Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision: DENIED Appeal Number: 2500869

Decision Date: 04/11/2025 **Hearing Date:** 03/03/2025

Hearing Officer: Kenneth Brodzinski

Appearance for Appellant: Appearance for MassHealth:

Dr. Katherine Moynihan

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: Prior Authorization -

Orthodontics

Decision Date: 04/11/2025 **Hearing Date:** 03/03/2025

MassHealth's Rep.: Dr. Katherine

Moynihan

Appellant's Rep.:

Hearing Location: Tewksbury MEC

Authority

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

Jurisdiction

Through notice dated October 17, 2024, MassHealth denied Appellant's request for prior authorization for comprehensive orthodontic treatment (Exhibit A). Appellant filed this appeal in a timely manner on December 19, 2024 (see 130 CMR 610.015(B) and Exhibit A). Denial of assistance is valid grounds for appeal (see 130 CMR 610.032).

Action Taken by the Division

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

Issue

The appeal issue is whether MassHealth properly applied the controlling regulation(s) to accurate facts in denying Appellant's request for comprehensive orthodontic treatment.

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Summary of Evidence

Appellant and his mother appeared in person. MassHealth appeared virtually by video.

The MassHealth representative, a practicing orthodontist, testified that Appellant's request for comprehensive orthodontic treatment was considered in light of the written information provided in the prior authorization request form (Exhibit B) and oral photographs submitted by Appellant's dental provider. The information was then applied to a standardized HLD Index that is used to make an objective determination as to whether Appellant has a "handicapping malocclusion." The MassHealth representative testified that the HLD Index uses objective measurements taken from the subject's teeth to generate an overall numeric score. The MassHealth representative testified that a handicapping malocclusion is indicated with a minimum score of 22. She further testified that according to the prior authorization request, Appellant's dental provider reported an overall score of 30 (Exhibit B).

The MassHealth representative testified that MassHealth's agent DentaQuest reviewed the request and took measurements from Appellant's oral photographs and determined an HLD score of 17. The MassHealth representative testified that her own review and measurements yielded an HLD score of 14. The MassHealth representative then explained where and how Appellant's provider had overscored Appellant's dental condition and where she and DentaQuest diverged in their scoring.

Appellant's mother did not challenge the scoring by DentaQuest or the MassHealth representative. Appellant's mother testified that her daughter is very unhappy with her dentition and doesn't want to smile. She testified that Appellant recently went to a birthday party and refused to smile even for photographs.

Findings of Fact

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

- 1. Appellant seeks prior authorization for comprehensive orthodontic treatment.
- 2. Appellant's dental provider determined that Appellant has an overall HLD index score of 30.
- 3. Using measurements taken from Appellant's oral photographs, MassHealth's agent

¹ A handicapping malocclusion can also be evidenced by the presence of an "auto qualifier" which are conditions such as cleft lip/cleft pallet and deep impinging overbites among others. Appellant's provider did not assert the presence of any auto qualifier.

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DentaQuest determined that Appellant had an overall HLD index score of 17.

- 4. Using measurements taken from Appellant's oral photographs, the MassHealth representative, who is a practicing orthodontist, determined that Appellant had an overall HLD index score of 14.
- 5. Appellant does not have a "handicapping malocclusion" at this time.

Analysis and Conclusions of Law

The party appealing an administrative decision bears the burden of demonstrating the decision's invalidity (*Merisme v. Board of Appeals of Motor Vehicle Liability Policies and Bonds*, 27 Mass. App. Ct. 470, 474 (1989). On this record, Appellant has not met her burden.

Regulations at 130 CMR 420.431(C)(3) state in pertinent part:

Service Descriptions and Limitations: Orthodontic Services:

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. Upon the completion of orthodontic treatment, the provider must take post treatment photographic prints and maintain them in the member's dental record.

(Emphasis supplied).

Appendix D of the MassHealth Dental Manual requires an HLD score of 22 and/or the existence of an auto qualifier to evidence the existence of a handicapping malocclusion. The same Appendix limits the crowding that is to be counted towards the HLD score to "Anterior crowding" only (canine to canine).

While Appellant may benefit from orthodontic treatment, the above-cited regulation is clear and unambiguous. MassHealth will cover orthodontic treatment "only" for recipients who have a "handicapping malocclusion." Based on the informed and considered opinion of MassHealth's agent, DentaQuest and the MassHealth representative, who is a practicing orthodontist, who both examined Appellant's oral photographs and the other documentation submitted by the requesting dental provider, this record supports a finding that Appellant does not meet the requirements of 130 CMR 420.431(C)(3) insofar as she currently does not have

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the minimum objective score of 22 to indicate the presence of a "handicapping malocclusion."

Both DentaQuest and the MassHealth representative reached scores below 22 and agreed with the areas that Appellant's dental provider had overscored.

Aat hearing, Appellant's mother did not address the scoring. Appellant's mother only discussed how Appellant feels about her smile. She provided no objective information or documentation and presented no evidence that would support the reversal of MassHealth's determination.

For the foregoing reasons, the appeal is DENIED.

If Appellant's dental condition should worsen as she grows older, and her dental provider believes a handicapping malocclusion can be documented, a new prior authorization request can be filed at that time as long as Appellant is under the age of 21.

Order for MassHealth

None.

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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.

Kenneth Brodzinski Hearing Officer Board of Hearings

MassHealth Representative: DentaQuest 2, MA

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