

Case Number:	CM14-0046704		
Date Assigned:	07/02/2014	Date of Injury:	08/07/2013
Decision Date:	12/12/2014	UR Denial Date:	04/04/2014
Priority:	Standard	Application Received:	04/14/2014

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 55 a year old male who was injured on August 7, 2013 he stepped on the tile and his right ankle and knee rolled. His medication history included Diclofenac, Hydrochlorothiazide, Valtrex, Niacin, Topical and oral antibiotics. The patient underwent Mohs surgery and skin biopsies. Progress report dated June 25, 2014 indicate the patient is being treated for squamous cell carcinoma and undetermined neoplasm. The patient is recommended for CO2 fractionated laser resurfacing. Progress report 9/23/2013 indicate the patient is a type II Fitzpatrick photo classification. The patient has a history of sun exposure and he has advanced solar elastosis and solar dyschromia on the upper extremities also he has diffuse actinic keratosis on the bald scalp, ears, forehead, cheeks, nose, temples, hands, forearms, and lower arms, the lower lip shows actinic cheilitis and has keratotic papules on the scalp, hand and right upper back suspicious for squamous cell carcinoma. The patient was diagnosed with actinic keratosis, actinic cheilitis, history of basal cell carcinoma left neck removed and rule out squamous cell carcinoma. Prior utilization review dated April 4, 2014 indicated the request for CO2 fractionated laser resurfacing x6 is denied as the medical necessity has not been established.

IMR ISSUES, DECISIONS AND RATIONALES

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

CO2 FRACTIONATED LASER RESURFACING X6: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation WWW.NCBI.NLM.NIH.GOV

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: http://practicaldermatology.com/pdfs/PD0610_residents.pdf
<http://www.ncbi.nlm.nih.gov/pubmed/21659876>

Decision rationale: CO2 Fractionated Laser Resurfacing is a cosmetic procedure and therefore not medically necessary for this patient. The www.ncbi.nlm.nih.gov states that the fractional laser technology is a new technology to improve scars, increased the options for treatment of scars. These have been shown to be beneficial for hypotrophic, incipient, and established scars. Therefore the request is not medically necessary.