

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2312147
Decision Date:	1/22/2024	Hearing Date:	12/29/2023
Hearing Officer:	Alexandra Shube		

Appearance for Appellant:
Via telephone:
Pro se

Appearance for MassHealth:
Via telephone:
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 Authorization – Adult Dental
Decision Date:	1/22/2024	Hearing Date:	12/29/2023
MassHealth's Rep.:	Dr. Sheldon Sullaway	Appellant's Rep.:	Pro se
Hearing Location:	Quincy Harbor South Remote	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

By a notice dated October 5, 2023, MassHealth denied the appellant's request for prior authorization of a crown on tooth number 4 (Exhibit 1). The appellant filed this appeal in a timely manner on November 28, 2023 (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 crown on tooth number 4.

Issue

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

Summary of Evidence

A consultant from DentaQuest, the MassHealth dental administrator, appeared telephonically and testified as follows: On October 5, 2023, the appellant's dental provider submitted a prior authorization request on the appellant's behalf for coverage of a crown on tooth number 4 (service code D2740). On the same date, MassHealth denied the prior authorization request. MassHealth denied the request because it determined that the appellant was provided a crown on the same tooth on July 29, 2021, and coverage is limited to one crown per tooth every five years.¹ He 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." He stated that because it has not been sixty months (five years) since MassHealth paid for the appellant's last crown, he is not eligible for coverage of a new one.

The appellant appeared at hearing telephonically and testified on his own behalf. He stated that the current crown was done incorrectly in July 2021 by his former dentist. The dentist left an open margin which is causing discomfort. He was not satisfied with that dentist, and no longer sees him. His current dentist recommended replacing the crown because of the open margin and discomfort.

The MassHealth dentist stated that if he is experiencing pain or discomfort, the appellant could be seen for emergency treatment which would be covered by MassHealth. Additionally, he provided the appellant with information for the MassHealth Dental Program Intervention Services where he could direct a complaint in hopes of resolving the issue that way.

Findings of Fact

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

1. The appellant is a MassHealth member who is over the age of 21 (Exhibit 5).
2. On October 5, 2023, the appellant's dental provider submitted a prior authorization request for coverage of a crown on tooth number 4 (service code D2740) (Testimony and Exhibits 1 and 4).
3. On October 5, 2023, MassHealth denied the request because the appellant received a crown on the same tooth on July 29, 2021, and coverage is limited to one crown per tooth every five years (Testimony and Exhibits 1 and 4).

¹ As part of the same notice, MassHealth took no action on a request for "core buildup, including any pins when required" (service code D2950) noting that authorization is not required for this service. See Exhibit 4.

4. The appellant filed a timely appeal on November 28, 2023 (Exhibit 2).

Analysis and Conclusions of Law

At issue in this case is the appellant's request for MassHealth coverage of a crown on tooth number 4. The appellant sought the crown as a replacement for one that is causing him some discomfort. MassHealth denied the request because the appellant had received the first crown on the same tooth less than five years ago on July 29, 2021, and not enough time had passed to allow for coverage of a replacement. Under 130 CMR 420.425(B), MassHealth pays for certain types of crowns for members age 21 and older. However, the guidelines in the MassHealth Dental Office Reference Manual set forth certain limitations on that coverage: For individuals age 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.

Alexandra Shube
Hearing Officer
Board of Hearings

cc: MassHealth Representative: DentaQuest 1, MA