

Case Number:	CM15-0191680		
Date Assigned:	10/05/2015	Date of Injury:	02/07/2004
Decision Date:	11/12/2015	UR Denial Date:	08/31/2015
Priority:	Standard	Application Received:	09/29/2015

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:

State(s) of Licensure: Arizona, California

Certification(s)/Specialty: Family Practice

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 56-year-old male injured worker suffered an industrial injury on 2-7-2004. On 7-27-2015, the treating provider reported the skin on the arms and legs showed scattered bruising and brown discoloration. The medical record did not indicate what kind of skin condition he had or how long it had been there. The Utilization Review on 8-31-2015 determined non-certification for Bottle of ammonium lactate lotion 12% 225g.

IMR ISSUES, DECISIONS AND RATIONALES

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

Bottle of ammonium lactate lotion 12% 225g: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation www.pdr.net/drug/summary/lac-hydrin-lotion?druglabelid=1569.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation National Guidelines (NIH) and Ammonium Lactate.

Decision rationale: According to the guidelines, Ammonium Lactate is used for many dermatological conditions including, dry skin, psoriasis, keratosis pilaris, etc. In this case, there

is no mention of dermatological condition that would require the lotion. There is no mention of location of application or frequency of use. The request for ammonium lactate is not medically necessary.