



STATE OF WISCONSIN
Division of Hearings and Appeals

In the Matter of



DECISION

MPA/158928

PRELIMINARY RECITALS

Pursuant to a petition filed July 07, 2014, 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 telephonic hearing was held on August 06, 2014, at Milwaukee, Wisconsin. At the request of petitioner, the record was held open until August 20, 2014 for the petitioner to submit a letter from her dentist to DHA. The petitioner failed to submit any dentist letter to DHA by August 20, 2014 or even by the date of this decision.

The issue for determination is whether the petitioner is entitled to MA coverage of a prior authorization (PA) request for a lower (mandibular) partial denture.

There appeared at that time and place the following persons:

PARTIES IN INTEREST:

Petitioner:



Respondent:

Department of Health Services
1 West Wilson Street, Room 651
Madison, Wisconsin 53703

By: 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:

Gary M. Wolkstein
Division of Hearings and Appeals

FINDINGS OF FACT

1. Petitioner (CARES # ) is a resident of Milwaukee County. She is certified for MA.

2. On or about May 29, 2014, a prior authorization (PA) request was submitted by petitioner's dental provider, [REDACTED], D.D.S., on the petitioner's behalf for a partial mandibular (lower) denture.
3. On June 10, 2014, the Department issued a written notice to the petitioner advising that the request for the lower partial mandibular denture was denied.
4. The basis for the denial of the partial lower denture was that petitioner did not meet any of the approval criteria to receive the lower partial denture.
5. The petitioner did not have less than two posterior teeth per quadrant in occlusion with the upper opposing quadrant; 2) the recipient did not have a combination of one or more anterior teeth that are missing in the arch; and 3) the recipient does not have six or more teeth missing in the arch.
6. The petitioner currently has at least 2 posterior teeth bilaterally that can be used for chewing and fewer than 6 missing lower teeth, and thus does not meet partial denture approval criteria.

DISCUSSION

A partial denture can be a covered service for an MA recipient, subject to prior authorization. Wis. Stat. s.49.46(2)(b)1,im. 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 medically necessary. *Id.*, 1.

A partial denture is a prosthetic device, which replaces some missing teeth in an arch and is held in place by remaining natural teeth. A quadrant is half of either the upper arch or lower arch.

The Division's policy is to deny a partial denture for posterior teeth if the patient has enough teeth left to chew food because the denture would not be medically necessary. This policy is articulated in the following section of the denial criteria:

PROCEDURE/SERVICE

(Removable Prosthodontics)

...

...

Denial Criteria:

1. If two (2) or more posterior teeth are present per quadrant and in occlusion with the opposing quadrant, or no anterior teeth are missing.
- ...
6. If placement of a partial denture in an arch provides at least 2 posterior teeth per quadrant in occlusion with the opposing quadrant, then the opposing partial, if requested, would not be authorized unless the recipient also has an anterior tooth missing that arch.

Disposition:

...

2. If any of the Denial Criteria are met, deny the request.

See *MA Prior Authorization Guidelines*, p. 124.016.07 and p. 124.011.05. The Division has acted consistently with its policy which is not unreasonable. Posterior teeth are bicuspid and molars.

While the record was held open, neither the petitioner nor her dentist submitted any new evidence to DHA regarding petitioner's eligibility for lower partial dentures or a response to DHCAA's dental consultant denial letter (Exhibit 1). As a result, there is no reliable evidence to refute that the Department correctly denied the petitioner's PA request for a lower partial denture due to Findings of Fact #4 - #6

above. Accordingly, the Department's denial of the prior authorization request for a partial lower denture was correct. There was no evidence of any extenuating circumstances.

CONCLUSIONS OF LAW

The petitioner's prior authorization (PA) request for a partial lower denture was correctly denied because the PA request does not meet the applicable MA criteria for approval.

THEREFORE, it is **ORDERED**

The petition for review herein be and the same is hereby Dismissed.

REQUEST FOR A REHEARING

You may request a rehearing if you think this decision is based on a serious mistake in the facts or the law or if you have found new evidence that would change the decision. Your request must be **received within 20 days after the date of this decision**. Late requests cannot be granted.

Send your request for rehearing in writing to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400 **and** to those identified in this decision as "PARTIES IN INTEREST." Your rehearing request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and explain why you did not have it at your first hearing. If your request does not explain these things, it will be denied.

The process for requesting a rehearing may be found at Wis. Stat. § 227.49. A copy of the statutes may be found online or 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 filed with the Court **and** served either personally or by certified mail on the Secretary of the Department of Health Services, 1 West Wilson Street, Room 651, Madison, Wisconsin 53703, **and** on those identified in this decision as "PARTIES IN INTEREST" **no more than 30 days after the date of this decision** or 30 days after a denial of a timely rehearing (if you request one).

The process for Circuit Court Appeals may be found at Wis. Stat. §§ 227.52 and 227.53. A copy of the statutes may be found online or at your local library or courthouse.

Given under my hand at the City of Madison,
Wisconsin, this 25th day of September, 2014

\sGary M. Wolkstein
Administrative Law Judge
Division of Hearings and Appeals



State of Wisconsin\DIVISION OF HEARINGS AND APPEALS

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The preceding decision was sent to the following parties on September 25, 2014.

Division of Health Care Access and Accountability