



State of New Jersey

DEPARTMENT OF THE TREASURY
DIVISION OF PENSIONS AND BENEFITS
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Lt. Governor

March 13, 2024

FINAL ADMINISTRATIVE DETERMINATION



Dear [REDACTED],

I am writing in reference to the decision of the State Health Benefits Commission (“Commission”) denying your request for reimbursement for the replaced crown work that was rendered on June 10, 2022. At its meeting of May 10, 2023, the Commission determined that the crown work was not eligible for reimbursement by the dental plan because the terms of the plan only cover a replacement every five (5) years. On June 5, 2023, you filed a filed appeal of the Commission’s Decision.

At its meeting of September 13, 2023, the Commission considered your appeal. After careful review, the Commission affirmed its prior decision, and finding no genuine issue of material fact in dispute, denied your request for an administrative hearing. Thereafter, the Commission directed the undersigned to draft a Final Administrative Determination.

Findings of Fact and Conclusions of Law as outlined below were presented to and approved by the Commission at its March 13, 2024 meeting.

Findings of Fact

You are enrolled in the School Employees’ Health Benefits Program (“SEHBP”) based on your retirement from [REDACTED]. You are enrolled in the Aetna Dental Expense Plan.¹

On December 15, 2017, you had a crown placed on tooth 2. A replacement crown on tooth 2 was rendered on June 10, 2022.

On August 23, 2022, you received an Explanation of Benefits from Aetna for the services rendered on June 10, 2022, explaining that the crown was not eligible for coverage. On September 7, 2022, you wrote to Aetna challenging the denial of coverage. Aetna responded on November 1, 2022,

¹ Contracts for the dental plans offered by the SEHBP were held by the Commission at the time of service.

affirming the original denial of coverage, explaining that this was not an issue of medical necessity, but purely based on the contractual provisions as contained in the Retiree Dental Plans Member Guidebook. Aetna specifically referenced the section titled “DEP SERVICES ELIGIBLE FOR REIMBURSEMENT”, which states the following:

Restorative procedures, including fillings, inlays, onlays, and crowns (the replacement of a crown is covered only after a five- year period measured from the date on which the crown was previously placed).

On January 26, 2023, you filed a second level appeal asserting that the replacement of the crown was necessary due to fast growing decay under the crown and the gum line. Aetna responded on February 16, 2023, again denying the appeal, explaining that even though you asserted that the crown replacement was medically necessary, the replacement was not covered because it was within the five-year window of ineligibility for a replaced crown. Aetna’s letter provided you with appeal rights to the Commission.

On May 10, 2023, the Commission heard your appeal for reimbursement for the replaced crown. The Commission considered all the information submitted and voted to deny your appeal based on the specific provisions of the plan that a crown must be over five years old in order to be eligible for replacement.

On June 5, 2023, you expressed your disagreement with the Commission’s decision. You requested reconsideration due to the fact that the replacement was due to address the severe dental decay beneath the original crown and that serious infection and root damage would occur if you did not get the crown replaced immediately.

On September 13, 2023, the Commission heard your request for reconsideration or for an appeal to the Office of Administrative Law. The Commission denied your request for a reconsideration because you provided no new information, and finding no genuine issue of material fact in dispute, denied your request for an administrative hearing. The Commission directed the undersigned to draft a detailed Findings of Fact and Conclusions of Law for review at its March 13, 2024 meeting.

Conclusions of Law

The SEHBP provides health coverage to qualified employees and retirees of participating local education employers. N.J.S.A. 52:14-17.46.1 to -46.16. The benefits under the contract or contracts for the SEHBP “may be subject to such limitations, exclusions, or waiting periods as the commission finds to be necessary or desirable to avoid inequity, unnecessary utilization, duplication of services or benefits otherwise available, including coverage afforded under the laws of the United States, such as the federal Medicare program, or for other reasons.” N.J.S.A. 52:14-17.46.5(d).² Further, all provisions of the SHBP Act apply to the SEHBP, except as expressly states in the SEHBP Act. N.J.S.A. 52:14-17.46.11. Additionally, the regulations promulgated by

² The same provision exists in the State Health Benefits Plan, under the authority of the SHBC, at N.J.S.A. 52:14-17.29(D). As noted previously, the contract for dental benefits at the time was held by the SHBC.

the Commission apply to the SEHBP until the SEHBP has its own regulations. N.J.S.A. 52:14-17.46.4

The Commission is empowered to establish regulations to administer the SHBP. N.J.S.A. 52:14-17.27(a). Pursuant to N.J.A.C. 17:9-2.14, the Commission adopts by reference all of the policy provisions contained in the SHBP health plan contracts, along with any subsequent amendments, to the exclusion of all other possible coverages. “The plans handbook supplements the master contracts and contains the specific provisions for services to be covered and those which are excluded.” Ibid.

The Retiree Dental Plans Member Guidebook states the following:

“Restorative procedures, including fillings, inlays, onlays, and crowns (the replacement of a crown is covered only after a five- year period measured from the date on which the crown was previously placed).”

You had a crown placed on tooth 2 on December 15, 2017 and a replacement crown placed on the same tooth on June 10, 2022. As the replacement was performed within five years it is not eligible for coverage under the plain language of the terms of the plan. In your appeal, you have not asserted that the dates of service are incorrect or that it was more than five years between services. Therefore, the Commission finds your crown replacement on June 10, 2022 is not eligible for reimbursement.

As noted above, the Commission has considered all the written submissions and all documentation in the record. Because this matter does not entail any disputed questions of fact, the Commission was able to reach its findings of fact and conclusions of law on the basis of the programs enabling statutes and regulations without the need for an administrative hearing. Accordingly, this correspondence constitutes the Final Administrative Determination of the State Health Benefits Commission.

You have the right, if you wish, to appeal this final administrative action to the Superior Court of New Jersey, Appellate Division within 45 days of the date of this letter in accordance with the Rules Governing the Courts in the State of New Jersey.

All appeals should be directed to:

Superior Court of New Jersey
Appellate Division
Attn: Court Clerk
PO Box 006
Trenton, NJ 08625

Sincerely,



Kelly Fields
Acting Secretary
State Health Benefits Commission