Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appearance for Appellant: Pro se Appearance for MassHealth: Sheldon Sullaway, DDS, 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:	Approved	lssue:	Dental; Denture Replacement
Decision Date:	10/30/2023	Hearing Date:	08/25/2023
MassHealth's Rep.:	Sheldon Sullaway, DDS	Appellant's Rep.:	Pro se
Hearing Location:	Board of Hearings (Remote)	Aid Pending:	Νο

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 June 2, 2023, MassHealth denied Appellant's prior authorization (PA) request for a complete maxillary denture (D5110) and partial mandibular denture – resin base (D5212). <u>See</u> 130 CMR 420.428 and Exhibits 2 and 5. Appellant filed this appeal in a timely manner on July 20, 2023.¹ <u>See</u> 130 CMR 610.015(B) and Exh. 1. Denial of assistance is valid grounds for appeal. <u>See</u> 130 CMR 610.032.

Action Taken by MassHealth

MassHealth denied Appellant's request for a complete upper denture and partial lower denture because she exceeded the benefit limitation.

lssue

 $^{^{1}}$ In her fair hearing request, Appellant listed an appeal representative to assist her at hearing. At the outset of the hearing, Appellant indicated that the representative – someone that had a career and extensive knowledge in dentistry – had since passed away. Appellant opted to proceed with the hearing without an appeal representative.

The appeal issue is whether MassHealth was correct in denying Appellant's request for dentures due to having exceeded MassHealth benefit limitation.

Summary of Evidence

The MassHealth representative, a Massachusetts licensed dentist and consultant for DentaQuest, appeared at the hearing by telephone. 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 adult member over the age of 21. <u>See</u> Exh. 2; <u>see also</u> Exh. 5, p. 3. On June 2, 2023, MassHealth received a prior authorization (PA) request from Appellant's dental provider at

, seeking approval for coverage of a complete maxillary denture (upper arch) under procedure code D5110 and a partial mandibular denture – resin base for tooth #32 under procedure code D5212. See Exh. 5, p. 3.

On June 2, 2023, MassHealth denied Appellant's PA request based on the determination that she had reached the benefit limitation for dentures, which are covered once per 84 months. <u>See id</u>. at 2. The MassHealth representative testified that MassHealth previously approved Appellant for the requested treatment and paid her then-dental provider for the completed services on March 12, 2019. Under 130 CMR 420.428(F), MassHealth will only replace a member's dentures once every 84-months, or 7-years. The representative explained that because Appellant received coverage for a complete upper and partial lower denture within 7-years, she is ineligible for replacement dentures at this time.

Appellant appeared at the hearing by telephone and testified that she received her initial denture which has since been closed for having committed MassHealth from fraud and malpractice. Her dentures were never satisfactory, and she could "see through" them since the day she received them. She raised her concerns about the dentures with the practice but was told that it was "not a big deal" and there was nothing to worry about. She kept the dentures in and would take them out at night. A month later, she observed a small chip from the gum part of the denture. She again contacted and they dismissed her concern, indicating it was not a problem. The dentures continued to chip. By the time she called again, the practice had closed. Any time she would call the practice, she would get a busy dial tone. The practice left no referral information regarding who to contact. Eventually, Appellant sought new dental care through a health center. The provider at the health center informed Appellant that her dentures were "too damaged to be repaired" and that she would not be eligible for new dentures. The dentures started falling out and she would try to secure them with glue four times a day. Eventually three of the teeth on the upper arch fell off, including one front tooth and two teeth next to it. She is no longer able to hold the dentures even with glue. As a result, she has lost over 50 pounds and looks "emaciated." She can only eat soft foods. She was recently seen by her

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doctor and was told she was severely dehydrated. Appellant described how it has not only affected her physical health, but her mental health as well and she has become significantly depressed.

Prior to hearing, Appellant included a letter from her physician, **Sector 2019**, M.D., dated June 28, 2023 that stated the following:

[Appellant] is a patient of mine. Her poorly fitting dentures are causing her to lose weight and [are] unable to properly fit. She has lost 40 lbs in the last year. They are also affecting her mental health.

<u>See</u> Exh. 3.

The record was left open for Appellant to obtain additional information from her dental provider as to the condition of the existing denture. <u>See</u> Exh. 6.

During the record-open period, Appellant submitted a letter from her dental provider, Dr. from the second provider, stating the following:

[Appellant] presented on 8/30/23 with her existing CU that is broken in multiple areas. CU has chipped away and multiple teeth are missing from the denture. Denture flanges are very chipped as well. We are unable to repair the denture or fix them with a reline and she has been advised to fabricate a new CU.

<u>See</u> Exh. 7, p. 1.

In addition, Appellant sent before and after pictures of herself showing the significant weight loss of 55lbs she asserted has been caused by her inability to use dentures. <u>See id</u>. pp. 2-3.

Dr. Sullaway reviewed the letter and pictures submitted during the record-open period and responded that "because of the regulations stated in my original testimony, I have to uphold the denial." <u>See</u> Exh. 8.

Findings of Fact

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

- 1. Appellant is a MassHealth adult member over the age of 21.
- On June 2, 2023, MassHealth received a PA request from Appellant's dental provider at seeking approval for coverage of (1) a complete maxillary denture - procedure code D5110 and (2) a mandibular partial denture – resin base for tooth #32 under procedure code D5212.
- 3. MassHealth previously approved Appellant for the completed upper and partial lower denture on March 12, 2019, and paid her then-provider for the services, accordingly.
- 4. On June 2, 2023, MassHealth denied Appellant's PA request based on the determination that she had reached the benefit limitation for dentures, which are covered once per 84 months.
- 5. The dental provider that was paid for Appellant's initial set of dentures is no longer in practice and the office has since closed.
- 6. Appellant's dentures are chipped with multiple teeth missing such that they cannot be repaired or fixed with a reline.
- 7. Appellant has lost significant weight because of her inability to use her existing denture with negative impact to her health.

Analysis and Conclusions of Law

At issue in this appeal is whether MassHealth correctly denied Appellant's prior authorization request for a complete maxillary denture. MassHealth dental regulations governing coverage of removable prosthodontics states, in relevant part, the following:

(A) <u>General Conditions</u>. *The MassHealth agency pays for dentures services once per seven calendar years per member*...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...

...

(F) <u>Replacement of Dentures</u>. *The MassHealth agency 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. The provider must inform the member of the MassHealth agency's policy on replacing dentures and the member's responsibility for denture care. *The MassHealth agency 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, 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.

130 CMR 420.428 (emphases added).

It is undisputed that Appellant's dentures are less than seven years old. The evidence shows, however, that the existing dentures cannot be made usable through repair or reline. Additionally, there is no evidence that any of the other conditions in the above list applies. Therefore, Appellant provided sufficient evidence to demonstrate that the replacement of her complete upper denture and partial lower denture is medically necessary and falls under the exception to the rule barring payment for denture replacement within seven years. <u>See</u> 130 CMR 420.428(F). Based on the foregoing, this appeal is APPROVED.

Order for MassHealth

Approve Appellant's 6/2/23 PA request for dental procedure codes (1) D5110 – complete maxillary denture and (2) D5212 – partial mandibular denture – resin base, tooth #32.

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.

Casey Groff, Esq. Hearing Officer Board of Hearings

cc: MassHealth Representative: DentaQuest 1, MA