

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision: Denied

Appeal Number: 2208003

Decision Date: 12/28/2022

Hearing Date: 11/29/2022

Hearing Officer: Marc Tonaszuck

Appearance for Appellant:
Pro se

Appearance for MassHealth:
Dr. Nersasian, DentaQuest



*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:	Dental
Decision Date:	12/28/2022	Hearing Date:	11/29/2022
MassHealth's Rep.:	Dr. Nersasian, DentaQuest	Appellant's Rep.:	Pro se
Hearing Location:	Quincy Harbor South		

Authority

This hearing was conducted pursuant to Massachusetts General Laws Chapter 118E, Chapter 30 and the rules and regulations promulgated thereunder.

Jurisdiction

Through a notice dated 09/28/2022, MassHealth informed the appellant that it denied his prior authorization request for a dental implant and abutment for tooth number 8 because dental implants are a non-covered service (Exhibit 1). The appellant filed this appeal with the Board of Hearings in a timely manner on 10/25/2022¹ (130 CMR 610.015(B); Exhibit 2).

¹ In MassHealth Eligibility Operations Memo (EOM) 20-09 dated April 7, 2020, MassHealth states the following:

- Regarding Fair Hearings during the COVID-19 outbreak national emergency, and through the end of month in which such national emergency period ends:
 - All appeal hearings will be telephonic; and
 - Individuals will have up to 120 days, instead of the standard 30 days, to request a fair hearing for member eligibility-related concerns.

Action Taken by MassHealth

MassHealth denied the appellant's request for dental implant and abutment on tooth number 8.

Issue

Was MassHealth correct in denying the appellant's request for dental implant and abutment for tooth number 8?

Summary of Evidence

Dr. Nersasian, a dentist licensed to practice in Massachusetts testified on behalf of MassHealth. He is employed by DentaQuest, the contractor that makes dental decisions for MassHealth. Dr. Nersasian testified that on 09/27/2022, the appellant's dental provider submitted a prior authorization (PA) request for a dental implant and abutment for tooth number 8. Included with the PA request was a letter from the appellant's physician dated 09/28/2022, stating that the appellant's tooth was "knocked out during anesthesia for open heart surgery this past May." Dr. Nersasian explained that the PA request was denied because dental implants and the associated services are a non-covered service under the MassHealth regulations. As a result, MassHealth is unable to approve the PA request. Dr. Nersasian suggested that the appellant seek reimbursement from the hospital, since the incident occurred during a surgical procedure.

The appellant appeared by telephone and testified that because his open heart surgery was paid for by MassHealth, he expected that MassHealth will approve his request for the dental implant to replace the tooth that was "knocked out" during the surgery. He stated it is "a lot of money that I cannot afford."

Findings of Fact

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

1. The appellant is a MassHealth member (Testimony).
2. On 09/27/2022, the appellant's dental provider submitted a PA request to MassHealth for a dental implant and abutment for tooth number 8 (Testimony; Exhibit 4).
3. On 09/28/2022, MassHealth denied the request for the dental implant, because it is not a covered service by MassHealth (Testimony; Exhibits 1 and 4).

4. The appellant's tooth was "knocked out during anesthesia for open heart surgery this past May" (Testimony; Exhibit 4).
5. On 10/25/2022, the appellant appealed MassHealth's denial to the Board of Hearings (Testimony; Exhibit 2).

Analysis and Conclusions of Law

MassHealth dental provider regulations at 130 CMR 420.421(B) address noncovered services as follows:

The MassHealth agency does not pay for the following services for any member, except when MassHealth determines the service to be medically necessary and the member is under age 21. Prior authorization must be submitted for any medically necessary noncovered services for members under age 21.

- (1) cosmetic services;
- (2) certain dentures including unilateral partials, overdentures and their attachments, temporary dentures, CuSil-type dentures, other dentures of specialized designs or techniques, and preformed dentures with mounted teeth (teeth that have been set in acrylic before the initial impressions);
- (3) counseling or member-education services;
- (4) habit-breaking appliances;
- (5) implants of any type or description;**
- (6) laminate veneers;
- (7) oral hygiene devices and appliances, dentifrices, and mouth rinses;
- (8) orthotic splints, including mandibular orthopedic repositioning appliances;
- (9) panoramic films for crowns, endodontics, periodontics, and interproximal caries;
- (10) root canals filled by silver point technique, or paste only;
- (11) tooth splinting for periodontal purposes; and
- (12) any other service not listed in Subchapter 6 of the *Dental Manual*.

(Emphasis added.)

The appellant has the burden "to demonstrate the invalidity of the administrative determination." See *Andrews vs. Division of Medical Assistance*, 68 Mass. App. Ct. 228. Moreover, the burden is on the appealing party to demonstrate the invalidity of the administrative determination. See *Fisch v. Board of Registration in Med.*, 437 Mass. 128, 131 (2002); *Faith Assembly of God of S. Dennis & Hyannis, Inc. v. State Bldg. Code Commn.*, 11 Mass. App. Ct. 333 , 334 (1981); *Haverhill Mun. Hosp. v. Commissioner of the Div. of Med. Assistance*, 45 Mass. App. Ct. 386 , 390 (1998).

The appellant, a MassHealth member, requested a dental implant and associated

services to replace a missing tooth number 8. MassHealth reviewed the request and denied it because dental implants are a non-covered service. The appellant argued that because the medical procedure during which the tooth was “knocked out,” was covered by MassHealth, the implant must also be covered by MassHealth. The appellant provided no documentary or testimonial evidence to show that MassHealth misinterpreted its policies or regulations. Nor has he shown that dental implants are a covered service and that he was incorrectly denied that service.

It is the appellant’s burden to show by a preponderance of proof that MassHealth’s determination is either not supported by the facts or not supported by the relevant law. MassHealth regulations specifically and clearly articulate that dental implants are a non-covered service. This appeal is therefore 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.

Marc Tonaszuck
Hearing Officer
Board of Hearings

cc:
MassHealth Representative: DentaQuest