



STATE OF WISCONSIN
Division of Hearings and Appeals

In the Matter of

Redact

DECISION

HMO/166181

PRELIMINARY RECITALS

Pursuant to a petition filed May 20, 2015, under Wis. Stat., §49.45(5)(a), to review a decision by the Division of Health Care Access and Accountability (DHCAA) to uphold a Medical Assistance (MA) denial of root canals by petitioner's HMO, a hearing was held on June 9, 2015, by telephone.

The issue for determination is whether the DHCAA correctly denied the request for root canals.

PARTIES IN INTEREST:

Petitioner:

Redact

Respondent:

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

By: Redact
Division of Health Care Access and Accountability
P.O. Box 309
Madison, WI 53701-0309

ADMINISTRATIVE LAW JUDGE:

Brian C. Schneider
Division of Hearings and Appeals

FINDINGS OF FACT

- 1. Petitioner (CARES # Redact) is a resident of Milwaukee County who receives MA.
2. Petitioner's dentist (the name is unreadable on the copy in the record) requested that Redact, petitioner's HMO dental agency, approve root canals for teeth nos. 2, 7, 8, and 10. The HMO denied the request because of rampant decay and the likelihood that the service would be ineffective.
3. Petitioner appealed the denial. The DHCAA reviewed the denial and upheld it due to extensive decay and less than 50% of clinical crowns being intact.

DISCUSSION

Under the discretion allowed by Wis. Stat., §49.45(9), the Department now requires MA recipients to participate in HMOs. Wis. Admin. Code, §DHS 104.05(2)(a). MA recipients enrolled in HMOs must receive medical services from the HMOs' providers, except for referrals or emergencies. Admin. Code, §DHS 104.05(3).

The criteria for approval by a managed care program contracted with the DHCAA are the same as the general MA criteria. See Admin. Code, §DHS 104.05(3), which states that HMO enrollees shall obtain services "paid for by MA" from the HMO's providers. The department must contract with the HMO concerning the specifics of the plan and coverage. Admin. Code, §DHS 104.05(1).

If the enrollee disagrees with any aspect of service delivery provided or arranged by the HMO, the recipient may file a grievance with the department or appeal to the Division of Hearings and Appeals. Just as with regular MA, when the department denies a grievance from an HMO recipient, the recipient can appeal the department's denial within 45 days. Wis. Stat., §49.45(5); Admin. Code, §DHS 104.01(5)(a)3.

The Department's Prior Authorization Guidelines Manual, Dental, page 124.005.03, states that a poor prognosis for successful root canal therapy is a reason for denying a prior authorization request for root canal. In a prior authorization request the provider has the obligation to justify the provision of the service. Admin. Code, §DHS 107.02(3)(d)6.

Specifically, the Manual states that a request must be denied if:

1. The x-rays indicate the tooth is non-restorable, as determined by the Dental Consultant;
2. The x-ray indicates that more than 50% of the natural clinical crown has been destroyed by decay as determined by the Dental Consultant;...
5. Poor prognosis for successful root canal therapy (e.g. dilacerated roots, chronic abscess, etc.), as determined by the Dental Consultant.

See also the Online MA Provider Handbook, Dental, Topic #2881. To succeed in an appeal the recipient and the provider must show that the DHCAA Dental Consultant was wrong in determining that the prognosis was poor. Petitioner's grandmother has had no contact with the requesting dentist, so it is unknown if the dentist agrees or disagrees with the DHCAA conclusion. I thus must uphold the denial.

If the requesting dentist believes the prognosis is good, and that the Consultants misread the x-rays, a new request can be made by petitioner's dentist explaining why the prognosis is good.

CONCLUSIONS OF LAW

The DHCAA correctly denied the requested root canals because the service has a poor prognosis.

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 16th day of June, 2015

\sBrian C. Schneider
Administrative Law Judge
Division of Hearings and Appeals



State of Wisconsin \DIVISION OF HEARINGS AND APPEALS

Brian Hayes, Administrator
Suite 201
5005 University Avenue
Madison, WI 53705-5400

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

The preceding decision was sent to the following parties on June 16, 2015.

Division of Health Care Access and Accountability