

**STATE OF MICHIGAN  
MICHIGAN ADMINISTRATIVE HEARING SYSTEM  
FOR THE DEPARTMENT OF HEALTH AND HUMAN SERVICES**

P.O. Box 30763, Lansing, MI 48909  
(517) 335-2484; Fax: (517) 373-4147

**IN THE MATTER OF:**

**Docket No.** 15-004379 PA

██████████

██████████

██████████

Appellant.

\_\_\_\_\_ /

**DECISION AND ORDER**

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

After due notice, a telephone hearing was held on ██████████. Appellant appeared and testified on her own behalf. ██████████ Appeals Review Officer, represented the Department of Health and Human Services. ██████████, Medicaid Utilization Analyst, testified as a witness for the Department.

**ISSUE**

Did the Department properly deny Appellant's prior authorization request for partial upper and lower 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 █████ year-old Medicaid beneficiary. (Exhibit A, page 5).
2. On ██████████, the Department received a prior authorization request filed by Appellant's dentist on behalf of Appellant and requesting partial upper and lower dentures. (Respondent's Exhibit A, page 5).
3. In reviewing the request, the Department found that it had previously approved and paid for the placement of partial upper and lower dentures on ██████████. (Exhibit A, page 6; Testimony of ██████████)
4. The Department then determined that the prior authorization request must be denied pursuant to the policy that complete or partial dentures cannot be authorized when a previous prosthesis has been provided within █████ years, whether or not the existing denture was obtained through Medicaid. (Testimony of ██████████).

5. However, the Department failed to send Appellant any written notice of its decision. (Testimony of ██████████).
6. Appellant was able to learn of the Department's decision and the reason for its decision through her dentist. (Testimony of Appellant).
7. On ██████████, the Michigan Administrative Hearing System received a request for hearing filed by Appellant with respect to the denial of partial dentures. (Exhibit A, page 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.

Medicaid covered benefits are addressed for the practitioners and beneficiaries in the Medicaid Provider Manual (MPM). Regarding the specific request in this case, the applicable version of the MPM states:

#### **6.6 PROSTHODONTICS (REMOVABLE)**

##### **6.6.A. 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

- 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.

Before final impressions are taken and any construction begun on a complete or partial denture, healing adequate to support a prosthesis must take place following the completion of extractions or surgical procedures. This includes the posterior ridges of any immediate denture. An exception is made for the six anterior teeth (cuspid to cuspid) only when an immediate denture is authorized.

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, July 1, 2014 version  
Dental Chapter, pages 18-19  
(Emphasis added)*

Appellant bears the burden of proving by a preponderance of the evidence that the Department erred in denying her prior authorization request. Based on the evidence in this case, Appellant has failed to meet that burden of proof.

The above policy clearly states that complete or partial dentures cannot be authorized when a previous prosthesis has been provided within ██████ years, whether or not the existing denture was obtained through Medicaid. Here, it is undisputed that the Department approved and paid for partial upper and lower dentures in ██████████ which is within ██████ years of Appellant's current request.

In response, Appellant testified that she never received the approved dentures in ██████████ because her dentist at the time only placed her with temporary dentures before removing the temporary dentures and closing his business prior to her next appointment. Appellant also testified that she did not contact the Department at the time because she did not know how to do so and that she has been without dentures for years. She further testified that, once she found a new dentist, she had her new dentist submit a new request.

However, this Administrative Law Judge's jurisdiction is limited to reviewing the Department's decision in light of the information it had at the time it made that decision. In this case, the available information clearly demonstrated that Appellant had previously received partial upper and lower dentures within five years of the current prior authorization request and that there was no applicable exception to the ██████ year rule. Accordingly, the Department properly denied Appellant's request.

To the extent that Appellant has issues with her previous dentist, she can take them up with the Department's Fraud Section and, during the hearing, the Department's witness provided Appellant with the Fraud Section's contact information. With respect to the issue in this case, however, the Department's decision must be affirmed given the information available at the time.

[REDACTED]  
Docket No. 15-004379 PA  
Decision and Order

**DECISION AND ORDER**

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

**IT IS THEREFORE ORDERED THAT:**

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

*Steven Kibit*

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Steven Kibit  
Administrative Law Judge  
for Nick Lyon, Director  
Michigan Department of Health and Human Services

Date Signed: [REDACTED]

Date Mailed: [REDACTED]

SK/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.