MAXIMUS Federal Services

Case Number:	CM15-0191762		
Date Assigned:	10/05/2015	Date of Injury:	10/08/2013
Decision Date:	11/12/2015	UR Denial Date:	09/23/2015
Priority:	Standard	Application Received:	09/29/2015

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, New York
Certification(s)/Specialty: Podiatrist

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 male (undocumented age) with an industrial injury date of 10-08-2013. A diagnosis is not indicated in the medical records reviewed. The following treatment notes were submitted for review:- 04-14-2015 - The injured worker presented for recheck. The treating physician documented: "He is in the same place." "He feels no better, no worse." The treating physician noted physical therapy and Orthotripsy had not been approved.- 06-16-2015 - The injured worker presented with orthotics. The treating physician indicated the injured worker "feels a little uncomfortable when he is standing for long periods of time, but the problem he is wearing them full time." The treating physician also documented if the orthotics are not helpful "we have to go back to Orthotripsy or other treatment alternatives."- 08-18-2015 - The treating physician documented the injured worker was still having pain. "The orthotics is comfortable and helps him at this point but every time he is on his feet for more than 10 minutes he gets some discomfort."The above medical records are the only medical records available for review and do not indicate a physical exam, prior treatments or medications. On 09-23-2015 the request for Orthotripsy (Low Energy) 5-6 treatments for the bilateral feet was non-certified by utilization review.

IMR ISSUES, DECISIONS AND RATIONALES

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

Orthotripsy (Low Energy) 5-6 treatments for the bilateral feet: Upheld

Claims Administrator guideline: Decision based on MTUS Ankle and Foot Complaints 2004.

MAXIMUS guideline: Decision based on MTUS Ankle and Foot Complaints 2004, Section(s): Initial Assessment, General Approach, Diagnostic Criteria, Physical Methods. Decision based on Non-MTUS Citation 1. Alan Greene MD FAAP. "Dupuytren's Contracture and Plantar Fibromatosis". Retrieved 2007-12-282. Valentine W. Curran. "Plantar fibromatosis MedPix -- Case - 4777". Dept of Radiology and Radiological Sciences, Uniformed Services University. Retrieved 2007-12-28.

Decision rationale: The stated diagnosis given on the review application is: plantar fascial fibromatosis, benign nodules, on the bottom of the foot. These are painful lesions, typically in the middle of the arch or instep, that may be painful with pressure or shoe wear. There is no statement in the provided record to substantiate the presence of plantar fascial fibromatosis. Orthotripsy is the use of extracorporeal shock wave technology to treat musculoskeletal disorders. Various ESWT devices are approved for marketing by the U.S. Food and Drug Administration (FDA) for the treatment of patients with chronic proximal plantar fasciitis. There is no statement in the provided record to substantiate the presence of plantar fasciitis in the injured worker's feet. If substantiated, that the injured worker is being primarily treated for plantar fasciitis, MTUS Ankle & Foot Complaints, page 371, does not recommend extracorporeal shock wave therapy (ESWT) in treating plantar fasciitis. The record provides no evidence of diagnostic study, or alternatives, or objectives, in care management as recommended by the MTUS guidelines. As per MTUS guidelines, the proposed surgical procedures cannot be certified as medically necessary.