

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2310368
Decision Date:	02/16/2024	Hearing Date:	12/04/2023
Hearing Officer:	Marc Tonaszuck	Record Open to:	01/19/2024

Appearance for Appellant:



Appearance for MassHealth:

Dr. Carl Perlmutter, DentaQuest

Interpreter:

Spanish



*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:	Orthodontics – Continuation of Coverage
Decision Date:	02/16/2024	Hearing Date:	12/04/2023
MassHealth's Rep.:	Dr. Carl Perlmutter, DentaQuest	Appellant's Rep.:	Mother
Hearing Location:	Springfield MassHealth Enrollment Center	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 10/22/2023, MassHealth denied the appellant's request for a continuation of orthodontic treatment submitted by his provider, Dr. Rizkallah, because MassHealth determined that the documentation was insufficient (see Exhibit 1). On 10/25/2023, a timely appeal was submitted on the appellant's behalf¹ (see 130 CMR 610.015(B) and Exhibit 2). Denial of assistance is valid grounds for appeal (see 130 CMR 610.032).

A fair hearing took place before the Board of Hearings on 12/04/2023, at which time the appellant's representative requested an opportunity to provide additional documentation to the hearing record. The record remained open in this matter until 01/05/2024 for the appellant's submission and until 01/19/2024 for DentaQuest's response (Exhibit 5).

Action Taken by MassHealth

¹ The appellant is a minor child who was represented in these proceedings by his mother.

MassHealth denied the appellant's request for a continuation of orthodontic care.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 420.431, in determining that the appellant is not eligible for a continuation of his orthodontic care.

Summary of Evidence

The appellant, a minor child, was represented at the fair hearing by his mother, who appeared telephonically. MassHealth was represented at the fair hearing by Dr. Carl Perlmutter, an orthodontist employed by DentaQuest, the MassHealth contractor that makes dental decisions for MassHealth. Exhibits 1-4 were admitted into evidence.

Dr. Perlmutter testified that a request was submitted by the appellant's treating orthodontist, Dr. Rizkallah, who requested a continuation of orthodontic care for the appellant. The appellant has braces on his teeth and the provider is seeking 8 ortho units (2 years) of additional treatment. Dr. Perlmutter testified that in order for DentaQuest to approve a continuation of care request, the proper forms must be submitted. In this case, they were not. Specifically, DentaQuest would need to know if the appellant had originally been approved by MassHealth for the installation of the braces, and if so, DentaQuest would need to see a letter from the previous provider authorizing transfer the patient's authorization to the new provider (only if current authorization has not expired or been consumed).

The appellant's mother testified with the assistance of a Spanish-language interpreter. She stated that her dentist told her that the appellant needed to continue his orthodontic treatment. Her orthodontist submitted the documents to DentaQuest with the initial PA request. She requested an opportunity to provide the hearing officer with the missing documentation. Her request was granted and the record remained open in this matter until 01/05/2024 for her submission and until 01/19/2024 for DentaQuest's response (Exhibit 5).

The appellant did make any submission during the record open period.

Findings of Fact

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

1. The appellant is under 21 years of age and currently has braces installed on his teeth.
2. On 09/28/2023, the appellant's orthodontic provider, Dr. Rizkallah, requested prior

authorization for continuation of comprehensive orthodontic treatment.

3. MassHealth provides coverage for a continuation of orthodontic care when the appropriate documentation is submitted by the orthodontic provider.
4. Dr. Rizkallah submitted a completed 2012 or newer ADA claim form listing services to be rendered.
5. Dr. Rizkallah submitted a Continuation of Care form that indicates “N/A” in the fields for “name of previous insurer that issued original approval,” “banding date,” “case rate approved by previous insurer,” “amount paid for dates of service that occurred prior to the patient becoming a MassHealth member,” “amount owed for dates of service that occurred prior to the patient becoming a MassHealth member,” and number of adjustments remaining.”
6. Dr. Rizkallah did not provide a copy of the appellant’s original approval and current diagnostic documentation.
7. Dr. Rizkallah did not provide documentation to show if orthodontics were previously approved by MassHealth, a letter from the previous provider authorizing transfer the patient’s authorization to the new provider (only if current authorization has not expired or been consumed).
8. The appellant has been eligible for MassHealth Standard benefits since 2011.
9. A fair hearing took place before the Board of Hearings on 12/04/2023.
10. At the fair hearing, the DentaQuest orthodontist informed the appellant’s mother of the incomplete documentation.
11. The hearing officer asked the appellant’s mother if she would like an opportunity to obtain the appropriate documentation from the appellant’s orthodontic provider.
12. The appellant’s mother requested that she be given an opportunity to provide the missing documentation.
13. The appellant’s mother’s request was granted and the record remained open until 01/05/2024 for her submission.
14. The appellant’s mother did not make a submission during the record open period.

Analysis and Conclusions of Law

Regulation 130 CMR 420.431(C) states, in relevant part, as follows:

The MassHealth agency pays for comprehensive orthodontic treatment only once per member under age 21 per lifetime and only when the member has a severe and handicapping malocclusion. The MassHealth agency determines whether a malocclusion is severe and handicapping based on the clinical standards described in Appendix D of the *Dental Manual*.

Section 16.4 of the MassHealth Dental Program Office Reference Manual, Authorization for Continuation of Care, states,

If a member is already receiving comprehensive or interceptive orthodontic treatment and is transferring from another provider and/or state Medicaid program or other insurer, the MassHealth provider that seeks to continue the treatment must submit to DentaQuest a prior authorization request for continuation of care including the following documentation:

- a. 2012 or newer ADA claim form listing services to be rendered.
- b. Continuation of Care form (page B-4 from the ORM).
- c. Copy of the member's original approval (if covered by MassHealth at that time) and current diagnostic documentation (e.g., photographic prints and radiographs, medical necessity narrative, other supporting documentation, etc.).
- d. If service was previously approved by MassHealth, a letter from the previous provider authorizing transfer the patient's authorization to the new provider (only if current authorization has not expired or been consumed). The provider is responsible for compiling and submitting the required information. Authorization for continuation of care may not be available without complete information.

When requesting prior authorization for continuation of comprehensive orthodontic care, the provider must submit the above documentation. In order for MassHealth to pay for orthodontic treatment, the provided documentation must be complete and comply with the above guidelines.

The appellant is under 21 years of age and has braces installed on his teeth. He has been eligible for MassHealth Standard benefits since 2011. On 09/28/2023, the appellant's orthodontic provider, Dr. Rizkallah, submitted a continuation of care request to MassHealth. Included with his request was a completed 2012 or newer ADA claim form listing services to be rendered. He also submitted a Continuation of Care form that indicates "N/A" in the fields for "name of previous insurer that issued original approval," "banding date," "case rate approved by previous insurer," "amount paid for dates of service that occurred prior to the patient becoming a MassHealth member," "amount owed for dates of service that occurred prior to the patient becoming a

MassHealth member,” and number of adjustments remaining.”

Dr. Rizkallah did not provide a copy of the appellant’s original approval and current diagnostic documentation. He also did not provide documentation to show if orthodontics were previously approved by MassHealth, a letter from the previous provider authorizing transfer the patient’s authorization to the new provider (only if current authorization has not expired or been consumed).

DentaQuest denied the request for a continuation of care based on the insufficiency of the documentation provided by Dr. Rizkallah. At the fair hearing, the DentaQuest orthodontist explained to the appellant’s mother what documentation DentaQuest would need in order to approve the appellant’s request for a continuation of care. She requested an opportunity to provide the missing documentation and her request was granted to hold the hearing record open for her submission; however, she provided no submission during the record open period.

DentaQuest correctly determined that the documentation submitted by the appellant’s orthodontic provider does not meet the requirements of the above guidelines. This appeal is therefore denied.

The appellant may make a new request for a continuation of care at any time.

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.

Marc Tonaszuck
Hearing Officer
Board of Hearings

cc: MassHealth Representative: DentaQuest 2, MA