



STATE OF WISCONSIN
Division of Hearings and Appeals

In the Matter of

[Redacted]
[Redacted]
[Redacted]

DECISION

MPA/165363

PRELIMINARY RECITALS

Pursuant to a petition filed April 13, 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 in regard to Medical Assistance, a telephone hearing was held on May 13, 2015. The record was held open for 10 days to allow petitioner time to submit a letter from her physician. As of the date of this Decision, no additional documentation was received.

The issue for determination is whether the respondent correctly denied petitioner's request for a root canal procedure.

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, Room 651
Madison, Wisconsin 53703

By: [Redacted], DDS (written appearance only)
Division of Health Care Access and Accountability
1 West Wilson Street, Room 272
P.O. Box 309
Madison, WI 53707-0309

ADMINISTRATIVE LAW JUDGE:

Peter McCombs
Division of Hearings and Appeals

FINDINGS OF FACT

- 1. Petitioner (CARES # [Redacted]) is a resident of Dane County.

2. The petitioner sought authorization on February 19, 2015, for a root canal on tooth 14. The respondent denied the request on March 4, 2015.
3. Petitioner's AAP periodontal classification does not meet a Type I or II classification.

DISCUSSION

The petitioner appeals the denial of her prior authorization request for a root canal on tooth 14. A root canal removes infected pulpal tissue from the tooth and replaces it with a filling to prevent the loss of the tooth. The alternative to root canal therapy is extraction. Extraction is a covered service under the MA program, without prior authorization.

The Division of Health Care Access and Accountability denied the request because it determined that the petitioner's request did not satisfy the approval criteria for a root canal found at the online ForwardHealth Provider's Handbook, which states:

Topic #2881

Anterior, Bicuspid, and Molar Root Canal Therapy

Root canal therapy should only be provided when there is a strong likelihood that the treatment will be successful and definitive (i.e., that it will not later result in extraction). To receive Medicaid reimbursement for root canal therapy, the member's record must include clinical documentation of *all* the following:

- **Evidence of good periodontal health (AAP periodontal classification of Type I or II).**
- Evidence visible on radiographs that at least 50 percent of the clinical crown is intact.
- A treatment plan that identifies no more than three teeth for root canal therapy, including molars. Molar root canals (D3330) for members ages 21 and older and treatment plans involving root canal therapy on four or more teeth require PA.

Anterior, bicuspid, and molar root canals (D3310, D3320, and D3330) are not reimbursable if any of the following are true:

- The member has fewer than two posterior teeth in occlusion per quadrant.
- The member is missing six or more teeth in the arch where the root canal is to be performed, including third molars.
- The member is missing one or more anterior teeth in the arch where the root canal is to be performed.

If the member has one of the previously listed conditions, he or she may qualify for a partial denture and the provider should request PA for the partial denture service.

(emphasis added).

The petitioner (and I assume her dentist) believes that the tooth can be restored, but dental records reviewed by the respondent indicate that petitioner's periodontal status does not meet Type I or Type II. See, Exhibit 3. The petitioner and/or petitioner's provider have not established otherwise. Because this fails to meet the approval criteria, and a request must be denied if even only one of the approval criteria is not met, I must uphold the Division's decision even if the tooth is restorable.

CONCLUSIONS OF LAW

The Division of Health Care Access and Accountability correctly denied the petitioner's request for a root canal because petitioner's periodontal status does not meet Type I or Type II.

THEREFORE, it is

ORDERED

The petitioner's appeal is 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 3rd day of July, 2015.

\sPeter McCombs
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 July 3, 2015.

Division of Health Care Access and Accountability