



State of New Jersey

DEPARTMENT OF HUMAN SERVICES

Division of Medical Assistance and Health Services

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**STATE OF NEW JERSEY
DEPARTMENT OF HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE
AND HEALTH SERVICES**

H.S.,

PETITIONER,

v.

DIVISION OF MEDICAL ASSISTANCE :

AND HEALTH SERVICES AND :

AETNA, :

RESPONDENTS. :

ADMINISTRATIVE ACTION

FINAL AGENCY DECISION

OAL DKT. NO. HMA 05135-25

As Assistant Commissioner for the Division of Medical Assistance and Health Services (DMAHS), I have reviewed the record in this case, including the OAL case file, the documents in evidence, and the Initial Decision. Both parties filed exceptions to the Initial Decision. Procedurally, the time period for the Agency Head to render a Final Agency Decision is April 6, 2026, pursuant to an extension order.

This matter concerns Aetna's determination that Petitioner was not eligible to receive two dental implants for teeth nineteen and twenty-one. The issue presented here is whether Aetna's denial was proper under N.J.A.C. 10:56-213(c)(1).

On November 14, 2024, Petitioner's dentist, Rutgers Dental, requested pre-approval for dental implants for teeth nineteen and twenty-one. ID at 2. On the same date, Aetna denied the request. Ibid. On January 23, 2025, an internal audit review affirmed the denial. Ibid. On March 3, 2025, Petitioner requested a fair hearing. Ibid. The hearing was held on November 10, 2025, and the record closed upon submission of closing briefs on December 12, 2025. Ibid.

During the hearing, Petitioner testified that they are missing several teeth and have mandibular tori, which affect their speech and their ability to work in sales and as a dance instructor. ID at 2. Petitioner further testified that they have been receiving treatment at the Rutgers School of Dental Medicine. Ibid. Dr. Chao-Ho Chien, D.M.D. (Dr. Chien), recommended that Petitioner restore their lower teeth with endodontic treatment, posts and cores, and crowns. Ibid. The records indicate that using a partial or complete denture would require removal of the tori, which would involve removing healthy bone and present difficulty for Petitioner. Ibid.

Dr. Ryan Lee, D.M.D., (Dr. Lee) testified on behalf of Aetna. ID at 3. He stated that Petitioner's tori are deformities that prevent the use of a complete denture and require surgical removal, which is invasive and painful. Ibid. However, Dr. Lee testified that the tori would not prevent the use of a partial denture. Ibid. Dr. Lee further testified that Petitioner never attempted a partial denture, and the record does not reflect that such treatment was pursued meaningfully. Ibid. The records indicate that Petitioner initially considered a partial denture but rejected that option due to the anticipated need for tori

removal. Ibid. Dr. Lee opined that Petitioner has sufficient healthy teeth to support a partial denture and that the tori need not to be removed. ID at 4.

The Administrative Law Judge (ALJ) reversed Aetna's determination, finding that Petitioner's tori constitute deformities that prevent the use of either a complete or partial denture and establish medical necessity for implants at teeth twenty and twenty-one. ID at 4. The ALJ determined that Dr. Chien, as the treating dentist who personally examined Petitioner and directly observed the location of the tori, provided a more persuasive opinion than Dr. Lee, whose opinion was based upon review of records and photographs. Ibid. Accordingly, the ALJ concluded that Petitioner was entitled to approval of the requested implants at this time pursuant to N.J.A.C. 10:56-2.13(c)(1). ID at 5.

On January 8, 2026, Aetna filed exceptions to the Initial Decision, asserting that it contained multiple errors. Aetna argued that the ALJ incorrectly concluded that Petitioner could not use a partial denture or undergo surgical removal due to jaw tori, despite treatment notes indicating that surgical removal was considered the preferred treatment option, albeit difficult. Aetna further contended that the ALJ improperly relied on certain statements that were inconsistent with earlier treatment plans and contradicted Dr. Lee's testimony. Aetna also asserted that the ALJ afforded undue weight to Dr. Chien's notes and mischaracterized Dr. Lee's testimony. Dr. Lee testified that Petitioner's tori are small, that Petitioner retains sufficient usable dentition, and that a partial denture should be attempted prior to implant surgery because it is less invasive. He also testified that removal of small tori would be less invasive than implant placement. Finally, Aetna argued that the Initial Decision incorrectly stated that two experts testified, when only Dr. Lee provided expert testimony.

On January 9, 2026, Petitioner filed a response to Aetna's exceptions, arguing that Aetna failed to demonstrate legal and factual errors, or to show that the Initial Decision

was arbitrary, capricious, or unreasonable. Petitioner requested that DMAHS uphold the ALJ's decision.

On January 21, 2026, Aetna filed supplemental exceptions advising DMAHS that the November 10, 2025, hearing transcript contained an error in Dr. Lee's testimony, which was subsequently corrected by the court reporting service.

Medicaid regulations only cover medically necessary dental services, and implants are limited to requests that demonstrate that an individual "has a facial anomaly, deformity, or has been unable to function with a complete denture for at least two years and other surgical corrections have been unsuccessful in improving the retention of the denture." N.J.A.C. 10:56-2.13(c).

Upon a careful review of the entire record, including the Initial Decision, the hearing testimony, documentary evidence, and the parties exceptions, I FIND that the ALJ's finding of facts and conclusions of law are supported by substantial credible evidence and are consistent with applicable law and regulation.

The ALJ properly evaluated the competing expert opinions and reasonably afforded greater weight to Dr. Chien, who conducted a direct, in-person examination and assessed the functional and anatomical limitations caused by Petitioner's mandibular tori. In contrast, Aetna's expert, Dr. Lee, based his opinion solely on a review of records and photographs. It is well-established that the factfinder may assign greater probative value to the treating provider with firsthand clinical knowledge of Petitioner's condition.

Aetna's arguments in its exceptions amount largely to disagreement with the ALJ's credibility determination and with the ALJ's weighing of the evidence. Such determinations are entitled to deference where, as here, they are supported by the record. The ALJ thoroughly considered alternative treatment options, including partial dentures

and surgical removal of tori, and reasonably concluded that those alternatives were either impractical or medically inappropriate under the circumstances.

First, Aetna's contention that the ALJ erred in concluding that Petitioner could not utilize a partial denture or undergo surgical removal of the tori is not supported by the record. The ALJ specifically relied on the treating dentist, Dr. Chien, who personally examined Petitioner and directly observed the anatomical limitations caused by the tori. Based on this firsthand evaluation, Dr. Chien concluded that the tori constitute deformities that prevented the effective use of a denture and supported the medical necessity of implants. The ALJ reasonably found this option more persuasive, as it was based solely on a review of the records.

Second, Aetna's argument that surgical removal was a preferable treatment option, even if difficult, does not undermine the ALJ's findings. The mere possibility of a more invasive or complex procedure does not negate the medical necessity of implants, particularly where the treating provider determined that such an approach would be impractical or contraindicated given Petitioner's condition.

Third, Aetna's claim that the ALJ relied on inconsistent statements or mischaracterized the evidence lacks merit. The ALJ appropriately exercised discretion in weighing the witnesses' credibility. It is well established that greater weight may be afforded to a treating provider who has personally examined the patient over a reviewing dentist who has not.

Finally, Aetna's assertion that undue weight was given to Dr. Chien's opinion is simply a disagreement with the ALJ's credibility determination. Such determinations are entitled to a difference where, as here, they are supported by substantial evidence in the record.

Accordingly, I CONCLUDE that the ALJ correctly determined that Petitioner satisfied the requirements for medical necessity under N.J.A.C. 10:56-2.13(c)(1), as the record demonstrates that Petitioner's anatomical deformities prevent effective use of dentures and justify the requested dental implants.

THEREFORE, it is on this 28th day of MARCH 2026,

ORDERED:

That the Initial Decision is hereby ADOPTED.



Gregory Woods, Assistant Commissioner
Division of Medical Assistance and Health Services