MAXIMUS Federal Services

Case Number:	CM15-0000289		
Date Assigned:	01/09/2015	Date of Injury:	04/05/2012
Decision Date:	03/12/2015	UR Denial Date:	12/09/2014
Priority:	Standard	Application Received:	01/02/2015

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: California
Certification(s)/Specialty: Physical Medicine & Rehabilitation

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 37-year-old male, with a reported date of injury of 04/05/2012. He has reported right hip pain. The diagnoses have included status post right hip arthroscopy with debridement and right hip rectus femoris tendinosis.Treatments to date have included acupuncture.Currently, the injured worker complains of continued right hip pain in the anterior aspect of the hip. The injured worker indicated that he felt better with his acupuncture treatments. He rated his pain 5 out 10. The objective findings included slight tenderness in the anterior rectus femoris; full range of motion of the right hip; and no significant impingement signs with internal and external rotation. The treating physician requested the platelet-rich plasma injection into the rectus femoris to encourage the healing response and get the injured worker to permanent and stationary status. On 12/06/2013, Utilization Review (UR) non-certified the request for platelet-rich plasma injection with ultrasound to the right hip. The UR physician noted that there was no clear evidence that the injured worker had unsuccessful trials in conservative care, and that there are no high quality studies that support the effectiveness of the injections. The Non-MTUS Official Disability Guidelines was cited.

IMR ISSUES, DECISIONS AND RATIONALES

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

Platelet-rich plasma injection with ultrasound to the right hip: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines - TWC Hip & Pelvis Procedure Summary (updated 3/25/14)

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Pain chapter, platelet rich plasma injections Hip and Pelvis chapter, Platelet rich plasma injections

Decision rationale: The patient presents with sharp pain in the groin area and pain over the rectus area of his right hip rated 5/10. Patient is status post right hip arthroscopy with joint debridement at an unspecified date. The request is for PLATELET RICH PLASMA INJECTION WITH ULTRASOUND TO THE RIGHT HIP. Physical examination dated 12/12/14 reveals tenderness to palpation over the superior spine of the right hip and tenderness to the right groin area. The patient's current medication regimen is not provided. Diagnostic imaging was not included with the reports provided. Patient is currently working full duty with no documented limitations. ODG guidelines, pain chapter states the following regarding platelet rich plasma injections: "Not recommended for chronic pain except in a research setting." ODG Guidelines, Hip and Pelvis chapter, under Platlet rich plasma injections states: "Under study. For OA of the hip, this preliminary non-controlled prospective study supported the safety, tolerability and efficacy of PRP injections for pain relief and improved function in a limited number of patients. Each joint received three IA injections of PRP, which were administered once a week. 40% of the patients were classified as excellent responders who showed an early pain reduction at 6-7 weeks, which was sustained at 6 months, and a parallel reduction of disability. (Snchez, 2012) Little has been published regarding the use of platelet-rich plasma during total hip arthroplasty. This study concluded that the use of platelet-rich plasma does not appear to have a role in total hip arthroplasty." According to progress note dated 12/12/14, the treater appears to be requesting a platelet rich plasma injection under ultrasound to the right hip following arthroscopic debridement of the joint to "accelerate healing." While this patient does present with significant pain and surgical history, such therapies are still under investigation and are not yet supported by guidelines as appropriate standard medical interventions. Therefore, this request IS NOT medically necessary.