

**STATE OF MICHIGAN
STATE OFFICE OF ADMINISTRATIVE HEARINGS AND RULES
FOR THE DEPARTMENT OF COMMUNITY HEALTH**

P.O. Box 30763, Lansing, MI 48909
(877) 833-0870; Fax: (517) 334-9505

IN THE MATTER OF:

██████████,

Appellant

_____ /

Docket No. 2009-13654 PA

Case No. ██████████

Load No. ██████████

DECISION AND ORDER

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and 42 CFR 431.200 *et seq.*, upon the Appellant's request for a hearing.

After due notice, a hearing was held on ██████████. ██████████ (Appellant) appeared and testified on her own behalf. ██████████ represented the Department. ██████████, appeared as a witness for the Department.

ISSUE

Did the Department properly deny Appellant's prior authorization request for full dentures?

FINDINGS OF FACT

The Administrative Law Judge, based upon the competent, material and substantial evidence on the whole record, finds as material fact:

1. Appellant is a Medicaid beneficiary.
2. On ██████████, Appellant received complete mandible and maxillary dentures. (Exhibit 1 Page 6)
3. On ██████████, the Department received a prior authorization request for complete maxillary and mandibular dentures from the Appellant's dentist. (Exhibit 1 Page 5)
4. On ██████████, the Department denied the prior authorization request for

the dentures on the basis that Appellant had full dentures placed on ██████████
██████████; and Appellant is not eligible for new dentures until ██████████. (Exhibit 1
Page 5)

5. On ██████████, the Department sent Appellant notice that the prior authorization request was reviewed and denied on the basis that: "Michigan Medicaid or Children's Special Health Care records indicate that you have been provided with this type of service within the last 5 years..." (Exhibit 1 Page 4)
6. On ██████████, the State Office of Administrative Hearings and Rules received Appellant's Request for Hearing.

CONCLUSIONS OF LAW

The Medical Assistance Program is established pursuant to Title XIX of the Social Security Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). It is administered in accordance with state statute, the Social Welfare Act, the Administrative Code, and the State Plan under Title XIX of the Social Security Act Medical Assistance Program.

In this case, the Department provided documentary evidence, which indicates that Appellant had a previous placement of full upper and lower dentures on June 9, 2006. (See Exhibit 1, page 6) MDCH Medicaid Provider Manual, Dental Section, January 1, 2009, page 17, outlines coverage for partial dentures:


Complete or partial dentures are not authorized when:

A previous denture has been provided within five years, whether or not the existing denture was obtained through Medicaid.

An adjustment, relines, repair, or duplication will make it serviceable.

Replacement of a complete or partial denture that has been lost or broken beyond repair is not a benefit within five years, whether or not the existing denture was obtained through Medicaid.

The Department provided the necessary evidence to establish that Appellant had complete upper and lower dentures paid for by the Medicaid program within the last five years. Appellant failed to provide any evidence to rebut the evidence provided the Department. Therefore the authorization request for complete dentures was properly denied in accordance to the policy outlined in the Dental Section of the Department's Medicaid Provider Manual. (Exhibit 1 Page 10)


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DECISION AND ORDER

The Administrative Law Judge, based on the above findings of fact and conclusions of law, decides that the Department properly denied Appellant's prior authorization request for complete upper and lower dentures.

IT IS THEREFORE ORDERED that:

The Department's decision is **AFFIRMED**.

Marya A. Nelson-Davis
Administrative Law Judge
for Janet Olszewski, Director
Michigan Department of Community Health

cc: 

Date Mailed: 5/1/2009

***** NOTICE *****

The State Office of Administrative Hearings and Rules may order a rehearing on either its own motion or at the request of a party within 30 days of the mailing date of this Decision and Order. The State Office of Administrative Hearings and Rules will not order a rehearing on the Department's motion where the final decision or rehearing cannot be implemented within 90 days of the filing of the original request. The Appellant may appeal the Decision and Order to Circuit Court within 30 days of the receipt of the Decision and Order or, if a timely request for rehearing was made, within 30 days of the receipt of the rehearing decision.