



FH  
[REDACTED]

**STATE OF WISCONSIN  
Division of Hearings and Appeals**

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In the Matter of

[REDACTED]  
[REDACTED]  
[REDACTED]

DECISION

MPA/147204

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**PRELIMINARY RECITALS**

Pursuant to a petition filed February 11, 2013, under Wis. Stat. § 49.45(5), and Wis. Admin. Code § HA 3.03(1), to review a decision by the Division of Health Care Access and Accountability in regard to Medical Assistance, a hearing was held on April 09, 2013, at Milwaukee, Wisconsin.

The issue for determination is whether the evidence is sufficient to demonstrate that a prior authorization request for root canal meets the standards necessary for approval of Medicaid payment.

There appeared at that time and place the following persons:

**PARTIES IN INTEREST:**

Petitioner:

[REDACTED]  
[REDACTED]  
[REDACTED]

Respondent:

Department of Health Services  
1 West Wilson Street  
Madison, Wisconsin 53703

By: Dr. Robert Dwyer, DDS  
Division of Health Care Access and Accountability  
1 West Wilson Street, Room 272  
P.O. Box 309  
Madison, WI 53707-0309

**ADMINISTRATIVE LAW JUDGE:**

David D. Fleming  
Division of Hearings and Appeals

**FINDINGS OF FACT**

1. Petitioner (CARES # [REDACTED]) is a resident of Milwaukee County.
2. A prior authorization request seeking Wisconsin Medicaid program payment for a root canal for Petitioner's tooth # 15 was filed with the Medicaid on or about January 9, 2013.

- 3. The prior authorization request at issue here was denied. The reason for the denial was that Petitioner’s tooth # 15 should be in occlusion with tooth # 18 but Petitioner has lost teeth #s 19 and 20 permitting # 18, all in the opposing quadrant, to migrate forward to the extent that it is no longer in occlusion with # 15.

**DISCUSSION**

Root canal therapy can be a covered service for certain Medicaid recipients, subject to prior authorization. *Wis. Admin. Code §DHS 107.07(2)(a)1*. For any prior authorization request to be approved, the requested service must satisfy the generic prior authorization criteria listed at *§DHS 107.02(3)(e)*. Those criteria include the requirement that the service be appropriate. *Id.*, 2.

Root canal therapy is an endodontic service which removes infected pulpal tissue from the tooth and places a sealing filling insides the tooth, thus preventing the loss of the tooth by extraction. The alternative to root canal therapy is extraction. Extraction is a covered service under the MA program, without prior authorization.

Per *Wis. Admin. Code § DHS 107.07(3)(a)*, the Department of Health Services is allowed to impose “reasonable limitations” on reimbursement of covered services.

Root canals are reimbursed if they meet the criteria found in the *Prior Authorizations Guidelines Manual*, § 124.009. The Division must deny these requests if “one or more of the Denial Criteria are met.” *Prior Authorizations Guidelines Manual*, § 124.009.04. The Division determined that Petitioner’s tooth met the following denial criterion found at *Prior Authorizations Guidelines Manual*, § 124.009.04:

- ...
- 8. a non-functional occlusion for the tooth due to missing teeth in the opposing dental arch or quadrant
- ...

The record was held open to give Petitioner’s dental provider opportunity to submit information in response to the Department determination that tooth # 15 is not in occlusion with the opposite quadrant. Nothing was received.

I must conclude that the available evidence indicates that the Department correctly denied this prior authorization request for Medicaid payment for root canal therapy for Petitioner’s tooth #15 as the evidence does not demonstrate that it is in occlusion with its opposing tooth.

**CONCLUSIONS OF LAW**

The Division of Health Care Access and Accountability correctly denied the Petitioner’s request for a root canal because the available evidence indicates that tooth # 15 is in occlusion with teeth in the opposite quadrant.

**THEREFORE, it is**

**ORDERED**

That this appeal is dismissed.

**REQUEST FOR A REHEARING**

This is a final administrative decision. If you think this decision is based on a serious mistake in the facts or the law, you may request a rehearing. You may also ask for a rehearing if you have found new

evidence which would change the decision. Your request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and tell why you did not have it at your first hearing. If you do not explain these things, your request will have to be denied.

To ask for a rehearing, send a written request to the Division of Hearings and Appeals, P.O. Box 7875, Madison, WI 53707-7875. Send a copy of your request to the other people named in this decision as "PARTIES IN INTEREST." Your request for a rehearing must be received no later than 20 days after the date of the decision. Late requests cannot be granted.

The process for asking for a rehearing is in Wis. Stat. § 227.49. A copy of the statutes can be found at your local library or courthouse.

### **APPEAL TO COURT**

You may also appeal this decision to Circuit Court in the county where you live. Appeals must be served and filed with the appropriate court no more than 30 days after the date of this hearing decision (or 30 days after a denial of rehearing, if you ask for one).

For purposes of appeal to circuit court, the Respondent in this matter is the Department of Health Services. After filing the appeal with the appropriate court, it must be served on the Secretary of that Department, either personally or by certified mail. The address of the Department is: 1 West Wilson Street, Madison, Wisconsin 53703. A copy should also be sent to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400.

The appeal must also be served on the other "PARTIES IN INTEREST" named in this decision. The process for appeals to the Circuit Court is in Wis. Stat. §§ 227.52 and 227.53.

Given under my hand at the City of Milwaukee,  
Wisconsin, this 21st day of May, 2013

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\sDavid D. Fleming  
Administrative Law Judge  
Division of Hearings and Appeals



**State of Wisconsin\DIVISION OF HEARINGS AND APPEALS**

David H. Schwarz  
Suite 201  
5005 University Avenue  
Madison, WI 53705-5400

Telephone: (608) 266-3096  
FAX: (608) 264-9885  
email: [DHAmail@wisconsin.gov](mailto:DHAmail@wisconsin.gov)  
Internet: <http://dha.state.wi.us>

The preceding decision was sent to the following parties on May 21, 2013.

Division of Health Care Access And Accountability