

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:

[REDACTED]
[REDACTED]
[REDACTED]

Appeal Decision:	Denied	Appeal Number:	2408720
Decision Date:	08/16/2024	Hearing Date:	07/12/2024
Hearing Officer:	Scott Bernard		

Appearance for Appellant:

[REDACTED]

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

Appeal Decision:	Denied	Issue:	Dental/Crown/Benefit Limitation
Decision Date:	08/16/2024	Hearing Date:	07/12/2024
MassHealth's Rep.:	Dr. Sheldon Sullaway	Appellant's Rep.:	██████
Hearing Location:	Quincy Harbor South	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 May 13, 2024, MassHealth denied the appellant's prior authorization (PA) request for porcelain/ceramic crowns for teeth 29, 30, and 31 under Current Dental Terminology code (CDT) D2740 because the appellant was limited to one request every 60 months for this service. (See Exhibit (Ex.) 1; Ex. 5, p. 4). The appellant filed this appeal in a timely manner on June 3, 2024. (See 130 CMR 610.015(B) and Ex. 2). Denial of assistance is valid grounds for appeal. (See 130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied the appellant's PA request for a porcelain/ceramic crowns for teeth 29, 30, and 31 under CDT D2740.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 420.025, in determining that the request for prior authorization should be denied.

Summary of Evidence

MassHealth was represented by a licensed dental consultant with DentaQuest, the MassHealth agent responsible for administering the MassHealth dental plan and for making prior authorization determinations for dental services and the appellant appeared on her own behalf. Both parties attended the hearing by telephone.

The MassHealth representative testified to the following. On May 13, 2024, the appellant's dental provider submitted prior authorization requests for procedure number D2740, porcelain/ceramic crowns, for teeth numbers 29, 30, and 31. (Testimony; Ex. 5, p. 6). MassHealth issued a denial on the same date stating that the request exceeded the benefit allowance. (Testimony; Ex. 1; Ex. 2, pp. 2-3; Ex. 5, pp. 4-5). The MassHealth representative stated that the benefit allowance for D2740 is described in the MassHealth Dental Program Office Reference Manual (ORM) on page 112. (Testimony). According to the ORM, this service is limited to once every sixty months or five years. (Testimony). MassHealth paid for crowns for these teeth under this code less than sixty months ago, and for that reason MassHealth denied the PA requests. (Testimony). The MassHealth representative did state that if the appellant was experiencing discomfort in those teeth, she should make an emergency appointment to see her dentist, who is permitted to provide palliative treatment. (Testimony).

The appellant testified to the following. The appellant was supposed to have the crowns put in about one year ago but alleged that she never received the crowns from her old dentist, who was paid for the work but did not install the crowns. (Testimony). Initially, that dentist pressured the appellant to get the crowns installed quickly, fearing she might lose her MassHealth benefits. (Testimony). He performed preparatory work on the three teeth in one day, leaving her bruised. (Testimony). The appellant now has one large temporary crown for those three teeth, and this has made it difficult for her to chew on that side of her mouth. (Testimony). After that incident, the appellant did try to communicate with the old dentist to get the crowns installed but he avoided talking to her and eventually completely refused to take her calls. (Testimony). The appellant experiences ongoing pain, which she manages with coconut oil. (Testimony). The appellant has been offered sedatives and antibiotics but is concerned about their effect on her health. (Testimony). When asked whether she informed MassHealth about her old dentist's actions, the appellant said that she spoke to someone but did not provide details as to what the results were. (Testimony). The appellant is happy with her current dental provider, who submitted the PA request that MassHealth denied. (Testimony). They have done other dental work for her. (Testimony).

The MassHealth representative expressed sympathy concerning the appellant's condition. (Testimony). He recommended that she contact the MassHealth Dental Customer Service line and request a complaint form. (Testimony). The MassHealth representative also gave the appellant an address where she could request a complaint form be sent to her. (Testimony).

Findings of Fact

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

1. On May 13, 2024, the appellant's dental provider submitted prior authorization requests for procedure number D2740, porcelain/ceramic crowns, for teeth numbers 29, 30, and 31. (Testimony; Ex. 5, p. 6).
2. MassHealth issued a denial on the same date stating that the request exceeded the benefit allowance. (Testimony; Ex. 1; Ex. 2, pp. 2-3; Ex. 5, pp. 4-5).
3. The benefit allowance for D2740 is limited to once every sixty months or five years. (Testimony).
4. MassHealth paid for crowns for these teeth under this code less than sixty months ago, and for that reason MassHealth denied the PA requests. (Testimony).

Analysis and Conclusions of Law

MassHealth pays for restorative services in accordance with the service descriptions and limitations in 130 CMR 420.425(A) through (E). 130 CMR 420.425(C) states that for individuals over the age of 21, MassHealth pays for crowns made from porcelain or ceramic on permanent incisors, cuspids, bicuspid, and first and second molars. (130 CMR 420.425(C)(2)(b)). The regulation does not describe a service limitation for submitting requests under CDT D2740 or, for that matter, any other CDT code. The service limitation is contained within the ORM, which the MassHealth representative cited in his testimony. The ORM states that for a PA request for "D2740, crown - porcelain/ceramic" for individuals "21 and older" for "[t]eeth 2 - 15, 18 - 31" there is a limitation of "One...per 60 Month(s) Per patient per tooth." (ORM, p. 112). In rendering a decision, a hearing officer must give due consideration to Policy Memoranda and any other MassHealth agency representations and materials containing legal rules, standards, policies, procedures, or interpretations as a source of guidance in applying a law or regulation. (130 CMR 610.082(C)(3)). The ORM falls within this description.

The MassHealth representative testified that MassHealth approved requests for procedure D2740 for teeth 29, 30, and 31 at some point within the last 60 months. The record further shows that MassHealth received a request for the same service for the same teeth under the same code on May 13, 2024. The ORM limits this service to one time every 60 months. As the second request for service was submitted less than 60 months after the first, MassHealth denied the request. The appellant testified that she did not receive the crowns, however MassHealth paid for such crowns. At this time, the appellant would likely be best served by submitting a written complaint in the way the MassHealth representative described.

For the above stated 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.

Scott Bernard
Hearing Officer
Board of Hearings

DentaQuest 1, MA