

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2311011
Decision Date:	01/30/2024	Hearing Date:	12/15/2023
Hearing Officer:	Thomas Doyle		

Appearance for Appellant:
Pro se

Appearance for MassHealth:
Dr. Sheldon Sullaway



*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 Approval-Crown
Decision Date:	01/30/2024	Hearing Date:	12/15/2023
MassHealth's Rep.:	Dr. Sheldon Sullaway	Appellant's Rep.:	Pro se
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 September 26, 2023, MassHealth denied a prior authorization request for a crown. (Ex. 5). The appellant filed an appeal in a timely manner on November 1, 2023. (Ex. 2). A decision regarding the scope or amount of assistance is valid grounds for appeal. (130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied the appellant's prior authorization request for a crown.

Issue

Whether MassHealth was correct in denying the appellant's prior authorization.

Summary of Evidence

Appellant, a MassHealth member over the age of 21 and acting pro se, and the MassHealth representative, a consultant from DentaQuest, the MassHealth dental administrator, appeared by telephone and were sworn. MassHealth received a request for procedure D2740, crown.

(Testimony; Ex. 5, p. 1). The MassHealth representative referred to the MassHealth Dental Program Office Reference Manual, which states that coverage of the D2740 service code is limited to once every sixty months “per patient per tooth.” Appellant had a crown placed on tooth number 14; this was covered by her MassHealth benefit on July 28, 2021. The MassHealth representative stated that, because it has not been sixty months (five years) since MassHealth paid for the appellant’s last crown, she is not eligible for coverage of a new one on tooth number 14. The MassHealth representative provided appellant with information for the MassHealth Dental Program Intervention Services where she could direct a complaint in hopes of resolving the issue that way.

Appellant testified that the crown was broken during a root canal procedure. She stated that she was not currently in any pain.

Findings of Fact

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

1. Appellant is a MassHealth member over the age of 21. (Ex. 6).
2. Appellant had a crown placed and covered by her MassHealth benefit on July 28, 2021. (Testimony).
3. On or about September 26, 2023, MassHealth received a prior authorization request from the appellant’s dental provider seeking coverage for a crown for appellant’s number 14 tooth. (Testimony; Ex. 1; Ex. 5).
4. MassHealth denied the request on or about September 26, 2023 because it had already paid for a crown for the appellant’s tooth on tooth number 14 within the past 5 years. (Testimony; Ex. 5).
5. During a root canal on appellant’s tooth, the crown was broken. (Testimony; Ex. 4).

Analysis and Conclusions of Law

At issue in this case is the appellant’s request for MassHealth coverage of a crown on tooth number 14. The appellant sought the crown as a replacement for one that was intentionally broken during a root canal to help with complications that occurred during that root canal. (Ex. 4). MassHealth denied the request because the appellant had received the first crown on the same tooth less than five years ago and not enough time had passed to allow for coverage of a replacement. Under 130 CMR 420.425(C), MassHealth pays for certain types of crowns for members aged 21 and older. However, the guidelines in the MassHealth Dental Office Reference

Manual set forth certain limitations on that coverage: For individuals aged 21 and older, coverage of crowns is limited to “one . . . per 60 month(s) per patient per tooth.” There is no dispute that this request came less than 60 months after the appellant received the first crown on the same tooth. Under these regulations, MassHealth was correct to deny coverage for this service.

For the foregoing reasons, this 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: DentaQuest 1, MA