

Case Number:	CM14-0176135		
Date Assigned:	10/29/2014	Date of Injury:	09/03/2013
Decision Date:	12/10/2014	UR Denial Date:	10/16/2014
Priority:	Standard	Application Received:	10/24/2014

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 Anesthesia, has a subspecialty in Pain Medicine and is licensed to practice in Massachusetts. 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:

According to the documents available for review, the patient is a 42 year old male. The date of injury is 9/3/2013. The patient sustained an injury to the left elbow. The specific mechanism of injury was not fully elaborated on in the notes available for review. The current diagnosis is left medial elbow epicondylitis. The patient currently complains of pain in the left elbow worse with movement. A request for Platelet Rich Plasma Left Elbow Ultrasound Guided Injection was denied.

IMR ISSUES, DECISIONS AND RATIONALES

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

Platelet Rich Plasma Left Elbow Ultrasound Guided Injection: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Platelet-Rich Plasma (PRP)

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Elbow complaints, Platelet Rich Plasma

Decision rationale: According to the Official Disability Guidelines, platelet rich plasma therapy is not recommended. Recent evidence shows this treatment to be no better than placebo.

Therefore at this time the requirements for treatment have not been met, and medical necessity has not been established.