

Case Number:	CM15-0064325		
Date Assigned:	04/10/2015	Date of Injury:	05/18/2011
Decision Date:	05/11/2015	UR Denial Date:	03/12/2015
Priority:	Standard	Application Received:	04/06/2015

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, Indiana, New York
Certification(s)/Specialty: Internal 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 60-year-old male, who sustained an industrial injury on 5/18/11. The injured worker has complaints of right knee pain. The diagnoses have included right knee pain status post medial unicompartmental arthroplasty. Treatment to date has included cortisone injections; right knee X-ray and medications. The request was for platelet allograft.

IMR ISSUES, DECISIONS AND RATIONALES

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

Platelet allograft: 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) Knee Section, Platelet Rich Plasma.

Decision rationale: Pursuant to the Official Disability Guidelines, platelet allograft is not medically necessary. The guidelines state platelet rich plasma (PRP) is under study. The small

study found a statistically significant improvement in all scores at the end of multiple platelet rich plasma injections in patients with chronic refractory patellar tendinopathy and a further improvement at six months, after physical therapy was added. In this case, the injured worker's working diagnoses are residual right knee pain, status post partially replacement; meniscal tear post the surgical repair; and post arthroscopic procedure. The injured worker is authorized to undergo a total knee arthroplasty. If the totally arthroplasty is authorized and the patient consents, platelet rich plasma is not clinically indicated. Injured worker consented to the surgery. The injured worker had the aforementioned surgery on or about April 3, 2015. Based on the clinical documentation in the medical record and the peer-reviewed evidence-based guidelines, platelet allograft is not medically necessary.