

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2505370
Decision Date:	8/11/2025	Hearing Date:	05/16/2025
Hearing Officer:	Marc Tonaszuck	Record Open to:	07/11/2025

Appearance for Appellant:



Appearance for MassHealth:

Dr. Gamm, BeneCare



*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 – Orthodontic Services
Decision Date:	8/11/2025	Hearing Date:	05/16/2025
MassHealth's Rep.:	Dr. Gamm, BeneCare	Appellant's Rep.:	Pro se
Hearing Location:	Springfield MassHealth Enrollment Center	Aid Pending:	No

Authority

This hearing was conducted pursuant to Massachusetts General Laws Chapters 119E and 30A, and the rules and regulations promulgated thereunder.

Jurisdiction

Through a notice dated 03/23/2025 MassHealth informed the appellant that it denied his request for prior authorization of comprehensive orthodontic treatment (130 CMR 420.431(C); Exhibit 1). The appellant filed a timely appeal on 04/03/2025 and, as a minor appellant, was represented by his mother in these proceedings (130 CMR 610.015(B); Exhibit 2). Denial of a request for prior approval is a valid basis for appeal (130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied the appellant's request for prior authorization of comprehensive orthodontic treatment.

Issue

Did MassHealth correctly determine that the appellant is not eligible for comprehensive orthodontic treatment pursuant to 130 CMR 420.431(C)?

Summary of Evidence

The MassHealth orthodontic consultant from BeneCare, an orthodontist licensed in Massachusetts, testified that on 03/12/2025 the appellant's provider, Tufts Dental Clinic, submitted to MassHealth on the appellant's behalf a prior authorization (PA) for comprehensive orthodontic treatment. The representative stated that MassHealth only provides coverage for comprehensive orthodontic treatment when there is a severe and handicapping malocclusion. The request was considered after review of the oral photographs, X-rays, and written information submitted by the appellant's orthodontic provider. This information was applied to a standardized Handicapping Labio-Lingual Deviations (HLD) Index that is used to make an objective determination of whether the appellant has a severe and handicapping malocclusion. The representative testified that the HLD Index uses objective measurements taken from the subject's teeth to generate an overall numeric score, or to find an automatically qualifying condition. A severe and handicapping malocclusion typically reflects a minimum score of 22 or an auto-qualifying condition. MassHealth submitted into evidence: Appellant's PA packet; photographs; X-rays; HLD MassHealth Form; and the HLD Index (Exhibit 4).

MassHealth testified that according to the prior authorization request, the appellant's orthodontic provider reported that the appellant no instance of an "automatic qualifier," and no letter of medical necessity was attached. The appellant's orthodontic provider calculated the following HLD Index score:

Conditions Observed	Raw Score	Multiplier	Weighted Score
Overjet in mm	3	1	3
Overbite in mm	4	1	4
Mandibular Protrusion in mm	4	5	20
Open Bite in mm	0	4	0
Ectopic Eruption (# of teeth, excluding third molars)	0	3	0

Anterior Crowding	Maxilla: Mandible:	Flat score of 5 for each	5
Labio-Lingual Spread, in mm (anterior spacing)	1	1	1
Posterior Unilateral Crossbite	0	Flat score of 4	0
Posterior Impactions or congenitally missing posterior teeth (excluding 3 rd molars)	0	3	0
Total HLD Score			32

The BeneCare orthodontist testified that he reviewed the appellant's photographs, X-rays and all the other documentation that was provided to MassHealth with the prior authorization request from the appellant's orthodontist. According to the X-ray and photographs, the appellant does not have four millimeters of a mandibular protrusion. He has one millimeter, resulting in an HLD score of 5 points in this field. Second, the appellant does not have at least 3.5 mm. of crowding on either arch. Therefore, the provider mistakenly gave 5 points in this field, where the appellant has zero. Dr. Gamm's measurements are as follows:

Conditions Observed	Raw Score	Multiplier	Weighted Score
Overjet in mm	2	1	2
Overbite in mm	2	1	2
Mandibular Protrusion in mm	1	5	5
Open Bite in mm	0	4	0
Ectopic Eruption (# of teeth, excluding third molars)	0	3	0
Anterior Crowding	Maxilla: Mandible:	Flat score of 5 for each	0
Labio-Lingual Spread, in mm (anterior spacing)	3	1	3
Posterior Unilateral Crossbite	0	Flat score of 4	0
Posterior Impactions or congenitally missing posterior teeth (excluding 3 rd molars)	0	3	0
Total HLD Score			12

Dr. Gamm concluded that because the HLD Index score is not 22 or over, and without the above automatic qualifying condition, the appellant's malocclusion does not meet the standards for MassHealth payment.

The appellant's mother appeared in person at the fair hearing. She testified that she has noticed some changes with the appellant's mouth recently; specifically, that he sometimes has pain in his mouth. He also suffers from headaches due to his bite. She requested an opportunity to submit a letter of medical necessity in support of the appellant's request for comprehensive orthodontia. Her request was granted, and the record remained open for the appellant's submission until 06/20/2025 and until 07/11/2025 for BeneCare's response (Exhibit 5).

No submission was made by either party during the record open period.

Findings of Fact

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

1. The appellant is under 21 years of age (Testimony).
2. On 03/12/2025, the appellant's orthodontic provider, Tufts Dental Clinic, requested prior authorization for comprehensive orthodontic treatment (Testimony, Exhibit 4).
3. On 03/23/2025, MassHealth denied the appellant's prior authorization request (Exhibit 1).
4. On 04/03/2025, a timely fair hearing request was filed on the appellant's behalf (Exhibit 2).
5. MassHealth provides coverage for comprehensive orthodontic treatment only when there is a severe and handicapping malocclusion.
6. MassHealth employs a system of comparative measurements known as the HLD Index as a determinant of a severe and handicapping malocclusion.
7. An automatic qualifying condition on the HLD Index is a severe and handicapping malocclusion.
8. A HLD Index score of 22 or higher denotes a severe and handicapping malocclusion.
9. The appellant's orthodontic provider calculated an HLD Index score of 32, scoring 20 points for 4 mm of mandibular protrusion and 5 points for anterior crowding.
10. According to the HLD Index score sheet instructions, 5 points is scored for anterior crowding, of 3.5 mm or more among the six front teeth on either arch.
11. The appellant does not have 3.5 mm of crowding among the six front teeth of either arch.

12. The appellant has 1 mm of mandibular protrusion.
13. Using measurements taken from the appellant's oral photographs, X-rays and other submitted materials, the MassHealth representative, a licensed orthodontist, determined that at the time the prior authorization request was submitted, the appellant did not have a deep impinging overbite or an HLD score of 22 or above.
14. The BeneCare orthodontist concluded that the appellant does not have a severe and handicapping malocclusion.
15. Appellant's orthodontists checked "no" when asked if he was submitting a medical necessity narrative with the prior authorization request.
16. At the fair hearing that took place before the Board of Hearings on 05/16/2025, the appellant's representative requested an opportunity to provide a letter of medical necessity.
17. The appellant's representative's request for a record open period was granted and the record remained open in this matter until 06/20/2025 for the appellant's submission.
18. No submission was made by either party during the record open period.

Analysis and Conclusions of Law

Regulation 130 CMR 420.431(C) states, in relevant part, as follows:

The MassHealth agency pays for comprehensive orthodontic treatment only once per member under age 21 per lifetime and only when the member has a severe and handicapping malocclusion. The MassHealth agency determines whether a malocclusion is severe and handicapping based on the clinical standards described in Appendix D of the *Dental Manual*.

When requesting prior authorization for comprehensive orthodontic treatment, the provider submits, among other things, a completed HLD Index recording form which documents the results of applying the clinical standards described in Appendix D of the Dental Manual. In order for MassHealth to pay for orthodontic treatment, the appellant's malocclusion must be severe and handicapping as indicated by an automatic qualifier on the HLD index, a minimum HLD index score of 22, or a medical necessity narrative.

In this case, the appellant's treating orthodontist calculated an overall HLD Index score of 23 and he did not attach a medical necessity narrative. He checked off an automatic qualifying condition, to wit, a deep impinging overbite. A deep impinging overbite, if verified, is a MassHealth approval

even without an HLD Index score of 22.

The MassHealth representative testified credibly how the appellant's treating orthodontist erred on two points: 1) mismeasurement of an mandibular protrusion and mismeasurement of crowding among the anterior (front) teeth.

The appellant's provider's HLD Index score totaled 32 points, including 3 mm of overjet (3 points), 4 mm (4 points) for overbite, 5 points for crowding, labio-lingual spread of 1 mm (1 point); and 20 points for 4mm of mandibular protrusion.

At the fair hearing, the BeneCare representative, an orthodontist, testified credibly that his measurements were essentially the same as the appellant's provider's measurements, with the exception of the mandibular protrusion score and the crowding score. The BeneCare representative testified that the mandibular protrusion is no more than 1 mm, resulting in an HLD Index score of 5 points. I credit the BeneCare orthodontist's testimony; it was supported by references to the photographs and X-rays. The appellant's treating provider was not present at the fair hearing and was not available for questioning by the hearing officer.

Similarly, the BeneCare orthodontist testified that the crowding of the appellant's anterior teeth do not total 3.5 mm on either arch. Thus, they cannot be scored for 5 points. For the same reasons as above, I credit the BeneCare orthodontist's testimony.

When reducing the appellant's treating source's score by the 20 points (5 for crowding and 15 for mandibular protrusion), the appellant's HLD score is 12. Since the corrected HLD Index score does not reach the required 22 points, MassHealth was correct to deny the request for the appellant's orthodontia.

At the fair hearing, when given the opportunity to provide a letter of medical necessity, the appellant's mother failed to do so. Accordingly, MassHealth's denial of the request for comprehensive orthodontia is supported by the regulations and the facts in the hearing record. This appeal is therefore 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.

Marc Tonaszuck
Hearing Officer
Board of Hearings

MassHealth Representative: BeneCare 1, Attn: Jhanelle Boapea