

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2208604
Decision Date:	1/17/2023	Hearing Date:	12/30/22
Hearing Officer:	Alexandra Shube		

Appearance for Appellant:

Via telephone:

Pro se

Appearance for MassHealth:

Via telephone:

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:	Denied	Issue:	Prior Authorization – Adult Dental Services
Decision Date:	1/17/2023	Hearing Date:	12/30/22
MassHealth’s Rep.:	Dr. Sheldon Sullaway	Appellant’s Rep.:	Pro se
Hearing Location:	Quincy Harbor South Remote	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 September 30, 2022, MassHealth denied the appellant's prior authorization request for dental service code D5211 – partial upper denture (Exhibits 1 and 5). The appellant filed this appeal in a timely manner on November 17, 2022 (see 130 CMR 610.015(B) and Exhibit 2). Denial of a prior authorization request is valid grounds for appeal (see 130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied the appellant’s prior authorization request for dental service code D5211 – partial upper denture.

Issue

The appeal issue is whether MassHealth was correct in denying the appellant’s prior authorization request.

Summary of Evidence

A MassHealth representative from DentaQuest, the third-party contractor that administers and manages the dental program available to MassHealth members, appeared via telephone and testified as follows: on September 30, 2022, the appellant's provider submitted a prior authorization request for dental service code D5211 – partial upper denture. On September 30, 2022, MassHealth denied the request because of benefit limitations. The requested service is allowed once every seven years (or 84 months) and MassHealth records indicate that the appellant received the requested service, a partial upper denture, less than seven years ago, on May 2, 2022 from the same provider.

The appellant appeared via telephone and testified as follows: she was a victim of domestic violence which resulted in most of her teeth being knocked out of her mouth. She received an upper partial denture in June of 2022 but there was a problem with the denture's fit and it would not go over her upper gums properly due to a bone on her upper right jaw corner. Subsequently, she also suffered a broken crown on her tooth number 9 six times and her dentist informed her that she needed to have that tooth extracted and the bone on her upper gum in the corner of her jaw cut down. On September 9, 2022, she had the surgical procedure done at Boston Medical Center. She went back to her dentist on September 30, 2022 with the same complaint – that the denture still did not fit properly on her gums, and in addition, she was now missing an entirely new tooth (number 9) that needed to be added to her denture because of the required extraction of that tooth. She only has three teeth in her upper jaw and she cannot chew anything except soft foods. As a result of these issues, she has only been able to eat a limited number of foods, mainly mashed potatoes and mac and cheese, for several months. Her inability to properly chew and eat is adversely affecting her diabetes and causing her blood sugar levels to constantly drop. This has left her hungry and exhausted.

Dr. Sullaway responded that the appellant's provider did not submit a narrative which is routinely required by the DentaQuest Office Reference Manual. The narrative needs to explain which teeth the denture is replacing, which teeth will be used to hold the denture in place, and whether those teeth are strong enough to support the denture. He noted that the dental x-ray that was provided by the appellant's dentist in the prior authorization request was not dated or labelled. He indicated further that as a result of the lack of a narrative from her dentist and the lack of any identifying patient information on the x-ray, the requirements for D5211 were not met, but that there are exceptions in the regulations at 130 CMR 420.428(F) which can permit payment for replacement dentures prior to the 84-months limit. While the appellant's testimony was informative, he needed additional documentation from her dentist to support the request.

The appellant was given the opportunity to hold the record open to provide a narrative and properly labeled and dated x-rays from her provider, but she was upset and did not want to do so.

Findings of Fact

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

1. On September 30, 2022, MassHealth received a prior authorization request from the appellant's provider for dental service code D5211 – partial upper denture (Testimony and Exhibit 5).
2. On September 30, 2022, MassHealth denied the request because payment for partial dentures is allowed only once every seven years (or 84 months) (Testimony and Exhibits 1 and 5).
3. MassHealth paid for partial upper dentures less than seven years ago, on May 2, 2022 (Testimony).
4. The appellant timely appealed the denial on November 17, 2022. (Exhibit 2).
5. The appellant's upper dentures did not correctly fit her mouth and gums from the time she received them because of bone protrusions in her mouth that needed to be surgically removed. (Testimony and Exhibit 2).
6. The appellant's crown on her number 9 tooth broke six times until the tooth was completely removed, after she had received her original dentures (Testimony and Exhibit 2).
7. On September 9, 2022, the appellant underwent a surgical procedure at Boston Medical Center and had the bone on her upper gum in the corner of her jaw cut down (Testimony and Exhibit 2).

Analysis and Conclusions of Law

Regulation 130 CMR 420.428 governs removable prosthodontic services and states the following:

- (A) General Conditions. The MassHealth agency pays for dentures services once per seven (7) calendar years per member, subject to the age limitations specified in 130 CMR 420.428(B). MassHealth payment includes all services associated with the fabrication and delivery process, including all adjustments necessary in the six months following insertion. The member is responsible for all denture care and maintenance following insertion. The MassHealth agency does not pay for complete dentures when the member's medical record indicates material limitations to the member's ability to cooperate during the fabrication of the denture or to accept or function with the denture, or indications that the member does not intend to utilize the denture.

Under 130 CMR 420.428(F), MassHealth pays for the necessary replacement of dentures. The member is responsible for denture care and maintenance. 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. 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.

Regulation 130 CMR 420.428 lays out the framework for denture benefits for MassHealth beneficiaries and their possible replacement and repair. There is a strong regulatory presumption that replacement dentures for those dentures which are less than seven years old cannot be approved by the MassHealth agency unless some extraordinary or unusual circumstances, such as those in 130 CMR 420.428(F)(1) through (4) or (6) through (8), exist.

For procedure D5211, the MassHealth Dental Office Reference Manual requires that "[d]ocumentation must indicate that there are two or more missing posterior teeth or one or more missing anterior teeth, the remaining dentition is sound and there is a good prognosis." The prior authorization request submitted by the appellant's provider does not include any narrative describing the treatment plan and determining a good prognosis and is therefore incomplete.

Furthermore, MassHealth records show that MassHealth paid for and the appellant received a new partial upper denture in May 2022, under the 84-month (or 7-year) replacement standard. While the appellant's testimony is credible and her quality of life and health are being adversely affected by her improperly fitting dentures, there is insufficient documentation to meet any of the exceptions described in 130 CMR 420.428(F). Although there have been physiological changes as well as a surgery and removal of tooth number 9, additional documentation from her provider is needed to show that those changes necessitate a new denture, that her current dentures cannot be remedied, or that there is a poor prognosis for success with any further reline.

Under these circumstances, the appellant has not met the replacement criteria listed in 130 CMR 420.428(F) and the appeal is denied.¹

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.

Alexandra Shube
Hearing Officer
Board of Hearings

cc:

MassHealth Representative: DentaQuest 1, MA

¹ This denial does not preclude the appellant or her provider from submitting to MassHealth a new prior authorization with a complete narrative and appropriately labeled and dated x-rays. Given the appellant's recent surgery and removal of tooth number 9, she is encouraged to do so.