

Case Number:	CM15-0016004		
Date Assigned:	02/04/2015	Date of Injury:	01/10/2014
Decision Date:	03/27/2015	UR Denial Date:	01/12/2015
Priority:	Standard	Application Received:	01/28/2015

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

Certification(s)/Specialty: Physical Medicine & Rehabilitation

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 34-year-old male who sustained an industrial injury on 01/10/2014. The current diagnoses include plantar fasciitis right foot. Treatments to date include medication management, physical therapy, and shoe inserts. Report dated 01/06/2015 noted that the injured worker presented with complaints that included burning pain in the right foot and heel with cramping/spasms in the right heel. Physical examination was positive for abnormal findings. The utilization review performed on 01/12/2015 non-certified a prescription for DepoMedrol injection in the right foot based on the clinical information submitted for review lacks documentation illustrating the injured worker's pain, utilizing the VAS and guidelines state corticosteroid injections for plantar fasciitis is under study. The reviewer referenced the Official Disability Guidelines in making this decision.

IMR ISSUES, DECISIONS AND RATIONALES

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

DepoMedrol 80mg injection to the right foot: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Ankle and Foot, Injections

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official disability guidelines Ankle & Foot (Acute & Chronic) Chapter under Injections (corticosteroid)

Decision rationale: Based on the 01/06/15 progress report provided by treating physician, the patient presents with right foot burning pain. The request is for Depomedrol 80MG Injection To The Right Foot. Patient's diagnosis on 01/06/15 included plantar fasciitis right foot, which is supported by MRI study dated 07/11/14. The patient has had physical therapy. Patient's medications include NSAIDs and Hydrocodone. The patient is temporarily totally disabled. ODG-TWC, Ankle & Foot (Acute & Chronic) Chapter under Injections (corticosteroid) states: "Not recommended for tendonitis or Morton's Neuroma, and not recommend intra- articular corticosteroids. Heel pain (plantar fasciitis): Under study. There is no evidence for the effectiveness of injected corticosteroid therapy for reducing plantar heel pain. (Crawford, 2000) Tendon (Achilles tendonitis): Not Cortisone injections in the area of the Achilles tendon are controversial because cortisone injected around the tendon is harmful and can lead to Achilles tendon ruptures." Per progress report dated 01/06/14, treater states "the right foot is still tender along the plantar fascia from the mid area to the heel. Considering that he had bruising at the time of the injury, it is consistent with traumatic plantar fasciitis, please approve a cortisone injection for the right plantar fascia. Use inserts for his boots." However, ODG states "There is no evidence for the effectiveness of injected corticosteroid therapy for reducing plantar heel pain," and corticosteroid injection is still under study. Due to lack of guideline support, the request for Depomedrol injection to the right foot IS NOT medically necessary.