

Case Number:	CM15-0097894		
Date Assigned:	05/29/2015	Date of Injury:	01/11/1982
Decision Date:	06/29/2015	UR Denial Date:	04/22/2015
Priority:	Standard	Application Received:	05/20/2015

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 Jersey, Alabama, California
 Certification(s)/Specialty: Neurology, Neuromuscular 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 55 year old female, who sustained an industrial injury on 1/11/82. The injured worker was diagnosed as having seborrheic dermatitis, inflamed seborrheic keratosis and hemangioma of skin and basal cell carcinoma of skin. Treatment to date has included topical lotion and cream. Currently, the injured worker complains of moles/lections of right shoulder, right upper back and both thighs. Physical exam noted all areas of cutaneous malignancies well healed, acute inflamed scales with yellowish crusting patches to skin, inflamed seborrheic keratosis of left back (irritation, inflamed, enlarging), right thigh hemangioma and extra mottled pigmentation-reddish color with telangiectasia, irritated and increasing in size. The treatment plan included laser procedure for face.

IMR ISSUES, DECISIONS AND RATIONALES

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

One (1) intense pulse laser light therapy x5 lesions: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Laser Treatment of Benign Pigmented Lesions. <http://emedicine.medscape.com/article/1120359-overview>.

Decision rationale: According to Medscape guidelines, laser therapy can be used in pigmented skin lesions. The patient already has had 7 sessions of laser therapy of the face. There is no documentation that the patient lesions are malignant and the procedure seems to be done for cosmetic reasons. Therefore, the request for one (1) intense pulse laser light therapy x5 lesions is not medically necessary.