

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2203696
Decision Date:	7/7/2022	Hearing Date:	06/27/2022
Hearing Officer:	Sara E. McGrath		

Appearances for Appellant:
[Redacted] Appellant's Mother

Appearances for MassHealth:
Dr. Harold Kaplan



*Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
Board of Hearings
100 Hancock Street
Quincy, MA 02171*

APPEAL DECISION

Appeal Decision:	Denied	Issue:	Prior Authorization for Orthodonture
Decision Date:	7/7/2022	Hearing Date:	06/27/2022
MassHealth Rep.:	Dr. Harold Kaplan	Appellant Rep.:	Appellant's Mother
Hearing Location:	Board of Hearings (Remote)		

Authority

This hearing was conducted pursuant to Massachusetts General Laws Chapters 118E and 30A, and the rules and regulations promulgated thereunder.

Jurisdiction

Through a notice dated March 1, 2022, MassHealth denied the appellant's request for prior authorization of comprehensive orthodontic treatment (Exhibit 1). The appellant filed a timely appeal on May 11, 2022 (130 CMR 610.015(B); Exhibit 2). Denial of a request for prior approval is a valid basis for appeal (130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied the appellant's request for prior authorization of comprehensive orthodontic treatment.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 420.431(C), in determining that the appellant is ineligible for comprehensive orthodontic treatment.

Summary of Evidence

MassHealth was represented at hearing by Dr. Harold Kaplan, an orthodontic consultant from DentaQuest, the MassHealth dental contractor. The evidence indicates that the appellant's provider submitted a prior authorization request for comprehensive orthodontic treatment, together with X-rays and photographs, on April 4, 2022. As required, the provider completed the Handicapping Labio-Lingual Deviations (HLD) Form, which requires a total score of 22 or higher for approval.¹ However, the provider did not include a score on his HLD Form, but rather indicated that the appellant is eligible for automatic approval because he has overjet (greater than 9 mm), as well as posterior crossbite of three or more maxillary teeth per arch (Exhibit 3).

Dr. Kaplan testified that when DentaQuest initially evaluated this prior authorization request on behalf of MassHealth, it denied the request without calculating an HLD score (Exhibit 1). Dr. Kaplan explained that DentaQuest denied the request because it is too early for the appellant to start comprehensive orthodontic treatment. The appellant's first bicuspid, also called premolars, have not erupted yet, and thus he is not ready for comprehensive treatment. Dr. Kaplan explained that the appellant is a candidate for early, or interceptive, treatment.

The appellant's mother, who appeared telephonically, testified with the assistance of a Hindi interpreter, and explained that the appellant's orthodontist told her the appellant needs treatment now. The mother testified that the appellant cannot close his mouth because of his teeth, and his lips are always cracked and dry. She also stated that the appellant's treatment has already begun.

Findings of Fact

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

1. On February 26, 2022, the appellant's orthodontic provider submitted a prior authorization request for comprehensive orthodontic treatment to MassHealth.
2. The appellant's provider completed a Handicapping Labio-Lingual Deviations (HLD) Form for the appellant. The provider did not include an HLD score, but rather indicated that the appellant has overjet (greater than 9 mm), as well as posterior crossbite of three or more maxillary teeth per arch (either of which would result in automatic approval under the HLD guidelines).
3. On March 1, 2022, MassHealth notified the appellant that the prior authorization request

¹ The form also includes space for providers to indicate whether, regardless of score, a patient has one of the thirteen conditions (described below) that would result in automatic approval, and/or to provide a narrative to explain why orthodontic treatment is otherwise medically necessary. The provider in this case alleged the presence of an auto-qualifying condition but did not complete a medical necessity narrative (Exhibit 3).

had been denied.

4. On May 11, 2022, the appellant filed a timely appeal of the denial.
5. In preparation for hearing on June 27, 2022, a MassHealth orthodontic consultant reviewed the provider's paperwork and agreed with MassHealth's decision to deny the request for comprehensive orthodontic treatment.
6. The appellant's first bicuspid, or premolars, have not yet erupted.

Analysis and Conclusions of Law

130 CMR 420.431(C) states, in relevant part, as follows:

The MassHealth agency pays for comprehensive orthodontic treatment only once per member under age 21 per lifetime and only when the member has a severe and handicapping malocclusion. The MassHealth agency determines whether a malocclusion is severe and handicapping based on the clinical standards described in Appendix D of the *Dental Manual*. . . .

Comprehensive orthodontic care should commence when the first premolars and 1st permanent molars have erupted. It should only include the transitional dentition in cases with craniofacial anomalies such as cleft lip or cleft palate. Comprehensive treatment may commence with second deciduous molars present.

The record reflects that the appellant's first premolars have not yet erupted (Exhibit 3). Further, there is no evidence of a craniofacial anomaly. As such, the appellant has not demonstrated that he meets the MassHealth criteria for approval of comprehensive orthodontic treatment. MassHealth's denial of the prior authorization request was proper.

This appeal is therefore 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.

Sara E. McGrath
Hearing Officer
Board of Hearings

cc: DentaQuest