

# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**

[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]

<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2409795
<b>Decision Date:</b>	08/15/2024	<b>Hearing Date:</b>	07/29/2024
<b>Hearing Officer:</b>	Alexandra Shube		

**Appearances for Appellant:**

[REDACTED]  
[REDACTED]  
[REDACTED]

**Appearance for MassHealth:**

Dr. Katherine Moynihan, Orthodontist

**Interpreter:** [REDACTED]



*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>	Prior Authorization – Orthodontics
<b>Decision Date:</b>	08/15/2024	<b>Hearing Date:</b>	07/29/2024
<b>MassHealth's Rep.:</b>	Dr. Moynihan	<b>Appellant's Reps.:</b>	[REDACTED] [REDACTED] [REDACTED]
<b>Hearing Location:</b>	Tewksbury 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 May 4, 2024, MassHealth denied the appellant's request for prior authorization of comprehensive orthodontic treatment (Exhibits 1 and 4). The appellant filed this appeal in a timely manner on June 24, 2024 (see 130 CMR 610.015(B) and Exhibit 2). Denial of a request for prior approval is a valid basis for appeal (see 130 CMR 610.032).

### Action Taken by MassHealth

MassHealth denied the appellant's request for prior authorization of comprehensive orthodontic treatment.

### Issue

The appeal issue is whether MassHealth was correct in determining that the appellant is ineligible for comprehensive orthodontic treatment.

## Summary of Evidence

The appellant is a minor child who has MassHealth Limited and the Children's Medical Security Plan (CMSP). The appellant appeared in-person with his mother and a social worker joined them over the telephone. MassHealth was represented at hearing by Dr. Katherine Moynihan, an orthodontic consultant from DentaQuest, MassHealth's orthodontic contractor.

The appellant's provider submitted a prior authorization request for comprehensive orthodontic treatment, including photographs and x-rays, on May 4, 2024. As required, the provider completed the MassHealth Handicapping Labio-Lingual Deviations ("HLD") Form, which requires a total score of 22 or higher for approval. The provider indicated she found two conditions that warrant automatic approval of comprehensive orthodontic treatment: impinging overbite with evidence of occlusal contact into the opposing soft tissue and crowding of 10mm or more, in either the maxillary or mandibular arch (excluding 3<sup>rd</sup> molars). She did not include a medical necessity narrative. The provider's HLD Form indicates that she found a total score of 38, broken down as follows:

Conditions Observed	Raw Score	Multiplier	Weighted Score
Overjet in mm	4	1	4
Overbite in mm	6	1	6
Mandibular Protrusion in mm	2	5	10
Open Bite in mm	0	4	0
Ectopic Eruption (# of teeth, excluding third molars)	0	3	0
Anterior Crowding <sup>1</sup>	Maxilla: x Mandible: x	Flat score of 5 for each <sup>2</sup>	10
Labio-Lingual Spread, in mm (anterior spacing)	8	1	8
Posterior Unilateral Crossbite	0	Flat score of 4	0
Posterior Impactions or congenitally missing posterior teeth (excluding 3 <sup>rd</sup> molars)	0	3	0
<b>Total HLD Score</b>			<b>38</b>

---

<sup>1</sup> The HLD Form instructs the user to record the more serious (i.e., higher score) of either the ectopic eruption or the anterior crowding, but not to count both scores.

<sup>2</sup> The HLD scoring instructions state that to give points for anterior crowding, arch length insufficiency must exceed 3.5 mm.

MassHealth denied the prior authorization request because the CMSP does not cover orthodontics. As such, DentaQuest did not complete the HLD form and denied the request on May 4, 2024.

At hearing, Dr. Moynihan explained that CMSP does not cover orthodontics. The appellant's mother could look into other MassHealth options to see if her son would qualify for more comprehensive benefits.

The appellant's mother was under the impression that she could still appeal based on medical necessity. The appellant's mother and social worker explained that the appellant has a heart condition (inflammation around his heart) for which he has been hospitalized in the past. Any pain or stress to his body can cause the heart condition to worsen. They are seeking braces for the appellant to allow space for the tooth to come down in a way that will reduce stress on his body. When he was hospitalized in December, the doctor said he needed to rest and not over-stress his body. The social worker also argued that orthodontics should be covered by MassHealth Limited, which the appellant has.

Dr. Moynihan explained the medical necessity process and the need for a medical necessity narrative from the treating provider with supporting documentation. She is not aware of any cardiac condition that would be ameliorated by orthodontic treatment. In fact, orthodontia is one medical field where the doctor purposefully causes inflammation in the body. While she does not know the appellant's exact condition, based on testimony, it sounded very likely that orthodontic treatment would be contraindicated given the appellant's heart condition. At this time, however, the HLD score, any automatic qualifying conditions if present, and medical necessity if established are irrelevant because the appellant has CMSP which does not cover orthodontics.

## **Findings of Fact**

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

1. The appellant is a MassHealth member under the age of 21 (Testimony and Exhibit 5).
2. The appellant's provider requested prior authorization for comprehensive orthodontic treatment and submitted an Orthodontics Prior Authorization Form, an HLD Form, photographs, and x-rays on May 4, 2024 (Exhibit 4).
3. The provider calculated an HLD score of 38, indicated the auto-qualifying conditions of impinging overbite with evidence of occlusal contact into the opposing soft tissue and crowding of 10mm or more, in either the maxillary or mandibular arch (excluding 3<sup>rd</sup> molars), and did not submit a medical necessity narrative (Exhibit 4).

4. The appellant has MassHealth Limited and CMSP, which do not cover orthodontic treatment (Testimony and Exhibit 5).
5. On May 4, 2024, DentaQuest denied the appellant's prior authorization request because orthodontic treatment is not covered by the CMSP (Testimony and Exhibit 4).
6. On June 24, 2024, the appellant timely appealed the denial (Exhibit 2).

## Analysis and Conclusions of Law

Pursuant to 130 CMR 522.004(G), Children's Medical Security Plan benefits provided are described at M.G.L. c. 118E, § 10F. Included benefits are:

- (1) preventive pediatric care;
- (2) sick visits;
- (3) office visits, first-aid treatment, and follow-up care;
- (4) provision of smoking prevention educational information and materials to the parent, guardian, or the person with whom the enrollee resides, as distributed by the Department of Public Health;
- (5) prescription drugs up to \$200 per state fiscal year;
- (6) urgent care visits, not including emergency care in a hospital outpatient or emergency department;
- (7) outpatient surgery and anesthesia that is medically necessary for the treatment of inguinal hernia and ear tubes;
- (8) annual and medically necessary eye exams;
- (9) medically necessary mental-health outpatient services, including substance-abuse treatment services, not to exceed 20 visits per fiscal year;
- (10) durable medical equipment, up to \$200 per state fiscal year, with an additional \$300 per state fiscal year for equipment and supplies related to asthma, diabetes, and seizure disorders only;
- (11) dental health services, up to \$750 per state fiscal year, including preventive dental care, provided that no funds will be expended for cosmetic or surgical dentistry;
- (12) auditory screening;
- (13) laboratory diagnostic services; and
- (14) radiologic diagnostic services.

Additionally, 130 CMR 450.105(F) states the following regarding covered services for MassHealth Limited:

For MassHealth Limited members (*see* 130 CMR 505.006: *MassHealth Limited* and 130

CMR 519.009: *MassHealth Limited*), the MassHealth agency pays only for the treatment of a medical condition (including labor and delivery) that manifests itself by acute symptoms of sufficient severity that the absence of immediate medical attention reasonably could be expected to result in

- (a) placing the member's health in serious jeopardy;
- (b) serious impairment to bodily functions; or
- (c) serious dysfunction of any bodily organ or part.

The appellant has MassHealth Limited and the Children's Medical Security Plan. Pursuant to 130 CMR 522.004(G), orthodontic treatment is not a benefit covered by CMSP.

The appellant has also not established that he has a medical condition that meets the requirements of 130 CMR 450.105(F) for MassHealth Limited to cover orthodontic treatment. He has not shown he has a condition manifested by acute symptoms of sufficient severity. Furthermore, he is not seeking immediate medical attention, but comprehensive orthodontic treatment. Even if comprehensive orthodontic treatment could be considered "immediate medical attention," he has not shown that the absence of the requested comprehensive orthodontic treatment could be expected to result in placing his health in serious jeopardy; serious impairment to bodily functions; or serious dysfunction to any bodily organ or part. To the contrary, based on information provided by the appellant through testimony, the MassHealth orthodontist felt that orthodontic treatment would likely be contraindicated given the appellant's heart condition.

For these reasons, the MassHealth decision was correct and 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.

---

Alexandra Shube  
Hearing Officer  
Board of Hearings

MassHealth Representative: DentaQuest 2, MA