

**BEFORE THE ALASKA OFFICE OF ADMINISTRATIVE HEARINGS ON REFERRAL
BY THE DEPARTMENT OF HEALTH AND SOCIAL SERVICES**

In the Matter of)	
)	
N X)	OAH No. 16-1065-MDX
_____)	Agency No.

DECISION

I. Introduction

N X receives Medicaid benefits. Her provider requested authorization for a new upper denture for Ms. X. The Division of Public Assistance denied the request because the program had paid for dentures for Ms. X within the past five years. Ms. X appeals.

Because the division’s regulation only allows authorization for a denture once in a five year period, the division’s denial is upheld.

II. Facts

The Medicaid program paid for a set of dentures for Ms. X on February 22, 2012.¹ Those dentures no longer fit properly, and are causing Ms. X pain. She had them adjusted by Dr. C, and both sides of her jaw popped and her cheekbone cracked.² In August 2016, Dr. T S of No Name Dental in No Name requested authorization from the Medicaid program for a new upper denture for Ms. X.³ The division denied the request.⁴

Ms. X appealed the denial. A telephonic hearing was held on September 30, 2016. Ms. X represented herself. Division Hearing Representative Terri Gagne represented the division. Mary Hansen, the dental program manager for the division, testified.

III. Discussion

Ms. X argues that the division should approve her provider’s request for pre-authorization because she needs new dentures and regards new dentures as medically necessary. The Medicaid program requires a showing of medical necessity before it will pay for services.⁵ In addition, the regulations governing the Medicaid program limit the types of dental services the program will pay for. Specifically, the regulations provide that the department will pay for replacement of complete or partial dentures “only once per five calendar years.”⁶ Whether the division will preauthorize payment for a new denture for Ms. X depends then not only on

¹ Exhibit D at 2.
² Exhibit C at 2; Testimony of X.
³ Exhibit D at 2.
⁴ Exhibit D at 1.
⁵ 7 AAC 105.100(5).
⁶ 7 AAC 110.145(b)(6).

whether the denture is medically necessary, but also on when the division last paid for dentures for Ms. X.

The division paid for Ms. X's current upper denture on February 22, 2012.⁷ The division's notice to Ms. X of the denial of the request for pre-authorization, however, stated that her current upper denture was purchased on December 22, 2012.⁸ Because the February date is repeated elsewhere in the record, it is the correct date and the December 22, 2012 date was a typographical error. When the division denied authorization of the request for preauthorization from No Name Dental Group, it specifically noted that Ms. X would not be eligible for a new denture until February 22, 2017.⁹

The division's denial of the request by No Name Dental Group for a new upper denture for Ms. X is consistent with the five-year coverage limitation, and the division's denial should therefore be upheld. However, nothing in this decision prevents Ms. X's dentist from requesting preauthorization for new dentures for Ms. X in 2017, after the five year period has elapsed.

IV. Conclusion

The division's August 29, 2016 denial of No Name Dental Group's request for preauthorization for a new upper denture for Ms. X is upheld.

Dated: October 14, 2016.

Signed _____
Kathryn L. Kurtz
Administrative Law Judge

Adoption

The undersigned by delegation from the Commissioner of Health and Social Services, adopts this decision as final under the authority of AS 44.64.060(e)(1).

Judicial review of this decision may be obtained by filing an appeal in the Alaska Superior Court in accordance with AS 44.62.560 and Alaska R. App. P. 602(a)(2) within 30 days after the date of this decision.

DATED this 15th day of November 2016.

By: Signed _____
Signature
Douglas Jones _____
Name
Medicaid Program Integrity Manager
Title

[This document has been modified to conform to the technical standards for publication.]

⁷ Exhibit D at 2; Exhibit E at 4, 6.

⁸ Exhibit D at 1.

⁹ Exhibit D at 2.