

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2178866
Decision Date:	3/22/2022	Hearing Date:	January 03, 2022
Hearing Officer:	Brook Padgett	Record Open:	February 03, 2022

Appellant Representative:



CCA Representative:

Cassandra Home, Appeals and Grievance
Supervisor



*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 – Dental Treatment
Decision Date:	3/22/2022	Hearing Date:	January 03, 2022
CCA Rep.:	C. Horne	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 of Adverse Action from Commonwealth Care Alliance (CCA)¹ dated November 02, 2021, denying a prior authorization request for dental services (D2751). (Exhibit 1).

The appellant appealed the action in a timely manner on November 22, 2021. (130 CMR 610.015(B); Exhibit 2).

Denial of a request for prior authorization is valid grounds for appeal. (130 CMR 610.032).

Action Taken by CCA

CCA denied the appellant's prior authorization request of a porcelain crown for tooth #14 and 15.

Issue

Is CCA correct in denying the appellant's prior authorization request?

¹ Commonwealth Care Alliance is a MassHealth managed care contractor as defined by regulations at 130 CMR 610.004 and described in regulations at 130 CMR 508.000.

Summary of Evidence

CCA was represented by their Appeals and Grievance Supervisor, who testified the appellant is 61 years old and a member of the OneCare program. On October 01, 2021, the appellant through his provider requested a full coverage crown for tooth #14 and 15. On October 18, 2021, CCA denied the request. CCA stated to be approved for the requested service there must be x-ray evidence that the tooth receiving the crown has no decay and the tooth receiving the crown must have at least 50% bone support. In this instance the record indicates that tooth #14 has decay on the root and the record does not demonstrate tooth #15 has at least 50% bone support. The criteria used for review is found in the Clinical Criteria section of the CCA Dental Provider Manual. CCA submitted into evidence Dental Provider Manual and Member Appeal exhibits. (Exhibit 4).

The appellant's dentist testified on behalf of the appellant and stated the appellant requires a crown on tooth #14 and 15 as his teeth are so severely worn down that they no longer have any enamel. The dentist stated the appellant has difficulty eating as any heat or cold causes him pain. The dentist maintains the appellant requires both crowns to prevent fracture and a loss of his posterior bite. (Testimony).

CCA responded that the evidence indicates the request is not medically necessary. CCA stated that if the provider can submit x-rays that show there is no decay on the root of tooth #14, and tooth #15 has at least 50% bone support the request would be reconsidered.

The representative stated she has already sent CCA all the required information, but she would do it again to demonstrate the appellant meets the requirements.

At the appellant's request the record remained open until February 03, 2022, to allow time to submit x-ray evidence of the lack of decay on the root of tooth #14, and at least 50% bone support surrounding tooth #15.²

No additional verifications were submitted by either the appellant or his representative within the required time limits.

Findings of Fact

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

1. The appellant is a member of CCA OneCare program. (Testimony).
2. The appellant is over 21 years of age. (Exhibit 4).

² The form extending the record open period to February 03, 2022, incorrectly specified x-ray evidence must demonstrate 15% bone support in error rather than the required 50% bone support.

3. Teeth #14 and 15 are posterior teeth.
4. The appellant's dental provider submitted a prior authorization request for a complete porcelain crown for tooth #14 and 15. (Exhibit 4).
5. The record indicates the appellant has decay on tooth #14 and less than 50% bone support on tooth #15. (Exhibit 4).

Analysis and Conclusions of Law

CCA is a MassHealth managed care contractor as defined by regulations at 130 CMR 610.004 and described in regulations at 130 CMR 508.000. The appellant is a member of the CCA OneCare program and submitted a request for prior authorization from his dental provider for a complete crown on tooth #14 and 15. This request was denied by CCA as the evidence indicates there is decay on the root of tooth #14 and there is less than 50% bone support for tooth #15.

Although the appellant and his provider were given additional time to submit verification that tooth #14 had no root decay and tooth #15 had more than 50% bone support, no additional evidence was submitted within the required time period.

MassHealth members aged 21 years and older are eligible for crowns on anterior teeth only and will not pay for crowns for a posterior tooth unless extraction (the alternative treatment) would cause undue medical risk for a member with or more specific medical conditions, such as hemophilia, radiation therapy, acquired or congenital immune disorder, severe physical disabilities, profound mental retardation and/or profound mental illness.³

The appellant is over 21 years old and has presented no evidence that he meets the undue medical risk criteria for a posterior crown as defined by MassHealth regulations.

130 CMR 420.425: Service Descriptions and Limitations: Restorative Services

The MassHealth agency considers all of the following to be components of a completed restoration and includes them in the fee for this service: tooth and soft-tissue preparation, cement bases, etching and bonding agents, pulp capping, impression, local anesthesia, and polishing. The MassHealth agency does not pay for restorations replaced within one year of the date of the completion of the original restoration.

(D) Root canal therapys, Posts, and Cores.

(1) Crowns, posts, and cores require prior authorization from the MassHealth agency. For crowns, posts, and cores, the MassHealth agency grants prior-authorization requests only when both the prognosis of the tooth and remaining dentition is excellent, and then only when the MassHealth agency determines that

³ See 130 CMR 420.425(D)(4).

conventional restorations cannot be placed due to extensive loss of tooth structure, or when an amalgam or a composite restoration with pins will not withstand the forces of mastication. Acrylic jacket crowns (laboratory processed only) are covered for members under age 21 only.

(3) Members under age 21 are eligible for crowns, posts, and cores on permanent incisors, cuspids, bicuspid, and first molars only.

(4) Members aged 21 years and older are eligible for crowns on anterior teeth only, subject to prior authorization. The MassHealth agency does not pay for crowns for a posterior tooth unless extraction (the alternative treatment) would cause undue medical risk for a member with or more specific medical conditions. The prior-authorization request must include documentation of these medical conditions, which include, but are not limited to:

- (a) hemophilia;
- (b) history of radiation therapy;
- (c) acquired or congenital immune disorder;
- (d) severe physical disabilities such as quadriplegia;
- (e) profound mental retardation; and
- (f) profound mental illness.

The appellant's request for a complete crown for tooth #14 and 15 fails to meet either the MassHealth regulations or the CCA Provider Manual criteria; therefore, this appeal must be denied.

Order for CCA

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.

Brook Padgett
Hearing Officer
Board of Hearings

cc: SCO Representative: Cassandra Horne, Commonwealth Care Alliance