



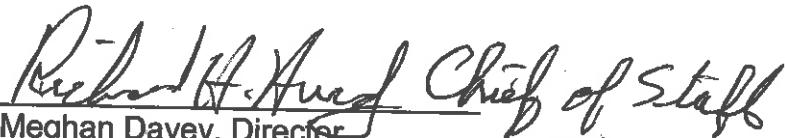
I hereby ADOPT the Initial Decision affirming the denial of prior authorization for orthodontic braces. Medicaid payment is only available for medically necessary dental services. Orthodontic treatment is limited to handicapping malocclusions based upon an assessment scale. N.J.A.C. 10:56-2.15(b). A patient must receive 26 or more points for the orthodontic service to be covered under Medicaid.

Petitioner's own orthodontist determined that she scored 8 points on the assessment scale. Thereafter, at all levels of the appeal process, Petitioner failed to score higher than 24 points. Additionally, Petitioner has none of the extenuating circumstances described in N.J.A.C. 10:56-2.15(b) (such as an oral cleft) which would permit payment. As a result, the ALJ concluded that Petitioner failed to meet the medical necessity requirements needed to qualify for orthodontic braces under the Medicaid regulations. Based upon my review of the record, I agree with the ALJ's conclusion.

THEREFORE, it is on this <sup>13<sup>th</sup></sup> day of NOVEMBER 2018,

ORDERED:

That the Initial Decision is hereby ADOPTED.

  
Meghan Davey, Director  
Division of Medical Assistance  
and Health Services  
OBO