

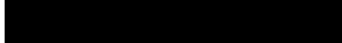
Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2310442
Decision Date:	12/12/2023	Hearing Date:	11/30/2023
Hearing Officer:	Sara E. McGrath		

Appearances for Appellant:



Appearances for MassHealth:

Dr. Sheldon Sullaway



*Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
Board of Hearings
100 Hancock Street
Quincy, MA 02171*

APPEAL DECISION

Appeal Decision:	Denied	Issue:	Prior Authorization for Dental Services
Decision Date:	12/12/2023	Hearing Date:	11/30/2023
MassHealth's Rep.:	Dr. Sullaway	Appellant's Rep.:	Pro se
Hearing Location:	Board of Hearings (telephonic)		

Authority

This hearing was conducted pursuant to Massachusetts General Laws Chapters 118E and 30A, and the rules and regulations promulgated thereunder.

Jurisdiction

Through a notice dated October 2, 2023, MassHealth denied the appellant's prior authorization request for a complete upper and a complete lower denture (Exhibit 1). The appellant filed this appeal in a timely manner (130 CMR 610.015(B); Exhibit 2). Denial of a request for prior authorization is a valid basis for appeal (130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied the appellant's request for prior authorization of a complete upper and a complete lower denture.

Issue

The appeal issue is whether MassHealth was correct in denying the appellant's prior authorization request.

Summary of Evidence

MassHealth was represented by a dental consultant for DentaQuest, the administrator of the MassHealth dental program. The MassHealth dentist appeared by telephone and testified that the appellant's provider submitted a prior authorization request for a complete upper and a complete lower denture on October 2, 2023. MassHealth denied the request on the same date. The MassHealth dentist explained that the appellant received a complete upper denture and a complete lower denture in April 2023, and that MassHealth limits the authorization of new dentures to once every seven years, with exceptions. He added that the PA request included no narrative from the provider and no other information that would allow reversal of the denial based on an exception.

The appellant appeared at the hearing by telephone and testified on her own behalf. She explained that prior to receiving the dentures, she had two surgeries to reshape her jaw. After her remaining teeth were removed, she waited for her gums to heal. Her dentist then made her dentures, and she had problems with them from the beginning. She submitted a letter in support of her appeal. That letter provides the following additional details:

My name is [appellant] and I am filing this appeal because I have been denied dentures and the dentist I originally went to is not standing behind their work. . . .

I received these dentures as a finished product on 4/11/23. On 4/25/23 I went back with concerns about the fit because my gums were in pain. An adjustment was done, though I had to return again after 4/25 because the problem was not corrected. The dentist told me I had to get used to them and she could not keep adjusting them. My gums were tender and a cut was forming on the bottom back left side.

Fast-forward to August. I was in [REDACTED], NH for a knee injury. During one of the exams, the doctor moved my leg producing pain in my knee. My response was to bite down and my upper dentures broke in half. This occurred on 8/9/23 at 11:42 am. I have a photo taken right after this happened and it's time stamped, if needed. Upon discharge from [REDACTED] on [REDACTED]/23, I went to the dentist and was denied service. [The dentist] stated she did not believe these were her dentures because she puts her name on them. The bottom dentures showed her name, the top could not be read because of where they broke. [The dentist] stated she would make a new denture, for the top only, but I would have to pay in advance, then get reimbursed by MassHealth. I know it does not work this way and I also have no money to buy new dentures.

(Exhibit 1, p. 3).

The appellant concluded by stating that her upper dentures are completely broken as described above, and her bottom dentures are ill-fitting in that they are too loose and too long, causing gum

pain.

Dr. Sullaway responded and suggested a reline of the lower denture; the appellant responded that her former dentist told her she would have to wait additional time before a reline can be done.

Findings of Fact

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

1. On October 2, 2023, the appellant requested MassHealth prior authorization for a complete upper denture and a complete lower denture.
2. On October 2, 2023, MassHealth denied the request.
3. The appellant filed a timely appeal of the MassHealth denial.
4. MassHealth paid for a complete upper and a complete lower denture less than one year ago.
5. The appellant has indicated that her upper denture is broken and that her lower denture is ill-fitting.

Analysis and Conclusions of Law

The issue on appeal involves the appellant's request for replacement dentures. MassHealth covers the cost of medically necessary dental services for its members, subject to the service descriptions and limitations set forth in its regulations (130 CMR 420.410). Under 130 CMR 420.428(F), MassHealth 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, and 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.

The appellant received new dentures in April 2023, and in October 2023 requested MassHealth coverage for a replacement set. She offered testimony regarding the status of the dentures, stating that the upper denture is broken, and the lower denture does not fit well. This testimony falls short of establishing the extraordinary circumstances that would justify a replacement at this time. Specifically, the appellant has not demonstrated that repair and/or reline will be unsuccessful (130 CMR 420.428(F)(1)). Because the dentures are not yet seven years old and there is no evidence that any of the exceptions listed above applies here, MassHealth was correct to deny coverage of the replacement dentures under 130 CMR 420.428 (F).

This appeal is therefore 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.

Sara E. McGrath
Hearing Officer
Board of Hearings

cc: DentaQuest