

Case Number:	CM14-0034211		
Date Assigned:	06/20/2014	Date of Injury:	09/03/2012
Decision Date:	07/18/2014	UR Denial Date:	03/10/2014
Priority:	Standard	Application Received:	03/19/2014

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 Family 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:

The patient is a 32 year old female with a date of injury on 9/3/2012. Patient has diagnoses of myofascial pain syndrome, right ankle inversion injury, posttraumatic arthrofibrosis, sinus tarsi syndrome, and peroneal tendinosis. Subjective complaints are of continued right ankle pain. Physical exam shows tenderness over the right ankle, right calf atrophy, normal range of motion, and +1 positive anterior drawer test. Prior treatments have included medications. Right ankle MRI from 1/3/13 shows tendinosis of the peroneus brevis tendon, and small effusion.

IMR ISSUES, DECISIONS AND RATIONALES

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

Richie Hinge AFO brace, QTY: 1: 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), Ankle and Foot Chapter.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) FOOT/ANKLE, AFOs.

Decision rationale: ACOEM guidelines suggest that braces may be used for acute injuries of the foot or ankle. The ODG recommends an ankle foot orthosis (AFO) as an option for foot drop. An

AFO also is used during surgical or neurologic recovery. For this patient, submitted documentation does not show evidence of a foot drop or significant ankle instability. Therefore, the medical necessity of a Richie hinge brace AFO is not medically necessary.

Cortisone injections to right ankle, QTY: 3: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 371. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Foot/Ankle, Steroid Injections.

Decision rationale: ACOEM states that invasive techniques (e.g., needle acupuncture and injection procedures) have no proven value, with the exception of 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 four to six weeks of conservative therapy is ineffective. The ODG suggests that ankle injections are under study. There is little information available from trials to support the use of peritendinous steroid injection in the treatment of acute or chronic Achilles tendinitis. For this patient, there is not a diagnosis that is consistent with guideline recommendations. Therefore, the requests for ankle steroid injections are not medically necessary.