

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2416881
Decision Date:	01/24/2025	Hearing Date:	December 30, 2024
Hearing Officer:	Brook Padgett		

Appellant Representatives:



MassHealth Representative:

Dr. David Cabeceiras, DMD



*Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
Board of Hearings
100 Hancock Street, 6th floor
Quincy, MA 02171*

APPEAL DECISION

Appeal Decision:	Denied	Issue:	130 CMR 420.431 Orthodontic Services
Decision Date:	01/24/2025	Hearing Date:	December 30, 2024
MassHealth Rep.:	D. Cabeceiras, DMD	Appellant Reps.:	
Hearing Location:	Springfield		

Authority

This hearing was conducted pursuant to Massachusetts General Laws Chapter 118E, Chapter 30A, and the rules and regulations promulgated thereunder.

Jurisdiction

The Appellant received a notice dated October 08, 2024, stating: MassHealth has denied your request for full orthodontic treatment. (130 CMR 420.431(E)(1); Exhibit 1).

The Appellant filed this appeal timely on November 03, 2024. (130 CMR 610.015(B); Exhibit 2).

Denial of assistance is valid grounds for appeal. (130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied the Appellant's request for prior authorization for full orthodontic treatment.

Issue

Is the Appellant eligible for full orthodontic treatment?

Summary of Evidence

MassHealth was represented by a board-certified orthodontist and consultant for DentaQuest, the third-party contractor that administers and manages the MassHealth dental program. According to testimony and documentary evidence presented by the MassHealth representative, the Appellant is a minor child and a MassHealth recipient. On October 08, 2024, the Appellant's orthodontic Provider sent MassHealth a prior authorization (PA) request seeking coverage for comprehensive orthodontic treatment (D8080) with periodic orthodontic treatment visits (D8670). On October 14, 2024, MassHealth denied the request because the "service exceeds [the] benefit allowance" of "one time per-lifetime per-patient."

At hearing, the MassHealth representative testified that MassHealth's dental regulations limit coverage of comprehensive orthodontic treatment to once per-lifetime. According to records, MassHealth approved the Appellant for comprehensive orthodontic treatment and the Appellant was banded on May 09, 2022. On June 19, 2023, the Appellant requested the braces be removed. The Appellant has therefore already received their limit of once per-lifetime orthodontic treatment and is currently ineligible to have MassHealth cover the new request.

MassHealth stated that the Appellant's Provider did complete an HLD form with the PA request; however, because the Appellant exceeded the benefit limit MassHealth did not perform a substantive review as to whether Appellant's malocclusion warranted braces.

The Appellant was represented by his father and mother who testified the Appellant was previously approved for braces; however, they asked them to be removed because the Provider wanted to pull one of the Appellant's teeth. The Appellant was 10 at the time and very nervous about having a canine tooth pulled so rather than traumatize her they requested the braces be removed and allow the tooth to naturally fall into place. The tooth is now in the correct location and they want to resume the orthodontic care but the orthodontist is refusing to re-band the Appellant without getting paid to put the braces back on.

The MassHealth representative stated often times a tooth needs to be removed to facilitate treatment. The Appellant was previously approved for coverage for both putting on and taking off of the braces as well as for the treatment. The Appellant continues to have MassHealth funds to cover the ongoing treatment, so if the Appellant can privately pay to have the braces put back on, MassHealth will pay for the continuation of care. However, because MassHealth already paid for the initial placement and removal of the braces, MassHealth will not pay to have the hardware put back on.

Findings of Fact

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

1. The appellant was approved for comprehensive orthodontic treatment and was banded with braces on May 09, 2022. (Exhibit 4).
2. At the Appellant's parents' request, the Appellant's Provider removed the Appellant's braces to allow a tooth to naturally fall into place rather than have the tooth pulled. (Testimony).
3. On June 19, 2023, the Appellant's then-orthodontic Provider removed Appellant's braces before orthodontic treatment was completed. (Exhibit 4).
4. On October 08, 2024, Appellant's current orthodontic Provider sent MassHealth a PA request seeking coverage for comprehensive orthodontic treatment to re-band the removed braces. (Exhibit 4).
5. On October 08, 2024, MassHealth denied the request because Appellant had exceeded MassHealth's benefit allowance of once per-lifetime per-patient for the service. (Exhibit 4).

Analysis and Conclusions of Law

MassHealth covers the cost of medically necessary dental services for its members, subject to the service descriptions and limitations set forth in its regulations. See 130 CMR 420.431. MassHealth regulations governing coverage of orthodontic treatment states, 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.

Subchapter 6 of the MassHealth Dental Manual, which is incorporated by reference into the regulations, provides a list of the Current Dental Terminology (CDT) service codes MassHealth pays for, as well as a description of those codes and the applicable PA requirements. Subchapter 6, CDT procedure code D8080 is covered for members under 21 years of age "***once per lifetime***."¹

¹ Specifically, these sources indicate that MassHealth pays for only ***one of*** D8080, D8070, and D8090 once per-member per-lifetime. Id.

See MassHealth Dental Manual Subchapter 6, § 612 (1/1/23); See also DentaQuest's "Office Reference Manual" (Rev. 1/12/24), p. 102. See 130 CMR 420.431(C)(3) (*Emphasis added*).

It is undisputed that MassHealth previously approved, and paid for, comprehensive orthodontic treatment on behalf of Appellant prior to May 09, 2022. Although the Appellant's parents credibly testified about their concern regarding the Appellant's age and the trauma of pulling of one of the Appellant's teeth when they requested the Appellant's braces be removed on June 19, 2023, the MassHealth regulations are clear that D8080 is covered for members under 21 years of age only once per lifetime. The Appellant's current request exceeds the program's limits. See 130 CMR 420.431(C)(3).

Based on the foregoing, this appeal must be 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.

Brook Padgett
Hearing Officer
Board of Hearings

cc: MassHealth representative: DentaQuest, PO Box 9708, Boston, MA 02114-9708