Laser Treatment for Skin Conditions

These services may or may not be covered by your HealthPartners plan. Please see your plan documents for your specific coverage information. If there is a difference between this general information and your plan documents, your plan documents will be used to determine your coverage.

Administrative Process

Prior authorization is not required for laser treatment for skin conditions.

Coverage

Laser treatment for skin conditions is generally covered subject to the indications listed below and per your plan documents.

Indications that are covered

Laser treatment for:
1. Port wine stains (PWS) - if guidelines for removal are met. (See Port Wine Stain Treatment policy for specific guidelines)
2. Hemangioma - if guidelines for removal are met. (See Hemangioma Treatment policy for specific guidelines)
3. Wart/Verruca removal - if being removed for functional reasons
4. Localized, recalcitrant plaque psoriasis, mild to moderate, affecting 10% or less of body surface area which has not responded to a three month trial of 3 or more conservative treatments consisting of topical agents and/or phototherapy

Indications that are not covered (this list may not be all inclusive)

Laser treatment for:
1. An active acne lesion is considered investigational
2. Acne scarring is considered cosmetic
3. Rosacea, including associated telangiectasia and rhinophyma, is considered cosmetic
4. Eczema is considered investigational
5. Pseudofolliculitis barbae is considered cosmetic
6. Onychomycosis is considered investigational. (see Investigational list policy)
7. All other types of psoriasis (including generalized), not meeting coverage criteria as described above
8. All other conditions for which laser treatment is deemed cosmetic are not covered

Definitions

Lasers work by producing an intense, but gentle, burst of light that targets abnormal tissue and leaves surrounding tissue intact. A wavelength of light is chosen that most selectively destroys the target of interest while sparing surrounding tissue. Lasers are utilized in dermatology to treat various skin disorders. One type of laser is a pulsed dye laser which uses a dye to mark target tissues that absorb more light when the laser is focused on them. Other types of laser include, but are not limited to, Excimer (e.g. XTRACTM), YAG, 1450 nm Diode, Argon, Glass Erbium (e.g. Aramis).

Cosmetic treatment performed to alter an abnormal or normal body part primarily to render it more aesthetically pleasing is not covered. Contractual benefits prohibit the coverage of cosmetic services. Please see Cosmetic Surgery/Treatments policy for more details.

Products

This information is for most, but not all, HealthPartners plans. Please read your plan documents to see if your plan has limits or will not cover some items. If there is a difference between this general information and your plan documents, your plan documents will be used to determine your coverage. These coverage criteria may not apply to Medicare Products if Medicare requires different coverage. For more information regarding Medicare coverage criteria or for a copy of a Medicare coverage policy, contact Member Services at 952-883-7979 or 1-800-233-9645.