

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2419326
Decision Date:	2/5/2025	Hearing Date:	01/23/2025
Hearing Officer:	Susan Burgess-Cox		

Appearance for Appellant:
Pro se

Appearance for Commonwealth Care Alliance (CCA):
Cassandra Horne & Dr. Alan Finkelstein

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

Appeal Decision:	Denied	Issue:	General Dental; ICO
Decision Date:	2/5/2025	Hearing Date:	01/23/2025
CCA's Rep.:	Cassandra Horne & Alan Finkelstein	Appellant's Rep.:	Pro se
Hearing Location:	All Parties Appeared by Telephone		

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 27, 2024, Commonwealth Care Alliance, (CCA), a MassHealth-contracted Integrated Care Organization (ICO), denied a Level 1 Appeal regarding the surgical placement of an endosteal/implant for tooth #3/5/7/10/12/14/19; prefabricated abutment, includes modification and placement for tooth #3/5/7/10/12/14/19; implant supported porcelain/ceramic crowns for tooth #3/4/5/6/7/8/9/10/11/12/13/14; and porcelain ceramic crowns for tooth #20/21/22/27/28/29/30. The reason for the denial was because the treatment proposed is beyond the scope of coverage and does not meet the criteria for medical necessity. (Exhibit 1). The notice from CCA states that "Medically Necessity" means that the services, supplies, or drugs are needed for the prevention, diagnosis or treatment of your medical condition and meet accepted standards of medical practice. (Exhibit 1).

The appellant filed this external appeal of the final decision of the ICO on December 18, 2024. (130 CMR 610.018; Exhibit 2).

A decision of an ICO to "deny or provide limited authorization of a requested service, including the type or level of service, including determinations based on the type or level of service, requirements for medical necessity, appropriateness, setting, or effectiveness of a covered benefit" is valid grounds for appeal. (130 CMR 610.032(B)).

Action Taken by the Integrated Care Organization

The MassHealth-contracted Integrated Care Organization, Commonwealth Care Alliance (CCA), denied the appellant's prior authorization request for an endosteal/implant for tooth #3/5/7/10/12/14/19; prefabricated abutment, includes modification and placement for tooth #3/5/7/10/12/14/19; implant supported porcelain/ceramic crowns for tooth #3/4/5/6/7/8/9/10/11/12/13/14; and porcelain ceramic crowns for tooth #20/21/22/27/28/29/30.

Issue

Whether Commonwealth Care Alliance (CCA) was correct in denying the appellant's prior authorization request.

Summary of Evidence

All parties appeared by telephone. Documents from Commonwealth Care Alliance (CCA) were incorporated into the hearing record as Exhibit 4. Documents from the appellant were incorporated into the hearing record as Exhibit 5.

Commonwealth Care Alliance (CCA), a MassHealth Integrated Care Organization (ICO) received a prior authorization request for services on 20 of the appellant's teeth. (Testimony; Exhibit 4). On April 9, 2022, CCA denied the request as the services were not covered codes nor deemed medically necessary. (Testimony; Exhibit 4).

The appellant filed a request for a standard 30-day appeal with CCA. (Testimony; Exhibit 4). On November 13, 2024, CCA issued a notice denying the Level 1 appeal. (Testimony; Exhibit 1; Exhibit 4).

As an ICO, CCA is responsible for providing enrolled members with the full continuum of Medicare- and MassHealth covered services. MassHealth does not cover implants of any type or description. As an ICO, CCA can provide more to members than MassHealth allows, but not less.

The appellant requested authorization for the surgical placement of implants on tooth number 3/5/7/10/12/14/19. CCA covers the surgical placement of implants (D6010¹) with certain

¹ This number is a dental procedure code that is part of the Current Dental Terminology (CDT) system. The American Dental Association (ADA) develops and updates these codes annually. The codes help ensure dental treatment is documented accurately, consistently and uniformly.

limitations including: the replacement of 1 missing anterior tooth when no other teeth (including 3rd molars) are missing in the arch or a maximum of two missing upper or lower anterior implants for the purpose of supporting a denture where there is no minimal ridge present. (Testimony; CCA Provider Manual). For the surgical placement of implants, CCA needs to see documentation showing healthy bone and periodontium; and the area is free from the presence of periodontal disease. (Testimony; CCA Provider Manual). CCA denied this request. The dentist offering testimony for CCA noted that seeking coverage of an implant for 7 teeth is beyond the scope of coverage.

The appellant requested authorization for prefabricated abutment (D6056), including modification and placement, for tooth #3/5/7/10/12/14/19. (Testimony; CCA Provider Manual). CCA covers these structures if the agency is provided with documentation showing a fully integrated surgical implant with good crown/root ratio; healthy bone and periodontium surrounding the surgical implant; and that the area is free from the presence of periodontal disease. (Testimony; CCA Provider Manual). CCA denied this request as it went beyond the scope of coverage. The dentist present for CCA also noted that this is not a service covered by MassHealth.

The appellant requested authorization for an implant supported porcelain/ceramic crowns (D6065) for tooth #3/4/5/6/7/8/9/10/11/12/13/14. CCA covers these structures if the agency is provided with documentation showing a fully integrated surgical implant with good crown/root ratio; healthy bone and periodontium surrounding the surgical implant; and that the area is free from the presence of periodontal disease. (Testimony; CCA Provider Manual). CCA denied this request. The dentist present for CCA testified that this request is beyond the scope of coverage.

The appellant requested authorization for porcelain/ceramic crowns (D2740) for tooth #20/21/22/27/28/29/30. The CCA representative testified that the request must include documentation showing medical necessity and the appellant's provider did not submit adequate documentation. The dentist from CCA testified that the X-rays submitted by the appellant's provider were not clear, so CCA was unable to confirm that the treatment was medically necessary. The dentist from CCA recommended that the appellant return to the current provider and have them present an alternative plan that would be within the scope of CCA coverage.

During the course of the appeal process the appellant provided documentation of current medications; a medical history of: depression; conditions related to other areas of the body with notes indicating that most have been resolved; and dental records from 2023 and March 2024. The appellant's son initially appeared at hearing but did not offer any testimony. The appellant testified that she had a bridge in her mouth that has been broken for years. The appellant testified that as her mouth changed, the bridge did not fit correctly. The appellant asked CCA to approve the request as the services were necessary for her health.

The appellant asked CCA to recommend a treatment plan. The dentist from CCA responded that it was up to the appellant's dentist to submit a plan to CCA as they are providing the care to the appellant. The appellant testified that the request for this treatment plan was for her health.

Findings of Fact

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

1. CCA received a prior authorization request for the surgical placement of implants (D6010) on tooth #3/5/7/10/12/14/19.
2. CCA received a prior authorization request for prefabricated abutment (D6056), including modification and placement, for tooth #3/5/7/10/12/14/19.
3. CCA received a prior authorization request for implant supported porcelain/ceramic crowns (D6065) for tooth #3/4/5/6/7/8/9/10/11/12/13/14.
4. CCA received a prior authorization request for porcelain/ceramic crowns (D2740) for tooth #20/21/22/27/28/29/30.
5. CCA denied the prior authorization requests for all 4 treatments.
6. The appellant filed a request for a standard 30-day appeal with CCA.
7. On November 13, 2024, CCA issued a notice denying the Level 1 appeal

Analysis and Conclusions of Law

As a MassHealth ICO, CCA will authorize, arrange, integrate, and coordinate the provision of all covered services for the member. (130 CMR 508.007). Upon enrollment, the ICO is required to provide evidence of its coverage, the range of available covered services, what to do for emergency conditions and urgent care needs, and how to obtain access to specialty, behavioral health, and long-term services and supports. (130 CMR 508.007).

CCA is responsible for providing enrolled members with the full continuum of Medicare- and MassHealth covered services. (130 CMR 450.105). Those services include dental services governed by the regulations at 130 CMR 420.000. As an ICO, CCA can provide more to members than MassHealth allows, but not less.

MassHealth pays only for medically necessary services to eligible MassHealth members and may require that medical necessity be established through the prior authorization process. (130 CMR 420.410(A)(1)).

A service is "medically necessary" if:

- (1) it is reasonably calculated to prevent, diagnose, prevent the worsening of, alleviate, correct, or cure conditions in the member that endanger life, cause suffering or pain, cause physical deformity or malfunction, threaten to cause or to aggravate a handicap, or result in illness or infirmity; and
- (2) there is no other medical service or site of service, comparable in effect, available, and suitable for the member requesting the service, that is more conservative or less costly to MassHealth. (130 CMR 450.204(A)).

MassHealth does not cover implants of any type or description. (130 CMR 420.421(B)(5)).

CCA covers implants with certain limitations including: the replacement of 1 missing anterior tooth when no other teeth (including 3rd molars) are missing in the arch or a maximum of two missing upper or lower anterior implants for the purpose of supporting a denture where there is no minimal ridge present. (CCA Provider Manual). The appellant's request for implants for 7 teeth and supporting dentition is beyond the scope of coverage.

Additionally, the appellant requested authorization for porcelain/ceramic crowns (D2740) for tooth #20/21/22/27/28/29/30. The appellant did not provide documentation prior to or at hearing to demonstrate that the treatment was medically necessary. The appellant did not provide sufficient testimony or evidence to demonstrate how the conditions listed in the medical records relate to the dental treatment in the authorization request.

As noted at hearing, the appellant can return to the current or other provider and present an alternative treatment plan for CCA to consider in the future.

The decision made by the ICO was correct.

This appeal is denied.

Order for the Integrated Care Organization

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.

Susan Burgess-Cox
Hearing Officer
Board of Hearings

[REDACTED]

MassHealth Representative: ICO Commonwealth Care Alliance, Attn: Nayelis Guerrero, 30 Winter Street, Boston, MA 02108