

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2177993
Decision Date:	1/05/2022	Hearing Date:	11/22/2021
Hearing Officer:	Samantha Kurkijy		

Appearances for Appellant:




MassHealth Representative:

Dr. Harold Kaplan



*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:	1/05/2022	Hearing Date:	11/22/2021
MassHealth Rep.:	Dr. Harold Kaplan	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 July 26, 2021, MassHealth denied the appellant's Prior Authorization request for comprehensive orthodontic treatment. (Exhibit 1; Exhibit 4; 130 CMR 420.431.) The appellant filed a timely appeal on October 14, 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.

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. Harold Kaplan, 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 July 22, 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 she found a total score of 24, broken down as follows (Exhibit 1):

Conditions Observed	Raw Score	Multiplier	Weighted Score
Overjet in mm	3	1	3
Overbite in mm	1	1	1
Mandibular Protrusion in mm	3	5	15
Open Bite in mm	0	4	0
Ectopic Eruption (# of teeth, excluding third molars)	0	3	0
Anterior Crowding ¹	Maxilla: Mandible:	Flat score of 5 for each ²	5 ³
Labio-Lingual Spread, in mm (anterior spacing)	0	1	0
Posterior Unilateral Crossbite	No	Flat score of 4	0
Posterior impactions or congenitally missing posterior teeth	0	3	0
Total HLD Score			24

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):

Conditions Observed	Raw Score	Multiplier	Weighted Score
Overjet in mm	3	1	3

¹ 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.)

² The HLD Index states that to give points for anterior crowding, arch length insufficiency must exceed 3.5 mm. (Exhibit 1.)

³ The provider did not indicate whether she found maxillary or mandibular anterior crowding.

Overbite in mm	2	1	2
Mandibular Protrusion in mm	1	5	5
Anterior Open Bite in mm	0	4	0
Ectopic Eruption (# of teeth, excluding third molars)	0	3	0
Anterior Crowding ⁴	Maxilla: X Mandible: X	Flat score of 5 for each ⁵	0
Labio-Lingual Spread, in mm (anterior spacing)	2	1	2
Posterior Unilateral Crossbite	No	Flat score of 4	0
Posterior impactions or congenitally missing posterior teeth	0	3	0
Total HLD Score			12

Because it found an HLD score below the threshold of 22, MassHealth denied the appellant's PA request on July 26, 2021.⁶ The appellant submitted an appeal on October 14, 2021.

At hearing, Dr. Kaplan completed an HLD Index based on a review of the records. He determined that the appellant's overall HLD score is 20, as calculated below:

Conditions Observed	Raw Score	Multiplier	Weighted Score
Overjet in mm	2	1	2
Overbite in mm	1	1	1
Mandibular Protrusion in mm	2	5	10
Anterior Open Bite in mm	0	4	0
Ectopic Eruption (# of teeth, excluding third molars)	0	3	0
Anterior Crowding	Maxilla: √ Mandible: X	Flat score of 5 for each	5
Labio-Lingual Spread, in mm (anterior spacing)	2	1	2
Posterior Unilateral Crossbite	No	Flat score of 4	0
Posterior impactions or congenitally missing	0	3	0

⁴ 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.)

⁵ The HLD scoring instructions state that to give points for anterior crowding, the anterior crowding must exceed 3.5 mm. (Exhibit 1.)

⁶ The provider declined to submit a Medical Necessity Narrative with the PA request. (Exhibit 1.)

posterior teeth			
Total HLD Score			20

Dr. Kaplan testified that MassHealth only pays for cases involving severe, disfiguring, and handicapping malocclusions. The HLD Index, which measures the characteristics of the appellant's bite, requires a score of 22 in order for MassHealth to consider the appellant's condition to be physically handicapping. He testified that the biggest difference between his score and the appellant's provider's score is in the area of mandibular protrusion. Dr. Kaplan explained that a mandibular protrusion describes the relationship between the upper first molar and the lower first molar. He further explained that a mandibular protrusion occurs when the lower first molar is further than it should be. The provider found 3 mm of mandibular protrusion while Dr. Kaplan found 2 mm of mandibular protrusion. He noted that the photos of the appellant show the presence of a palate expander. Because the appellant's HLD score is below 22, MassHealth will not pay for comprehensive orthodontic treatment. Dr. Kaplan 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 testified that she and the appellant became residents of Massachusetts last year. She testified that the appellant had a bracket placed to make room for braces in the other state but he did not receive braces there. She testified that the palate expander is no longer in the appellant's mouth. She testified that in May 2017, the appellant had four teeth extracted because he was determined to be at high risk for overcrowding. She testified he was determined to be high risk for overcrowding on two other occasions and has had a total of five teeth extracted. The appellant's representative testified that the appellant will need to have more extractions and has pain in his teeth. She questioned why the appellant would have to suffer and wait to get braces. She opined that the appellant's provider should have an opportunity to be part of the hearing.⁷

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 July 22, 2021.
3. The appellant's provider completed a MassHealth HLD Index for the appellant. The provider determined that the appellant has an HLD score of 24.
4. When DentaQuest initially evaluated the PA request on behalf of MassHealth, its

⁷ If the appellant wanted his provider to participate in the hearing, he may have designated his provider his appeal representative or called her as a witness. However, he did not exercise these options. (See Exhibit 2.)

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 July 26, 2021 and the appellant timely appealed the denial on October 14, 2021.
7. At hearing, a MassHealth orthodontic consultant reviewed the provider's paperwork, finding that the appellant has an HLD score of 20.
8. The appellant did not submit a Medical Necessity Narrative from his pediatrician or his primary care provider with his PA request.
9. A mandibular protrusion describes the relationship between the upper first molar and the lower first molar. A mandibular protrusion occurs when the lower first molar is further than it should be.
10. The provider found 3 mm of mandibular protrusion while Dr. Kaplan found 2 mm of mandibular protrusion.
11. 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.⁸

In this case, the appellant’s provider found an overall HLD score of 24. 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 20 on the HLD Index. The biggest difference between the score of the provider and that of Dr. Kaplan concerns the issue of mandibular protrusion. As noted by Dr. Kaplan, a mandibular protrusion occurs when the lower first molar is further than it should be. Dr. Kaplan measured a mandibular protrusion of 2 mm and the provider measured a mandibular protrusion of 3 mm. Dr. Kaplan’s measurement of the appellant’s mandibular protrusion 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 Kurkijy
Hearing Officer
Board of Hearings

cc:

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

⁸ 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.