

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



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|-------------------------|--------------|------------------------|------------|
| Appeal Decision: | Approved | Appeal Number: | 2205286 |
| Decision Date: | 8/23/2022 | Hearing Date: | 08/19/2022 |
| Hearing Officer: | Thomas Doyle | Record Open to: | |

Appearance for Appellant: Pro Se

Appearance for MassHealth: Dr. Sheldon
Sullaway

Interpreter:



*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

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|---------------------------|----------------------|--------------------------|-----------------|
| Appeal Decision: | Approved | Issue: | Dental Services |
| Decision Date: | 8/23/2022 | Hearing Date: | 08/19/2022 |
| MassHealth's Rep.: | Dr. Sheldon Sullaway | Appellant's Rep.: | Pro se |
| Hearing Location: | Remote (phone) | 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 June 13, 2022, MassHealth denied a prior authorization request for the replacement of complete maxillary and mandibular dentures. (130 CMR 420.000; Ex. 1). The appellant filed an appeal in a timely manner on June 25, 2022. (130 CMR 610.015; Ex. 2). A decision regarding the scope or amount of assistance is valid grounds for appeal. (130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied the appellant's prior authorization request for the replacement of complete maxillary and mandibular dentures.

Issue

Whether MassHealth was correct in denying the appellant's prior authorization.

Summary of Evidence

All parties appeared by telephone and documents submitted by MassHealth were incorporated into the hearing record as Exhibit 7. The appellant submitted a letter on her own behalf, (Ex. 4), a medical necessity letter from a physician (Ex. 5) and a letter from Ms. Holohan, an M.Ed, LADC I, with SaVida Health. (Ex. 6).

On June 14, 2022, MassHealth received a prior authorization request for complete maxillary (upper) and complete mandibular (lower) dentures. (Testimony). The request was received and reviewed by DentaQuest Dental on behalf of MassHealth. MassHealth denied the request as the appellant received complete maxillary and mandibular dentures on January 20, 2018 (Testimony) and MassHealth does not authorize the replacement of dentures that are less than 7-years old unless the member meets one of the exceptions listed in the regulations.

The MassHealth representative testified that MassHealth members are responsible for denture care and maintenance. The member must take all possible steps to prevent loss of or damage to their dentures. MassHealth does not replace dentures if the member's history shows that they are less than 7 years old and no other condition warranting their replacement exists.

Appellant's physician wrote in a letter that appellant suffers from chronic anxiety and depression and that her anxiety is magnified by her poor dental health. The doctor further writes there would be strong benefits for appellant's mental health if her oral and dental health were addressed. (Ex. 5). Ms. Holohan writes appellant is consistent, dependable and making great progress in her treatment goals. She continues that appellant has struggled with the social stigma of addiction but also the social stigma and discrimination because of physical characteristics. Ms. Holohan writes that without her smile, appellant suffers from social anxiety and depression. (Ex. 6). Appellant wrote in her letter that having no teeth is holding her back in many ways. She spent two years not leaving her house, which greatly affected her mental health. She also writes she cannot chew her food. (Ex. 4). Appellant testified that the lack of teeth is stunting further growth. (Testimony).

Findings of Fact

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

1. MassHealth received a prior authorization request for complete mandibular and maxillary dentures. (Testimony).
2. MassHealth denied the request as the appellant received dentures in January 2018. (Testimony).
3. The appellant suffers from anxiety and depression (Ex. 5).
4. The loss of the dentures has led to difficulty with eating. (Ex. 4).
5. Appellant is over 21 years old. (Ex. 1).

Analysis and Conclusions of Law

MassHealth pays for the certain dental services when medically necessary, in accordance with the service descriptions and limitations described in 130 CMR 420.422 through 420.456. (130 CMR 420.410(A)(1); 130 CMR 420.421(A)(1)).

A service is medically necessary if

- (1) it is reasonably calculated to prevent, diagnose, prevent the worsening of, alleviate, correct, or cure conditions in the member that endanger life, cause suffering or pain, cause physical deformity or malfunction, threaten to cause or to aggravate a handicap, or result in illness or infirmity; and
- (2) there is no other medical service or site of service, comparable in effect, available, and suitable for the member requesting the service, that is more conservative or less costly to the MassHealth agency. (130 CMR 450.204(A)).

Pursuant to 130 CMR 420.428(A), MassHealth pays for denture services once per seven calendar years per member. 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. (130 CMR 420.428(F)).

MassHealth 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, and 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 appellant's dentures are less than 7 years old but the appellant's physician, counselor and appellant herself presented sufficient testimony and evidence regarding the appellant's mental health to demonstrate that the replacement was medically necessary and fell under the exceptions to the rule barring payment for replacement within 7 years. (130 CMR 420.428(F); 130 CMR 450.204(A)). The decision made by MassHealth was not correct.

This appeal is approved.

Order for MassHealth

Approve the appellant's prior authorization request for a complete mandibular and maxillary denture.

Implementation of this Decision

If this decision is not implemented within 30 days after the date of this decision, you should contact your MassHealth Enrollment Center. If you experience problems 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.

Thomas Doyle
Hearing Officer
Board of Hearings

cc:
MassHealth Representative: DentaQuest 1, MA

[REDACTED]