

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision: Denied

Appeal Number: 2202754

Decision Date: 9/8/2022

Hearing Date: 08/26/2022

Hearing Officer: Radha Tilva

Appearance for Appellant:
Pro se

Appearance for MassHealth:
Dr. Sheldon Sullaway, DentaQuest Rep.



*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 – partial denture
Decision Date:	9/8/2022	Hearing Date:	08/26/2022
MassHealth's Rep.:	Dr. Sheldon Sullaway	Appellant's Rep.:	Pro se
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 March 10, 2022, MassHealth denied appellant's prior authorization request for a maxillary partial upper denture (Exhibit 1). The appellant filed this appeal in a timely manner on April 11, 2022 (see 130 CMR 610.015(B) and Exhibit 2). The hearing was scheduled for August 26, 2022 with the Board of Hearings. Challenging a prior authorization request is valid grounds for appeal (see 130 CMR 610.032).

Action Taken by MassHealth

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

Issue

The appeal issue is whether MassHealth was correct in denying appellant's prior authorization request for a maxillary partial upper denture.

Summary of Evidence

The MassHealth representative that appeared by telephone testified he is a practicing dentist for over 40 years now a consultant for DentaQuest, the entity responsible for reviewing MassHealth's

prior authorization request for dental and orthodontic services. The MassHealth representative stated the following: On March 10, 2022 MassHealth received a prior authorization request for procedure code D5211 for a partial upper denture. The service was promptly denied by MassHealth because MassHealth pays for denture services once per seven calendar years per member pursuant to 130 CMR 420.428(F)(5). MassHealth paid for these dentures for appellant on May 6, 2021. No narrative was sent from the provider to explain what the problem was with the existing denture. The MassHealth representative further stated that appellant is responsible for the care of his dentures under 130 CMR 420.428(A).

The appellant appeared at hearing by telephone and testified to the following: a month into receiving his denture appellant had to have a tooth surgically removed. Appellant was not told at the time of surgery that he was supposed to keep his denture. After the tooth extraction, appellant went back to his dentist four months later and they told him that they needed his old denture so that they could add a tooth to the existing denture, however, appellant had misplaced the denture and could not find it.

Findings of Fact

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

1. On March 10, 2022 MassHealth received a prior authorization request for procedure code D5211 for a partial upper denture.
2. The request was promptly denied by MassHealth because MassHealth pays for a denture only once per seven years under the regulations.
3. MassHealth paid for a partial upper denture on May 6, 2021.
4. Appellant needed a tooth extracted approximately a month into having the denture made.
5. Appellant was not told that the existing denture would be used to place the new missing tooth.
6. Appellant misplaced/lost his denture.

Analysis and Conclusions of Law

Pursuant to 130 CMR 420.428(A) MassHealth pays for denture services once per seven calendar years per member. There is no dispute that appellant received his prior denture on May 6, 2021 however, appellant contends that he thought his old denture was unusable when he had surgery to remove a tooth. Appellant also testified that he lost his denture. 130 CMR 420.428(F) governs MassHealth's requirements for replacement dentures:

(F) Replacement of Dentures. The MassHealth agency pays 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. The provider must inform the member of the MassHealth agency's policy on replacing dentures and the member's responsibility for denture care. The MassHealth agency 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;
- (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.

The evidence does not support that appellant meets any of the requirements above. Absent any written evidence from the dentist that the existing denture was unusable and could not be fixed a replacement denture is not covered under the MassHealth guidelines. Appellant's own testimony supports that he lost the denture on his own and not due to an extraordinary circumstance, therefore, 130 CMR 420.428(F)(8) also does not apply. Based on the above regulations MassHealth was correct in denying appellant's prior authorization request for a partial upper denture. 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.

Radha Tilva
Hearing Officer
Board of Hearings

cc:
MassHealth Representative: DentaQuest 1, MA