



State of West Virginia
DEPARTMENT OF HEALTH AND HUMAN RESOURCES
Office of Inspector General
Board of Review
1027 N. Randolph Ave.
Elkins, WV 26241

Joe Manchin III
Governor

Martha Yeager Walker
Secretary

August 17, 2007

_____ for _____

Dear Ms. _____:

Attached is a copy of the findings of fact and conclusions of law on your hearing held August 15, 2007. Your hearing request was based on the Department of Health and Human Resources' action to deny Medicaid coverage of dental services for your daughter.

In arriving at a decision, the State Hearing Officer is governed by the Public Welfare Laws of West Virginia and the rules and regulations established by the Department of Health and Human Resources. These same laws and regulations are used in all cases to assure that all persons are treated alike.

Eligibility for Medicaid Program services is determined based on current regulations. One of these regulations states that West Virginia Medicaid covers medically necessary dental services that reflect the level of treatment that can be safely furnished, and for which no equally effective, more conservative or less costly treatment is available statewide.

Information submitted during the hearing fails to justify the need for Medicaid authorization of a fixed dental bridge and indicates that more cost-effective alternatives are available.

It is the decision of the State Hearing Officer to **uphold** the action of the Department in denying your request for Medicaid to cover dental services.

Sincerely,

Pamela L. Hinzman
State Hearing Officer
Member, State Board of Review

cc: Erika H. Young, Chairman, Board of Review
Evelyn Whidby, BMS

**WEST VIRGINIA DEPARTMENT OF HEALTH & HUMAN RESOURCES
BOARD OF REVIEW**

_____,

Claimant,

v.

Action Number: 07-BOR-1395

**West Virginia Department of
Health and Human Resources,**

Respondent.

DECISION OF STATE HEARING OFFICER

I. INTRODUCTION:

This is a report of the State Hearing Officer resulting from a fair hearing concluded on August 17, 2007 for _____. This hearing was held in accordance with the provisions found in the Common Chapters Manual, Chapter 700 of the West Virginia Department of Health and Human Resources. This fair hearing was convened on August 15, 2007 on a timely appeal filed May 3, 2007.

II. PROGRAM PURPOSE:

The program entitled Medicaid is set up cooperatively between the Federal and State governments and administered by the West Virginia Department of Health & Human Resources.

The 1965 Amendments to the Social Security Act established, under Title XIX, a Federal-State medical assistance program commonly known as Medicaid. The Department of Health and Human Resources administers the Medicaid Program in West Virginia in accordance with Federal Regulations. The Bureau for Medical Services is responsible for development of regulations to implement Federal and State requirements for the program. The Department of Health and Human Resources processes claims for reimbursements to providers participating in the program.

III. PARTICIPANTS:

_____, Claimant

_____, Claimant's mother

Dr. Robert Krieg, General Dentist, Bureau for Medical Services (participated telephonically)

Miranda Walker, RN, Bureau for Medical Services (participated telephonically)

Presiding at the hearing was Pamela L. Hinzman, State Hearing Officer and a member of the State Board of Review.

IV. QUESTIONS TO BE DECIDED:

The question to be decided is whether the Department was correct in its action to deny the Claimant's request for Medicaid to cover dental services.

V. APPLICABLE POLICY:

Dental Manual, Chapter 500, Section 520 and Attachment 1

VI. LISTING OF DOCUMENTARY EVIDENCE ADMITTED:

Department's Exhibits:

D-A Dental Manual, Chapter 500, Section 520 and Attachment 1

D-B Information from Dr. [REDACTED] DDS

D-C Notices of Denial from West Virginia Medical Institute

VII. FINDINGS OF FACT:

1) Dr. [REDACTED] requested that Medicaid authorize payment for a fixed dental bridge for the Claimant, who is 14 years old. The Claimant has had orthodontic work to correct her bite and has a congenitally missing lower bicuspid. Dr. [REDACTED] submitted a Request for Prior Authorization (D-B) to West Virginia Medical Institute (WVMI) in March 2007.

2) On April 20, 2007, the Department, through WVMI, sent Notices of Denial for Dental Services (D-C) to both the Claimant and Dr. [REDACTED]. These notices state, in part:

A request for prior authorization was submitted for dental services. Based on the medical information provided, the request has been denied.

Reason for Denial: Documentation provided does not indicate medical necessity- specifically:

Your request for prior authorization of a fixed bridge for this patient has been reviewed. The information provided does not document sufficient breakdown of the abutment teeth to warrant a fixed bridge on the basis of medical necessity. The information presented seems to justify a unilateral partial of an acid etch bridge. You may submit a request for either of these procedures.

- 3) The BMS General Dentist testified that the condition of the Claimant's teeth does not warrant a fixed bridge, which he stated is a more invasive procedure. He stated that a unilateral partial/acid etch bridge would fulfill the treatment, is less invasive to the teeth and is more cost-effective to the Department.
- 5) The Claimant's mother testified that her daughter's dentist had voiced concerns about the danger of swallowing an acid etch bridge. The BMS Dentist responded that the chance of an individual swallowing such a bridge is "slim to none."
- 6) Dental Manual, Chapter 500, Section 520, Covered Dental Services, states:

WV Medicaid covers medically necessary services that do not duplicate another provider's services. Covered dental services must meet all of the following criteria:

- Services must be individualized, specific, consistent with symptoms or confirmed diagnosis of the illness or injury under treatment, and not in excess of the member's needs
- Services must not be experimental, investigational or for research purposes
- Services must reflect the level of treatment that can be safely furnished, and for which no equally effective, more conservative, or less costly treatment is available statewide
- Services must not be for the convenience of the member, the member's caretaker, or the provider of service

IMPORTANT: The fact that a provider prescribes, recommends or approves medical care does not in itself make the care medically necessary or a covered service. Nor does it mean that the patient is eligible for Medicaid benefits. It is the provider's responsibility to verify Medicaid eligibility before services are provided, even for prior authorized services.

VIII. CONCLUSIONS OF LAW:

- 1) Medicaid policy provides that covered dental services must reflect the level of treatment that can be safely furnished, and for which no equally effective, more conservative or less costly treatment is available statewide.
- 2) Information provided during the hearing indicates that the Claimant's dental needs can be met more cost-effectively with a unilateral partial/acid etch bridge as opposed to the fixed bridge recommended by her dentist.
- 3) The Department acted correctly in denying the Claimant's request for Medicaid payment of dental services for a fixed bridge.

IX. DECISION:

It is the decision of the State Hearing Officer to **uphold** the action of the Agency in denying the Claimant's request for Medicaid payment of a fixed dental bridge.

X. RIGHT OF APPEAL:

See Attachment

XI. ATTACHMENTS:

The Claimant's Recourse to Hearing Decision

Form IG-BR-29

ENTERED this 17th Day of August 2007.

Pamela L. Hinzman
State Hearing Officer