

Case Number:	CM15-0200578		
Date Assigned:	10/15/2015	Date of Injury:	07/25/2014
Decision Date:	12/02/2015	UR Denial Date:	10/01/2015
Priority:	Standard	Application Received:	10/12/2015

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: Texas, New York, California
 Certification(s)/Specialty: Preventive Medicine, Occupational Medicine

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 applicant is represented 38-year-old who has filed a claim for chronic shoulder pain reportedly associated with an industrial injury of July 23, 2014. In a Utilization Review report dated October 5, 2015, the claims administrator failed to approve requests for a platelet-rich plasma (PRP) injection. A September 18, 2015 office visit was referenced in the determination. The applicant's attorney subsequently appealed. Shoulder MRI imaging dated July 10, 2015 was notable for supraspinatus tendonitis and partial thickness intra-substance interstitial tears of said supraspinatus tendon. On September 18, 2015, the applicant was described as having undergone an earlier right shoulder rotator cuff repair surgery. The applicant had heightened right shoulder pain complaints, it was reported. The applicant had a pending right shoulder MR arthrogram. The applicant also had undergone left shoulder corticosteroid injection therapy, it was reported. The applicant was apparently contemplating a left shoulder platelet-rich plasma injection. The applicant's medication includes metformin, Prilosec, Claritin and Tylenol with Codeine. The claimant exhibited a limited left shoulder range of motion with flexion and abduction to 110 to 130 degree range. A platelet-rich plasma injection under ultrasound guidance was sought. The claimant was kept off of work, on total temporary disability.

IMR ISSUES, DECISIONS AND RATIONALES

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

PRP injection to be done under ultrasound guidance to the left shoulder: 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) Shoulder (updated 09/08/2015).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Shoulder Disorders, Platelet-rich plasma (PRP).

Decision rationale: No, the request for platelet-rich plasma injection to the left shoulder was not medically necessary, medically appropriate, or indicated here. The MTUS does not address the topic. However, ODGs Shoulder Chapter platelet-rich plasma topic notes that platelet-plasma injections are "under study" as a solo treatment. While ODGs Shoulder Chapter does qualify its tepid position on platelet-rich plasma injection by noting that platelet-rich plasma injections are recommended to augment arthroscopic repair of large and massive rotator cuff tears, here, however, the claimant was described as having issues with left shoulder tendonitis and partial thickness tearing appreciated about the supraspinatus tendon, per left shoulder MRI imaging of September 10, 2015. It did not appear that the platelet-rich plasma injection in question was proposed in conjunction with a rotator cuff repair procedure, it was further noted. Therefore, the request was not medically necessary.