

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	DENIED	Appeal Number:	2408061
Decision Date:	8/14/2024	Hearing Date:	06/28/2024
Hearing Officer:	Kenneth Brodzinski		

Appearance for Appellant:

Pro se

Appearance for MassHealth:

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 - Dental
Decision Date:	8/14/2024	Hearing Date:	06/28/2024
MassHealth's Rep.:	Dr. Sheldon Sullaway	Appellant's Rep.:	Pro se
Hearing Location:	Springfield MEC		

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 April 4, 2024, MassHealth denied Appellant's prior authorization request for dental services ([Exhibit A](#)). Appellant filed for this appeal in a timely manner on May 20, 2024 (see 130 CMR 610.015(B) and [Exhibit A](#)). Denial of a prior authorization request constitutes valid grounds for appeal (see 130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied Appellant's prior authorization requests for dental services.

Issue

The appeal issue is whether MassHealth properly applied the controlling regulation(s) to accurate facts when it denied Appellant's prior authorization request for dental services.

Summary of Evidence

Both parties appeared by telephone.

MassHealth was represented by a practicing dentist duly licensed in the Commonwealth. The MassHealth representative testified that Appellant's dental provider submitted a prior authorization request for dental service codes D6057 (crown abutment for an implanted tooth) and D6059 (crown for an implanted tooth). Both codes were for tooth number 5. The MassHealth representative testified that the request was denied because both of the service codes are not covered services under the MassHealth dental program.

Appellant testified consistent with a written letter that accompanied his Fair Hearing Request (Exhibit A). Appellant explained that he privately paid for dental implants about [REDACTED]. According to Appellant, his wife used the internet to see if MassHealth covered crowns and found that they did. Appellant also spoke by telephone with a MassHealth representative named [REDACTED]. Appellant reported that he explained that he had dental implants that needed crowns and was told by [REDACTED] that crowns are covered.

Findings of Fact

Based on a preponderance of the evidence, this record supports the following findings:

1. Appellant's dental provider submitted a prior authorization request for dental service codes D6057 (crown abutment for an implanted tooth) and D6059 (crown for an implanted tooth).
2. MassHealth denied the requested service codes on the grounds that they are not covered services.

Analysis and Conclusions of Law

The party appealing an administrative decision bears the burden of demonstrating the decision's invalidity (*Merisme v. Board of Appeals of Motor Vehicle Liability Policies and Bonds*, 27 Mass. App. Ct. 470, 474 (1989)). Appellant has not met his burden.

Covered MassHealth dental service codes are listed in the "*Dental Manual for MassHealth Providers*, Subchapter 6, Service Codes". According to this list, dental codes D6057 and D6059 are not listed and therefore are not covered under the MassHealth dental program.

As explained to Appellant during the hearing, there are different kinds of crowns. Crowns for

implanted teeth are not covered. Crowns for implanted teeth, unlike crowns for natural teeth, also require an abutment, and abutments are also not covered under the MassHealth Dental program.

It is nearly impossible to reliably draw facts from a reported phone conversation without both parties to the call offering testimony. Regardless of what Appellant was or was not told over the phone when he contacted MassHealth and regardless of how complete and accurate the questions may have been, coverage is simply not determined outside of the prior authorization process. The PA process is there precisely to avoid having members proceed with a treatment or service only to later find that it is not covered. That is the purpose of receiving PRIOR authorization. Calling a MassHealth representative is not part of the prior authorization process. Having the treating dentist communicate with the MassHealth Dental Department, professional to professional, in writing, providing complete and accurate information will elicit a response from a MassHealth dental professional (not a customer service representative) as to whether the requested service is covered or not.

On this record, there is no basis in fact or law to overturn MassHealth determination. This record shows that MassHealth properly applied the controlling regulations and properly denied the request for service codes not listed in the *"Dental Manual for MassHealth Providers, Subchapter 6, Service Codes"*. For the foregoing 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.

Kenneth Brodzinski
Hearing Officer
Board of Hearings

MassHealth Representative: DentaQuest 1, MA