

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Dismissed	Appeal Number:	2207638
Decision Date:	3/8/2023	Hearing Date:	1/6/2023
Hearing Officer:	Cynthia Kopka	Record Open to:	3/23/2023

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

Appeal Decision:	Dismissed	Issue:	Prior authorization – dental
Decision Date:	3/8/2023	Hearing Date:	1/6/2023
MassHealth’s Rep.:	Dr. Sullaway	Appellant’s Rep.:	Pro se
Hearing Location:	Quincy (remote)	Aid Pending:	No

This hearing was conducted pursuant to Massachusetts General Laws Chapter 118E, Chapter 30A, and the rules and regulations promulgated thereunder. The issue on appeal involves MassHealth’s denial of Appellant’s prior authorization request for prior authorization request for dental service code D4341, periodontal scaling and root planing of four quadrants (PA No. 202223900094700) Exhibit 1. The hearing record was held open to allow Appellant to submit additional evidence. Exhibits 5, 6. After hearing, the MassHealth representative determined that based on the evidence submitted, the denial should be overturned and PA No. 202223900094700 will be approved. Exhibit 8.

As there was an adjustment that resolves the issue in dispute between the parties, this appeal is dismissed. 130 CMR 610.035(A)(8), 130 CMR 610.051(B), 130 CMR 610.083(C)

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.

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.

Cynthia Kopka
Hearing Officer
Board of Hearings

cc:
MassHealth Representative: DentaQuest 1, MA