

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2407516
Decision Date:	08/06/2024	Hearing Date:	06/10/2024
Hearing Officer:	Casey Groff, Esq.		

Appearance for Appellant:



Appearance for MassHealth:

Harold Kaplan, D.M.D. (in-person)



*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:	Orthodontic Services
Decision Date:	08/06/2024	Hearing Date:	06/10/2024
MassHealth's Rep.:	Harold Kaplan, DMD	Appellant's Rep.:	██████████
Hearing Location:	Tewksbury MassHealth Enrollment Center	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

Through a notice dated 4/25/2024, MassHealth denied Appellant's prior authorization (PA) request for comprehensive orthodontic treatment. See Exhibits 1 and 2. Appellant filed a timely appeal on 5/10/24. See 130 CMR 610.015(B) and Exhibit 3. Denial of assistance is valid grounds for appeal. See 130 CMR 610.032.

Action Taken by MassHealth

MassHealth denied Appellant's PA request for comprehensive orthodontic treatment.

Issue

The appeal issue is whether MassHealth correctly denied Appellant's request for comprehensive orthodontic treatment.

Summary of Evidence

At the hearing, MassHealth was represented by Harold Kaplan, D.M.D., a board-certified orthodontist and consultant for DentaQuest. DentaQuest is the third-party contractor that administers MassHealth's dental program. According to testimony and documentary evidence presented by the MassHealth representative, Appellant is a minor child and MassHealth recipient. On 4/23/24 Appellant's orthodontic provider sent MassHealth a prior authorization (PA) request seeking coverage for procedure code D8080 - *comprehensive orthodontic treatment of the adolescent dentition* and eight (8) counts of procedure code D8670 - *periodic orthodontic treatment visits*. See Exh. 5, pp. 4-6. In support thereof, the provider indicated that Appellant had an auto-qualifying condition of "*crowding of 10 mm or more, in either the maxillary or mandibular arch (excluding 3rd molars). Includes the normal complement of teeth.*" See *id.* at 10. The requesting orthodontist did not indicate the presence of any other auto-qualifying condition listed on the Handicapping Labio-Lingual Deviations ("HLD") form, nor did they submit an HLD score or medical necessity narrative. *Id.* at 10-11. On 4/25/24, MassHealth denied the PA request based on its finding that the documentation submitted by the provider failed to demonstrate medical necessity for the proposed treatment. See *id.* at 4-5. Appellant's mother timely appealed the denial on behalf of her minor daughter. See Exh. 3.

Dr. Kaplan testified that MassHealth only covers comprehensive orthodontic treatment for members who have a severe, handicapping, or deforming malocclusion. The Handicapping Labio-Lingual Deviations (HLD) Index is a methodology that MassHealth uses to measure the degree to which characteristics of the member's teeth and bite deviate from normal occlusion and alignment. MassHealth considers a malocclusion to be "physically handicapping," only when the member's cumulative measured deviations result in an HLD score of 22 points or higher, or if there is one characteristic of the member's bite that is severe enough to be considered an "auto-qualifying condition." These conditions are listed on the HLD form. MassHealth will also consider alternative bases for coverage when the request contains a clinical narrative and documentation establishing medical necessity.

Upon receipt of the PA request, a DentaQuest orthodontic consultant reviewed the documentation submitted therein, including Appellant's dental records, oral and facial photographs, and x-rays. On review, the consultant determined that Appellant did not have any of the enumerated auto-qualifying conditions, including crowding of 10mm or more. Additionally, the dental consultant calculated an HLD score of 16 based on the documentation submitted. *Id.* at 7. In measuring the various HLD characteristics, the consultant awarded 5 points for anterior maxillary crowding that exceeded 3.5mm; however, the consultant did not find that the crowding reached 10mm to be deemed an auto-qualifying condition.

Dr. Kaplan testified that in preparation for this appeal, he conducted a secondary independent review of the PA request and dental records.¹ Dr. Kaplan testified that he measured Appellant's

¹ Dr. Kaplan was unable to perform an in-person oral examination of Appellant as she was not present at the

maxillary crowding at 7.5mm. Therefore, like the prior consultant, Dr. Kaplan also allotted 5 HLD points for evidence of crowding exceeding 3.5mm but could not substantiate the presence of an auto-qualifying condition based on crowding alone; nor could Dr. Kaplan find evidence of any other auto-qualifying condition. Because none of the reviews, including the one performed by Appellant's orthodontist, yielded a finding of an HLD score of 22 points or more, and because MassHealth could not evidence to substantiate the presence of an auto-qualifying condition, MassHealth denied the PA request.

Appellant's mother appeared at the hearing and testified that her daughter has been complaining of pain in her mouth and that her wisdom teeth are starting to erupt. She appealed a previous denial for braces about 2 or 3 years ago, and since then, her daughter's teeth and crowding have only gotten worse. She is concerned that the crowding will continue to worsen as more time passes. Currently, Appellant's upper crowding is "extreme," and she "absolutely" needs treatment. If MassHealth refuses to cover orthodontics, the provider suggested, as an alternative procedure, pulling four teeth. She did not want to go down that route. Appellant's mother testified that she has three kids and works part time. She does not have the money to pay for braces out of pocket. As such, she disputed the 4/25/24 denial.

Findings of Fact

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

1. On 4/23/24, Appellant's orthodontic provider sent MassHealth a PA request seeking coverage for comprehensive orthodontic treatment of the adolescent dentition with periodic orthodontic treatment visits. (Testimony; Exhs. 1, 2, and 5).
2. In support of the requested treatment, the provider indicated that Appellant had an "auto-qualifying" condition of *"crowding of 10 mm or more, in either the maxillary or mandibular arch (excluding 3rd molars). Includes the normal complement of teeth."* (Testimony; Exh. 5).
3. The requesting orthodontist did not indicate the presence of any other auto-qualifying condition listed on the HLD form, nor did they calculate and HLD score or include a medical necessity narrative in the PA request. (Testimony; Exh. 5).
4. Upon receipt of the PA request, a DentaQuest orthodontic consultant reviewed Appellant's dental records, oral photographs, and x-rays, and determined that Appellant had a total HLD score of 16 points; 5 points of which were based on maxillary crowding exceeding 3.5mm. (Testimony; Exh. 5).

hearing.

5. The DentaQuest consultant found that Appellant's maxillary crowding did not reach the requisite 10mm to be considered an auto-qualifying condition on crowding alone; nor did the consultant find evidence that Appellant had any other auto-qualifying condition. (Testimony; Exh. 5).
6. On 4/25/24, MassHealth denied the PA request based on a finding that the documentation submitted by the provider failed to demonstrate medical necessity for the proposed treatment. (Testimony; Exhs. 1 and 2).
7. Appellant, through her mother, timely appealed the denial. (Exh. 3).
8. Prior to this appeal, Appellant appealed a denial for braces issued approximately 2-3 years ago, and since then her crowding has worsened.
9. In preparation for the hearing, Dr. Kaplan – a board-certified orthodontist and consultant for DentaQuest - conducted a secondary review of Appellant's dental records and calculated a total HLD score of 15 points; 5 points of which were based on maxillary crowding that exceeded 3.5mm. (Testimony).
10. Dr. Kaplan measured total crowding of maxillary arch at 7.5mm, which was less than required to be considered an auto-qualifying condition on crowding alone, and he did not find evidence that Appellant had any other auto-qualifying condition. (Testimony).

Analysis and Conclusions of Law

MassHealth regulations governing coverage of orthodontic treatment provides, in relevant part, the following:

The MassHealth agency pays for comprehensive orthodontic treatment, subject to prior authorization, once per member per lifetime under the age of 21 **and only when the member has a handicapping malocclusion**. The MassHealth agency determines whether a malocclusion is handicapping based on clinical standards for medical necessity as described in Appendix D of the *Dental Manual*.

See 130 CMR 420.431(C)(3) (emphasis added).

Appendix D of the *Dental Manual* is the Authorization Form for Comprehensive Orthodontic Treatment and includes the "Handicapping Labio-Lingual Deviations" (HLD) Index. The HLD Index is a quantitative and objective method for measuring malocclusion through which the examiner calculates a single cumulative HLD score based on a series of measurements that represent the degree to which a case deviates from normal alignment and occlusion. See

Dental Manual, Appendix D. MassHealth has determined that an HLD score of 22 points or higher signifies a handicapping malocclusion. *Id.* Additionally, MassHealth will approve coverage for orthodontic treatment, without regard for the HLD numerical score, if there is evidence that the member has an “auto-qualifying” condition. *Id.* The HLD Index lists 13 separate “auto-qualifying conditions” for the provider to check, if and when applicable, as a basis for the requested treatment. *See id.* The HLD form explicitly states that **MassHealth will authorize treatment only “for cases with verified auto-qualifiers or verified scores of 22 and above.”** *See id.* (emphasis added). Alternatively, providers may seek authorization for comprehensive orthodontic treatment by submitting a clinical narrative that sufficiently demonstrates that braces are medically necessary to treat a handicapping malocclusion.²

In this case, Appellant’s orthodontist did not include an HLD score or medical necessity narrative in submitting the PA request. Rather, Appellant’s provider requested coverage for the proposed treatment solely on the basis that Appellant had an auto-qualifying of “*crowding of 10 mm or more, in either the maxillary or mandibular arch (excluding 3rd molars).*” *See* Exh. 5. Upon reviewing the images and dental records submitted with the PA request, orthodontic consultants from DentaQuest were unable to substantiate the presence of an auto-qualifying condition. While it is undisputed that Appellant has maxillary crowding that exceeds 3.5mm, neither the initial DentaQuest reviewer nor Dr. Kaplan found that her crowding reached the threshold measurement of 10mm to be considered an auto-qualifying condition. Because both consultants calculated HLD scores under the requisite 22 points, i.e. 16 and 15, respectively, there is no evidence that MassHealth erred in denying Appellant’s PA request for braces. While Appellant’s mother provided credible testimony regarding progression in her daughter’s crowding and problems stemming therefrom, there was ultimately no evidence to prove that her condition amounted to a

² Under Appendix D of the Dental Manual the “medical necessity narrative” must further show that the treatment will correct or significantly ameliorate (i.) a severe deviation affecting the patient’s mouth and/or underlying dentofacial structures; ii. a diagnosed mental, emotional, or behavioral condition caused by the patient’s malocclusion; iii. a diagnosed nutritional deficiency and/or a substantiated inability to eat or chew caused by the patient’s malocclusion; iv. a diagnosed speech or language pathology caused by the patient’s malocclusion; or v. a condition in which the overall severity or impact of the patient’s malocclusion is not otherwise apparent. The medical necessity narrative must clearly demonstrate why comprehensive orthodontic treatment is medically necessary for the patient. If any part of the requesting provider’s justification of medical necessity involves a mental, emotional, or behavioral condition; a nutritional deficiency; a speech or language pathology; or the presence of any other condition that would typically require the diagnosis, opinion, or expertise of a licensed clinician other than the requesting provider, then the narrative and any attached documentation must: (1) clearly identify the appropriately qualified and licensed clinician(s) who furnished the diagnosis or opinion substantiating the condition or pathology (e.g., general dentist, oral surgeon, physician, clinical psychologist, clinical dietitian, speech therapist); (2) describe the nature and extent of the identified clinician(s) involvement and interaction with the patient, including dates of treatment; (3) state the specific diagnosis or other opinion of the patient’s condition furnished by the identified clinician(s); (4) document the recommendation by the clinician(s) to seek orthodontic evaluation or treatment (if such a recommendation was made); (5) discuss any treatments for the patient’s condition (other than comprehensive orthodontic treatment) considered or attempted by the clinician(s); and (6) provide any other relevant information from the clinician(s) that supports the requesting provider’s justification of the medical necessity of comprehensive orthodontic treatment.

“handicapping malocclusion” as defined by the clinical criteria set forth under MassHealth regulations to warrant reversal of the 4/25/24 coverage determination.

Based on the foregoing, 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.

Casey Groff, Esq.
Hearing Officer
Board of Hearings

cc:

MassHealth Representative: DentaQuest 2, MA