

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	DISMISSED (with Orders for the Parties)	Appeal Number:	2203239
Decision Date:	7/7/2022	Hearing Date:	06/03/2022
Hearing Officer:	Christopher Taffe		

Appearance for Appellant:
Appellant (by phone)

Appearances for MassHealth/MCO:
Cassandra Horne, Appeals & Grievance Supervisor/Manager, & Jessica Medeiros, Sr. Director, Ancillary Programs – Dental Operations, on behalf of Commonwealth Care Alliance (both by phone)



*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:	DISMISSED (with Orders for the Parties)	Issue:	MCO – PA for Dental Request – Appealable Action – Jurisdiction
Decision Date:	7/7/2022	Hearing Date:	06/03/2022
MassHealth’s Rep.:	C. Horne & J. Medeiros	Appellant’s Rep.:	Pro Se
Hearing Location:	HarborSouth Tower, Quincy	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 30, 2022 titled “*Notice of Adverse Action - Denial of Level 1 Appeal*”, the Medicare-Medicaid Plan of Commonwealth Care Alliance (“CCA”), an Integrated Care Organization (“ICO”), sent Appellant a notice stating that it was denying his Level I appeal for Prior Authorization (PA)¹ request # A0211123137081. On April 29, 2022, Appellant filed an appeal request with the Board of Hearings seeking a Fair Hearing. See 130 CMR 610.015(B) and Exhibit 1.

The record reveals that this PA request sought approval of approximately 25 different dental services which were denied. For brevity, they will not be listed in their entirety, but they include:

- 16 crowns on 16 different teeth;
- an implant and related-implant services on one upper bicuspid tooth (#5);
- two interim partial dentures (one for the upper jaw and one for the lower jaw);
- a partial upper overdenture; and

¹ In this appeal, and in the context of many Fair Hearing requests involving dental benefits and services, PA can be used to refer to both “Prior Authorization” and “Prior Approval”. There are no substantive distinctions between these two phrases represented by the PA acronym, and they are often used interchangeably.

- clinical crown lengthening on two cuspid teeth (#6 and 22).

See Exhibits 1 and Exhibit 3, pages 1-2 and 64.²

The Board of Hearings (BOH) has limited jurisdiction over denials given to certain MassHealth members when those denials involve requests for assistance related to covered benefits from a Managed Care Contractor (including an ICO like CCA), with which the member is enrolled. See 130 CMR 610.032(B); 130 CMR 508.008 (discussing the role of ICO's in the MassHealth program); 130 CMR 508.011.

On its face, the denial action contained in the March 30, 2022 appears to be such an appealable action over which the Board of Hearings may have jurisdiction. However, as discussed more in the Summary and this decision, there is no proper appealable action to justify a fully substantive Fair Hearing decision by the Board of Hearings at this time.

Action Taken by MassHealth/CCA

CCA initially denied the Appellant's request for a series of more than 25 dental procedures, including certain procedures related to a dental implant.

Issues

The appeal issues are:

Whether it was proper and necessary for CCA to issue the March 30, 2022 notice (the appealable action at issue)? and

- If so, was CCA correct or justified in its decision to deny the various services at issue in this PA? and
- If not, does the Board of Hearings have jurisdiction over this matter and/or what is the appropriate outcome for this current Fair Hearing appeal request?

Summary of Evidence

Appellant is an adult MassHealth member, over the age of 21, who receives dental benefits as an enrollee in CCA's Medicare-Medicaid Plan, a plan which is sometimes referred to as a "OneCare Plan". For this matter, CCA is an ICO, and an ICO is a specific type of Managed Care Contractor (MCC) that offers benefits to individual enrollees who have both Medicare and Medicaid benefits; the ICO will generally deliver a member's primary care and will authorize, arrange, integrate, and coordinate the provision of all covered services for the member available through his or her health insurance benefits. Appellant, as a MassHealth member, has been an enrollee in CCA since February of 2014.

² The most readable list/summary of the approximately 30 services is in Exhibit 3, pages 1 and 2.

Appellant appeared and represented himself at hearing. CCA was represented at hearing by Ms. Horne, who is an Appeals & Grievances Supervisor/Manager for the CCA's Operations Department, and Ms. Medeiros, who is a Senior Director at CCA affiliated with its Dental Program. Both parties appeared by phone and submitted pre-hearing submissions; CCA's submission is Exhibit 3 and Appellant's submission is Exhibit 4. [Both submissions consist of several parts and documents, and Appellant's submission had sub-exhibits which he marked as Exhibits A through E, some of which had "Exhibit" stickers already on them, presumably from a prior appeal at BOH, discussed below.]

Aside from the cover letters and one five-sentence letter dated April 20, 2022, the entirety of the contents submitted by the parties in Exhibits 3 and 4 are all from March 29, 2022 or earlier. The parties already had a Fair Hearing before the Board of Hearings on March 29, 2022 (Appeal # 2201491 before Officer Kallianidis) over the same Prior Authorization that is at issue in this hearing and in the appealable action notice dated March 30, 2022. As discussed in more detail below, that March 29, 2022 hearing resulted in a withdrawal, but inadvertently led to the March 30, 2022 appealable action notice, which in turn unnecessarily led to this more current appeal.

As to the necessary background history of PA # A0211123137081, Appellant's dental provider at Tufts Dental School (Tufts) filed this PA³ first on or around November 24, 2021 prior approval or prior authorization for 31 dental services. See Exhibit 3, pages 1-2. On or around November 29, 2021, CCA issued an approval notice, which approved some of the services including root canal treatment on tooth # 9 as well as two extractions on teeth # 12 and 19, and a mouth splint.⁴ CCA also sent a second notice denying the remaining 25 services. See Exhibit 3, pages 11-13.

Appellant verbally requested an internal or Level I appeal with CCA on or around November 26, 2022.⁵ See Exhibit 3, pages 43 and 51. On December 1, 2021, CCA issued a Level II denial for this PA. See Exhibit 3, pages 84 to 87. This December 1, 2021 Level II denial notice gave an appeal right to the Board of Hearings. This December 1, 2021 notice cited the approximately 25 services⁶ that were not approved from the initial PA submission.

Just over two months later, on February 3, 2022, CCA issued **another** Level II denial for this same PA. See Exhibit 3, page 64 to 67. The February 3, 2022 Level II denial notice is identical to the December 1, 2021 Level II denial notice, other than the updated date. Compare Exhibit 3 pages 64

³ **The entire record reveals that there is just one PA number (# A0211123137081) at issue in this matter, and that this sole PA (# A0211123137081) was the subject of the March 29, 2022 Fair Hearing.** This is the same and only PA that appears on all correspondence in Exhibits 1, 3 and 4 that mentions a PA #. As there is just this one relevant PA # in this issue, it will be referred to as "the PA" for the remainder of the decision.

In Exhibit 3, page 9 and 10, there is an approval notice dated November 29, 2021 for extraction of teeth #12 and 19, and certain root canal treatment on tooth # 9

⁴ Three of the services requested, related to extraction of teeth # 12 and 19, and a mouth splint, did not require prior approval to be granted through the PA process.

⁵ It is a bit unclear how Appellant verbally requested an appeal on November 26, 2021 three days BEFORE the date of the November 29, 2021 notice, but it is presumed that CCA communicated verbally its denial decision to Appellant and/or his dentist at some point before issuing the paper confirmation of its denial on November 29, 2022.

⁶ These are the services described in the Jurisdiction section.

to 67 with 84 to 87.⁷ This notice also denies the approximate 25 dental services discussed above.

Appellant appealed this February 3, 2022 Level II denial notice to the Board of Hearings on March 1, 2022, leading to BOH Appeal # 2201490. The Fair Hearing was held on this other appeal on March 29, 2022.

As verified by the Appellant's documentation in this appeal (marked as Exhibit 4 of this appeal), Appellant withdrew that earlier appeal on March 29, 2022. The last page of Appellant's Exhibit 4 submission has a copy of the withdrawal notice written up by Officer Kallianidis and sent to Appellant on March 29, 2022. The withdrawal form, dated March 29, 2022,⁸ states in its substantive entirety the following:

*"I hereby withdraw my appeal for the following reason(s):
CCA has agreed to work with my dental provider to come up with an alternative treatment plan that is beneficial to me and acceptable to both parties." See Exhibit 4.*

On March 30, 2022, the very next day following the first hearing date, CCA issued the Level II denial notice which is the subject of this appeal. When filing his appeal in April 2022 of this notice, Appellant submitted only page 1 of this notice. (For reasons unknown, CCA did not include a copy of the March 30, 2022 notice in its Exhibit 3 packet.) **Page 1 of this March 30, 2022 notice, which lists the services being requested, is identical to both the December 1, 2021 Level II notices and February 3, 2022 Level II notices.**⁹ The same PA or "Authorization Requested" number appears. Compare Exhibit 1 with Exhibit 3, pages 64 and 84.

The March 30, 2022 notice reiterates that the Level I was denied, but testimony at hearing verifies that the Level I denial was the one that occurred in December 2021 and the period before for the March 29, 2022 hearing. CCA could not explain why this notice was generated one day after the Fair Hearing, and, with its testimony, CCA did not describe any events or history that occurred between the hearing date of March 29, 2022 and the March 30, 2022 date of the notice which led to this March 30, 2022 notice.

Appellant filed this current appeal on April 29, 2022. See Exhibit 1. At hearing, Appellant expressed displeasure at the March 30, 2022 notice suggesting that CCA did not follow its

⁷ For some reason, CCA included the Spanish-versions of these notices in Exhibit 4, even though this Appellant did not request a Spanish-speaking interpreter. The Spanish versions of these December 1, 2021 and February 3, 2022 notices also appear identical. Compare Exhibit 3, pages 74-77 and pages 94-97. It is unknown why, but CCA submitted versions of these two notices as well as the November 29, 2021 Level I denial) in Exhibit 3 in both English and Spanish – it appears to simply be a waste of paper that is automatically generated, and CCA is encouraged to minimize the amount of unnecessary and duplicative paperwork when making hearing exhibits per 130 CMR 610.062.

⁸ The withdrawal form also indicates that Appellant appeared telephonically by phone at the March 29, 2022 hearing and did not physically sign it. It was signed by Hearing Officer Kallianidis on behalf of the telephonic appellant, and a copy was mailed to Appellant after the conclusion of the March 29, 2022 hearing.

⁹ Although pages after page 1 were not produced by Appellant, they are usually identical boilerplate pages, describing the appeal right options and stating generically what happens after an appeal right is exercised. See Exhibit 3, pages 65 to 67 and 85 to 87 for examples.

agreement and come up with an acceptable treatment plan as they were required to do per the March 29, 2022 hearing.

At hearing, CCA testified to its efforts after the March 30, 2022 hearing, which indicated attempts to contact Appellant's dental provider at Tufts in the last weeks of May 2022. There were also discussions by the parties about emails that they tried to send to one another in April 2022, as well as discussion about whether certain emails were received. Appellant questioned why greater emails or followup was never done by CCA. CCA also testified, that as of this June 3, 2022 hearing date, they hadn't received anything from the provider at Tufts regarding an alternate treatment plan. CCA testified that the plan of crowns, or crowns in conjunction with a denture or upper implant, may not work due to the limited or current tooth structure and health of the gums and teeth, and that as discussed at the last hearing, an alternative plan was needed. CCA also mentioned that its decision to considering when to approve implant services are very limited, and usually reserved for members with other types of dental history and a greater need for a implant.

Appellant testified to his frustration and stated that there was great medical need in that he was a teeth grinder, had GERD, and was a type 1 (insulin-dependent) diabetic for over 46 years who was currently using an insulin pump, and that his health condition required that he be able to best chew his food for proper digestion and nutrition. The letter from his dental provider in Exhibit 4 (which is dated November 23, 2021, more than three months prior to the denial notice at issue) states that *"We cannot only treat one tooth at a time for this patient as he has loss of vertical dimension and we need to correct the occlusion plane to restore form and function of the dentition."* Appellant submitted several documents in Exhibit 4 in support of the medical need and benefits of chewing for his health; none of the articles mention the specific dental treatments (like crowns and implants).¹⁰ In addition to the medical reasons, Appellant wants his treatment plan approved, in part because of the improper notice sent by CCA and in part because of how he has been treated by CCA throughout this process going back to last year and into May 2022.

Findings of Fact

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

1. At all times relevant, Appellant is a CCA enrollee who receives his Medicaid benefits and services through this ICO. (Testimony and Exhibit 3).
2. On or around November 24, 2021, Appellant's dental provider from Tufts submitted a PA for 31 dental services. (Testimony and Exhibit 3)
3. On or around November 29, 2021, CCA issued an approval notice, which approved some of the services including root canal treatment on tooth # 9 as well as two extractions on teeth # 12 and 19, and a mouth splint. CCA also sent a second notice denying the remaining 25 services.

¹⁰ Many of these documents submitted by Appellant in Exhibit 4 were broken into subparts and labelled with exhibit stickers. Presumably these exhibit stickers were from the prior Fair Hearing on March 29, 2022 and were resubmissions.

(Testimony and Exhibit 3)

4. The PA # involved in that November request is PA # A0211123137081. (Testimony and Exhibit 3)
 - a. There is no evidence of any new or different PA request or number in any subsequent action between the parties. (Testimony and Exhibits 3 and 4)
5. Appellant exercised his right and internally appealed to CCA the November 29, 2022 denial for a Level I appeal. (Testimony and Exhibit 3)
6. Subsequently, on December 1, 2022, CCA denied the Level I appeal request, and sent Appellant a notice which offered Appellant a Level II appeal request over the approximate 25 dental services that were denied. (Testimony and Exhibit 3)
 - a. The services denied included:
 - i. 16 crowns on 16 different teeth;
 - ii. an implant and related-implant services on one upper bicuspid tooth (#5);
 - iii. two interim partial dentures (one for the upper jaw and one for the lower jaw);
 - iv. a partial upper overdenture; and
 - v. clinical crown lengthening on two cuspid teeth (#6 and 22).
7. This December 1, 2021 Level II denial notice was subsequently reissued in substantive identical form by CCA both on February 3, 2022 and March 30, 2022. Both the February 2022 and March 2022 Level II denial notices were substantively identical to the December 1, 2021 notice in that that referred to the exact same PA number and the exact same treatments which were denied. (Exhibit 3)
 - a. The only thing different between the December 1, 2021 Level II denial notice, the February 3, 2022 Level II denial notice, and the March 30, 2022 Level II denial notice were the dates on page 1. (Exhibits 1 and 3)
8. Appellant previously appealed the February 3, 2022 denial notice to the Board of Hearings and had a Fair Hearing appeal hearing on that matter on March 29, 2022, which was Board of Hearings Appeal # 2201490. (Testimony and Exhibits 3 and 4)
9. The March 29, 2022 appeal ended after hearing with a withdrawal agreement. The text of the withdrawal agreement form for Appellant states that *"I hereby withdraw my appeal for the following reason(s):*
CCA has agreed to work with my dental provider to come up with an alternative treatment plan that is beneficial to me and acceptable to both parties." (Exhibit 4)
10. For reasons unknown, the day after the March 29, 2022 hearing, CCA issued the March 30, 2022 Level II denial notice, leading to this current appeal. (Testimony and Exhibits 1 and 3)

11. There was no new PA or submission for an alternative plan made or submitted by Appellant's provider after the March 29, 2022 hearing, nor was there a new Level I (internal CCA appeal) process which occurred between March 29, 2022 and March 30, 2022. (Testimony and Exhibits 3 and 4)
12. There is no evidence suggesting that, since the first hearing date of March 29, 2022, Appellant and his dental provider have requested a specific modified treatment plan that is different in any way from the same treatment plan in PA # A0211123137081. Appellant is open to the idea of dental treatment that addresses his medical conditions, but no specifics have been made discussing what is included with that treatment.

Analysis and Conclusions of Law

MassHealth members who have both Medicare and Medicaid, like the Appellant, may enroll in an ICO pursuant to 130 CMR 508.007. After a member enrolls, the ICO will deliver the member's primary care and will authorize, arrange, integrate, and coordinate the provision of all covered services for the member. Such covered services may encompass specialty, behavioral health, and long-term-care services; dental benefits are one such included medical service. Whenever an ICO like CCA makes an adverse benefit decision, it must provide notice to the affected MassHealth member. 130 CMR 508.011. An ICO has 30 days to resolve any internal appeals, and the MassHealth member then has 120 days to request a "Level II" Fair Hearing from the Board of Hearings, which is what happened here with Appellant's dental request. See 130 CMR 508.012; 130 CMR 610.015(B)(7).

As to any prior authorization or PA request, the MassHealth program is generally required to cover services and treatments for its Medicaid beneficiaries that are "*medically necessary*". See 130 CMR 450.204. Furthermore, additional guidance "*about the medical necessity of MassHealth services are contained in other MassHealth regulations and medical necessity and coverage guidelines.*" See 130 CMR 450.204(D). With the explicit referenced to "*coverage guidelines*" within this section of the regulation, it appears that the regulatory law allows the MassHealth program to have coverage exclusions within other agency regulations and relevant documentation.

As one example, within the MassHealth dental program alone, there are many exclusions (or non-covered services) and restrictions that the MassHealth agency has within its dental regulations which the MassHealth agency may follow when handling requests for its members. This list of excluded dental services is greater for adults (like Appellant) who are over the age of 21 than it is for young adult and children who are Medicaid recipients in the Commonwealth. See 130 CMR 420.421. For example, MassHealth does not pay for implants of any type. See 130 CMR 420.421(B)(5). However, MassHealth may pay for crowns or other related services when medically appropriate. See e.g., 130 CMR 420.426 (describing endodontic services and limitations).

Even though a Medicaid beneficiary like Appellant over the age of 21 has no entitlement to consideration under the MassHealth Dental Program's regulations for implant treatment, both the denial notice and testimony at hearing indicates that CCA has agreed to potentially cover some form

of implant services for its enrollees on a limited basis. In looking at CCA's decision, it is important to note that MassHealth's required covered services may set the floor or minimum of such benefits, but that CCA may choose to go above and beyond these required benefits, and offer more in dental services to its enrollees, and may create standards for when those extra benefits may be used. However, since the additional benefits services are not mandated by the state's Medicaid program, there is no entitlement to such a service.¹¹

Before going further into the substantive nature of Appellant's request, there is a need to first look at jurisdiction to see whether BOH has any power to review any issue in the March 30, 2022 notice, which is the appealable action for this appeal.

The Board of Hearings has limited jurisdiction, or power, to hear and resolve disputes involving an SCO or other type of Managed Care Contractor, such as what we have here between Appellant and CCA. The relevant jurisdictional limit and scope from 130 CMR 610.032(B) is reprinted below:

610.032: Grounds for Appeal

...

*(B) Members enrolled in a managed care contractor have a right to request a fair hearing for any of the following actions or inactions by the managed care contractor, **provided the member has exhausted all remedies available through the managed care contractor's internal appeals process** (except where a member is notified by the managed care contractor that exhaustion is unnecessary):*

...

(2) a decision to deny or provide limited authorization of a requested service, including the type or level of service, including determinations based on the type or level of service, requirements for medical necessity, appropriateness, setting, or effectiveness of a covered benefit;

(3) a decision to reduce, suspend, or terminate a previous authorization for a service; ...

(Bolded and underlined emphasis added.)

The Board of Hearings may also dismiss an appeal when developments reveal there is no appealable action that needs to be resolved. See 130 CMR 610.035, which reads in relevant part as follows:

610.035: Dismissal of a Request for a Hearing

(A) BOH will dismiss a request for a hearing when

...

(5) the stated reason for the hearing request is outside the scope of 130 CMR 610.000 as set forth in 130 CMR 610.003;

(6) BOH has conducted a hearing and issued a decision on the same appealable action arising out of the same facts that constitute the basis of the request;

...

¹¹ This background is noted simply to point out for Appellant how any treatment plan requesting implant services, like the one in the PA at issue, may wind up never being approved for a MassHealth member. While there may be limited exceptions, I find no need to further discuss that in this decision.

(8) BOH learns of an adjustment or action that resolves all of the issues in dispute between the parties; ...

In this case, I find there are grounds to dismiss the current appeal. First of all the issuance of the March 30, 2022 notice appears to have been an administrative error, creating an unnecessary appeal. There was no Level I appeal done between March 29, 2022 and the March 30, 2022 date of its notice so there is no substantive new action underlying the March 30, 2022 notice and 130 CMR 610.032(B) has not been satisfied. As evidence of this, the exact same PA number that appears in the March 30, 2022 notice also appears in the February 3, 2022 notice (which was already appealed), as well as the November 29, 2022 denial notice. Thus, there is no new request or dispute where BOH is compelled to weigh in and offer a review. I also don't find any evidence of there being an exhaustion of the Level I appeal right in the actions after March 29, 2022.

Furthermore, and perhaps more compelling, as evidenced via the withdrawal of March 29, 2022 hearing, there clearly was an agreed-upon adjustment which attempted to resolve this matter. There is no legal basis to have an appeal withdrawal in a Fair Hearing setting one day, and then have it immediately followed by a new notice one day later (which is the original appealable action) in order to revive the very same dispute. Had the parties wanted to do that, or had the first Hearing Officer meant to do that, the parties and/or the Hearing Officer could have sought or opted for a continuance of the first appeal under 130 CMR 610.074. That was not done here, as indicated by the text of the withdrawal form as found in Exhibit 4.¹² Moreover, the withdrawal form indicates that both parties agreed that there would be an “*alternative*” treatment plan. In this appeal, the March 30, 2022 denial notice in Exhibit 1 contains the same services that were previously appealed; there is not one difference. There is no need to re-litigate, or for this Hearing Officer to weigh in on, an appealable action derived from the original treatment plan, prior authorization request, and dispute at issue in Appeal 2221492. For those reasons, I find this appeal and Appellant's request for action by the Board of Hearings to be premature or not appropriate per 130 CMR 610.036(A)(5), (6), and (8). There is no right to a Fair Hearing because there was an agreement reached by the parties. If Appellant believes that the agency is violating the agreement, the Appellant may seek other avenues (such as a grievance) for relief. Appellant may also need to live up to his end of the agreement and work with his provider to submit a new and alternative dental request that is acceptable to both he and his dental provider; if that new request or PA is denied, and if all internal appeal rights and then exhausted with CCA then and only then Appellant may have grounds to discuss the substantive dental issues with the Board of Hearings. Based on the above, this appeal is not appropriate for the Board of Hearings and is thus DISMISSED.

There likely may be an argument, from the Appellant, that believes this Fair Hearing decision should rule on the more substantive nature of this claim. To save the parties time I will state that were I to go down that road, I would find nothing in the MassHealth regulations which compels

¹² The parties may have more of an issue with the vagueness and brevity of the written terms of the withdrawal in Appeal # 2221492. but that is not something that can be addressed in this appeal. If need be, that is something that could have been brought up to the former Hearing Officer or his supervisors immediately upon receipt. But in this case, the Appellant received the withdrawal notice shortly after hearing, and then decided to file a new appeal request on April 30, 2022.

CCA to approve any dental plan that involves an implant. As discussed earlier, dental implants are not mandated coverage under the Medicaid guidelines. See 130 CMR 420.421(B)(5). Without the implant, it seems inappropriate for me to weigh in on and approve the remainder of dental services requested in this original plan, especially as this is one complex PA with multiple parts, and I'm not sure what the alternative plan would need.¹³ Thus, to the extent one wants a substantive opinion, I will note that this appeal would otherwise be "Denied" based on the current record, especially as there has been no new plan offered by Appellant's treating dental provider.

In conclusion, I will note that the parties reached an agreement and that agreement consisted of the parties working on an alternate plan. To the extent that a new plan is formulate or requested, a new Prior Authorization must be requested at some point. See 130 CMR 420.431. Appellant is required to work with and remind his dental provider on creating an alternative plan that his dentist wants to do, and the Appellant cannot just suggest that CCA must figure it out with limited or no communication from him and/or his treating dental provider. As stated at hearing, CCA will need to see the new plan to see if it can be accommodated as part of the Prior Authorization process. If and when there is a new PA, and if it is denied because of a dispute the two sides, then and only then can the Appellant ask the Board of Hearings to step in and hold a Fair Hearing on this matter.

In an attempt to help the two sides move ahead with this matter, I have crafted Orders to try to improve the current status quo and move the parties forward as part of this DISMISSAL.

¹³ As also stated above and mentioned briefly at hearing, CCA does offer implants in some contexts, and perhaps there is some future alternative plan in which an implant may be part of the solution. However, a great deal of deference will be given to the Respondent ICO's judgment when they want to offer such an additional benefit to CCA enrollees.

Order for Appellant

Work with your dental provider at Tufts and ask the provider to either contact or respond to CCA or to submit a new Prior Authorization with an alternative treatment plan within 30 days of the date of this decision.

Order for MassHealth/CCA

Do NOT issue any more notices on PA # A0211123137081 that contain explicit appeal rights to the Board of Hearings. Reach out at least one more time to Appellant's dental provider within the next 30 days following the date of this decision.

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.

Implementation of this Decision

If this decision is not implemented within 30 days after the date of this decision, you should contact Commonwealth Care Alliance – Member Services at 1-866-610-2273.¹⁴ If you experience problems after 30 days with the implementation of this decision, you should report this in writing to the Director of the Board of Hearings at the address on the first page of this decision.

Christopher Taffe
Hearing Officer
Board of Hearings

cc: Appeals Coordinator @ CCA

¹⁴ This contact information and phone number is from both the December 1, 2022 and February 3, 2022 Level II denial notices in Exhibit 3 which state this CCA phone number may be in service from 8:00 AM to 8:00 PM seven days a week. The same notice also suggests that other places to potentially get help with implementation and/or ICO issues may include (1) the "My Ombudsman" office (1-855-781-9898, Monday through Friday, 9:00 AM to 4:00 PM) or (2) MassHealth Customer Service (1-800-841-2900, Monday through Friday, 8:00 AM to 5:00 PM).