

**Office of Medicaid  
BOARD OF HEARINGS**

**Appellant Name and Address:**



|                         |              |                        |            |
|-------------------------|--------------|------------------------|------------|
| <b>Appeal Decision:</b> | Denied       | <b>Appeal Number:</b>  | 2413549    |
| <b>Decision Date:</b>   | 11/27/2024   | <b>Hearing Date:</b>   | 10/04/2024 |
| <b>Hearing Officer:</b> | Thomas Doyle | <b>Record Open to:</b> |            |

**Appearance for Appellant:**  
Pro se

**Appearance for MassHealth:**  
Dr. Sheldon Sullaway

**Interpreter:**



*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>            | Dental – General Dental |
| <b>Decision Date:</b>     | 11/27/2024           | <b>Hearing Date:</b>     | 10/04/2024              |
| <b>MassHealth’s Rep.:</b> | Dr. Sheldon Sullaway | <b>Appellant’s Rep.:</b> | Pro se                  |
| <b>Hearing Location:</b>  | Remote (phone)       | <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 July 26, 2024, MassHealth denied a prior authorization request for a crown. (Ex. 1). The appellant filed an appeal in a timely manner on August 8, 2024. (130 CMR 610.015; Ex. 2). A decision regarding the scope or amount of assistance is valid grounds for appeal. (130 CMR 610.032).

## Action Taken by MassHealth

MassHealth denied the appellant’s prior authorization request for a replacement crown.

## Issue

Whether MassHealth was correct in denying the appellant’s prior authorization.

## Summary of Evidence

Appellant, a MassHealth member over the age of 21 and acting pro se, and the MassHealth representative, a consultant from DentaQuest, the MassHealth dental administrator, appeared by telephone and were sworn. MassHealth received a request for prior authorization for procedure

D2740, crown. (Testimony; Ex. 4, p. 2). Under 130 CMR 420.425 (C), MassHealth pays for certain types of crowns for members aged 21 and older. However, the guidelines in the MassHealth Dental Office Reference Manual set forth certain limitations on that coverage: For individuals aged 21 and older, coverage of crowns is limited to “one . . . per 60 month(s) per patient per tooth.” There is no dispute that this request came less than 60 months after the appellant received the first crown. Appellant had a crown placed and covered by his MassHealth benefit on March 1, 2023. The MassHealth representative stated that because it has not been 60 months (five years) since MassHealth paid for appellant’s last crown, appellant is not eligible for coverage of a new one.

Appellant testified that the claim was filed because the crown he has now has a gap in it and he believes if it remains, it will cause tooth decay. He stated he took care of his teeth after the crown was placed in March 2023.

## **Findings of Fact**

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

1. Appellant is a MassHealth member over the age of 21. (Ex. 5).
2. Appellant had a crown placed and covered by his MassHealth benefit on March 1, 2023. (Testimony).
3. On or about July 26, 2024, MassHealth received a prior authorization request from the appellant’s dental provider seeking coverage for a crown for appellant’s number 14 tooth. (Testimony; Ex. 1; Ex. 4).
4. MassHealth denied the request on or about July 26, 2024 because it had previously paid for a crown for the appellant’s tooth within the past 5 years. (Testimony).

## **Analysis and Conclusions of Law**

The appellant has the burden "to demonstrate the invalidity of the administrative determination." Andrews v. Division of Medical Assistance, 68 Mass. App. Ct. 228 (2007).

At issue in this case is the appellant’s request for MassHealth coverage of a crown on tooth number 14. MassHealth denied the request because the appellant had received the first crown on the same tooth less than five years ago and not enough time had passed to allow for coverage of a replacement. Under 130 CMR 420.425 (C), MassHealth pays for certain types of crowns for members aged 21 and older. However, the guidelines in the MassHealth Dental Office Reference Manual set forth certain limitations on that coverage: For individuals aged 21 and older, coverage

of crowns is limited to “one . . . per 60 month(s) per patient per tooth.” There is no dispute that this request came less than 60 months after the appellant received the first crown on the same tooth. Under these regulations, MassHealth was correct to deny coverage for this service.

For the foregoing reasons, 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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Thomas Doyle  
Hearing Officer  
Board of Hearings

MassHealth Representative: DentaQuest 1, MA