

# Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2179458
<b>Decision Date:</b>	3/03/2022	<b>Hearing Date:</b>	01/21/2022
<b>Hearing Officer:</b>	Christine Therrien		

**Appearance for Appellant:**  
Pro se

**Appearance for MassHealth:**  
Dr. Sheldon Sullaway



*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

<b>Appeal Decision:</b>	Denied	<b>Issue:</b>	Dental
<b>Decision Date:</b>	3/03/2022	<b>Hearing Date:</b>	01/21/2022
<b>MassHealth's Rep.:</b>	Dr. Sullaway	<b>Appellant's Rep.:</b>	Pro se
<b>Hearing Location:</b>	Telephonic		

## 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 9/17/21, MassHealth denied the appellant's claim for payment because MassHealth determined that it is not a covered service (130 CMR 420.427(F) and Exhibit 1). The appellant filed this appeal in a timely manner on 12/22/21 (130 CMR 610.015(B) and Exhibit 2). Denial of a prior authorization is valid grounds for appeal (130 CMR 610.032).

## Action Taken by MassHealth

MassHealth denied the appellant's request for prior authorization for a maxillary denture.

## Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 420.427(F), in determining that the replacement maxillary denture is a covered service.

## Summary of Evidence

The MassHealth representative testified that the appellant submitted a claim for coverage for a maxillary denture that was created on 9/16/21 and MassHealth denied the request on 9/17/21. The MassHealth representative testified that the claim was denied because the service exceeds the benefit limit which is once per 84 months (7 years). The MassHealth representative testified that the appellant was issued a maxillary denture on 3/10/16.

The appellant testified that he thought MassHealth would pay for new dentures every five years, so he waited and got a new one made after five years. The appellant testified that he lost his denture while on vacation in 2017. The appellant testified that he left the denture in the hotel and it was gone when he returned later in the day. The appellant testified that he is out of work and the bill from the dentist has gone to collections.

## Findings of Fact

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

1. The appellant submitted a claim for coverage for a maxillary denture that was created on 9/16/21.
2. MassHealth denied the request on 9/17/21.
3. The claim was denied because the service exceeds the benefit limit which is once per 84 months (7 years).
4. The appellant was issued a maxillary denture on 3/10/16.

## Analysis and Conclusions of Law

130 CMR 420.428(A) General Conditions states that MassHealth will pay for dentures once per seven calendar years per member, subject to the age limitations specified in 130 CMR 420.428(B).<sup>1</sup>

130 CMR 420.428(F) Replacement of Dentures governs the replacement of dentures. MassHealth will pay for the necessary replacement of dentures. The member is responsible for denture care and maintenance. **The member, or persons responsible for the member's custodial care, must take all possible steps to prevent the loss of the member's dentures.** MassHealth does not pay for the replacement of dentures if the member's denture history reveals any of the following:

- (1) repair or reline will make the existing denture usable;
- (2) any of the dentures made previously have been unsatisfactory due to physiological causes that cannot be remedied;
- (3) a clinical evaluation suggests that the member will not adapt satisfactorily to the new denture;
- (4) no medical or surgical condition in the member necessitates a change in the denture or a requirement for a new denture;
- (5) the existing denture is less than seven years old and no other condition in this list applies;
- (6) the denture has been relined within the previous two years, unless the existing denture is at least seven years old;

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<sup>1</sup> 420.428(B) refers to members under the age of 21.

- (7) there has been marked physiological change in the member's oral cavity, any further reline has a poor prognosis for success; or  
(8) the loss of the denture was not due to extraordinary circumstances such as a fire in the home.

(emphasis added)

MassHealth provides coverage for dentures every 7 years. MassHealth last paid for a maxillary denture for the appellant on 3/10/16; which is within the past 7 years. The appellant does not fall into any category listed under 130 CMR 420.428(F), therefore the appellant is not currently eligible for MassHealth coverage for a replacement maxillary denture. Based on the evidence MassHealth was within regulatory authority in denying the appellant's claim request for replacement dentures. 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.

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Christine Therrien  
Hearing Officer  
Board of Hearings

cc:

MassHealth Representative: DentaQuest 1, MA