

Case Number:	CM13-0049419		
Date Assigned:	01/03/2014	Date of Injury:	04/23/2010
Decision Date:	08/01/2014	UR Denial Date:	10/30/2013
Priority:	Standard	Application Received:	11/07/2013

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. The expert reviewer is Board Certified in Internal Medicine and is licensed to practice in Arizona. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

This is a 61-year-old female who fell on April 23, 2010 while pushing a wheelchair, spraining her right ankle. She had swelling and pain with plantar flexion and dorsiflexion. Acupuncture provided relief. She had a negative electromyography (EMG). On April 17, 2012 the podiatrist diagnosed the patient with Sinus Tarsi Syndrome, stating the patient had a positive response to a steroid injection at the sinus tarsi region. He recommended that the patient have a repeat steroid injection and an arthrotomy of the sinus tarsi; both were declined. On 6/19/2012, she was fitted for orthotics to reduce excess motion in the region of the subtalar joint on the right foot. There is documentation that she received some benefit. When her orthotics was observed to show excess wear, another pair of orthotics was ordered. On the progress note written to justify the orthotics, the review of history stated that the patient was no longer having plantar fascia pain; yet, there is no mention of plantar fasciitis in the notes prior to this. The working diagnosis was Sinus Tarsi Syndrome.

IMR ISSUES, DECISIONS AND RATIONALES

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

Bilateral Orthotics: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 371.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 371. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: Clinical Features And Management of Ankle Pain, Section Sinus Tarsi Syndrome.

Decision rationale: The MTUS states: Rigid orthotics (full-shoe-length inserts made to realign within the foot and from foot to leg) may reduce pain experienced during walking and may reduce more global measures of pain and disability for patients with plantar fasciitis and metatarsalgia. If this patient had exams and a history consistent with plantar fasciitis, she would qualify for the orthotics. Instead, her diagnoses, even prior to the first pair of orthotics, was ankle sprain and sinus tarsi syndrome, for which the podiatrist offered arthroscopy. The MTUS does not offer the orthotics as a medically necessary treatment; however, UpToDate has stated the treatments for sinus tarsi syndrome (after an initial treatment with corticosteroid injections, which she declined) could include orthotics if appropriate along with rest, immobilization and lastly surgery. This case does not provide appropriate documentation to support the diagnosis of plantar fasciitis, which was given as a reason for the orthotics; thus, this request for authorization has been deemed medically not necessary.