

Case Number:	CM15-0222289		
Date Assigned:	11/18/2015	Date of Injury:	05/01/2013
Decision Date:	12/30/2015	UR Denial Date:	11/03/2015
Priority:	Standard	Application Received:	11/12/2015

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: Pennsylvania

Certification(s)/Specialty: Family Practice

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 51 year old female, who sustained an industrial injury on 5-01-2013. The injured worker was diagnosed as having plantar fasciitis, calcaneal spur, osteoarthritis, and pain. Treatment to date has included diagnostics, 1-2014 plantar fascial release with inferior calcaneal spur resection on left, 4-2014 plantar fascial release with inferior calcaneal spur resection on right, orthotics, and medications. On 10-20-2015, the injured worker reports "doing about the same", after presenting for the first time in four months. She reported having good days and bad days. She reported that orthotics were of good benefit but they appeared firm and she had difficulty getting used to them. Exam noted tenderness to both feet and "a little discomfort" along the distal course of the Achilles tendons bilaterally, but no frank pain with compression of the calcaneus itself. Medication included Norco, Voltaren topical 1% gel (since at least 6-2015), and Ultram. The treatment plan included "more routine use of Voltaren gel 1%" and "softer-functional orthotics". She remained off work. On 11-03-2015 Utilization Review non-certified a request for Voltaren gel 1% 100g (Qty 1 with 3 refills), functional orthotics right and left, and suspension casting right and left.

IMR ISSUES, DECISIONS AND RATIONALES

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

Voltaren gel 1% quantity 100g with three refills: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Topical Analgesics.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Topical Analgesics.

Decision rationale: Topical NSAIDs may be useful for chronic musculoskeletal pain, but there are no long-term studies of their effectiveness or safety. Topical Voltaren is indicated for the relief of osteoarthritis pain in joints that lend themselves to topical treatment, which includes the ankle, elbow, foot, hand, knee, and wrist. Topical NSAIDs are not recommended for greater than 4-12 weeks. NSAIDs in general should be used secondary to acetaminophen for mild to moderate pain. In this case, the topical NSAID is being used for ankle osteoarthritis, which is indicated for 4-12 weeks. However, this worker has already been using this medication for at least 12 weeks and there is no documentation of ongoing benefit. Therefore, the request is not medically necessary.

Functional orthotics right and left: Overturned

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

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Ankle and Foot/Orthotic devices.

Decision rationale: According to the ODG, orthotic devices are recommended for plantar fasciitis. The ODG also states: "Outcomes from using a custom orthosis are highly variable and dependent on the skill of the fabricator and the material used. A trial of a prefabricated orthosis is recommended in the acute phase, but due to diverse anatomical differences, many patients will require a custom orthosis for long-term pain control. A pre-fab orthosis made of softer material may be more appropriate in the acute phase, but it may break down with use whereas a custom semi-rigid orthosis may work better over the long term." According to the 10/20/15 physician progress note, this worker has had some benefit from orthotics but finds them too firm and still has some discomfort. She has also a home exercise program with stretching and massage. It is not clear from the documentation whether or not the current orthotics are pre-fabricated or custom. In any case, the current orthotics are not optimal and a trial of an orthotic of different material is appropriate. Therefore, the request is medically necessary.

Suspension casting right and left: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Treatment in Workers' Compensation, Ankle and Foot, Cast (immobilization).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Carroll M., Annabell M., and Rome K., (2011, March 4),

Reliability of capturing foot parameters using digital scanning and the neutral suspension casting technique. Journal of Foot and Ankle Research.

Decision rationale: Suspension casting is a non weight bearing, neutral suspension casting technique for functional orthoses. Casting discussed in the ODG Ankle and Foot section refers to immobilization which is not related to suspension casting which is only for the purpose of creating a mold for an orthotic. Neither the MTUS nor ODG discuss suspension casting. According to the article by Carroll M., Annabell M., and Rome K., (2011, March 4), Reliability of capturing foot parameters using digital scanning and the neutral suspension casting technique. Journal of Foot and Ankle Research: "The neutral suspension casting technique is a commonly utilized method for obtaining a negative impression of the foot prior to orthotic fabrication." Custom orthotics for both feet in this case are appropriate, therefore, suspension casting is medically necessary and appropriate.