

# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2207023
<b>Decision Date:</b>	12/2/2022	<b>Hearing Date:</b>	10/21/2022
<b>Hearing Officer:</b>	Christopher Jones		

**Appearance for Appellant:**  
Pro se

**Appearance for MassHealth:**  
Dr. Sheldon Sullaway



*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

<b>Appeal Decision:</b>	Denied	<b>Issue:</b>	Prior Authorization- Adult Dental
<b>Decision Date:</b>	12/2/2022	<b>Hearing Date:</b>	10/21/2022
<b>MassHealth's Rep.:</b>	Dr. Sheldon Sullaway	<b>Appellant's Rep.:</b>	Pro se
<b>Hearing Location:</b>	Remote	<b>Aid Pending:</b>	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 decision dated July 15, 2022, MassHealth denied the appellant's prior authorization request for an implant and fixed bridge replacement. (Exhibit 3; 130 CMR 420.421(B).) The appellant filed this appeal in a timely manner on September 19, 2022. (Exhibit 2; 130 CMR 610.015(B).) Denial of assistance is valid grounds for appeal. (130 CMR 610.032.)

## Action Taken by MassHealth

MassHealth denied the appellant's prior authorization request of an implant for tooth number 20 and the replacement of a bridge unit with crowns on tooth number 19 through tooth number 21.

## Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 420.421(B), in determining that the appellant's requested dental procedures were non-covered services.

## Summary of Evidence

Dr. Sullaway is a licensed dentist who works for DentaQuest, a company contracted by MassHealth to administer dental benefits. He testified that the appellant's requests for an implant (pontic

porcelain fused metal) and bridge replacement<sup>1</sup> were denied because the services are not covered for members over 21 years of age. The appellant is over the age of 21.

The appellant testified that she was told the services were not covered, however, she is in pain and unable to chew on her left side. Further, in order for her dentist to treat the tooth (tooth number 20) and replace it with an implant, he would have to take off the bridge unit. The bridge was not done in America, rather it was done in the appellant's home country over 10 years ago and she cannot afford to pay for the services out of pocket. The appellant further testified that she understands her insurance does not cover the bridge or implant however, she is in pain and it is unfair.

Dr. Sullaway explained that the provider did not submit a narrative and while other procedures may be available to the appellant, he is unable to diagnose or treat her during a hearing. He suggested that the appellant go back to her dentist and discuss what options may be covered by MassHealth to alleviate her discomfort and otherwise treat her teeth.

## Findings of Fact

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

1. On or about July 15, 2022, a prior authorization request was submitted on the appellant's behalf, seeking coverage for an implant and bridge replacement. (Exhibit 3.)
2. MassHealth denied the requests on the same day because they are services not covered for members over 21 years of age. (Exhibit 3; Testimony by Dr. Sullaway.)
3. The appellant is over the age of 21. (Testimony by Dr. Sullaway.)
4. The appellant understands that her insurance will not cover the services but feels it is unfair as she is in pain and cannot afford additional insurance. (Testimony by the appellant.)

## Analysis and Conclusions of Law

MassHealth pays for dental services that are medically necessary. (130 CMR 420.421(A).) Medical necessity for dental and orthodontic treatment must be shown in accordance with the regulations governing dental treatment, 130 CMR 420.000 and the MassHealth Dental Manual.<sup>2</sup> (130 CMR 450.204.) Certain services are excluded from coverage, "except when MassHealth determines the service to be medically necessary **and the member is younger than 21 years old.**" (130 CMR 420.421(B) (emphasis added).) Specifically excluded are "certain dentures including ... overdentures and their attachments ... ," and "implants of any type or description ... ." (130 CMR

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<sup>1</sup> The fixed bridge has been made between tooth number 19 through tooth number 21, thereby including tooth number 20.

<sup>2</sup> The Dental Manual is available on MassHealth's website, in the MassHealth Provider Library. (Available at <https://www.mass.gov/lists/dental-manual-for-masshealth-providers>.)

420.421(B)(2), (5).) Many covered services also require prior authorization. The instructions for submitting prior authorization requests “are described in the MassHealth Dental Program Office Reference Manual [(“ORM”)].”<sup>3</sup> (130 CMR 420.410(C)(2).)

The ORM sets out clinical criteria for various covered services. There is no guidance regarding fixed prosthodontics, such as implants or fixed bridges. Section 15.6 governs coverage criteria for removable prosthodontics, such as removable partial dentures or bridges. (See ORM, pp. 41-43.) Furthermore, Section 15.2 details the criteria for crowns, one of the services the appellant sought to have covered for her implant post. This section only references “the criteria for crowns ... **for permanent teeth** ... .” (ORM, p. 39 (emphasis added).) There is not a single reference in the ORM to implants, and the only reference to fixed prosthodontics exists in the billing code appendices attached to the ORM. The billing code appendix for non-developmentally disabled adults only references D6999, a catchall billing code for fixed prosthodontics that requires a “narrative of medical necessity.” (ORM, p. 124.) As noted by Dr. Sullaway, no narrative of medical necessity was submitted.

The appellant has not identified any error with MassHealth’s decision, and this appeal is 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.

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Christopher Jones  
Hearing Officer  
Board of Hearings

cc: MassHealth Representative: DentaQuest 1, MA

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<sup>3</sup> The current ORM is available at <https://masshealth-dental.net/MassHealth/media/Docs/MassHealth-ORM.pdf>. (Last visited September 21, 2022.)