Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision: Dismissed Appeal Number: 2302730

Decision Date: 5/16/2023 **Hearing Date:** 05/10/2023

Hearing Officer: Mariah Burns Record Open to: 05/12/2023

Appearance for Appellant:

Appearance for MassHealth:

Dr. David Cabeceiras for 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: Dismissed Issue: Comprehensive

Orthodontic Treatment

Decision Date: 5/16/2023 **Hearing Date:** 05/10/2023

MassHealth's Rep.: Dr. David Cabeceiras Appellant's Rep.:

Hearing Location: Remote Aid Pending: No

This telephonic hearing was conducted pursuant to Massachusetts General Laws Chapter 118E, Chapter 30A, and the rules and regulations promulgated thereunder. The issue on appeal involved denial of a request for prior authorization for comprehensive orthodontic treatment. The appellant's provider submitted a request and supporting clinical documentation indicating that the appellant possessed two auto-qualifying conditions: an overjet of over 9mm and a deep impinging overbite. Dr. Cabeceiras testified that he reviewed the appellant's records and agreed that it was likely that the appellant possesses at least one of these conditions, but he was unable to make a determination without a measuring device included with the appellant's photos. The record was kept open for the appellant's mother to provide new records with a measuring device, which she did via email. Based on her submission, Dr. Cabeceiras indicated that he was reversing DentaQuest's denial and would approve treatment for the appellant. The Appellant's mother was advised that treatment should not begin until she receives notice from MassHealth. This decision should not be considered notice.

Order for MassHealth

None, except to approve the request for prior authorization as indicated above and within the hearing record.

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.

Mariah Burns Hearing Officer Board of Hearings

cc:

MassHealth Representative: DentaQuest 1, MA