

Case Number:	CM15-0016600		
Date Assigned:	02/04/2015	Date of Injury:	02/17/2013
Decision Date:	03/25/2015	UR Denial Date:	01/02/2015
Priority:	Standard	Application Received:	01/28/2015

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: Maryland

Certification(s)/Specialty: Physical Medicine & Rehabilitation, Neuromuscular 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 injured worker is a 56 year old male who sustained an industrial injury on 02/17/2013. Diagnoses include cervical degenerative disc disease, herniated nucleus pulposus-C5-C6, status post cervical fusion on 4/25/2014, and thoracic strain. Treatment to date has included physical therapy, acupuncture, and cervical collar, active range of motion, medications, and epidural steroid injections. A hand written physician progress note dated 12/05/2014 documents the injured worker is doing better with physical therapy, and massage. He has decreased spasm and tightness with range of motions. There is a positive Spurling left. He has decreased trapezius and rhomboid pain. Decreased spasm with range of motion, and decreased stiffness. Treatment requested is for platelet rich plasma injection. On 01/02/2015 Utilization Review non-certified the request for platelet rich plasma injection, and cited was Official Disability Guidelines.

IMR ISSUES, DECISIONS AND RATIONALES

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

Platelet Rich Plasma 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); Low Back - Lumbar & Thoracic (Acute & Chronic) Pain (Chronic) (updated 12/31/14), 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 Pain (chronic)

Decision rationale: Platelet Rich Plasma Injection is not medically necessary per the ODG Guidelines. The MTUS does not address this issue. The ODG states that these injections are not recommended for chronic pain except in a research setting. PRP therapies are more complicated than previously acknowledged, and an understanding of the fundamental processes and pivotal molecules involved will need to be elucidated. PRP therapies in clinical trials await assessment. Platelet-rich plasma has been used to treat conditions such as lateral epicondylitis, ligament and muscle strains, and tears of the rotator cuff, anterior cruciate ligament, Achilles tendon, plastic surgery and other conditions. Platelet-rich plasma can be applied at the site of injury either during surgery or through an injection performed in the physician's office. However, there is little published clinical evidence that proves its efficacy in treating the multitude of injuries/disorders that are thought to benefit from PRP. The ODG lists guidelines that have specific body-part chapters below and recommendations regarding PRP injections. These include: Ankle: Not recommended, with recent higher quality evidence showing this treatment to be no better than placebo. Elbow: Under study. Hip: Under study. Knee: Under study. Low back: Not recommended. Shoulder: Not recommended. The documentation indicates that patient has cervical spine pain. The ODG does not contain evidence to support platelet rich plasma injection in the cervical spine. Furthermore, the actual request does not specify a body part. For these reasons the request for platelet rich plasma injections are not medically necessary.