

Case Number:	CM13-0042495		
Date Assigned:	12/27/2013	Date of Injury:	08/30/2011
Decision Date:	04/06/2015	UR Denial Date:	10/09/2013
Priority:	Standard	Application Received:	10/18/2013

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: Minnesota, Florida
 Certification(s)/Specialty: Orthopedic Surgery

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 sustained an industrial injury on August 30, 2011. He has reported pain in bilateral knees and has been diagnosed with bilateral knee patellofemoral chondromalacia and left knee status post arthroscopy (5/4/2012). Treatment has included medical imaging, surgery, rest, ice, heat, activity modification, physical therapy and injections. Currently the injured worker continues to have pain bilaterally with associated popping, cracking, and swelling. The treatment plan included platelet rich plasma injections. On October 9, 2013 Utilization Review non-certified bilateral platelet rich plasma injections citing the MTUS, ACOEM, and 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 (PRP) Injections to the Bilateral Knees: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 10 Elbow Disorders (Revised 2007). Decision based on Non-MTUS Citation ODG Treatment Guidelines.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines.

Decision rationale: The injured worker has chondromalacia of the patellofemoral joints of both knees. ODG guidelines indicate that platelet rich plasma is under study. They have the potential to promote the achievement of a satisfactory clinical outcome in difficult cases with chronic refractory tendinopathy of the patella tendon but more studies are needed to clarify specific indications. Platelet rich plasma injections can benefit patients with cartilage degeneration and early osteoarthritis of the knee. It may play a role in improving clinical outcomes in patients with early onset osteoarthritis at 6 months and 1 year but there was no change in MRI per knee compartment in at least 73% of cases at 1 year in contrast to an expectation that osteoarthritis would worsen. Based upon the guidelines, platelet rich plasma is still under study despite 2 decades of use and the results are promising but still inconsistent. As such, the request for platelet rich plasma injection is not supported and the medical necessity is not established.