

Case Number:	CM14-0035309		
Date Assigned:	06/23/2014	Date of Injury:	11/04/2010
Decision Date:	08/05/2014	UR Denial Date:	02/26/2014
Priority:	Standard	Application Received:	03/21/2014

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 Anesthesiology, has a subspecialty in Pain Management 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:

According to the records made available for review, this is a 52-year-old male with an 11/4/10 date of injury. At the time (12/5/13) of request for authorization for extracorporeal shock wave therapy right foot (ESWT); once (1) a week for six (6) weeks, there is documentation of subjective (persistent worsening pain in the right foot) and objective (no pertinent findings) findings, current diagnoses include plantar fasciitis, and treatment to date esd not specified. There is no documentation that the patient's heel pain from plantar fasciitis has remained despite six months of standard treatment; at least three conservative treatments have been performed prior to use of ESWT (Rest; Ice; NSAIDs; Orthotics; Physical Therapy; Injections); and no contraindications to extracorporeal shock wave therapy were documented.

IMR ISSUES, DECISIONS AND RATIONALES

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

ESWT (extracorporeal shock wave therapy) right foot; once (1) a week for six (6) weeks:
Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints. Decision based on Non-MTUS Citation Official Disability Guidelines: Ankle & Foot Chapter, extracorporeal shock wave therapy (ESWT) section.

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) Ankle and Foot, Extracorporeal Shock Wave Therapy (ESWT).

Decision rationale: ACOEM Guidelines identifies that limited evidence exists regarding extracorporeal shock wave therapy in treating plantar fasciitis to reduce pain and improve function. ODG identifies documentation of patients whose heel pain from plantar fasciitis has remained despite six months of standard treatment. In this case, three conservative treatments have been performed prior to the use of ESWT (Rest; Ice; NSAIDs; Orthotics; Physical Therapy; Injections) and no contraindications to extracorporeal shock wave therapy exist as criteria necessary to support the medical necessity of extracorporeal shock wave therapy to the ankle/foot. In addition, ODG identifies a maximum of 3 therapy sessions over 3 weeks. Within the medical information available for review, there is documentation of diagnoses of plantar fasciitis. However, given no documentation of objective findings and conservative treatment, there is no indication that the patient's heel pain from plantar fasciitis has remained despite six months of standard treatment. In addition, there is no documentation that no contraindications to extracorporeal shock wave therapy exist. Furthermore, the proposed number of sessions exceeds guideline recommendations. Therefore, based on guidelines and a review of the evidence, the request is not medically necessary.