearing Date:** 11/08/2021

Hearing Officer: Samantha Kurkjy

Appearances for Appellant: MassHealth Representative:

Dr. Carl Perlmutter



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: PA-Dental-

Orthodontics

**Decision Date:** 12/29/2021 **Hearing Date:** 11/08/2021

MassHealth Rep.: Dr. Carl Perlmutter Appellant Rep.:

**Hearing Location:** Remote **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 September 17, 2021, MassHealth denied the appellant's Prior Authorization request for comprehensive orthodontic treatment. (Exhibit 1; 130 CMR 420.431.) The appellant filed a timely appeal on October 1, 2021. (Exhibit 2; 130 CMR 610.015(B).) Challenging a denial of a request for Prior Authorization is a valid ground for appeal. (130 CMR 610.032.)

### **Action Taken by MassHealth**

MassHealth denied the appellant's request for Prior Authorization of comprehensive orthodontic treatment.

#### **Issue**

Whether MassHealth was correct in determining, pursuant to 130 CMR 420.431(E), that the appellant is ineligible for comprehensive orthodontic treatment.

<sup>&</sup>lt;sup>1</sup> The Claim/Pre-Authorization Status Detail lists the Final Decision Date as September 16, 2021. (Exhibit 4.)

# **Summary of Evidence**

The appellant is an individual under the age of 21 who was represented at hearing by his mother. MassHealth was represented at the hearing by Dr. Carl Perlmutter, an orthodontic consultant from DentaQuest. DentaQuest is the third-party company that currently administers and manages the dental program available to MassHealth members, including the appellant.

The appellant's provider submitted a Prior Authorization ("PA") request for comprehensive orthodontic treatment, including an x-ray and photographs, on September 16, 2021. As required, the provider completed the MassHealth Handicapping Labio-Lingual Deviations Index ("HLD Index"), which requires a total score of 22 or higher for approval. The provider's HLD Index indicates that he found a total score of 22, broken down as follows (Exhibit 1):

<b>Conditions Observed</b>	Raw Score	Multiplier	Weighted Score
Overjet in mm	6	1	6
Overbite in mm	5	1	5
Mandibular Protrusion	0	5	0
in mm			
Open Bite in mm	0	4	0
Ectopic Eruption (# of	0	3	0
teeth, excluding third			
molars)			
Anterior Crowding <sup>2</sup>	Maxilla:	Flat score of 5	5 <sup>4</sup>
	Mandible:	for each <sup>3</sup>	
Labio-Lingual Spread,	6	1	6
in mm (anterior spacing)			
Posterior Unilateral	No	Flat score of 4	0
Crossbite			
Posterior impactions or	0	3	0
congenitally missing			
posterior teeth			
<b>Total HLD Score</b>			22

When DentaQuest initially evaluated this PA request on behalf of MassHealth, its orthodontists determined that the appellant has an HLD score of 12. The DentaQuest HLD Form reflects the following scores (Exhibit 1):

<b>Conditions Observed</b>	Raw Score	Multiplier	Weighted Score
Overjet in mm	4	1	4
Overbite in mm	5	1	5
Mandibular Protrusion	0	5	0

<sup>&</sup>lt;sup>2</sup> The HLD Index instructs the user to record the more serious (i.e., higher score) of either the ectopic eruption **or** the anterior crowding, but not to count both scores. (Exhibit 1.)

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<sup>&</sup>lt;sup>3</sup> The HLD Index states that to give points for anterior crowding, arch length insufficiency must exceed 3.5 mm. (Exhibit 1.)

<sup>&</sup>lt;sup>4</sup> The provider did not indicate whether he found maxillary or mandibular anterior crowding.

in mm			
Anterior Open Bite in	0	4	0
mm			
Ectopic Eruption (# of	0	3	0
teeth, excluding third			
molars)			
Anterior Crowding <sup>5</sup>	Maxilla: X	Flat score of 5	0
	Mandible: X	for each <sup>6</sup>	
Labio-Lingual Spread,	3	1	3
in mm (anterior spacing)			
Posterior Unilateral	No	Flat score of 4	0
Crossbite			
Posterior impactions or	0	3	0
congenitally missing			
posterior teeth			
Total HLD Score			12

Because it found an HLD score below the threshold of 22, MassHealth denied the appellant's PA request on September 17, 2021. The appellant submitted an appeal on October 1, 2021.

At hearing, Dr. Perlmutter completed an HLD Index based on a review of the records. He determined that the appellant's overall HLD score is 12, as calculated below:

<b>Conditions Observed</b>	Raw Score	Multiplier	Weighted Score
Overjet in mm	4	1	4
Overbite in mm	5	1	5
Mandibular Protrusion	0	5	0
in mm			
Anterior Open Bite in	0	4	0
mm			
Ectopic Eruption (# of	0	3	0
teeth, excluding third			
molars)			
Anterior Crowding	Maxilla: X	Flat score of 5	0
	Mandible: X	for each	
Labio-Lingual Spread,	3	1	3
in mm (anterior spacing)			
Posterior Unilateral	No	Flat score of 4	0
Crossbite			
Posterior impactions or	0	3	0
congenitally missing			
posterior teeth			
Total HLD Score			12

<sup>&</sup>lt;sup>5</sup> The HLD Form instructs the user not to score teeth in the category of ectopic eruption if they are scored under the category of anterior crowding. (Exhibit 1.)

<sup>&</sup>lt;sup>6</sup> The HLD scoring instructions state that to give points for anterior crowding, the anterior crowding must exceed 3.5 mm. (Exhibit 1.)

<sup>&</sup>lt;sup>7</sup> The provider declined to submit a Medical Necessity Narrative with the PA request. (Exhibit 1.)

Dr. Perlmutter testified that MassHealth only pays for cases involving handicapping malocclusions. The HLD Index, which measures the characteristics of the appellant's bite, requires a score of 22 for MassHealth to consider the appellant's condition to be physically handicapping. Dr. Perlmutter testified that while the appellant has crowding on top, it does not amount to 3.5 mm and therefore does not warrant points. He testified that he does not agree with the appellant's provider's measurements; the provider was generous with his scoring and scored incorrectly. Because the appellant's HLD score is below 22, MassHealth will not pay for comprehensive orthodontic treatment. Dr. Perlmutter testified that the appellant may be re-examined every six months and has until the age of 21 to be treated.

The appellant's representative opined that a third opinion is needed. She testified that Dr. Perlmutter works for MassHealth and it is in his interest to deny the appellant's request for braces. She testified that the denial letter she received from MassHealth indicates the appellant's HLD score is 24. She testified that the appellant's provider informed her that if the appellant does not get braces, his speech might be impaired. She testified that the appellant is not seeking braces for cosmetic purposes. The appellant's representative testified that the appellant needs braces to correct his overbite and overjet.

### **Findings of Fact**

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

- 1. The appellant, who is an individual under the age of 21, is a MassHealth member.
- 2. The appellant, through his orthodontic provider, requested PA for comprehensive orthodontic treatment on September 16, 2021.
- 3. The appellant's provider completed a MassHealth HLD Index for the appellant. The provider determined that the appellant ha an HLD score of 22.
- 4. When DentaQuest initially evaluated the PA request on behalf of MassHealth, its orthodontists determined that the appellant has an HLD score of 12.
- 5. MassHealth approves requests for comprehensive orthodontic treatment when the member has an HLD score of 22 or more.
- 6. MassHealth denied the appellant's PA request on September 17, 2021 and the appellant timely appealed the denial on October 1, 2021.
- 7. At hearing, a MassHealth orthodontic consultant reviewed the provider's paperwork, finding that the appellant has an HLD score of 12.

<sup>&</sup>lt;sup>8</sup> Dr. Perlmutter testified that this score is an error.

- 8. The appellant did not submit a Medical Necessity Narrative with his PA request.
- 9. While the appellant has maxillary anterior crowding, the crowding does not amount to 3.5 mm.
- 10. The appellant does not have any of the conditions that warrant automatic approval of comprehensive orthodontic treatment (cleft palate, severe maxillary anterior crowding greater than 8 mm, deep impinging overbite, anterior impaction, severe traumatic deviation, overjet greater than 9 mm, or reverse overjet greater than 3.5 mm).

# **Analysis and Conclusions of Law**

Regulation 130 CMR 420.431 contains the relevant MassHealth regulation which discusses how a MassHealth member (who, like the appellant, is under 21 years of age at the time of the PA request) may receive approval on a PA request for comprehensive orthodontic treatment. The regulation reads, in part, as follows:

The MassHealth agency pays for comprehensive orthodontic treatment, subject to prior authorization, once per member per lifetime under the age of 21 and only when the member has a handicapping malocclusion. The MassHealth agency determines whether a malocclusion is handicapping based on clinical standards for medical necessity as described in Appendix D of the *Dental Manual*. Upon the completion of orthodontic treatment, the provider must take post treatment photographic prints and maintain them in the member's dental record....

#### (130 CMR 420.431(C)(3).)

Appendix D of the Dental Manual is the "MassHealth Handicapping Labio-Lingual Deviations Index," which is described as a quantitative, objective method for measuring malocclusion. The HLD Index provides a single score, based on a series of measurements that represent the degree to which a case deviates from normal alignment and occlusion. MassHealth has determined that a score of 22 or higher signifies a severe and handicapping malocclusion. <sup>9</sup>

In this case, the appellant's provider found an overall HLD score of 22. After reviewing the provider's submission, MassHealth found an HLD score of 12. Upon review of the PA documents, including an x-ray and photographs, a different orthodontic consultant for MassHealth found a score of 12 on the HLD Index. Dr. Perlmutter credibly testified that the

<sup>&</sup>lt;sup>9</sup> MassHealth will also approve a PA request, without regard for the HLD numerical score, if there is evidence of a cleft palate, severe maxillary anterior crowding greater than 8 mm, deep impinging overbite, anterior impaction, severe traumatic deviation, overjet greater than 9 mm, or reverse overjet greater than 3.5 mm.

appellant's maxillary anterior crowding does not amount to 3.5 mm. In order to warrant points, the HLD Index instructs that the crowding must exceed 3.5 mm. Subtracting the five points for crowding, the appellant's HLD score falls below the necessary 22 points. Dr. Perlmutter's measurement of the appellant's crowding, and his overall determination of the appellant's HLD score, is consistent with the evidence presented.

As the appellant does not qualify for comprehensive orthodontic treatment under the HLD guidelines, MassHealth was correct in determining that he does not have a severe and handicapping malocclusion. Accordingly, this appeal is denied.

#### Order for MassHealth

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.

Samantha Kurkjy Hearing Officer Board of Hearings

cc:

DentaQuest, P.O. Box 9708, Boston, MA 02114-9708

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