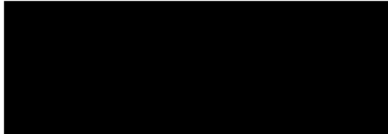


Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2305503
Decision Date:	12/21/2023	Hearing Date:	10/13/2023
Hearing Officer:	Thomas Doyle	Record Open to:	

Appearance for Appellant:



Appearance for Respondent:

Cassandra Horne, Appeals and Grievance
Manager
Dr. Allen Finkelstein, D.M.D., CCA Consultant

Interpreter:



*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, Dental; Medical Necessity
Decision Date:	12/21/2023	Hearing Date:	10/13/2023
Respondent Rep.:	Cassandra Horne Allen Finkelstein, D.M.D.	Appellant's Rep.:	
Hearing Location:	Remote (phone)	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 May 11, 2023, Commonwealth Care Alliance (CCA), a MassHealth-contracted Integrated Care Organization (ICO), notified the appellant they denied her Level 1 appeal regarding service D2740 Crown – Porcelain/Crown for multiple teeth because the treatment proposed is beyond the scope of coverage and does not meet the criteria for medical necessity. (Ex. 1). The appellant filed this external appeal of a final decision of an ICO in a timely manner on July 7, 2021.¹ (130 CMR 610.018; Ex. 2). A decision of an ICO to “deny or provide limited authorization of a requested service, including the type or level of service, including determinations based on the type or level of service, requirements for medical necessity, appropriateness, setting, or effectiveness of a covered benefit” is valid grounds for appeal (130 CMR 610.032(B)(2)).

¹ On July 7, 2023, appellant filed an electronic Fair Hearing Request Form. This form was not signed. Subsequently, she filed a handwritten Fair Hearing Request Form that was dated August 1, 2023. (Ex. 2). It is clear appellant's intent was to file an appeal within the 60-day time limit and I credit the July 7, 2023 electronic form.

Action Taken by Respondent

CCA denied the appellant's placement of crowns on multiple teeth.

Issue

The appeal issue is whether CCA was correct in determining that the appellant's requested dental procedures were not medically necessary.

Summary of Evidence

The hearing commenced and all parties were sworn. The CCA Appeals and Grievance Manager (manager) testified to the following: Appellant has been a member of the CCA OneCarePlan since February 2020. Appellant submitted a prior authorization (PA) request for code D2740 for porcelain ceramic crowns on multiple teeth. The PA was denied on March 16, 2023 because there was no medical necessity shown for the procedure. The procedure is covered if x-rays show 4 or more surfaces of the teeth are decayed. In their review of the record, CCA did not find 4 or more teeth showed decay. This denial was appealed by appellant. CCA undertook an independent review and that review found the treatment proposed is beyond the scope of coverage and did not meet the criteria for medical necessity. (Testimony).

The CCA consultant dentist (consultant) testified to the following: He reviewed a complete set of appellant's x-rays. He stated the first criteria is whether a tooth be restored by any other means. He testified that in this case, the teeth requested for crowns do not meet the standard for decay where a crown would be needed instead of a conventional restoration. The consultant then references a letter in evidence from the [REDACTED] (Ex. 8). The consultant noted how the author of the letter stated that the reason for the crowns was appellant has lost vertical dimension (height) and placing crowns can reverse this loss of vertical dimension. The loss of vertical dimension causes appellant's upper and lower jaws to be too close together which may result in tension on appellant's Temporo-Mandibular Joints, an inability to chew properly and reduce the amount of tongue space. The consultant also stated that the author of the letter wrote that appellant has a very large Maxillary and Mandibular tori that forces her tongue back and can potentially create a sleep apnea condition. The consultant stated the use of the word "may" indicates there is no definitive diagnosis. He further testified there was no supporting work up or documentation on the Temporo-Mandibular joint. The letter from the dental school indicates a plan to remove all tori. The consultant testified that tori is boney protuberances, present on appellant on the upper and lower arch that forces the tongue backwards. The author of the letter states that removing the tori could "prevent any possible

sleep apnea condition that the patient may already have.” (Ex. 8). The consultant testified appellant did not submit any sleep apnea tests to support the word “possible.” He stated there was no treatment plan submitted or documentation regarding removing the tori and that submission of photographs would have been prudent to judge the size of the tori. The consultant concluded that the request for prior authorization and the documentation submitted fell far short of a true clinical review. (Testimony).

When given the opportunity, appellant’s attorney representative did not have any questions for the CCA consultant after his testimony concluded. The appeal rep stated she did not find any specifications that require x-rays to show 4 or more teeth with decay. The CCA manager indicated the page numbers in the CCA provider manual where the criteria for crowns could be found. Appellant testified she was experiencing pain but the consultant noted this was not mentioned in the narrative provided by appellant’s provider in the prior authorization request.

Findings of Fact

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

1. CCA received a prior authorization request for the appellant for Code D2740, Crown, for multiple teeth. (Testimony; Ex. 5, pp. 1-7).
2. CCA denied the prior authorization request because x-rays did not show 4 or more surfaces of the tooth are decayed and the request was not medically necessary. Appellant appealed the initial denial from CCA. In a Level 1 appeal, CCA upheld the denial. (Testimony; Ex. 5, p. 11).
3. Appellant requested a Level 2 appeal to the Board of Hearings. (Testimony; Ex. 1).
4. The appellant’s dental provider wrote a letter saying appellant has conditions that may result in tension on her Temporo-Mandibular joints, ability to chew properly and reduce tongue space; he wrote appellant has very large tori that forces her tongue back and can potentially create a sleep apnea condition; he writes their plan is to prevent any possible sleep apnea condition that the patient may already have. (Ex. 8).
5. Appellant’s teeth did not show sufficient decay to warrant crowns. (Testimony).

Analysis and Conclusions of Law

The appellant has the burden "to demonstrate the invalidity of the administrative determination." Andrews v. Division of Medical Assistance, 68 Mass. App. Ct. 228 (2007).

The criteria used by CCA to determine medical necessity is found in their Provider Manual. (Ex. 6, p. 40; Testimony). The crown service requested by appellant is covered if, depending on the tooth, the x-rays show 3 or more or 4 or more surfaces of the tooth are decayed. The CCA consultant testified he reviewed the complete set of x-rays and the teeth requested for crowns did not meet the criteria for decay. I credit the testimony of the CCA consultant. I find his opinion to be persuasive, especially as he was subject to cross examination by the attorney appeal representative, who stated she had no questions for the consultant at the conclusion of his testimony.

Medical necessity is also defined in the MassHealth regulations.

450.204: Medical Necessity

The MassHealth agency does not pay a provider for services that are not medically necessary and may impose sanctions on a provider for providing or prescribing a service or for admitting a member to an inpatient facility where such service or admission is not medically necessary.

(A) A service is “medically necessary” if:

- (1) it is reasonably calculated to prevent, diagnose, prevent the worsening of, alleviate, correct, or cure conditions in the member that endanger life, cause suffering or pain, cause physical deformity or malfunction, threaten to cause or to aggravate a handicap, or result in illness or infirmity; and
- (2) there is no other medical service or site of service, comparable in effect, available, and suitable for the member requesting the service, that is more conservative or less costly to the MassHealth agency. Services that are less costly to the MassHealth agency include, but are not limited to, health care reasonably known by the provider, or identified by the MassHealth agency pursuant to a prior-authorization request, to be available to the member through sources described in 130 CMR 450.317(C), 503.007, or 517.007.

Appellant offered into evidence a letter from her provider. (Ex. 8). The provider writes “We humbly request from you to consider her case as a medical necessity.” The CCA consultant reviewed and testified regarding this letter and its sufficiency to support medical necessity. The consultant notes the wording used by the provider in the letter. Regarding the loss of Vertical Dimension, the provider writes there “may” be certain results; an issue can “potentially” create a sleep apnea condition; the provider “believes” he can improve appellant’s ability to chew and prevent “possible” sleep apnea that the patient “may” already have. The consultant testified that the word

“may” is not a definite diagnosis. He stated the provider did not submit any sleep apnea tests to support the “potential” of sleep apnea. The consultant concluded that the offered treatment plan was incomplete. I find the consultant’s testimony persuasive. His testimony was not challenged by cross examination. Using words like “may”, “potentially” and “possible” is equivocating language and the opposite of finding medical necessity.

The appellant has not met her burden. The record reflects that she has not shown enough decay on her teeth or medical necessity. The appeal is 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.

Thomas Doyle
Hearing Officer
Board of Hearings

cc:

MassHealth Representative: ICO Commonwealth Care Alliance, Attn: Cassandra Horne, 30 Winter Street, Boston, MA 02108

[REDACTED]