Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2204631
Decision Date:	7/28/2022	Hearing Date:	07/27/2022
Hearing Officer:	Scott Bernard		

Appearance for Appellant: (Father) *via* telephone Appearance for MassHealth: Dr. Harold Kaplan *via* telephone

Interpreter: Turkish



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 (PA) for Comprehensive Orthodontic Treatment
Decision Date:	7/28/2022	Hearing Date:	07/27/2022
MassHealth's Rep.:	Dr. Harold Kaplan	Appellant's Rep.:	
Hearing Location:	Quincy Harbor South		

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 May 31, 2022, denied the appellant's PA request for comprehensive orthodontic treatment because the submitted documentation did not support the medical necessity of comprehensive orthodontic treatment. (See 130 CMR 420.431 and Exhibit (Ex.) 1; Ex. 5, pp. 3-5). The appellant filed this appeal in a timely manner on June 21, 2022. (See 130 CMR 610.015(B) and Ex. 2). Denial of assistance is valid grounds for appeal (see 130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied the appellant's PA request for comprehensive orthodontic treatment.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 420.431, in denying comprehensive orthodontic treatment.

Summary of Evidence

The appellant is an individual under the age of 21. (Ex 5, p. 3). The appellant's treating orthodontist submitted a PA request for comprehensive orthodontic treatment, including relevant forms,

Page 1 of Appeal No.: 2204631

photographs, and x-rays on May 26, 2022. (Ex. 5, pp. 8-12).

The MassHealth representative, a licensed orthodontist, testified to the following. MassHealth usually does not pay for orthodontic treatment. MassHealth will only pay if they feel if the malocclusion is severe, disfiguring or handicapping. The question was not whether the member needed orthodontic treatment but whether the malocclusion was severe enough for MassHealth to pay for the treatment. The MassHealth representative stated that MassHealth determines this using HLD formula. The HLD formula lists all different conditions that can exist in the mouth. The more any one condition deviates from normal, the more points it gets. Overall, the HLD score has to equal or exceed 22 points for MassHealth to pay for treatment. The treating source and the initial MassHealth evaluator came to the following conclusions:

Overjet in mm	5	4
Overbite in mm	5	6
Mandibular Protrusion in mm (x 5)	0	0
Open Bite in mm (x 4)	0	0
Ectopic Eruption (# of teeth x 3)	3	3
Anterior Crowding:	5	0
• Maxilla		
Mandible		
Labio-Lingual Spread in mm	4	4
Posterior Unilateral Crossbite x 4	0	0
Posterior Impactions or Congenitally Missing Posterior Teeth x 3	0	0
Total HLD Score (Need 22 or Over)	22	17

(Ex. 5, pp. 9, 13).

The MassHealth representative stated that he too looked carefully at the x-rays and photographs. He stated that his HLD score was 18. The MassHealth representative stated that the treating orthodontist scored 3 points for an Ectopic Eruption and 5 points for Anterior Crowding. The MassHealth representative stated that according to the regulations this cannot be done.¹ The MassHealth representative stated that the appellant did have an Ectopic Eruption that should be scored a 3 and no Anterior Crowding. The MassHealth representative stated that the appellant did have an Ectopic Eruption that should be scored a 3 and no Anterior Crowding. The MassHealth representative stated that he agreed with the first MassHealth

¹ This is actually stated in the HLD form itself. (See Ex. 5, pp. 9, 13). It must be stated, however, that the treating orthodontist properly score Anterior Open Bite at 0. (Ex. 5, p. 9). The treating orthodontist scored Anterior Crowding at 5, and there does not appear to be a prohibition on this. (Id.).

evaluator's scoring, except he measured the labio-lingual spread as 5 points rather the 4 points.²

The appellant's representative stated that he knew that MassHealth normally does not pay for braces. He recognized that it is a very difficult process. The appellant's dentist recommended that the appellant receive braces after replacing a filling. The appellant's representative was concerned that it will be more difficult to fix damage to the teeth as the appellant gets older. The appellant's representative stated that the dentist also submitted a similar request for braces for the appellant's representative's older son, and his request was approved. The appellant's representative thought that his younger son had more problematic teeth and was concerned that somehow MassHealth confused the two submissions. The dentist who submitted both sons' requests for braces told the appellant's representative that he did not think it was likely that his older son would be approved and yet the older son was approved. The appellant's representative.

The MassHealth representative responded by stating that MassHealth did not mistakenly confuse the two brothers' submissions. The MassHealth representative stated that MassHealth will pay for orthodontic examinations every six months until the appellant is 21 and that the appellant's representative should have the appellant re-examined in November, when the appellant would be eligible for his next examination.

Findings of Fact

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

- 1. The appellant is an individual under the age of 21. (Ex 5 p. 3).
- 2. The appellant's treating orthodontist submitted a PA request for comprehensive orthodontic treatment, including relevant forms, photographs, and x-rays on May 26, 2022. (Ex. 5, pp. 8-12).
- 3. The MassHealth representative was a licensed orthodontist. (Testimony of the MassHealth representative).
- 4. MassHealth usually does not pay for orthodontic treatment. (Testimony of the MassHealth representative).
- 5. MassHealth will only pay if they feel if the malocclusion is severe, disfiguring or handicapping. (Testimony of the MassHealth representative).
- 6. The question was not whether the member needed orthodontic treatment but whether the malocclusion was severe enough for MassHealth to pay for the treatment. (Testimony of the MassHealth representative).
- 7. MassHealth determines this using HLD formula. (Testimony of the MassHealth representative).
- 8. The HLD formula lists all different conditions that can exist in the mouth. (Testimony of the

 $^{^2}$ The hearing officer also read two brief statements from the treating orthodontist that the appellant's representative submitted as part of the fair hearing request for the benefit of the MassHealth representative. (Ex. 2, pp. 4-5).

MassHealth representative).

- 9. The more any one condition deviates from normal, the more points it gets. (Testimony of the MassHealth representative).
- 10. Overall, the HLD score has to equal or exceed 22 points for MassHealth to pay for treatment. (Testimony of the MassHealth representative).
- 11. The treating orthodontist reached an HLD score of 22. (Ex. 5, p. 9).
- 12. The initial MassHealth evaluator reached an HLD score of 17. (Ex. 5, p. 13).
- 13. The MassHealth representative concluded that the appellant's HLD score was 18. (Testimony of the MassHealth representative).
- 14. The MassHealth representative concluded that the appellant did have an Ectopic Eruption score of 3 but did not have Anterior Crowding. (Testimony of the MassHealth representative).

Analysis and Conclusions of Law

130 CMR 420.431(B)(3) defines comprehensive orthodontic treatment as follows:

<u>Comprehensive Orthodontic Treatment</u>. Comprehensive orthodontic treatment includes a coordinated diagnosis and treatment leading to the improvement of a member's craniofacial dysfunction and/or dentofacial deformity which may include anatomical and/or functional relationship. Treatment may utilize fixed and/or removable orthodontic appliances and may also include functional and/or orthopedic appliances. Comprehensive orthodontics may incorporate treatment phases including adjunctive procedures to facilitate care focusing on specific objectives at various stages of dentofacial development. Comprehensive orthodontic treatment includes the transitional and adult dentition.

130 CMR 420.431(C)(3) describes the eligibility requirements for comprehensive orthodontic treatment, as follows:

(3) <u>Comprehensive Orthodontics</u>. The MassHealth agency pays for comprehensive orthodontic treatment, subject to prior authorization, once per member per lifetime under the age of 21 and only when the member has a handicapping malocclusion. The MassHealth agency determines whether a malocclusion is handicapping based on clinical standards for medical necessity as described in Appendix D of the Dental Manual...

The MassHealth agency pays for the office visit, radiographs and a record fee of the preorthodontic treatment examination (alternative billing to a contract fee) when the MassHealth agency denies a request for prior authorization for comprehensive orthodontic treatment or when the member terminates the planned treatment. The payment for a pre-orthodontic treatment consultation as a separate procedure does not

Page 4 of Appeal No.: 2204631

include models or photographic prints. The MassHealth agency may request additional consultation for any orthodontic procedure. Payment for comprehensive orthodontic treatment is inclusive of initial placement, and insertion and any adjustments (treatment visits) occurring in the calendar month of insertion of the orthodontic fixed and removable appliances (for example: rapid palatal expansion (RPE) or head gear), and records. Comprehensive orthodontic treatment may occur in phases, with the anticipation that full banding must occur during the treatment period. The payment for comprehensive orthodontic treatment covers a maximum period of three (3) calendar years. The MassHealth agency pays for orthodontic treatment as long as the member remains eligible for MassHealth, if initial placement and insertion of fixed or removable orthodontic appliances begins before the member reaches age 21...

Appendix D of the MassHealth Dental Manual is the Authorization Form for Comprehensive Orthodontic Treatment, MassHealth Handicapping Labio-Lingual Deviations Index, which is described as a quantitative, objective method for measuring malocclusion. The HLD index provides a single score, based on a series of measurements that represent the degree to which a case deviates from normal alignment and occlusion. MassHealth has determined that a score of 22 or higher signifies a severe and handicapping malocclusion.³

The record shows by the preponderance of the evidence that the appellant does not qualify for comprehensive orthodontic treatment. The treating orthodontist asserted that the appellant had an HLD score of 22. The first MassHealth evaluator scored it at 17. The MassHealth representative testified that he scored it at 18. The MassHealth representative explained that treating orthodontist measured the Anterior Crowding at 5. The MassHealth representative stated he and the first MassHealth evaluator both concluded that the appellant did not have any Anterior Crowding. The weight of the evidence therefore does not currently support approving orthodontic treatment.

For the above stated reasons, the appeal is DENIED.

Order for MassHealth

None.

³ MassHealth also approves prior authorization requests for comprehensive orthodontic treatment when the member has one of the "auto qualifying" conditions described by MassHealth in the HLD Index. None of the three orthodontists asserted that there was an autoqualifying condition, however.

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.

Scott Bernard Hearing Officer Board of Hearings

cc:

DentaQuest 1, MA

Page 6 of Appeal No.: 2204631