

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	DENIED	Appeal Number:	2403167
Decision Date:	05/23/2024	Hearing Date:	04/05/2024
Hearing Officer:	Kenneth Brodzinski		

Appearance for Appellant:

Pro se

Appearance for MassHealth:

Dr. Sheldon Sullaway

Interpreter:

Spanish



*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 - Dental
Decision Date:	05/23/2024	Hearing Date:	04/05/2024
MassHealth's Rep.:	Dr. Sheldon Sullaway	Appellant's 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

Through notice dated February 15, 2024, MassHealth denied Appellant's request for prior authorization to replace Appellant's full upper and lower dentures on the grounds that Appellant's existing or previous dentures are less than seven (7) years old (Exhibit A). Appellant filed this appeal in a timely manner on March 1, 2024 (see 130 CMR 610.015(B) and Exhibit A). Denial of prior authorization for assistance constitutes valid grounds for appeal (see 130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied Appellant's request for prior authorization to replace Appellant's full upper and lower dentures.

Issue

The appeal issue is whether MassHealth properly applied the controlling regulation(s) to accurate facts when it denied prior authorization to replace Appellant's full upper and lower dentures.

Summary of Evidence

Both parties appeared by telephone.

MassHealth was represented by a dentist who testified that Appellant's dental provider submitted a prior authorization request to MassHealth seeking approval for dental services D5110 (complete upper denture) and D5120 (complete lower denture). The MassHealth representative testified that both items were denied because Appellant was previously provided with these items on March 29, 2018 and MassHealth restricts replacement of these items if they are less than seven years old.

Appellant appeared on his own behalf and testified with the aid of a Spanish interpreter.

Appellant did not dispute the MassHealth representative's testimony. Appellant testified that he would be happy with just having the upper dentures. Appellant explained that while he was at work, his dentures fell out of his mouth and down a drain. Appellant testified that he can't chew his food and is losing weight. Additionally, he feels embarrassed because he cannot smile.

Findings of Fact

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

1. Appellant is appealing the denial of prior authorization for full upper and lower dentures.
2. MassHealth denied the request because Appellant's existing dentures are less than seven years old.
3. MassHealth paid for full upper and lower dentures that were furnished to Appellant on March 29, 2018.

Analysis and Conclusions of Law

This matter is controlled by MassHealth regulation 130 CMR 420.428 which states (emphasis supplied):

(F) Replacement of Dentures. The MassHealth agency pays for the necessary replacement of dentures. The member is responsible for denture care and maintenance. The member, or persons responsible for the member's custodial care, must take all

possible steps to prevent the loss of the member's dentures. The provider must inform the member of the MassHealth agency's policy on replacing dentures and the member's responsibility for denture care. The MassHealth agency does not pay for the replacement of dentures if the member's denture history reveals any of the following:

- (1) repair or reline will make the existing denture usable;*
- (2) any of the dentures made previously have been unsatisfactory due to physiological causes that cannot be remedied;*
- (3) a clinical evaluation suggests that the member will not adapt satisfactorily to the new denture;*
- (4) no medical or surgical condition in the member necessitates a change in the denture or a requirement for a new denture;*
- (5) the existing denture is less than seven years old and no other condition in this list applies;***
- (6) the denture has been relined within the previous two years, unless the existing denture is at least seven years old;*
- (7) there has been marked physiological change in the member's oral cavity, any further reline has a poor prognosis for success; or*
- (8) the loss of the denture was not due to extraordinary circumstances such as a fire in the home. The member, or persons responsible for the member's custodial care, must take all possible steps to prevent the loss of the member's dentures. The provider must inform the member of the MassHealth agency's policy on replacing dentures and the member's responsibility for denture care.*

The record does not evidence the applicability of conditions listed in sub sections 1-4, 6 or 7 above; therefore, subsection 5 does apply. MassHealth last furnished Appellant with full upper and lower dentures in March 2018. Insofar as the dentures are less than 7 years old, MassHealth properly applied the controlling regulation in denying the request.

For the foregoing reasons, the appeal is DENIED.

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.

Kenneth Brodzinski
Hearing Officer
Board of Hearings

cc:
MassHealth Representative: DentaQuest