

# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



Appeal Decision:	Denied	Appeal Number:	2404679
Decision Date:	06/07/2024	Hearing Date:	06/03/2024
Hearing Officer:	Marc Tonaszuck		

**Appearance for Appellant:**



**Appearance for MassHealth:**

Dr. Harold Kaplan, DentaQuest



*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>	Orthodontic Services
<b>Decision Date:</b>	06/07/2024	<b>Hearing Date:</b>	06/03/2024
<b>MassHealth's Rep.:</b>	Dr. Harold Kaplan, DentaQuest	<b>Appellant's Rep.:</b>	
<b>Hearing Location:</b>	Springfield MassHealth Enrollment Center	<b>Aid Pending:</b>	No

### 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 03/20/2024, MassHealth denied the appellant's prior authorization request for D8703 (replacement of lost or broken maxillary retainer) and D8704 (replacement of lost or broken mandibular retainer) (Exhibit 1). The appellant filed this appeal in a timely manner on 03/22/2024 (see 130 CMR 610.01S(B) and Exhibit 2). Challenging a denial of a prior authorization request is valid grounds for appeal (see 130 CMR 610.032).

### Action Taken by MassHealth

MassHealth denied appellant's prior authorization request for D8703 and D8704.

## Issue

The appeal issue is whether MassHealth was correct in denying appellant's prior authorization for replacement retainers.

## Summary of Evidence

MassHealth was represented by Dr. Harold Kaplan, a DentaQuest orthodontic consultant. On 03/18/2024, a prior authorization request for D8703 (replacement of lost or broken maxillary retainer) and D8704 (replacement of lost or broken mandibular retainer) was requested by the appellant's orthodontic provider, [REDACTED]. MassHealth denied that request because appellant had surpassed MassHealth's two-year time frame after the removal of his braces, which occurred on 01/27/2022. The MassHealth representative stated that he was unable to overturn MassHealth's decision.

The appellant appeared telephonically and requested that his mother represent him in these proceedings. She also appeared telephonically. The appellant's mother stated that she has her own insurance and the orthodontic provider informed her that she could not use it to pay for the retainers. The provider told her that MassHealth must pay for the retainers. She explained that the two retainers broke on the same day in March 2023, "due to normal wear and tear."

## Findings of Fact

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

1. On 03/18/2024, a prior authorization request for D8703 (replacement of lost or broken maxillary retainer) and D8704 (replacement of lost or broken mandibular retainer) was requested by appellant's orthodontic provider, [REDACTED].
2. MassHealth paid for the appellant's comprehensive orthodontia. He was debanded<sup>1</sup> on 01/27/2022.
3. Appellant's two retainers broke on the same day in March 2024.
4. On 03/20/2024, MassHealth denied the request for payment for the two retainers.
5. On 03/22/2024, a fair hearing request was submitted by the appellant.

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<sup>1</sup> "Debanding" refers to removal of orthodontia by an orthodontist.

6. On 06/03/2024, a fair hearing was held before the Board of Hearings. Dr. Kaplan, the MassHealth representative appeared telephonically, as did the appellant and his mother.

## Analysis and Conclusions of Law

The issue under appeal is whether MassHealth was correct in denying appellant's prior authorization request for a lower replacement retainer. Under 130 CMR 420.431(C)(5) the MassHealth agency pays for the replacement of lost or broken retainers with prior authorization. MassHealth's Dental Office Reference Manual, dated June 17, 2023, addresses the two procedure codes requested and states that the ***MassHealth agency pays for replacement retainers only during the 2-year retention period following orthodontic treatment*** (see MassHealth Dental Program, Office Reference Manual, p. 103 (June 17, 2023)). MassHealth paid for the appellant's comprehensive orthodontia. He was debanded on 01/27/2022. Because the prior authorization request of 03/18/2024 is outside the two year limit prescribed under the regulations, and the appellant has provided no legal basis for an exception to MassHealth's policy, 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.

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Marc Tonaszuck  
Hearing Officer  
Board of Hearings

cc:

MassHealth Representative: DentaQuest 1, MA