

Case Number:	CM14-0010620		
Date Assigned:	02/21/2014	Date of Injury:	03/15/2012
Decision Date:	06/25/2014	UR Denial Date:	01/06/2014
Priority:	Standard	Application Received:	01/27/2014

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 Occupational Medicine, 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 applicant is a represented [REDACTED] employee who has filed a claim for chronic foot pain reportedly associated with an industrial injury of March 15, 2012. Thus far, the applicant has been treated with the following: Analgesic medications; attorney representations; transfer of care to and from various providers in various specialties; a brace; MRI imaging of the right Achilles tendon of November 1, 2013, notable for partial tendon tear; and work restrictions. In a Utilization Review Report dated January 6, 2014, the claims administrator denied a request for eight sessions of physical therapy, citing non-MTUS ODG Guidelines and non-MTUS 2007 ACOEM Guidelines although the MTUS Chronic Pain Medical Treatment Guidelines did address the topic at hand. The claims administrator stated that the attending provider had not detailed how much (if any) PT treatment the applicant had had over the life of the claim. The applicant's attorney subsequently appealed. A January 10, 2014 handwritten note is notable for comments that the applicant was not improved significantly, had persistent complaints of heel pain, exhibited a fairly well-preserved ankle range of motion, and was still waiting for physical therapy to begin. Work restrictions and Voltaren gel were endorsed. In a medical-legal evaluation of October 30, 2013, it was stated that the applicant was no longer working as a waiter but was apparently intent on returning to work shortly. The applicant had apparently worked for fairly extended periods over the life of the claim, it was stated. It was seemingly suggested that the applicant had had 12 sessions of physical therapy in 2012 but had not had subsequent treatment since that point in time. The applicant did exhibit a limp, it was suggested. A December 13, 2013 progress note was notable for comments that the applicant had worked for several months following the injury but had apparently been unable to return to work since October 11, 2013 owing to a significant flaring pain. The applicant was on Norco for pain relief. Work restrictions were endorsed, along with Voltaren gel and physical therapy.

IMR ISSUES, DECISIONS AND RATIONALES

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

PHYSICAL THERAPY 2XWK X 4WKS RIGHT FOOT: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation MTUS: ANKLE AND FOOT COMPLAINTS, ,

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines MTUS Chronic Pain Medical Treatment Guidelines, Physical Medicine topic. Page(s): 99.

Decision rationale: The eight-session course of treatment proposed here does conform to the 9- to 10-session course recommended on page 99 of the MTUS Chronic Pain Medical Treatment Guidelines for myalgias and myositis of various body parts, the issue reportedly present here. In this case, while the applicant had apparently had 12 sessions of physical therapy earlier in the life of the claim, these sessions apparently transpired during the acute pain phase of the injury. The applicant does not appear to have any prior treatment during the chronic pain phase of the injury. As noted by the attending provider, the applicant is apparently intent on returning to some form of work. The applicant has had a significant flare of symptoms associated with plantar fasciitis and/or Achilles tendinitis. The applicant will likely benefit from the eight-session course of treatment provided, which would theoretically facilitate his return to regular work as a waiter. Therefore, the request is medically necessary.