

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	DENIED	Appeal Number:	2501371
Decision Date:	4/18/2025	Hearing Date:	02/25/2025
Hearing Officer:	Kenneth Brodzinski		

Appearance for Appellant:



Appearance for MassHealth:

Cassandra Horne; Jessica Medeiros, and
Kaliegh Emory - (Commonwealth Care
Alliance)



*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 - Dental
Decision Date:	4/18/2025	Hearing Date:	02/25/2025
MassHealth's Rep.:	Cassandra Horne - CCA	Appellant's Rep.:	Pro se
Hearing Location:	Quincy		

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 December 10, 2024, MassHealth's agent, Commonwealth Care Alliance (CCA) denied Appellant's request for reimbursement for dental services relative to dental codes D6010, D6057, and D0659 ([Exhibit A](#)). Appellant filed this appeal in a timely manner on January 22, 2025 (see 130 CMR 610.015(B) and [Exhibit A](#)). Denial of assistance constitutes valid grounds for appeal (see 130 CMR 610.032).

Action Taken by MassHealth

MassHealth's agent CCA denied Appellant's request for reimbursement for dental services relative to dental codes D6010, D6057, and D0659.

Issue

The appeal issue is whether CCA properly applied the controlling regulation(s) to accurate facts when it denied Appellant's request for reimbursement for dental services relative to dental codes D6010, D6057, and D0659.

Summary of Evidence

Both parties appeared by telephone.

The CCA representatives testified that Appellant has been a member of its SCO program since 2010. CCA received a request from Appellant to be reimbursed for dental services she received and paid for in 2022 for D6010 (surgical placement of a dental implant); D6057 (customized abutment for the dental implant); and D0659 (abutment supported porcelain crown). The CCA representatives testified that these services were not covered by CCA in 2022 when they were provided to Appellant; however, they were covered in 2024 when Appellant filed her request for reimbursement. According to CCA, in 2024 and currently, these three procedures are limited to once per lifetime per tooth; require prior authorization (PA) and must be provided by an in-network CCA provider.

The CCA representatives testified that in 2022, Appellant filed a PA for the three services which CCA denied because they were a non-covered service at that time. CCA also denied the current reimbursement request because Appellant did not obtain prior authorization approval before (or after) receiving the services, and the services were provided by an out-of-network provider.

Appellant appeared with her adult daughter. Appellant testified that she had all the preparation work related to the implant approved and went to the provider on the day the services were to be provided in 2022, and only then learned that the services were not covered. Appellant testified that she decided to use a credit card to pay for the services because she and her provider were ready for the services. Appellant and her daughter explained they were confused by the process and that they had multiple telephone conversations with a CCA representative which led them to believe that the procedures would be covered. Appellant provided no documentation to corroborate any of these telephone calls or conversations.

CCA noted that the three services were provided over a range of dates: D6010 in February 2022; D6057 fabrication of the custom abutment in June 2022; and D0659 provision of the abutment-supported porcelain crown in October 2022. As far as the preparation work, CCA testified that Appellant had filed PA requests in 2022 for bone grafting and an abutment, both of which were denied. CCA did not authorize or cover any of the preparation work.

Findings of Fact

Based on a preponderance of the evidence, this record supports the following:

1. Appellant has been a member of CCA's SCO program since 2010.
2. CCA received a request from Appellant to be reimbursed for dental services she received

and paid for in 2022 for D6010 (surgical placement of a dental implant); D6057 (customized abutment for the dental implant); and D0659 (abutment supported porcelain crown).

3. The three services were provided over a range of dates: D6010 in February 2022; D6057 fabrication of the custom abutment in June 2022; and D0659 provision of the abutment-supported porcelain crown in October 2022.
4. The three services were not covered by CCA in 2022 when they were provided to Appellant; however, they were covered in 2024 when Appellant filed her request for reimbursement.
5. The CCA representatives testified that in 2022, Appellant filed a PA for the three services which CCA denied because they were non-covered services at that time.
6. CCA also denied the current reimbursement request because Appellant did not obtain prior authorization approval before (or after) receiving the services and the services were provided by an out-of-network provider.
7. Prior to receiving the dental implant in February 2022 (the first of the three services), Appellant knew that CCA was not covering the services and decided to proceed and pay the provider with her own credit card.
8. Appellant knew that the subsequent two procedures provided in June and October 2022 were not covered by CCA and decided to pay for them privately.
9. Appellant had filed PA requests in 2022 for bone grafting and an abutment both of which were denied; CCA did not authorize or cover any of the preparation work related to the three subject services.

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.

All three services were provided to Appellant in 2022 and were not covered by CCA at that time. As an agent of MassHealth, and pursuant to regulation, CCA is obligated to provide those services that MassHealth is required to provide. In 2022, as well as now, implants and procedures related to the provision of dental implants are not MassHealth covered services. MassHealth dental regulation 130 CMR 420.421(B)(5) specifically identifies “*implants of any type*

or description” as a “*non-covered service*” for member’s age 21 or more.¹ Accordingly, CCA’s non coverage of the three services in 2022 was consistent with the requirements of the MassHealth program.

Appellant acknowledged that she knew before the first of the three services was provided to her in February 2022 that it was not covered by CCA. Nevertheless, she proceeded to privately pay not only for the first service, but the second provided in June 2022, and the third provided in October 2022, knowing full well that she never received prior authorization or any other indication from CCA that any of these services would be covered.

Appellant’s claim to have been confused by CCA is simply not credible, given the 8-month span of time at issue and having never received any authorization from CCA during this time. Additionally, Appellant had received explicit PA denials from CCA for the requested services as well as the preparatory procedures. It is worth noting that Appellant never applied for reimbursement in 2022 or 2023. She only applied for reimbursement in 2024 when CCA began covering the three services. Confusion on Appellant’s part is doubtful. It is more reasonable to conclude that upon learning CCA was now covering the previously uncovered services she had privately paid for, Appellant wants to be reimbursed. Unfortunately, Appellant’s desire does not change the fact that the services were not covered in 2022 when she received and paid for them and there was no MassHealth requirement at that time, or now, that those services were to be covered. Appellant has raised no authority or requirement that directs CCA to reimburse members for services that were not covered at the time they were provided.

On this record, Appellant has provided no basis in fact and/or law to disturb the action of MassHealth’s agent, CCA. For the foregoing reasons, the appeal is DENIED.

Order for MassHealth

None.

¹ According to the date of birth indicated on Appellant’s Fair Hearing Request, Appellant was over the age of 21 in 2022 (Exhibit A).

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

cc:

Appellant Representative: [REDACTED]
[REDACTED]

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