

<b>Case Number:</b>	CM13-0071968		
<b>Date Assigned:</b>	01/08/2014	<b>Date of Injury:</b>	04/14/2011
<b>Decision Date:</b>	08/04/2014	<b>UR Denial Date:</b>	12/17/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	12/30/2013

### HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to an expert reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The expert reviewer is Board Certified in Dermatology and is licensed to practice in Texas. He/she has been in active clinical practice for more than five years and is currently working at least 24 hours a week in active practice. The expert reviewer was selected based on his/her clinical experience, education, background, and expertise in the same or similar specialties that evaluate and/or treat the medical condition and disputed items/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

### CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

The patient is a 50-year-old male who has an industrial injury date of April 14, 2011. His primary diagnosis is actinic keratosis/photo dermatitis. A report dated February 15, 2013 documents the patient was evaluated for his photo dermatitis. Dermatologic examination revealed multiple new growths on the sun exposed areas of the face and body. Requested was authorization for treatment of the hypertrophic actinic keratosis with cryosurgery 20 lesions on the face (forehead, nose, cheeks) and 15 lesions on the body (both hands, arms). The primary treating physician's progress report (PR-2) dated September 20, 2013 indicates the treatment plan was cryosurgery 20 lesions face and 15 lesions body, and excision with repair on the back. The PR-2 dated October 25, 2013 indicates the treatment plan was for biopsy on the back. The PR-2 dated December 06, 2013 indicates that there are requests authorization for cryosurgery 20 lesions face and 15 lesions body. The examination form indicates a lesion from the back was excised. The form also indicates areas of treatment involve the face and bilateral hands. Prior UR determination was provided on December 17, 2013, which rendered a non-certification of the requested services, cryosurgery 20 face lesions, and 15 skin lesions.

### IMR ISSUES, DECISIONS AND RATIONALES

The Final Determination was based on decisions for the disputed items/services set forth below:

**CRYOSURGERY (20 LESIONS ON THE FACE):** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Habif: Clinical Dermatology, 4th ed. Chapter 21 - Premalignant and Malignant Nonmelanoma Skin Tumors.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management Page(s): 79. Decision based on Non-MTUS Citation National Library of Medicine: Medline Plus, Actinic keratosis:-[www.nlm.nih.gov](http://www.nlm.nih.gov).

**Decision rationale:** According to the medical literature, actinic keratosis is a small, rough, raised area found on areas of your skin that have often been exposed to the sun for a long period of time. Some actinic keratoses may develop into a type of skin cancer. Growths may be removed by burning (electrical cautery); scraping away the lesion and using electricity to kill any remaining cells (called curettage and electrodesiccation); cutting the tumor out and using stitches to place the skin back together (called excision) or freezing (cryotherapy, which freezes and kills the cells). The ACOEM Practice Guidelines state that under the optimal system, a clinician acts as the primary case manager. The clinician provides appropriate medical evaluation and treatment and adheres to a conservative evidence-based treatment approach that limits excessive physical medicine usage and referral. In this case, the medical records indicate that the patient has undergone cryosurgery procedure in the past for Actinic Keratosis. The medical records do not include clear documentation of the patient's response/outcome of previously rendered procedure(s). In addition, the medical records do not include a clearly legible medical report that documents the patient's presenting complaint and clinical objective findings and/or diagnostic findings that support the medical necessity of the requested treatment at this time.

**CRYOSURGERY (15 LESIONS ON THE BODY):** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Habif: Clinical Dermatology, 4th ed. Chapter 21 - Premalignant and Malignant Nonmelanoma Skin Tumors.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management Page(s): 79. Decision based on Non-MTUS Citation National Library of Medicine: Medline Plus, Actinic keratosis:-[www.nlm.nih.gov](http://www.nlm.nih.gov).

**Decision rationale:** According to the medical literature, actinic keratosis is a small, rough, raised area found on areas of your skin that have often been exposed to the sun for a long period of time. Some actinic keratoses may develop into a type of skin cancer. Growths may be removed by burning (electrical cautery); scraping away the lesion and using electricity to kill any remaining cells (called curettage and electrodesiccation); cutting the tumor out and using stitches to place the skin back together (called excision) or freezing (cryotherapy, which freezes and kills the cells). The ACOEM Practice Guidelines state that under the optimal system, a clinician acts as the primary case manager. The clinician provides appropriate medical evaluation and treatment and adheres to a conservative evidence-based treatment approach that limits excessive physical medicine usage and referral. In this case, the medical records indicate that the patient has undergone cryosurgery procedure in the past for Actinic Keratosis. The medical records do not include clear documentation of the patient's response/outcome of previously rendered

procedure(s). In addition, the medical records do not include a clearly legible medical report that documents the patient's presenting complaint and clinical objective findings and/or diagnostic findings that support the medical necessity of the requested treatment at this time.