

Case Number:	CM13-0027575		
Date Assigned:	03/19/2014	Date of Injury:	02/05/2010
Decision Date:	07/29/2014	UR Denial Date:	09/04/2013
Priority:	Standard	Application Received:	09/23/2013

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. The expert reviewer is Board Certified in Physical Medicine and Rehabilitation and is licensed to practice in California. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

This case involves a 63 year-old patient, who sustained an injury on 2/5/10, from pushing a heavy gate while employed by [REDACTED]. The request under consideration include platelet-rich plasma (PRP) injection for the left ankle. The patient underwent left Achilles tendon repair on 3/3/12, with at least 36 post-operative physical therapy and instructions in a home exercise program. The diagnoses include ankle sprain/strain; achilles bursitis/tendinitis; shoulder subscapularis & upper arm strain/sprain. The medications list Tylenol and non-steroidal anti-inflammatory drugs (NSAIDs). The report of 8/22/13 from the provider, noted the patient with cramping pain at night, but a little better and was able to walk half a block before more pain. The exam noted single-leg heel rise without problems; non-tender Achilles tendon; range of motion of PF/DF of 40/20 degrees respectively. An MRI was reported as showing slight increase signal at Achilles tendon with tendon largely intact. The treatment recommendation included PRP for left ankle. The request for platelet-rich plasma (PRP) injection for the left ankle was non-certified on 9/4/13, citing guidelines criteria and lack of medical necessity.

IMR ISSUES, DECISIONS AND RATIONALES

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

Platelet-rich Plasma (PRP) injection for the left ankle: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Work Loss Data Institute, On-line Official

Disability Guidelines - Treatment in Workers' Compensation, Integrated Treatment/Disability Duration Guidelines, Ankle & Foot (Acute & Chronic).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Chapter- Ankle & Foot, Platelet-rich plasma (PRP), pages 36-37.

Decision rationale: The Official Disability Guidelines indicate that a platelet-rich plasma (PRP) injection is not recommended as recent higher quality studies showed no evidence of efficacy over that of placebo effect. The evidence-based study noted PRP treatment for chronic Achilles tendon disorder or tendinopathy/tendinitis did not appear to reduce pain symptoms or increase functional activities and injections do not appear to be an effective approach in the treatment of Achilles tendinopathy. The submitted reports have not adequately demonstrated medical indication or necessity beyond the guidelines recommendations or criteria. The request is not medically necessary and appropriate.