

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2302388
Decision Date:	6/2/2023	Hearing Date:	04/28/2023
Hearing Officer:	Casey Groff, Esq.		

Appearance for Appellant:

, Mother

Appearance for MassHealth:

Harold Kaplan, D.M.D., 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:	Prior Authorization; Orthodontic Services
Decision Date:	6/2/2023	Hearing Date:	04/28/2023
MassHealth's Rep.:	Harold Kaplan, DMD	Appellant's Rep.:	Mother
Hearing Location:	Board of Hearings (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 March 3, 2023, MassHealth informed Appellant, a minor, that it denied his prior authorization (PA) request for periodic orthodontic treatment visits (procedure code D8670). See Exhibits 2 and 4. Appellant's mother filed a timely appeal of the decision on March 23, 2023. See 130 CMR 610.015(B) and Exhibit 1. Denial of assistance is valid grounds for appeal. See 130 CMR 610.032.

Action Taken by MassHealth

MassHealth denied Appellant's PA request for eight (8) periodic orthodontic treatment visits.

Issue

The appeal issue is whether MassHealth correctly denied Appellant's PA request for periodic orthodontic treatment visits (procedure code D8670).

Summary of Evidence

At hearing, MassHealth was represented by Dr. Harold Kaplan, D.M.D. a board-certified orthodontist and consultant from DentaQuest. DentaQuest is the third-party contractor that administers and manages MassHealth's dental program. Through testimony and documentary submissions, the MassHealth representative presented the following evidence:

Appellant is a MassHealth member under the age of 18. Id. On or around March of 2022, MassHealth approved Appellant for interceptive orthodontic treatment. The goal of interceptive treatment is to prevent, or minimize the severity of, a developing malocclusion. Coverage is limited to a one-year payment period and is approved once-per lifetime. MassHealth does not extend coverage of interceptive treatment beyond the initial approval. If a member requires further orthodontic treatment after interceptive services are completed, the provider may seek authorization for full comprehensive orthodontic treatment with the necessary documentation.

On February 8, 2023, Appellant's orthodontist sent MassHealth a prior authorization (PA) request seeking coverage for eight (8) "periodic orthodontic treatment" visits (procedure code D8670). See Exh. 4. The PA request indicated that Appellant was seeking continuation of care at his provider's new location after the former location was closed due to a flood. See id. at 5. On March 3, 2023, MassHealth denied the PA request, noting that "[i]nterceptive treatment is allowed once per lifetime and is not eligible for Continuation of Care." See id. at 3-4.

Dr. Kaplan explained that MassHealth already paid Appellant's provider for the maximum amount of interceptive coverage allowed under program rules. For this reason, MassHealth denied the request. To continue Appellant's orthodontic treatment, the provider must first seek authorization for comprehensive orthodontic treatment. Procedure code D8670 is designated for periodic orthodontic visits when a member has been approved for, and undergoing, comprehensive orthodontic care. Dr. Kaplan explained that interceptive and comprehensive treatment are separate segments of orthodontic treatment and approval for each is conditioned on different criteria. Appellant's provider did not submit a request for this next phase of treatment.

Appellant's mother appeared at the hearing by telephone. Appellant's mother testified that the orthodontist sent the PA request to continue treatment at a new location because the prior location was closed due to flooding. When she received the denial, it appeared MassHealth was denying the request based on its erroneous assumption that Appellant was starting treatment with a new orthodontist. Appellant's mother explained that her son is not switching orthodontists. Rather, the same provider that initiated treatment needed to continue providing services at the new location. Her son still requires significant orthodontic work, which she cannot pay for out of pocket. He currently has a bottom brace but does not have top braces. He will need at least three more years of work. She argued that MassHealth should correct its error and approve the PA request so Appellant can get the care he needs.

In response, Dr. Kaplan reiterated that the basis for denial was not due to a change in provider or provider location. The claims were denied because the provider completed interceptive treatment and did not submit a PA request to proceed to the next phase of orthodontic treatment, i.e. comprehensive orthodontic care. Dr. Kaplan explained that Appellant may indeed still be entitled to coverage of continued orthodontic services; however, his orthodontist must follow the correct protocol for MassHealth to authorize the services.

Findings of Fact

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

1. Appellant is a MassHealth member under the age of 18.
2. On or around March of 2022, MassHealth approved Appellant for interceptive orthodontic treatment.
3. As of the hearing date, MassHealth paid Appellant's provider for the maximum amount of interceptive coverage allowed under program rules.
4. On February 8, 2023, Appellant's orthodontist sent MassHealth a PA request seeking coverage for eight (8) "periodic orthodontic treatment" visits (procedure code D8670).
5. The PA request indicated that Appellant was seeking continuation of care at his provider's new location after the former location was closed due to a flood.
6. On March 3, 2023, MassHealth denied the PA request, noting that "[i]nterceptive treatment is allowed once per lifetime and is not eligible for Continuation of Care."

Analysis and Conclusions of Law

This appeal addresses whether MassHealth was correct in denying Appellant's request for eight (8)

periodic orthodontic visits (D8670). For member's 21 years of age and younger, MassHealth will cover the following orthodontic services when medically necessary:

- (1) Pre-orthodontic Treatment Examination – includes the periodic observation of the member's dentition at intervals established by the orthodontist to determine when orthodontic treatment should begin.
- (2) Interceptive Orthodontic Treatment – includes treatment of the primary and transitional dentition to prevent or minimize the development of a handicapping malocclusion and therefore, minimize or preclude the need for comprehensive orthodontic treatment.
- (3) Comprehensive Orthodontic Treatment – includes a coordinated diagnosis and treatment leading to the improvement of a member's craniofacial dysfunction and/or dentofacial deformity which may include anatomical and/or functional relationship. Treatment may utilize fixed and/or removable orthodontic appliances and may also include functional and/or orthopedic appliances. Comprehensive orthodontics may incorporate treatment phases including adjunctive procedures to facilitate care focusing on specific objectives at various stages of dentofacial development.
- (4) Orthodontic Treatment Visits – periodic visits which may include but are not limited to updating wiring, tightening ligatures or otherwise evaluating and updating care **while undergoing comprehensive orthodontic treatment.**

See 130 CMR 420.431(B) (emphasis added)

Coverage of both interceptive orthodontic treatment and comprehensive treatment are subject to prior authorization, and if approved, limited once per member's lifetime. MassHealth uses different sets of clinical standards to determine whether each phase of treatment is medically necessary, as described below:

(2) Interceptive Orthodontics.

(a) ***The MassHealth agency pays for interceptive orthodontic treatment once per member per lifetime.*** The MassHealth agency determines whether the treatment will prevent or minimize a handicapping malocclusion ***based on the clinical standards described in Appendix F of the Dental Manual.***

...

(c) When initiated during the early stages of a developing problem, interceptive orthodontics may reduce the severity of the malformation and mitigate its causes. Complicating factors such as skeletal disharmonies, overall space deficiency, or ***other conditions may require subsequent comprehensive orthodontic treatment.*** Prior authorization for comprehensive orthodontic treatment may be sought for Class III malocclusions as defined in Appendix F of the Dental Manual requiring facemask

treatment at the same time that authorization for interceptive orthodontic treatment is sought. For members with craniofacial anomalies, prior authorization may separately be sought for the cost of appliances, including installation.

(3) Comprehensive Orthodontics. The MassHealth agency pays for comprehensive orthodontic treatment, subject to prior authorization, once per member per lifetime for a member younger than 21 years old and only when the member has a handicapping malocclusion. The MassHealth agency determines whether a malocclusion is handicapping ***based on clinical standards for medical necessity as described in Appendix D of the Dental Manual.*** Upon the completion of orthodontic treatment, the provider must take post treatment photographic prints and maintain them in the member's dental record.

....

Once approved, interceptive treatment includes payment for the appliance used (e.g. D8050/D8060) and a maximum of five (5) adjustment visits (procedure code D8999). See MassHealth Dental Manual, Appendix F; see also MassHealth Dental Program Office Reference Manual (ORM), § 16.5, p. 48. Once the member has consumed all five D8999 adjustment visits, MassHealth does not extend coverage of additional interceptive services. The provider may, however, pursue comprehensive orthodontic treatment subject to MassHealth approval. See id. Initial authorization includes payment for comprehensive orthodontics (D8080/D8070) and eight (8) periodic orthodontic treatment visits (D8670) for the first two years of treatment. See ORM, § 16.3, p. 45-47. Unlike interceptive care, MassHealth may extend comprehensive treatment by authorizing an additional four (4) D8670 adjustment visits once initial authorization has expired. See id.

The evidence shows that in March of 2022, MassHealth approved Appellant for interceptive orthodontic treatment, which carries a maximum of five "adjustment visits" (D8999).¹ According to Dr. Kaplan's testimony, Appellant's provider received complete payment for the authorized services. Interceptive treatment is covered once per-lifetime per-member.² Appellant's provider now seeks prior authorization for eight "periodic orthodontic visits" under code D8670. The requested services, however, are only covered when the member has been approved for, and is undergoing, comprehensive orthodontic treatment. See 130 CMR 420.431(B). While Appellant may indeed require further orthodontic care, his provider did not seek approval or provide MassHealth with necessary documentation to initiate this next stage of

¹ Once MassHealth approves a request for interceptive orthodontic treatment, the provider can bill for the appliance once placed, and can bill up to a maximum of 5 adjustments using code D8999, using the actual dates of treatment as the dates of service. ORM, § 17.00. p. 49-50.

² In the event Appellant's provider had not completed all approved interceptive adjustment visits, the provider would need to submit a continuation of care form (see ORM B-4), including a copy of the original PA approval, and number of D8999 adjustment visits remaining. See MassHealth Dental Manual, Appendix F; see also ORM, § 16.4, pp. 47-48, App. B p. 4. In the instant case, none of these steps were taken.

treatment. As Appellant's provider has not yet sought approval for comprehensive orthodontic treatment, MassHealth did not err in denying Appellant's coverage for periodic orthodontic visits under D8670.

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.

Casey Groff, Esq.
Hearing Officer
Board of Hearings

cc:
MassHealth Representative: DentaQuest 2, MA