



STATE OF WISCONSIN
Division of Hearings and Appeals

In the Matter of:

Redact
Redact
Redact

DECISION

MPA/164820

PRELIMINARY RECITALS

Pursuant to a petition filed March 18, 2015, 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 ["DHCAA"] in regard to Medical Assistance ["MA"], a Hearing was held via telephone on May 5, 2015.

The issue for determination is whether DHCAA was correct to deny MA Prior Authorization ["PA"] (PA # Redact) for comprehensive orthodontic treatment, periodic orthodontic treatment visits, and orthodontic retention for petitioner.

There appeared at that time via telephone the following persons:

PARTIES IN INTEREST:

Petitioner:

Redact (not present at May 5, 2015 Hearing)
c/o Redact
Redact

Represented by:

Redact, petitioner's mother
Redact

Respondent:

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

BY: Rea Redact, DDS, DHCAA Dental Consultant (Dr. Redact did not appear at the May 5, 2015 Hearing but submitted a letter dated March 30, 2015 with attachments.)

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

ADMINISTRATIVE LAW JUDGE:
 Sean P. Maloney
 Division of Hearings and Appeals

FINDINGS OF FACT

1. Petitioner (CARES # [Redact]; 14 years old) is a resident of Oconto County, Wisconsin.
2. Petitioner's provider, [Redact] of Marshfield, Wisconsin, requested PA (PA # [Redact]; dated January 25, 2015) for MA coverage for comprehensive orthodontic treatment, periodic orthodontic treatment visits, and orthodontic retention for petitioner at a total cost of \$5,400.00.
3. DCHAA denied PA # [Redact] for MA coverage for comprehensive orthodontic treatment, periodic orthodontic treatment visits, and orthodontic retention for petitioner; DHCAA sent petitioner a letter dated February 17, 2015 and entitled *BadgerCare Plus Notice of Appeal Rights* informing her of the denial.
4. Petitioner has a Salzmann Index score of 20; the evidence in the record of this matter does not support a conclusion that petitioner has any of the following: (1) a severe and handicapping malocclusion determined by a minimum Salzmann Index of 30; (2) a severe handicapping malocclusion; (3) a need for minor treatment (1-4 teeth); or, (4) a referral from a mental health professional.

DISCUSSION

Petitioner appeals because DHCAA denied PA for comprehensive orthodontic treatment, periodic orthodontic treatment visits, and orthodontic retention. This is a denial of eligibility for services; it is not discontinuation of services. As with any eligibility denial, the burden is on petitioner to show that she is eligible for the requested services. *Lavine v. Milne*, 424 U.S. 577, 583-584 (1976). Petitioner has failed to do so.

Orthodontic services are not covered under MA. Wis. Admin. Code §§ DHS 107.07(1)intro. & 107.07(4)(j) (February 2014). However, medical services provided to Early and Periodic Screening, Diagnosis and Treatment ["EPSDT"] patients must be covered for all recipients under age 21 years if the EPSDT health assessment and evaluation indicates that they are needed. 42 C.F.R. § 441.56(c)(2) (2015); Wis. Admin. Code §§ DHS 107.22(1) & 107.22(4) (February 2014); See also, 42 USC § 1396d(a) & Wis. Admin. Code § DHS 101.03(54) (December 2008). Prior Authorization ["PA"] under section DHS 107.02(3) of the Wisconsin Administrative Code is required for coverage of such services. Wis. Admin. Code § DHS 107.22(4) (February 2014). Thus, the determination of whether or not the EPSDT health assessment and evaluation "indicates" that a requested service is "needed" is made by the PA process.

In determining whether to approve or disapprove a request for PA the limitations imposed by pertinent federal or state statutes, rules, regulations, or interpretations must be considered. Wis. Admin. Code § DHS 107.02(3)(e)9. (February 2014). Written state policy interpretations provide that orthodontic treatment can be approved in any of the following circumstances:

- (1) a severe and handicapping malocclusion determined by a minimum Salzmann Index of 30;
- (2) in extenuating circumstances, the dental consultant may, after comprehensive review of the case, determine that a severe handicapping malocclusion does exist, and approve the orthodontic treatment even though the Salzmann score is less than 30;

- (3) certain cases of minor treatment (1-4 teeth) can be approved for limited or interceptive orthodontic treatment using either fixed or removable appliances; or,
- (4) if the request for orthodontic services is the result of a personality or psychological problem or condition and a patient does not meet the criteria listed above, then a referral from a mental health professional is required.

ForwardHealth: BadgerCare Plus and Medicaid Handbook Area Dental Topic #2909 (“Severe Malocclusion”); Wisconsin Medicaid Provider Handbook [“WMPH”], Part B (Dental Handbook), Appendix 17, page B118 (issued 11/98); See also, Prior Authorization Guidelines Manual pages 125.004.03-04 & 125.005.03-04 (10/04/95); See also, DHA Case No. MPA-13/111381 (Wis. Div. Hearings & Appeals Proposed Decision July 30, 2010; Final Decision September 30, 2010) (DHS).

Based on the evidence in the record of this matter, petitioner does not satisfy any of the above criteria. Information in the record of this matter is that petitioner has a Salzmann Index of 20. Therefore, PA cannot be approved as requested by petitioner.

Petitioner’s mother argues that PA should be approved because petitioner has congenital defects. She states that petitioner is missing 2 permanent teeth on top (one lateral incisor and one canine; one of her baby teeth is still in place, but there will be an empty space once it is gone). This is causing (or will cause) petitioner’s other teeth to shift. She states that petitioner’s teeth will be in the wrong position causing the top and bottom teeth not to match up when petitioner bites. She also states that petitioner has pain while chewing because food gets crammed against her gums due to the unnaturally large gaps between petitioner’s teeth.

All of the above may be correct, but the documentation in the record of this matter is not sufficient to conclude that petitioner, at this time, has a severe handicapping malocclusion. Petitioner may wish to have her orthodontic provider file a new PA request with additional medical documentation showing that she has a severe handicapping malocclusion and that orthodontic treatment is medically necessary.

CONCLUSIONS OF LAW

For the reasons discussed above, DHCAA was correct to deny PA # Redact for comprehensive orthodontic treatment, periodic orthodontic treatment visits, and orthodontic retention for petitioner.

NOW, THEREFORE, it is

ORDERED

That 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 14th day of May, 2015

\sSean P. Maloney
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 May 14, 2015.

Division of Health Care Access and Accountability