

Case Number:	CM14-0144489		
Date Assigned:	09/12/2014	Date of Injury:	11/21/2000
Decision Date:	10/22/2014	UR Denial Date:	08/26/2014
Priority:	Standard	Application Received:	09/05/2014

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 Physical Medicine and Rehabilitation and is licensed to practice in Nevada. 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:

The records presented for review indicate that this 58 year-old female was reportedly injured on November 21, 2000. The most recent progress note, dated August 21, 2014, indicates that there were ongoing complaints of foot pain. The physical examination demonstrated tenderness to palpation the plantar aspect of the bilateral feet, some tenderness over the metatarsal's and lateral ankle. An assessment of the orthotics was described as "poor". Diagnostic imaging studies were not presented in the narrative. Previous treatment includes medications, orthotics, and other conservative pain management interventions. A request had been made for custom orthotics and was not certified in the pre-authorization process on August 26, 2014.

IMR ISSUES, DECISIONS AND RATIONALES

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

Durable medical equipment: purchase of a pair of contour orthotics: Upheld

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

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints, Acupuncture Treatment Guidelines.

Decision rationale: Use of orthotics are indicated for a 2-3 month period. The physical examination noted no significant change or demonstrated of the efficacy or utility of this device.

Therefore, considering the date of injury, the injury sustained, the treatment rendered, and the current physical examination, by the parameters noted in the ACOEM is insufficient clinical evidence presented to support the medical necessity of this device.