

Case Number:	CM14-0152277		
Date Assigned:	09/22/2014	Date of Injury:	04/24/2014
Decision Date:	10/22/2014	UR Denial Date:	08/12/2014
Priority:	Standard	Application Received:	09/18/2014

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, has a subspecialty in Pain Management and is licensed to practice in California. 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 patient with an injury date of April 24, 2014. A utilization review determination dated August 12, 2014 recommended non-certification of custom molded foot orthotics. A progress report dated September 13, 2014 identifies no subjective complaints. Objective examination findings reveal pain with palpation over the plantar surface of the metatarsal region to the 1st metatarsal. There is also a slight valgus shift to the 1st metatarsophalangeal joint compared to the left foot. Diagnoses include foot pain and metatarsalgia. The treatment plan recommends molded insoles to correct angulation and position of the 1st MTP for the treatment of sesamoiditis and metatarsalgia.

IMR ISSUES, DECISIONS AND RATIONALES

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

The purchase of custom molded foot orthotics (1 pair for symptoms related to bilateral foot injury): Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Ankle & Foot, Orthotic Devices, and on the Non-MTUS online resources: orthoinfo.aaos.org/topic.cfm?topic=A00164 and www.aofas.org/footcaremd/conditions/ailments-

of-the-big-toe/Pages/Sesamoiditis.aspx and www.mayoclinic.org/diseases-conditions/metatarsalgia/basics/lifestyle-home-remedies/con-20022369

Decision rationale: Regarding the request for custom orthotics, the Chronic Pain Medical Treatment Guidelines are silent. The ODG states orthotics are recommended for plantar fasciitis and for foot pain in rheumatoid arthritis. 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. The American Academy of Orthopedic Surgery and American Orthopedic Foot and Ankle Society do not recommend custom orthotics in the treatment of sesamoid injuries. The Mayo Clinic does not recommend custom orthotics in the treatment of metatarsalgia. Within the medical information made available for review, there is no documentation of symptoms and findings consistent with plantar fasciitis or foot pain in rheumatoid arthritis. There is no documentation of a trial with a prefabricated orthosis. Additionally, medical literature does not support the use of custom orthotics in the treatment of metatarsalgia or sesamoiditis. As such, the current request for custom orthotics is not medically necessary.