

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Approved	Appeal Number:	2311716
Decision Date:	1/22/2024	Hearing Date:	12/18/2023
Hearing Officer:	Stanley Kallianidis	Record Open Date:	01/18/2024

Appearance for Appellant:



Appearance for MassHealth:

Dr. David Cabeceiras



*The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
Board of Hearings
100 Hancock Street, 6th Floor
Quincy, Massachusetts 02171*

APPEAL DECISION

Appeal Decision:	Approved	Issue:	Orthodontics Medical Necessity
Decision Date:	1/22/2024	Hearing Date:	12/18/2023
MassHealth's Rep.:	Dr. David Cabeceiras	Appellant's Rep.:	Parent
Hearing Location:	Taunton		

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 November 7, 2023, MassHealth denied the appellant's request for prior authorization of comprehensive orthodontic treatment (*see* 130 CMR 420.431 and Exhibit 1). The appellant filed this appeal in a timely manner on November 17, 2023 (*see* 130 CMR 610.015(B) and Exhibit 2). Denial of a request for prior approval is a valid basis for appeal (*see* 130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied the appellant's request for prior authorization of comprehensive orthodontic treatment.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 420.431, in determining that the appellant is ineligible for comprehensive orthodontic treatment.

Summary of Evidence

The appellant is a minor MassHealth member who was represented at hearing in person by his mother. The appellant did not attend the hearing. MassHealth was represented at hearing by Dr. Cabeceiras, an orthodontic consultant from DentaQuest, the MassHealth dental contractor.

The appellant's provider submitted a prior authorization request for comprehensive orthodontic treatment and the MassHealth Handicapping Labio-Lingual Deviations ("HLD") Form, which ordinarily requires a total score of 22 or higher for approval, unless there were conditions that warrant automatic approval, or if there was demonstrated medical necessity via a medical necessity narrative. In this case, a medical necessity narrative was submitted with the request for prior authorization (Exhibit 3).

The provider's HLD Form indicated a finding of a total score of 11. When DentaQuest initially evaluated this prior authorization request on behalf of MassHealth, its orthodontists also did not find any of the conditions that warrant automatic approval of comprehensive orthodontic treatment and determined that the appellant has an HLD score of 18. It did not address the issue of medical necessity despite the fact that a medical necessity narrative and supporting letters had been submitted with the request (Exhibit 3).

According to a letter from the appellant's therapist, the appellant is bullied at school due to his teeth, and that his "need for braces is necessary not only for his orthodontic needs but his mental health as well." According to a letter from the appellant's pediatrician, the appellant "is suffering from bullying in school and is in therapy. His self esteem has been suffering due to his orthodontia/need for braces." He concluded that "it is the best medical, psychological, and psychosocial interest of this medically complex child to have the orthodontic work needed to optimize his self-esteem and decrease the bullying he is receiving" (Exhibit 3).

At hearing, Dr. Cabeceiras indicated that he could not complete an HLD form based of his own because the appellant was not present for an examination. However, based on his review of the x-rays and photographs, he agreed with DentaQuest that the appellant's HLD score was less than 22, although he acknowledged that the appellant has an overjet and overbite. He did not address the medical necessity question, preferring rather to defer this back to DentaQuest.

The appellant's mother testified that her son needs braces due to his overjet and overbite. She explained that he has autism and anxiety, and that he is bullied in school due to the condition of his teeth and that this exacerbates his anxiety. Thus, he has a psychological condition that made the request for braces medically necessary.

The record was left open until January 18, 2024, for MassHealth/DentaQuest to respond to the medical necessity narrative and accompanying letters of medical necessity (Exhibit 4).

On December 21, 2023, the MassHealth representative indicated that it was upholding the denial because he and DentaQuest found that the “documentation does not support the condition of medical necessity” (Exhibit 5).

Findings of Fact

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

1. The appellant’s provider submitted a prior authorization request for comprehensive orthodontic treatment, including photographs and x-rays (Exhibit 3).
2. The provider completed an HLD Form for the appellant and calculated an overall score of 11 (Exhibit 3).
3. The provider did not find any of the auto-qualifying conditions, but a medical necessity narrative submitted along with supportive letters (Exhibit 3).
4. DentaQuest determined that the appellant has an HLD score of 18, and Dr. Cabeceiras agreed that the HLD score was less than 22 (Exhibit 3 & testimony).
5. The appellant has anxiety and autism (Exhibit 3 and testimony).
6. The appellant is bullied at school due to his overjet and overbite, and this causes him more anxiety (Exhibit 3 and testimony).
7. The appellant’s therapist found that the appellant’s “need for braces is necessary not only for his orthodontic needs but his mental health as well.” His pediatrician found that “His self-esteem has been suffering due to his orthodontia/need for braces” (Exhibit 3).
8. His pediatrician concluded that “it is the best medical, psychological, and psychosocial interest of this medically complex child to have the orthodontic work needed to optimize his self-esteem and decrease the bullying he is receiving” (Exhibit 3).
9. MassHealth and DentaQuest found that the “documentation does not support the condition of medical necessity” (Exhibit 5).

Analysis and Conclusions of Law

130 CMR 420.431 states, in relevant part, as follows:

(A) General Conditions. The MassHealth agency pays for orthodontic treatment, subject to prior authorization, service descriptions and limitations as described in 130 CMR 420.431. The provider must seek prior authorization for orthodontic treatment and begin initial placement and insertion of orthodontic appliances and partial banding or full banding and brackets prior to the members 21st birthday.

(B) Service Limitations and Requirements.

(3) Comprehensive Orthodontics. The MassHealth agency pays for comprehensive orthodontic treatment, subject to prior authorization, once per member per lifetime younger than 21 years old and only when the member has a handicapping malocclusion. The MassHealth agency determines whether a malocclusion is handicapping based on clinical standards for medical necessity as described in Appendix D of the Dental Manual.

Appendix D of the Dental Manual is the “Handicapping Labio-Lingual Deviations Form” (HLD), which is described as a quantitative, objective method for evaluating prior authorization requests for comprehensive orthodontic treatment. The HLD index provides a single score, based on a series of measurements that represent the degree to which a case deviates from normal alignment and occlusion. A score of 22 or higher signifies a handicapping malocclusion.

MassHealth will also approve a prior authorization request, without regard for the HLD numerical score, if there is evidence of one of the following autoqualifiers: a cleft palate, deep impinging overbite, anterior impaction, severe traumatic deviation, overjet greater than 9 mm, reverse overjet greater than 3.5 mm, or severe maxillary anterior crowding, greater than 8 mm.

Appendix D of the Dental Manual also includes the instructions for submitting a medical necessity narrative. It states the following:

Providers may establish that comprehensive orthodontic treatment is medically necessary by submitting a medical necessity narrative and supporting documentation, where applicable. The narrative must establish that comprehensive orthodontic treatment is medically necessary to treat a handicapping malocclusion, including to correct or significantly ameliorate

- i. a severe deviation affecting the patient’s mouth and/or underlying dentofacial structures;

- ii. a diagnosed mental, emotional, or behavioral condition caused by the patient's malocclusion;
- iii. a diagnosed nutritional deficiency and/or substantiated inability to eat or chew caused by the patient's malocclusion;
- iv. a diagnosed speech or language pathology caused by the patient's malocclusion; or
- v. a condition in which the overall severity or impact of the patient's malocclusion is not otherwise apparent.

In this appeal, I have found that the appellant scored 11 and 18 on the HLD scale, principally due to his overjet and overbite. While he had an HLD score of less than 22 which signifies a not "handicapping malocclusion", a medical necessity narrative along with letters from his therapist and pediatrician were submitted with his request for full orthodontic treatment. I have found further that the appellant has anxiety and autism and that he is bullied at school due to his overjet and overbite. This causes him more anxiety, and is the basis of his medical necessity request.

While MassHealth did not find medical necessity in this case, his treating sources found differently. The appellant's therapist found that the appellant's "need for braces is necessary not only for his orthodontic needs but his mental health as well." His pediatrician found that "His self-esteem has been suffering due to his orthodontia/need for braces." His pediatrician concluded that "it is the best medical, psychological, and psychosocial interest of this medically complex child to have the orthodontic work needed to optimize his self-esteem and decrease the bullying he is receiving."

Based on the above letters and the appellant's mother's testimony I disagree with MassHealth's continued denial of the appellant's orthodontic request. Both his therapist and pediatrician fully documented how the appellant's dentition directly negatively affected his mental well-being. I thus conclude along with his physician that braces will improve his self-esteem and decrease his bullying.

Accordingly, while the appellant does not have a malocclusion that is "handicapping" his request is "medically necessary" based on conditions described in Appendix D of the Dental Manual. He is therefore eligible for orthodontic treatment.

The appeal is therefore approved.

Order for MassHealth

Approve appellant's request for full orthodontic treatment.

Implementation of this Decision

If this decision is not implemented within 30 days after the date of this notice, you should contact your local office. 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.

Stanley Kallianidis
Hearing Officer
Board of Hearings

cc: DentaQuest