

Case Number:	CM15-0106915		
Date Assigned:	06/11/2015	Date of Injury:	07/10/2012
Decision Date:	07/13/2015	UR Denial Date:	05/18/2015
Priority:	Standard	Application Received:	06/03/2015

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:
State(s) of Licensure: California, Indiana, Oregon
Certification(s)/Specialty: Orthopedic Surgery

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 55 year old female, who sustained an industrial injury on 7/10/2012. The current diagnoses are right calcific tendinitis and calcaneal bone spur. According to the progress report dated 5/1/2015, the injured worker describes persistent insertional tendinitis on the right with bony prominence that is enlarging. The level of pain is not rated. The physical examination reveals a significant enlargement and spurring at the insertion of the Achilles tendon on the right. She has some enlargement on the left, but is far less severe. The current medication list is not available for review. Treatment to date has included non-steroidal anti-inflammatories, immobilization, ice, stretching, custom orthotics, shoe modifications, and heel cups. The plan of care includes posterior calcaneal ostectomy with repair of Achilles tendon.

IMR ISSUES, DECISIONS AND RATIONALES

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

Posterior calcaneal ostectomy with repair of achilles tendon: Upheld

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

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation 1.) Kang S, Thordarson DB, Charlton TP. Insertional Achilles tendinitis and Haglund's deformity. Foot Ankle Int. 2012 Jun; 33(6):487-91.2.) Kearney R, Costa ML. Insertional achilles tendinopathy management: asystematic review. Foot Ankle Int. 2010 Aug; 31(8):689-94.

Decision rationale: CA MTUS/ACOEM and ODG are silent on the issue of retrocalcaneal bursectomy and excision of calcaneal spur. Alternative literature was searched. A recent article from Foot and Ankle International examined Haglund's deformity in symptomatic and asymptomatic patients. They determined that a Haglund's deformity was not indicative of insertional Achilles tendonitis and recommend against removal in the treatment of insertional tendonitis (1). Insertional tendonitis should be treated with nonsurgical management first. Evaluation of operative interventions in the literature has been predominately retrospective and remains a last resort (2). In this case, the request includes excision of the calcaneal deformity. Based on the current literature, the request is not medically necessary.