

**STATE OF MICHIGAN
MICHIGAN ADMINISTRATIVE HEARING SYSTEM
FOR THE DEPARTMENT OF COMMUNITY HEALTH**

P.O. Box 30763, Lansing, MI 48909
(877) 833-0870; Fax: (517) 373-4147

IN THE MATTER OF:

Docket No. 2013-39942 PA

██████████
Appellant
_____ /

DECISION AND ORDER

This matter is before the undersigned Administrative Law Judge (ALJ) 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. ██████████ Appeals Review Officer, represented the Department. ██████████, Medicaid Utilization Analyst appeared as a witness for the Department.

ISSUE

Did the Department properly deny Appellant's request for Prior Authorization (PA) of a lower partial denture?

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 ██████-year-old Medicaid beneficiary, born ██████████ (Exhibit A, p. 7 and testimony).
2. The Appellant testified that she needs teeth because she lost her lower partial denture and believes ██████ years is too long to wait for a replacement. (Testimony).
3. On ██████████ the Appellant's dentist (██████████ DDS) sought approval for a lower partial denture. (Exhibit A, p. 7).
4. On ██████████, the request for a lower partial denture was reviewed and denied as the Appellant was shown to have received such prosthesis within the last ██████ years, i.e., the previous lower partial was placed on

**Docket No. 2013-39942 PA
Decision and Order**

Appellant was further advised of her appeal rights. (Exhibit A, pp. 5-6).

5. On the Michigan Administrative Hearing System (MAHS) received the instant request for hearing brought by the Appellant. (Exhibit A, p. 4).

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.

1.10 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. . . .

Medicaid Provider Manual, (MPM) Practitioner,
January 1, 2013, p. 4.

Under the general policy instructions for Medicaid related dental services the MPM sets replacement schedules for denture repair and replacement:

GENERAL INSTRUCTIONS

Complete and partial dentures are benefits for all beneficiaries. All dentures require PA. Providers must assess the beneficiary's general oral health and provide a five-year prognosis for the prosthesis requested. An upper partial denture PA request must also include the prognosis of six sound teeth.

Complete or partial dentures are authorized:

- If there is one or more anterior teeth missing;
- If there are less than eight posterior teeth in occlusion (fixed bridges and dentures are to be considered occluding teeth); or

██████████
Docket No. 2013-39942 PA
Decision and Order

- Where an existing complete or partial denture cannot be made serviceable through repair, relining, adjustment, or duplicating (rebasing) 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....

Reimbursement for a complete or partial denture includes all necessary adjustments, relines, repairs, and duplications within six months of insertion. This includes such services for an immediate upper denture when authorized.

If a complete or partial denture requires an adjustment, reline, repair, or duplication within six months of insertion, but the services were not provided until after six months of insertion, no additional reimbursement is allowed for these services.

Complete or partial dentures are not authorized when:

- A previous prosthesis has been provided within five years, whether or not the existing denture was obtained through Medicaid.
- An adjustment, reline, repair, or duplication will make them 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.

MPM, Dental, §6.6A, January 1, 2013, pp. 17, 18

At the hearing the Department witness testified that the Appellant's request was denied for failure to meet policy requirements for prosthesis replacement within █ years of the previous placement by Medicaid. According to the Department's evidence the Appellant received placement of a lower partial denture on ██████████ (Exhibit A, p. 5 and testimony).

The Appellant testified that she needs teeth because she lost her lower partial denture and she believes █ years is too long to wait for a replacement. Appellant stated she

Docket No. 2013-39942 PA
Decision and Order

lost her partial. She used to take it out when she first got it because she was not used to it. She said it was in her purse and when she looked for it again it was gone. She stated she has looked everywhere and does not know where it went. Appellant stated she has [REDACTED] teeth missing in the front and can't go around without her partial denture. She stated she is on disability and can't afford to pay full-price for a new partial denture. Appellant asked for our sympathy and to allow her to get a new partial paid for by Medicaid.

On review, the Department's decision to deny the request for dentures was reached within policy. Despite its concern for needy individuals, the Department must implement its programs in accordance with federal law, state law and Department policy. This Administrative Law Judge is also bound by federal law and Department policy. The Michigan Administrative Hearing System has no Equitable Jurisdiction and cannot order the Department to provide programs or services to an individual who is not eligible for such services under the clearly established Medicaid policy.

DECISION AND ORDER

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

IT IS THEREFORE ORDERED that:

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

William D Bond

William D. Bond
Administrative Law Judge
for James K. Haveman, Director
Michigan Department of Community Health

Date Signed: [REDACTED]
Date Mailed: [REDACTED]

WDB/db
cc: [REDACTED]

***** NOTICE *****

The Michigan Administrative Hearing System 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 Michigan Administrative Hearing System 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.