

**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**

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**Docket No.** 2009-28739 PA  
**Case 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 ██████████. The Appellant appeared without representation. She had no witnesses. ██████████, appeals review officer, represented the Department. Her witness was Medicaid Analyst, ██████████.

**PRELIMINARY MATTER**

At hearing the Appellant offered proposed Exhibit #2 – a post petition prescription pad note from her (unknown) family practitioner. On objection the ALJ took the admission of this document under advisement. The ALJ now rules that the prescription pad note is not admissible as it had not been shared with the department prior to hearing and because it raises an issue not presented on PA.

**ISSUE**

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

**FINDINGS OF FACT**

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

1. At the time of hearing, the Appellant is a ██████████ disabled, Medicaid beneficiary.

2. The Appellant's dentist (██████████) sought approval on ██████████, for maxillary and mandibular partial dentures. The PA was approved – as amended with denial of the lower partial. (Department Exhibit A, p. 2)
3. The denial was based on submitted medical records demonstrating that the Appellant did not meet the program requirement of having fewer than eight teeth in occlusion in posterior areas of the mouth or an anterior tooth in the lower arch missing to qualify for a lower partial denture. (Department's Exhibit A, pp. 2, 5, 6, 7, 9)
4. On ██████████, the Appellant was notified of the department's denial. She was further advised of her appeal rights. (Department's Exhibit A, p. 5)
5. On ██████████, the State Office of Administrative Hearings and Rules received the instant request for hearing brought by ██████████. (Appellant's Exhibit #1)

### **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.

### **PRIOR AUTHORIZATION**

Medicaid requires prior authorization (PA) to cover certain services before those services are rendered to the beneficiary. The purpose of PA is to review the medical need for certain services. It does not serve as an authorization of fees or beneficiary eligibility. Different types of services requiring PA include:

- Procedures identified as requiring PA on the procedure code databases on the MDCH website;
- Procedures/items that are normally noncovered but may be medically necessary for select beneficiaries (e.g., surgery normally cosmetic in nature, obesity surgery, off-label use drugs, etc.); and
- Referrals for elective services by out-of-state nonenrolled providers.

Medicaid Provider Manual, MPM, Practitioner  
§ 1.10, October 1, 2009, p. 4.<sup>1</sup>

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<sup>1</sup> This version of the MPM is substantially similar to the edition in place at the time of requested service.

Under the general policy instructions for Medicaid related dental services the MPM sets the threshold for dentures at less than eight teeth in occlusion:

Complete and partial dentures are benefits are authorized:

- If there is one or more anterior teeth missing;
- If there are less than eight posterior teeth in occlusion;
- Where an existing complete or partial denture cannot be made serviceable through repair, relining, adjustment, or duplicating (rebasin) procedures. If a partial denture can be made serviceable, the dentist should provide the needed restorations to maintain use of the existing partial, extract teeth, add teeth to an existing partial, and remove hyperplastic tissue.

MPM, Dental, §6.6A, October 1, 2009, p. 16

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At hearing, the Department witness explained that the Appellant's request was denied for failure to meet policy requirements regarding number of teeth in occlusion in posterior areas of the mouth. See Department's Exhibit A, p. 6.

The Appellant said she needed both dentures owing to a pre existing digestive disorder and abdominal adhesions.

On review - I thought the Department's decision to deny dentures was correct, based on policy. There was a lack of credible evidence to support the Appellant's suggestion of a medically necessary approval for both maxillary and mandibular dentures.

### **DECISION AND ORDER**

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

**IT IS THEREFORE ORDERED** that:

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

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Dale Malewska  
Administrative Law Judge  
for Janet Olszewski, Director  
Michigan Department of Community Health

[REDACTED]  
Docket No. 2009-28739  
Decision & Order

cc:



Date Mailed: 10/8/2009

**\*\*\* 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.