

# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2400082
<b>Decision Date:</b>	4/9/2024	<b>Hearing Date:</b>	02/09/2024
<b>Hearing Officer:</b>	Scott Bernard		

**Appearance for Appellant:**



**Appearance for MassHealth:**

Dr. Sheldon Sullaway (DentaQuest) *via* telephone



*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

<b>Appeal Decision:</b>	Denied	<b>Issue:</b>	Dental – Prosthodontic Services (Fixed)
<b>Decision Date:</b>	4/9/2024	<b>Hearing Date:</b>	02/09/2024
<b>MassHealth's Rep.:</b>	Dr. Sheldon Sullaway	<b>Appellant's Rep.:</b>	
<b>Hearing Location:</b>	Quincy Harbor South	<b>Aid Pending:</b>	N/A

### 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 20, 2023, MassHealth denied the appellant's prior authorization (PA) request for surgical placement of a custom abutment (D6057) and an abutment supported porcelain/ceramic crown (D6058), both for tooth #20, because MassHealth determined that these services were not covered. (See 130 CMR 420.429; Exhibit (Ex.) 1; Ex. 8, pp. 3). The appellant's representative filed this appeal in a timely manner on his behalf on January 3, 2024. (See 130 CMR 610.015(B) and Ex. 2). Denial of assistance is valid grounds for appeal. (See 130 CMR 610.032).

On January 3, 2024 the Board of Hearings notified the appellant that it would dismiss his appeal within 10 days of the date of the letter unless he submitted documentation indicating that he authorized the appeal or the person requesting the appeal had the authority to request the appeal on his behalf. (Ex. 4). On January 16, 2024, the Board of Hearings received proof that the appellant's representative is the appellant's legal guardian. (Ex. 5). The Board of Hearings scheduled the hearing accordingly. (Ex. 6).

### Action Taken by MassHealth

MassHealth denied the appellant PA request for fixed prosthodontic services.

## Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 420.429, in determining that the services should be denied.

## Summary of Evidence

MassHealth was represented by a dentist licensed to practice for over 40 years working as a consultant with the DentaQuest, the MassHealth agent responsible for administering the MassHealth dental plan and for making the prior authorization determination for dental services. The appellant was represented by his mother, who is also his legal guardian. Both witnesses appeared at the hearing by telephone.

The MassHealth representative testified to the following. The appellant's dental provider submitted a request for prior authorization on November 20, 2023 and MassHealth made a determination and issued a denial notice on November 20, 2023. (Testimony; Ex. 1; Ex. 8, pp. 3, 4). The requests were for procedure number D6057, a custom abutment or implant and for procedure number D6058, which is the abutment supported porcelain ceramic crown, which would go over the implant on tooth #20. (Id.). Both procedures were denied because these services are not covered. (Testimony; Ex. 1; Ex. 8, p. 3). MassHealth does not cover any implant procedures. (Testimony). The operative notes indicate that the appellant's dental provider had already inserted the implant (D6057) at the time that tooth #20 was removed. (Testimony; Ex. 8, pp. 9-10, 11). This was done in June 2023 without prior authorization from MassHealth. (Id.). The MassHealth representative stated that he would have to uphold the denial. (Testimony).

The appellant's representative testified to the following. The appellant went in for the removal of his wisdom teeth on [REDACTED] 2023. (Testimony; Ex. 8, pp. 9-10). Prior to the procedure, the resident came out and spoke to the appellant's representative and her husband and said that tooth #20 had no adult tooth behind it and was loose and unstable. (Testimony; Ex. 8, p. 9). The resident informed the appellant's representative and her husband that the surgical team recommended pulling tooth #20 and inserting a titanium rod. (Testimony). Although the appellant's representative was not aware of it at the time, based on the MassHealth representative testimony she now assumed that this was the custom abutment (D6057). (Testimony). The appellant's representative and her husband asked to speak with the dentist and the oral surgeon, both of whom were in the operating room with the appellant. (Testimony). The dentist and oral surgeon informed the appellant's representative that they advised that the tooth come out. (Testimony). This recommendation was unexpected, they had only planned on the removal of the appellant's wisdom teeth. (Testimony). In any case, the appellant's representative and her husband approved the recommended procedures. (Testimony). Tooth #20 was removed and the titanium rod was placed. (Testimony).

The appellant and the appellant's representative went to a follow up appointment on August 12, 2023. (Testimony; Ex. 8, p. 11). The appellant's dentist told the appellant's representative at that time that MassHealth would not likely cover the crown. (Id.). When the appellant's representative asked the dentist whether there were other options, the dentist told the appellant's representative that the appellant could utilize a removable denture. (Id.). The appellant's representative is concerned since the appellant has a severe intellectual disability. (Testimony). The appellant has fine motor deficits, gross motor deficits, and autism. (Testimony). The appellant is not capable of putting a denture in and taking it out of his mouth and would have to rely on someone else to do so. (Testimony). For instance, the appellant currently has a retainer and the appellant's representative has to take it out and put it in his mouth for him. (Testimony). The appellant's representative stated that she understood MassHealth's position, but that the dental provider put her in a difficult position at the time they placed the titanium rod. (Testimony). The appellant's representative stated that the appellant is presently over the age of [REDACTED] 2023. (Testimony; Ex. 3).

## Findings of Fact

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

1. The appellant turned [REDACTED] years old subsequent to [REDACTED] 2023, but prior to November 2023. (Testimony; Ex. 3).
2. The appellant's dental provider submitted a request for prior authorization on November 20, 2023 and MassHealth made a determination and issued a denial notice on November 20, 2023. (Testimony; Ex. 1; Ex. 8, pp. 3, 4).
3. The requests were for procedure number D6057, a custom abutment or implant and for procedure number D6058, which is the abutment supported porcelain ceramic crown, which would go over the implant on tooth #20. (Id.).
4. Both procedures were denied because these services are not covered by MassHealth. (Testimony; Ex. 1; Ex. 8, p. 3).
5. MassHealth does not cover any implant procedures. (Testimony).
6. The operative notes indicate that the appellant's dental provider had already inserted the implant (D6057) at the time that tooth #20 was removed in June, 2023, without prior authorization from MassHealth. (Testimony; Ex. 8, pp. 9-10, 11).

## Analysis and Conclusions of Law

MassHealth "pays only for medically necessary services to eligible MassHealth members and may require that medical necessity be established through the **prior** authorization process..." (Emphasis

added). (130 CMR 420.410(A)(1)). In this case, the dental provider submitted the authorization request in November, which was after the date that the titanium rods were implanted. MassHealth does not approve authorization requests for procedures already undertaken or completed.

The service descriptions and limitations for fixed prosthodontic services are located at 130 CMR 420.429 and state "...MassHealth...pays for fixed partial dentures/bridge for **anterior teeth only for members younger than 21 years old with two or more missing permanent teeth...**" (130 CMR 420.429(A)). Holding aside the issue of prior authorization, MassHealth does not cover the services requested in the circumstance pertaining to the appellant. The dental provider is requesting that MassHealth pay for a titanium rod and crown for tooth #20, which is a single, posterior tooth. Furthermore, the appellant was not younger than the age of 21 that the request was submitted in any case.

For the above reasons, the 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.

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Scott Bernard  
Hearing Officer  
Board of Hearings

cc:

DentaQuest 1, MA