

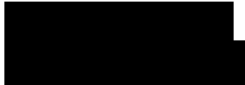
# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2418150
<b>Decision Date:</b>	2/19/2025	<b>Hearing Date:</b>	01/06/2025
<b>Hearing Officer:</b>	Thomas Doyle	<b>Record Open to:</b>	N/A

**Appearance for Appellant:**



**Appearance for MassHealth:**

Dr. Kathryn Moynihan



*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>	PA -Orthodontics
<b>Decision Date:</b>	2/19/2025	<b>Hearing Date:</b>	01/06/2025
<b>MassHealth's Rep.:</b>	Dr. Kathryn Moynihan	<b>Appellant's Rep.:</b>	
<b>Hearing Location:</b>	Quincy Harbor South 1	<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 November 4, 2024, MassHealth denied appellant's prior authorization for comprehensive orthodontic treatment. (Ex.1). Appellant filed this appeal in a timely manner on November 22, 2024. (Ex. 2). Denial of assistance is valid grounds for appeal. (130 CMR 610.032).

### Action Taken by MassHealth

MassHealth denied appellant's request for prior authorization for braces or comprehensive orthodontic treatment.

### Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 420.431, in determining appellant does not meet the MassHealth requirements for coverage of orthodontic treatment.

## Summary of Evidence

Appellant is an [REDACTED] male and a MassHealth member who was represented at hearing by her father. (Ex. 5). MassHealth was represented by Dr. Kathryn Moynihan, a consultant from DentaQuest, the entity that has contracted with MassHealth to administer and run the agency's dental program for MassHealth members. All parties appeared in person at the hearing site in [REDACTED]

Dr. Moynihan stated that MassHealth does not cover every case for every child. They only cover severe and handicapping cases. By law, the agency can only cover requests and pay for treatment for full orthodontics when the bad bite or "malocclusion" meets a certain high standard. It is not enough to say that the appellant has imperfect teeth, or that the member and their family has been told by a dentist that the patient would generally need or benefit from braces. Instead, to obtain approval, the bite or condition of the teeth must have enough issues or discrepancies that it falls into the group of malocclusions with the most severe or handicapping issues.

Appellant's orthodontic provider submitted a prior authorization request for comprehensive orthodontic treatment, together with X-rays and photographs. Appellant's dental provider completed the Handicapping Labio-Lingual Deviations (HLD) form and found a score of 30. (Ex. 4, p. 10). Dr. Moynihan testified that, on the HLD point scale, 22 points is needed for approval. Dr. Moynihan testified that she scored a 17 on the scale. (Testimony). DentaQuest reached a score of 16. (Ex. 4, p. 4).

Specifically, Dr. Moynihan testified that on the HLD scale, appellant's orthodontist, DentaQuest and herself found a score of 6mm for Overjet. (Testimony; Ex.4, p. 4, 10). In scoring Overbite, Dr. Moynihan stated, after her in-person examination of appellant, she scored 4mm as did DentaQuest. (Testimony; Ex. 4, p. 4). She testified she could not read the orthodontist's score on Overbite. (Testimony; Ex. 4, p. 10). In scoring Anterior Crowding, Dr. Moynihan stated the orthodontist found crowding in the upper arch but in her in person examination of appellant, while she found some crowding, it did not exceed 3.5 mm. She stated her and DentaQuest scored Anterior Crowding at 5mm and gave no points for the upper arch. (Testimony; Ex. 4, p. 10). Regarding the Labial-Lingual Spread, Dr. Moynihan stated this mean spacing or deviation from a normal arch length. She stated Labio Lingual is the lips and tongue. The orthodontist scored 3mm. (Ex. 4, p. 10). DentaQuest scored 1mm. (Ex. 4, p. 4). Dr. Moynihan scored 2mm after examining appellant at hearing. (Testimony). Dr. Moynihan next discussed Posterior Impaction. She stated appellant's orthodontist found 2 teeth were impacted and gave 3 points for each tooth, totaling 6. (Testimony; Ex. 4, p. 10). She stated, "you only count this if orthodontics is the only way to solve this issue." (Testimony). She stated DentaQuest gave a 0 score and after her in person examination of appellant, she found a score of 0. (Testimony; Ex. 4, p. 4). Dr. Moynihan concluded by saying the orthodontist found a score of 30 on the HLD

scale, DentaQuest found a score of 16 and, after her in person examination of appellant, she found a score of 17. (Testimony; Ex. 4, p. 4, 10). Dr. Moynihan stated that she finds appellant is under the necessary score of 22 needed on the HLD scale. She stated even though appellant may benefit from braces, appellant's condition is not severe or handicapping at this time.

Regardless of point total, it is also possible to qualify for orthodontic treatment if the appellant has a condition deemed an Autoqualifier. Here, the appellant's provider did not indicate the presence of an Autoqualifier. (Ex. 4, p. 10). DentaQuest did not find the presence of an Autoqualifier. (Ex. 4, p. 4). Dr. Moynihan testified she also did not find an Autoqualifier present. (Testimony).

It is additionally possible to qualify for comprehensive orthodontic treatment if that treatment is medically necessary for appellant. For appellant's particular conditions to be evaluated to see if those conditions support a Medical Necessity determination, evidence, in the form of a Medical Necessity Narrative letter and supporting documentation, must be submitted by appellant's requesting provider. Generally, this involves a severe medical condition that can include atypical or underlining health concerns which may be either dental or non-dental. Here, the appellant's orthodontic provider did not provide a Medical Necessity Narrative, nor was any additional supporting documentation submitted. (Ex. 4, p. 11-12). Moreover, Dr. Moynihan's testimony and DentaQuest's submitted evidence do not support a Medical Necessity determination at this time. (Testimony; Ex. 4).

Appellant's mother testified appellant is in pain. Dr. Moynihan stated there was no documentation submitted describing a diagnosis of pain. Appellant stated he felt like his second molar was impacting his first molar.

## Findings of Fact

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

1. Appellant is an [REDACTED] male and a MassHealth member. (Testimony; Ex. 1; Ex. 5).
2. Through a notice dated November 4, 2024, MassHealth denied appellant's prior authorization for comprehensive orthodontic treatment. (Ex.1).
3. Neither the initial DentaQuest review nor the review testified to by Dr. Moynihan found evidence of 22 or more points on the HLD scale. (Ex. 4, p. 4; Testimony). MassHealth approves requests for comprehensive orthodontic treatment when the member has an HLD score of 22 or more or has one of the conditions that warrant automatic approval of comprehensive orthodontic treatment. (Testimony).

4. Appellant's provider submitted an HLD score of 30 points. (Ex. 4, p. 10).
5. At hearing, Dr. Moynihan conducted an in person examination of appellant's mouth and reviewed the provider's paperwork, photographs, and X-rays. She calculated an HLD score of 17. (Testimony). DentaQuest found an HLD score of 16. (Ex. 4, p. 4).
6. Appellant only has a score of 5 points for Anterior Crowding as there is no crowding exceeding 3.5 mm in the upper arch. (Testimony; Ex. 4, p. 4).
7. Appellant only scores 2mm for Labial-Lingual Spread. (Testimony).
8. Appellant scores 0 points for Posterior Impaction. (Testimony).
9. Appellant's total HLD score is below 22. (Testimony).
10. None of the reviewers, appellant's orthodontist, Dr. Moynihan or DentaQuest found an auto qualifier to be present. (Testimony; Ex. 4, p. 4, 10).
11. Appellant's orthodontic provider did not submit documentation related to whether treatment is medically necessary in accordance with the instructions on the latter pages of the HLD form. (Ex. 4, p. 11-12).
12. DentaQuest's submitted evidence does not support a Medical Necessity determination at this time. (Ex. 4).

## **Analysis and Conclusions of Law**

As a rule, the MassHealth agency and its dental program pays only for medically necessary services to eligible MassHealth members and may require that such medical necessity be established through a prior authorization process. (130 CMR 450.204; 130 CMR 420.410). In addition to complying with the prior authorization requirements at 130 CMR 420.410 et seq.,<sup>1</sup> covered services for certain dental treatments, including orthodontia, are subject to the relevant limitations of 130 CMR 420.421 through 420.456. (130 CMR 420.421 (A) through (C)).

130 CMR 420.431 contains the description and limitation for orthodontic services. As to comprehensive orthodontic requests, that regulation reads in relevant part as follows:

---

<sup>1</sup> 130 CMR 420.410(C) also references and incorporates the MassHealth Dental Program Office Reference Manual publication as a source of additional explanatory guidance beyond the regulations. It is noted that references in the regulations to the "*Dental Manual*" include the pertinent state regulations, the administrative and billing instructions (including the HLD form), and service codes found in related subchapters and appendices. See <https://www.mass.gov/lists/dental-manual-for-masshealth-providers>.

420.431: Service Descriptions and Limitations: Orthodontic Services

(A) General Conditions. The MassHealth agency pays for orthodontic treatment, subject to prior authorization, service descriptions and limitations as described in 130 CMR 420.431. ...

(C) Service Limitations and Requirements.

...

(3) Comprehensive Orthodontics. The MassHealth agency pays for comprehensive orthodontic treatment, subject to prior authorization, once per member per lifetime younger than 21 years old 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**. ...

(**Bolded** emphasis added.)

Appendix D of the Dental Manual contains the current HLD Authorization Form found in Exhibit 4. As indicated by the paper record, the MassHealth testimony, and the relevant regulations, appendices, and manuals (including the HLD Authorization form), MassHealth approves comprehensive orthodontic treatment only when the member meets one of the three following requirements:

- (1) the member has an “auto qualifying” condition as described by MassHealth in the HLD Index;
- (2) the member meets or exceeds the threshold score (currently 22 points) listed by MassHealth on the HLD Index; or
- (3) comprehensive orthodontic treatment is medically necessary for the member, as demonstrated by a medical necessity narrative letter and supporting documentation submitted by the requesting provider. Usually this involves a severe medical condition that can include atypical or underlining health concerns which may be either dental or non- dental.

The appellant has the burden "to demonstrate the invalidity of the administrative determination." [REDACTED] On this record, the appellant has not demonstrated the invalidity of the denial of preauthorization for braces.

A review of the different HLD scores is required to ascertain if appellant’s bad bite or malocclusion is severe enough to qualify as a handicapping malocclusion. The MassHealth standard requires a current score of 22 on the HLD index. Here, appellant’s orthodontic provider calculated a score of 30 points on the HLD scale. Dr. Moynihan only found an HLD score of 17. (Testimony). Dr. Moynihan testified she carefully looked at photos and x-rays of appellant’s mouth and she had the opportunity to conduct an in-person examination of appellant at the hearing. There are three main areas of contention. The first is Anterior Crowding. Dr. Moynihan stated the orthodontist found crowding in the upper arch but in her in-person examination of appellant, while she

found some crowding, it did not exceed 3.5 mm. She stated her and DentaQuest scored Anterior Crowding only at 5mm and gave no points for the upper arch. The second criteria at issue is the Labio-Lingual Spread. Appellant's orthodontist scored 3mm while Dr. Moynihan scored 2mm after examining appellant's mouth at hearing. The third area of disagreement is Posterior Impactions. Dr. Moynihan stated appellant's orthodontist found 2 teeth were impacted and gave 3 points for each tooth, totaling 6. After her in person examination of appellant, Dr. Moynihan found a score of 0 points.

If Dr. Moynihan's scoring on the HLD scale is credited, you would have 5 points for Anterior Crowding, 2 points for Labio-Lingual Spread and 0 points for Posterior Impactions. You would then adjust the score of appellant's orthodontist to 20 on the HLD scale.<sup>2</sup>

I credit the testimony of Dr. Moynihan. I find her explanation of her process in reviewing photos, x-rays and her in-person examination to be very thorough. Dr. Moynihan is an orthodontist who provided credible testimony and based on the overall testimony given at hearing, I find that the opinion of the orthodontist present at hearing to be persuasive and plausible, especially as she was subject to cross examination by appellant his father and his mother.

Appellant has not met his burden and the appeal is denied.

## **Order for MassHealth**

None.

---

<sup>2</sup> The orthodontist's score for Overbite is illegible but appears to be a 5. If you credit this as a 5 and add that to 6 for Overjet, 2 for Mandibular Protrusion, 5 for Anterior Crowding, 2 for Labio-Lingual Spread and 0 for Posterior Impactions (the last three being what I find as fact) the orthodontist's score is 20, under the needed score of 22.

## **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.

---

Thomas Doyle  
Hearing Officer  
Board of Hearings

MassHealth Representative: DentaQuest 2, MA