

Case Number:	CM13-0029268		
Date Assigned:	03/19/2014	Date of Injury:	02/27/2012
Decision Date:	05/21/2014	UR Denial Date:	09/16/2013
Priority:	Standard	Application Received:	09/25/2013

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 Podiatric Surgery and is licensed to practice in New York. 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:

According to the enclosed information this patient was initially injured on November 30, 2010. It is noted that he injured both feet while at work. His most recent evaluation is on September 4, 2013. The patient relates during this visit that the semi-rigid orthotics are not supportive enough. Pain level may reach a six or seven out of 10, with a new complaint of numbness to the distal toes as well as Achilles pain bilaterally. Patient has been on a modified work schedule and taking anti-inflammatory medication. Physical exam reveals a pes planus foot structure with subtalar and midtarsal joint valgus BL. Tenderness noted along the plantar fascia medial aspect bilaterally. Antalgic gait was also noted. Diagnoses noted in chart are plantar fasciitis bilaterally, fully compensated STJ varus, as well as pes planus foot structure. Pt was treated with low and high dye strappings, rigid orthotics, and prescribed soft molded shoes to accommodate his rigid orthotics. Authorization of the shoes was denied.

IMR ISSUES, DECISIONS AND RATIONALES

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

DME: PAIR OF SOFT MOLDED SHOES, DOS: 9/4/13: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

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

Decision rationale: After careful review of the enclosed information and the MTUS guidelines concerning treatment of plantar fasciitis, soft molded shoes are not reasonable or medically necessary. Chapter 14, page 371 of the MTUS guideline advises that treatment for plantar fasciitis includes a heel donut, soft supportive shoes, and rigid orthotics. The MTUS guidelines do not recommend custom molded shoes, only soft supportive shoes. The request is not medically necessary or appropriate.