Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:

Appearances for Appellant:		Appearances for MassHealth:	
Hearing Officer:	Brook Padgett		
Decision Date:	01/11/2024	Hearing Date:	December 22, 2023
Appeal Decision:	Denied	Appeal Number:	2311843

Appearances for Appellant:

Appearances for MassHealth:

Pro se

Sheldon Sullaway, DMD



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

APPEAL DECISION

Appeal Decision:	Denied	lssue:	130 CMR 420.427 Adult Dental Program
Decision Date:	01//11/2024	Hearing Date:	December 22, 2023
MassHealth Rep.:	S. Sullaway, DMD	Appellant Rep.:	Pro se
Hearing Location:	Quincy		

Authority

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

Jurisdiction

The appellant received a notice dated November 12, 2023 stating he had been denied dental coverage for procedure D4341 in all four quadrants (Periodontal Scaling and Root Planing). (Exhibit 1). The appellant filed a timely appeal on November 20, 2023. (130 CMR 610.015(B); Exhibit 2). Denial of a request for prior authorization is valid grounds for appeal. (130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied the appellant's prior authorization request for Periodontal Scaling and Root Planing in all four quadrants.

lssue

Did MassHealth properly deny the appellant's prior authorization request?

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Summary of Evidence

The MassHealth dental consultant testified that on November 12, 2023, the appellant's dental provider submitted a request (D4341) for Periodontal Scaling and Root Planing – in all four quadrants (upper left, upper right, lower left, lower right). The consultant stated MassHealth pays for periodontal scaling and root planing only once per member per quadrant every three years and the records indicate the appellant received periodontal scaling and root planing in the upper and lower right quadrant on May 20, 2021 and periodontal scaling and root planing in the upper and lower left quadrant on August 13, 2021. (130 CMR 420.427(B)). The appellant received the request procedure within the last three years so the request was denied. (Exhibit 4).

The appellant acknowledged he received the periodontal scaling and root planing in all four quadrants in 2021. He stated his issue concern a crown that he received at the same time which was damaged and broken. The appellant maintained the crown he received was defective from the time it was put in, but his dental provider has refused to fix the crown and is requesting \$1,000.00 for a new one.

MassHealth responded that the provider request that was denied s concerned periodontal scaling and root planing and he has no documentation requesting a new crown. It was suggested that the appellant contact his provider regarding his eligibility for a new crown and Member Services to see if there was some recourse regarding his previously approved crown.

Findings of Fact

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

- 1. On November 12, 2023, the appellant's provider submitted a prior authorization request for periodontal scaling and root planing in all four quadrants. (Exhibit 4).
- 2. MassHealth records indicate the appellant received periodontal scaling and root planing on his upper and lower right four quadrants on May 20, 2021. (Exhibit 4).
- 3. MassHealth records indicate the appellant received approval for periodontal scaling and root planing for his upper and lower left four quadrants on August 13, 2021. (Exhibit 4).
- 4. MassHealth pays for periodontal scaling and root planing once per member per quadrant every three years. (130 CMR 420.427(B)).
- 5. The appellant has received periodontal scaling and root planing in all four quadrants within the prior three years.

Analysis and Conclusions of Law

All dental providers participating in MassHealth must comply with MassHealth regulations, including but not limited to 130 CMR 420.000 and 450.000. Subchapter 6 of the *Dental Manual* lists the Current Dental Terminology (CDT) codes for dentists and public health dental hygienists and Current Procedural Terminology (CPT) codes for specialists in oral surgery that the MassHealth agency pays for, a description of those codes, and where indicated, prior-authorization requirements.

On November 12, 2023, the appellant's dental provider submitted a request for prior authorization for periodontal scaling and root planing in all four quadrants. MassHealth pays for periodontal scaling and root planing once per member per quadrant every three years.¹ The appellant's request was denied because documentation indicates the appellant received periodontal scaling and root planing on the upper and lower right on May 20, 2021 and periodontal scaling and root planing on the upper and lower left on August 13, 2021, which is within the three year limitation.

MassHealth has correctly determined the appellant's ineligibility for procedure D4341 Periodontal Scaling and Root Planing – in all four quadrants (upper left, upper right, lower left, lower right) and this appeal is DENIED.

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¹ <u>130 CMR 420.427: Service Descriptions and Limitations: Periodontic Services (B) Periodontal Scaling and Root</u> <u>Planing</u>. The MassHealth agency pays for periodontal scaling and root planing once per member per quadrant every three years. The MassHealth agency does not pay separately for prophylaxis provided on the same day as periodontal scaling and root planing or on the same day as a gingivectomy or a gingivoplasty. The MassHealth agency pays only for periodontal scaling and root planing for a maximum of two quadrants on the same date of service in an office setting.

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.

Brook Padgett Hearing Officer Board of Hearings

cc: Sheldon Sullaway, DMD, DentaQuest.

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