

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2205254
Decision Date:	9/29/2022	Hearing Date:	08/17/2022
Hearing Officer:	Scott Bernard		

Appearance for Appellant:



Appearance for MassHealth:

Dr. David Cabaceiras

Interpreter:

Mandarin



*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:	Orthodontics
Decision Date:	9/29/2022	Hearing Date:	08/17/2022
MassHealth's Rep.:	Dr. David Cabaceiras	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 June 27, 2022, MassHealth denied the appellant's PA request for comprehensive orthodontic treatment. (See 130 CMR 420.431 and Exhibit (Ex.) 1). The appellant filed this appeal in a timely manner on July 14, 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. 1; Ex. 3; Ex. 5, p. 2). The appellant's treating orthodontist submitted a PA request for comprehensive orthodontic treatment, including relevant forms, photographs, and x-rays on June 24, 2022. (Ex. 1; Ex. 5, pp. 4-10).

The MassHealth representative, a licensed orthodontist, testified to the following. MassHealth only covers the cost of orthodontic treatment if the problem is serious enough. In order to determine the severity of the problem, the treating orthodontist fills out and submits a Handicapping Labio-Lingual

Deviation (HLD) form as well as radiographs and photographs. The HLD form has two sections. The first is a list of eight autoqualifying conditions. If the MassHealth member has any one of these conditions they would automatically qualify for comprehensive orthodontic treatment. The second section is a list of nine conditions. In order to receive orthodontic treatment, the total measurements from these nine conditions must meet or exceed 22.

The MassHealth representative stated that when the treating orthodontist filled out the HLD form her came to a point total of 15. When the MassHealth contractor filled it out, he reached a total of 16 points. The MassHealth representative stated that when he reviewed the submitted materials, he also determined that the total was 16 points. The MassHealth representative stated that none of the three orthodontists (including himself) found that the appellant had the 22 points necessary for MassHealth to pay for her orthodonture. None of the three orthodontists concluded the appellant had an autoqualifying condition. (Ex. 5, pp. 5, 11). The MassHealth representative stated that the appellant can revisit the orthodontist in six months for another assessment as to the appropriateness of this treatment. MassHealth will pay for that assessment every six months until the appellant turns 21.

The appellant's mother stated that the appellant's lower teeth are not in normal shape. They are difficult for her to clean, and she was concerned that the appellant was going to get gum disease. Four of the appellant's upper teeth in the middle were out of alignment. Two of them went inwards and two outwards. The appellant bites her lips because of this. Finally, the appellant was very shy in the social context, she smiles very little, and the appellant's mother thought she had social anxiety because of her teeth.

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. 1; Ex. 3; Ex. 5, p. 2).
2. The appellant's treating orthodontist submitted a PA request for comprehensive orthodontic treatment, including relevant forms, photographs, and x-rays on June 24, 2022. (Ex. 1; Ex. 5, pp. 4-10).
3. The MassHealth representative was a licensed orthodontist. (Testimony of the MassHealth representative).
4. MassHealth only covers the cost of orthodontic treatment if the problem is serious enough. (Testimony of the MassHealth representative).
5. In order to determine the severity of the problem, the treating orthodontist fills out and submits an HLD form as well as radiographs and photographs. (Testimony of the MassHealth representative).
6. The HLD form has two sections. (Testimony of the MassHealth representative).
7. The first is a list of eight autoqualifying conditions. (Testimony of the MassHealth representative).

representative).

8. If the MassHealth member has any one of these conditions they would automatically qualify for comprehensive orthodontic treatment. (Testimony of the MassHealth representative).
9. The second section is a list of nine conditions. (Testimony of the MassHealth representative).
10. In order to receive orthodontic treatment, the total measurements from these nine conditions must meet or exceed 22. (Testimony of the MassHealth representative).
11. The initial MassHealth evaluator reached an HLD score of 16. (Ex. 5, p. 11).
12. The MassHealth representative concluded that the appellant's HLD score was 16. (Testimony of the MassHealth representative).
13. None of the three orthodontists concluded the appellant had an autoqualifying condition. (Ex. 5, pp. 5, 11; Testimony of the MassHealth representative).

Analysis and Conclusions of Law

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

Comprehensive Orthodontic Treatment. 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) Comprehensive Orthodontics. 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

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.¹

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 15. The first MassHealth evaluator scored it at 16. The MassHealth representative testified that he also scored it at 16. 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.

¹ 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:

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