



Excimer and Pulsed Dye Laser Treatment

Last Revision/Review Date: May 19, 2021

P&P # C.6.28

Policy

This Medical Policy does not constitute medical advice. When deciding coverage, the enrollee's specific plan document must be referenced. The terms of an enrollee's plan document (Certificate of Coverage (COC) or Summary Plan Description (SPD)) may differ from this Medical Policy. In the event of a conflict, the enrollee's specific benefit plan document supersedes this Medical Policy. All reviewers must first identify enrollee eligibility, any federal or state regulatory requirements, and the plan benefit coverage prior to use of this Medical Policy. Other Policies and Coverage Determination Guidelines may apply. Quartz reserves the right, in its sole discretion, to modify its Policies and Guidelines as necessary.

Procedure

I. Excimer Laser Treatment of Psoriasis and Vitiligo

A. Documentation Required:

In order to facilitate the authorization process, referral requests must include the following:

1. Dermatologist documentation of mild to moderate localized psoriasis vulgaris (plaque psoriasis) or vitiligo of the face and neck.
2. Dermatologist documentation of percent body surface area of plaque psoriasis to be treated.
3. Dermatologist documentation of failed response to previous treatment.
4. Order from a dermatologist

B. Criteria for Medical Necessity-Psoriasis Initial Course of Treatment

Up to 13 excimer laser treatments using an FDA approved device is considered medically necessary for the treatment of mild to moderate localized plaque psoriasis if **BOTH** of the following are met:

1. Treatment area of localized plaque psoriasis affects 10% or less of body surface area;
AND
2. Failed response to 3 or more consecutive months of topical treatments from **at least 3** of the following:
 - a. Anthralin;
 - b. Corticosteroids;
 - c. Keratolytic agents;
 - d. Retinoids;
 - e. Tar preparations;
 - f. Vitamin D derivatives;
 - g. Calcineurin inhibitors.

C. Criteria for Medical Necessity-Vitiligo Initial Course of Treatment

Up to 13 excimer laser treatments using an FDA approved device is considered medically necessary for the treatment of vitiligo of the face and neck with documented failed response to 3 or more months of at least 2 of the following conservative treatments:

1. Topical or systemic corticosteroids;
2. Topical calcineurin inhibitors;

3. NB-UVB phototherapy or PUVA photochemotherapy.

D. Criteria for Medical Necessity-Subsequent Course of Treatment for Psoriasis and Vitiligo

Up to 13 excimer laser treatments per course and up to 2 additional courses per year is considered medically necessary for the treatment of mild to moderate localized plaque psoriasis of any body surface or vitiligo of the face and neck if there is documented, measurable response to treatment.

II. Pulsed Dye Laser (PDL) Treatment

A. Documentation Required

In order to facilitate the authorization process, referral requests must include the following:

1. Dermatologist documentation of the type of lesion and specific areas to be treated.
2. Dermatologist documentation of the treatment plan and anticipated outcome of treatment.
3. Documentation of symptoms and degree of functional impairment.
4. Order from a dermatologist.

B. Criteria for Medical Necessity-Pulsed Dye Laser (PDL)

Treatment with PDL is considered medically necessary for **EITHER** of the following conditions:

1. Treatment of congenital port-wine stains, glomangiomas that cannot be surgically removed, and infantile hemangiomas when they are located on the face or neck; **OR**
2. Treatment of superficial involuting, ulcerating or cavernous hemangiomas when **ONE** of the following is met:
 - i. The lesion compromises vital structures (e.g., nose, eyes, ears, lips); **OR**
 - ii. Is symptomatic (e.g., bleeding, painful, ulcerated); **OR**
 - iii. Results in a documented functional impairment.

III. Indications Considered Not Medically Necessary: (This list is not all inclusive.)

1. Excimer laser treatment of plaque psoriasis affecting greater than 10% of body surface area is considered not medically necessary.
2. Subsequent courses of excimer or pulsed dye laser treatment after failure to respond to the initial course of treatment is considered not medically necessary.
3. Excimer laser treatment of other forms of psoriasis including nail, scalp or palmoplantar psoriasis and pulse dye laser treatment of plaque or nail psoriasis is considered not medically necessary.
4. Excimer laser or pulsed dye laser treatment of the following dermatologic conditions are considered cosmetic and not medically necessary (this list is not all inclusive):
 - a. Dyschromia (caused by café au lait spots, rashes, sunburn)
 - b. Rhinophyma
 - c. Rosacea
 - d. Spider angiomata
 - e. Striae distensae (stretch marks)
 - f. Telangiectasia

IV . Indications Considered Experimental and Investigational: (This list is not all inclusive.)

1. Excimer or pulsed dye laser treatment of the following dermatologic conditions is considered experimental or investigational (this list is not all inclusive):
 - a. Acne vulgaris
 - b. Atopic dermatitis

- c. Eczematous lesions
- d. Granuloma annulare
- e. Granuloma faciale
- f. Herpes simplex labialis
- g. Hidradenitis suppurativa
- h. Hidrocystomas
- i. Jessner lymphocytic infiltration of skin
- j. Lichen sclerosus
- k. Lupus erythematoses
- l. Melasma
- m. Molluscum contagiosum
- n. Morphea (scleroderma of the skin)
- o. Mycosis fungoides
- p. Onychia
- q. Onychomycosis
- r. Pilonidal sinus disease
- s. Prurigo nodularis
- t. Reticular erythematous mucinosis
- u. Sarcoidosis
- v. Spongiotic dermatitis
- w. Vulval intraepitheat neoplasia
- x. Xanthelasma

CPT/ HCPCS CODES:

96920	Laser treatment for inflammatory skin disease (psoriasis); total area less than 250 sq cm
96921	250 sq cm to 500 sq cm
96922	over 500 sq cm
17106	Destruction of cutaneous vascular proliferative lesions (e.g., laser technique); less than 10 sq cm
17107	Destruction of cutaneous vascular proliferative lesions (e.g., laser technique); 10 sq cm to 50 sq cm
17108	Destruction of cutaneous vascular proliferative lesions (e.g., laser technique); over 50 sq cm

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