

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	DENIED	Appeal Number:	2502354
Decision Date:	4/2/2025	Hearing Date:	03/14/2025
Hearing Officer:	Sharon Dehmand		

Appearance for Appellant:
Pro se

Appearance for MassHealth:
Dr. Sheldon Sullaway, DentaQuest



*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:	Dental Services; General Dental
Decision Date:	4/2/2025	Hearing Date:	03/14/2025
MassHealth's Rep.:	Dr. Sheldon Sullaway	Appellant's Rep.:	Pro se
Hearing Location:	Remote	Aid Pending:	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 January 6, 2025, MassHealth denied the appellant's prior authorization request for a partial mandibular denture. See 130 CMR 420.428 and Exhibit 1. The appellant filed this appeal in a timely manner on February 7, 2025. See 130 CMR 610.015(B) and Exhibit 2. Denial of a request for prior authorization is a valid basis for appeal to the Board of Hearings. See 130 CMR 610.032.

Action Taken by MassHealth

MassHealth denied the appellant's request for prior authorization for a partial mandibular denture.

Issue

Whether MassHealth erred in denying the appellant's request for prior authorization for a partial mandibular denture because it exceeded the maximum allowed benefits. See 130 CMR 420.428(F)(5); 130 CMR 450.204(A).

Summary of Evidence

The MassHealth dental consultant for DentaQuest and the appellant who verified her identity appeared telephonically at the hearing. The following is a summary of the testimony and evidence provided at the hearing:

The MassHealth dental consultant testified that, on January 6, 2025, the appellant's provider submitted a prior authorization request for coverage of a partial mandibular denture under service code D5212. On January 6, 2025, MassHealth denied this request because it exceeded the maximum allowable benefits, as the treatment is covered only once every seven calendar years, or 84 months. MassHealth's records revealed that the appellant received a partial mandibular denture on June 16, 2021. He added that as part of the prior authorization submitted, the appellant's provider noted under the remarks section that a lower partial denture is medically necessary. However, MassHealth regulations do not have a medical necessity exception for dental services for adults over the age of 21. Because seven years have not elapsed since the appellant received her last lower partial denture, MassHealth denied the appellant's request.

The appellant acknowledged receiving a partial mandibular denture on the date specified by MassHealth's consultant. She testified that initially she received a partial mandibular denture in 2009. She added that when she visited a new dentist in 2021 for a routine cleaning, the dentist fitted her for a partial denture without her consent. When she received the denture, it did not fit properly and despite her repeated complaints, the dentist was unable to properly fit the denture. She said that after the third visit to the dentist, she was advised to just discard the denture. The appellant did so and went back to using her 2009 partial denture. She said that she really needs a new lower jaw denture because she has lost her molars. She argued that it is not her fault that her denture did not fit her property and had she known that she was entitled to a new lower jaw denture every 7 years, she would have had two replacements by now.

The MassHealth consultant stated that the proper avenue of relief would be to file a complaint against the dentist who could not fit the denture properly. The appellant stated that she has done so but no action has been taken.

Findings of Fact

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

1. The appellant is over the age of 21. (Testimony and Exhibit 4).
2. On January 6, 2025, the appellant's provider submitted a prior authorization request for the replacement of a partial mandibular denture under service code D5212. (Testimony and Exhibit 1).

3. On January 6, 2025, MassHealth denied the appellant's prior authorization request because it exceeded the maximum allowed benefits. (Testimony and Exhibit 1).
4. The appellant filed this appeal in a timely manner on February 7, 2025. (Exhibit 2).
5. MassHealth allows for a partial mandibular denture once every seven years. (Testimony and *Dental Manual*).
6. The appellant received and MassHealth paid for a partial mandibular denture less than seven years ago, on June 16, 2021. (Testimony).
7. The appellant discarded her partial mandibular denture because it did not fit her properly. (Testimony).

Analysis and Conclusions of Law

Per regulations, MassHealth pays for services when they are medically necessary and covered by MassHealth's dental program. 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 the MassHealth agency. Services that are less costly to the MassHealth agency include, but are not limited to, health care reasonably known by the provider, or identified by the MassHealth agency pursuant to a prior-authorization request, to be available to the member through sources described in 130 CMR 450.317(C), 503.007, or 517.007.

See 130 CMR 450.204(A).

MassHealth pays for the following dental services when they are medically necessary:

- (1) the services with codes listed in Subchapter 6 of the *Dental Manual*, in accordance with the service descriptions and limitations described in 130 CMR 420.422 through 420.456; and
- (2) all services for EPSDT-eligible members, in accordance with 130 CMR 450.140 through 450.149, without regard for the service limitations described in 130 CMR

420.422 through 420.456, or the listing of a code in Subchapter 6. All such services are available to EPSDT-eligible members, with prior authorization, even if the limitation specifically applies to other members younger than 21 years old.

See 130 CMR 420.421(A).

MassHealth's regulations regarding removable prosthodontic services state the following, in relevant parts:

(A) General Conditions. The MassHealth agency pays for dentures services once per seven calendar years per member, subject to the age limitations specified in 130 CMR 420.428(B). MassHealth payment includes all services associated with the fabrication and delivery process, including all adjustments necessary in the six months following insertion. The member is responsible for all denture care and maintenance following insertion. The MassHealth agency does not pay for complete dentures when the member's medical record indicates material limitations to the member's ability to cooperate during the fabrication of the denture or to accept or function with the denture, or indications that the member does not intend to utilize the denture.....

(F) Replacement of Dentures. The MassHealth agency pays for the necessary replacement of dentures. The member is responsible for denture care and maintenance. The member, or persons responsible for the member's custodial care, must take all possible steps to prevent the loss of the member's dentures. The provider must inform the member of the MassHealth agency's policy on replacing dentures and the member's responsibility for denture care. The MassHealth agency does not pay for the replacement of dentures if the member's denture history reveals any of the following:

- (1) repair or reline will make the existing denture usable;
- (2) any of the dentures made previously have been unsatisfactory due to physiological causes that cannot be remedied;
- (3) a clinical evaluation suggests that the member will not adapt satisfactorily to the new denture;
- (4) no medical or surgical condition in the member necessitates a change in the denture or a requirement for a new denture;
- (5) the existing denture is less than seven years old and no other condition in this list applies;
- (6) the denture has been relined within the previous two years, unless the existing denture is at least seven years old;
- (7) there has been marked physiological change in the member's oral cavity, and any further reline has a poor prognosis for success; or
- (8) the loss of the denture was not due to extraordinary circumstances such as a fire in the home.

See 130 CMR 420.428.

In this case, there is no dispute that the appellant received a partial mandibular denture on June 16, 2021; less than 84 months ago. The appellant contends that the denture did not fit properly and that after three office visits, she discarded her denture based on her dentist's advice. The responsibility for care and maintenance of dentures falls squarely on the shoulders of the member. See 130 CMR 420.028(F). Thus, even if I credit the appellant's assertion that she followed her dentist's ill-advised suggestion to discard her denture, it does not absolve her of her responsibility to take care of her denture as required by the regulations. Id.

Equally unpersuasive is the appellant's claim that, had she known she was entitled to a denture replacement every 7 years, she would have had two replacements by now. The fact remains that she did receive a replacement for her 2009 denture in 2021, albeit not properly fitted. It was incumbent upon the appellant to ensure that her dentist provided a proper fitting denture.¹

Based on the foregoing reasons, I find that the appellant has not proven by a preponderance of the evidence that MassHealth denial of the partial mandibular denture was made in error. As such, this appeal is 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.

Sharon Dehmand, Esq.
Hearing Officer
Board of Hearings

¹ The appellant stated that she had submitted a complaint against the dentist.

MassHealth Representative: DentaQuest 1, MA