

<b>Case Number:</b>	CM15-0219075		
<b>Date Assigned:</b>	11/12/2015	<b>Date of Injury:</b>	09/19/2003
<b>Decision Date:</b>	12/22/2015	<b>UR Denial Date:</b>	10/20/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/06/2015

### 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: New York

Certification(s)/Specialty: Internal Medicine

### 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 injured worker is a 59 year old male, who sustained an industrial injury on 9-19-2003. Medical records indicate the worker is undergoing treatment for contact dermatitis due to solvents and actinic keratosis. A report from 5-7-2015 reported the injured worker complained of spots on face and rash on bilateral upper extremities and a biopsy was taken. A progress report dated 6-29-2015, reported the injured worker complained of a rash. Physical examination revealed bilateral forearm dermatitis. Treatment to date has included medication management. On 10-14-2015, the Request for Authorization requested Skin biopsies-destruction actinic keratosis-pathology interpretation. On 10-20-2015, the Utilization Review noncertified the request for Skin biopsies-destruction actinic keratosis-pathology interpretation.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**1 Skin biopsies/destruction actinic keratosis/pathology interpretation:** Overturned

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Helsinki, Finland: Wiley Interscience. John Wiley & Sons; 2010 Jun 4 [Various]. Nicholson PJ, Llewellyn D, editor(s). Occupational contact dermatitis & urticarial. London (UK): British Occupational Health Research Foundation; 2010. 53 p.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Medscape Internal Medicine 2015.

**Decision rationale:** Skin biopsy is performed in order to microscopically examine various cutaneous conditions. A skin biopsy can safely be performed in an outpatient or ambulatory setting and may assist in diagnosis by allowing histopathologic evaluation of a tissue sample. After local anesthetic is administered, the tissue is removed and placed in a specimen container with an appropriate fixative, usually 10% formalin. The specimen is then sent to a pathology laboratory, where, after tissue fixation, slide preparation, and staining, a pathologist, dermatologist, or dermatopathologist can examine the specimen under a microscope. A skin biopsy is indicated to evaluate cutaneous growths when malignancy is a concern or to confirm the type of a known malignant growth (eg, basal cell carcinoma, squamous cell carcinoma, melanoma) prior to a more invasive surgical procedure. Skin biopsies are also indicated for cutaneous eruptions to help clarify the diagnosis when multiple etiologies are being considered. In this case, the patient has an industrial related contact dermatitis and multiple actinic keratoses. Medical necessity for the requested services is established. The requested services are medically necessary.