

Case Number:	CM14-0105712		
Date Assigned:	07/30/2014	Date of Injury:	06/01/2012
Decision Date:	08/29/2014	UR Denial Date:	06/24/2014
Priority:	Standard	Application Received:	07/07/2014

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 Physical Medicine & Rehab and is licensed to practice in California. 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:

The injured worker is a 45-year-old female who reported an injury on 06/01/2012. The mechanism of injury was not stated. The current diagnosis is pain in the limb. The injured worker was evaluated on 07/10/2014 with complaints of pain in bilateral feet. Physical examination was not provided on that date. Treatment recommendations included physical therapy and plantar fasciitis injections.

IMR ISSUES, DECISIONS AND RATIONALES

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

Plantar fasciitis right and left injection under fluoroscopy: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Ankle & Foot (Acute & Chronic).

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 369-371.

Decision rationale: California MTUS/ACOEM Practice Guidelines state invasive techniques have no proven value, with the exception of a corticosteroid injection into the affected web space, in patients with Morton's neuroma, or into the affected area in patients with plantar fasciitis or heel spur if 4 to 6 weeks of conservative treatment is ineffective. As per the

documentation submitted. It is noted that the injured worker has completed acupuncture treatment. However, there is no evidence of an exhaustion of 4 to 6 weeks of conservative treatment. The injured worker does not maintain a diagnosis of plantar fasciitis. Based on the clinical information received and the above mentioned guidelines, the request is non-certified.