

Case Number:	CM14-0080096		
Date Assigned:	07/18/2014	Date of Injury:	09/26/1995
Decision Date:	09/25/2014	UR Denial Date:	05/23/2014
Priority:	Standard	Application Received:	05/30/2014

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 Tennessee. 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:

This is a 62 year old male with a 9/26/1995 date of injury. The exact mechanism of the original injury was not clearly described. A progress reported dated 4/30/14 noted subjective complaints of bilateral foot/ankle pain, including pain in the right 3rd interspace (Morton's neuroma). Objective findings include left ankle tenderness, and right foot swelling. The patient had been undergoing month injections of steroid/anesthetic to both the neuroma as well as the left ankle from 5/2013 to 1/2014. Diagnostic Impression: Morton's neuroma, left ankle arthritis. Treatment to Date: medication management, neuroma and ankle injections. A UR decision dated 5/23/14 denied the request for 1 injection for neuroma. The patient had been undergoing monthly injections between 5/8/2013 and 1/15/2014, which would indicate that any improvement due to such injections was only transient. Performing series of steroid injections without documented evidence of significant benefit cannot be supported on the basis of medical necessity. It also denied the request for 1 injection to ankle joint. Evidence based guidelines do not recommend intra-articular corticosteroids for ankle complaints. Performing series of steroid injections without documented evidence of significant benefit cannot be supported on the basis of medical necessity.

IMR ISSUES, DECISIONS AND RATIONALES

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

Retrospective for 1 injection for neuroma between 4/30/2014 and 4/30/2014: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 371.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 369-371, 375. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) foot & ankle chapter.

Decision rationale: CA MTUS 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. In addition, ODG states that while evidence is limited, therapeutic injections are generally used procedures in the treatment of patients with ankle or foot pain or pathology. The guidelines also state that if overused, injections may be of significantly less value. However, although there is some evidence to support the value of corticosteroid injections with Morton's neuroma, the patient has had monthly neuroma injections over a period of more than 6 months. Yet he continues to have persistent recurrence of pain. These injections clearly have not been effective. Surgery should be strongly considered at this point. Therefore, the request for retrospective for 1 injection for neuroma between 4/30/14 and 4/30/14 was not medically necessary.

Retrospective for 1 injection to ankle joint between 4/30/2014 and 4/30/2014: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 371.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 369-371. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Foot and ankle chapter.

Decision rationale: CA MTUS 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. In addition, ODG states that while evidence is limited, therapeutic injections are generally used procedures in the treatment of patients with ankle or foot pain or pathology. The guidelines also state that if overused, injections may be of significantly less value.. However, there is no evidence to support the use of corticosteroid injections in the ankle joint. Furthermore, the patient has had monthly ankle injections over a period of greater than 6 months, with seemingly minimal persistent pain relief. Therefore, the request for retrospective for 1 injection to ankle joint between 4/30/14 and 4/30/14 was not medically necessary.