

Case Number:	CM14-0158987		
Date Assigned:	10/02/2014	Date of Injury:	05/02/2014
Decision Date:	11/17/2014	UR Denial Date:	09/20/2014
Priority:	Standard	Application Received:	09/29/2014

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 Internal Medicine, and is licensed to practice in California & Illinois. 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 patient is a 27 year old male who was injured on 05/02/2014 due to the repetitive nature of his job. Prior treatment history has included physical therapy, Tylenol 500 mg, ice and heat treatments. Diagnostic studies reviewed include MRI of the right ankle including the right Achilles tendon dated 07/02/2014 revealed 50% thickness tear of the fibers in the AP dimension. There was also an 11 mm segment of intra-substance partial tear of the medial aspect of the distal right Achilles tendon. There was no evidence of a tear or partial rupture of the plantar fascia of the right foot. Initial evaluation report dated 09/11/2014 documented the patient to have complaints of weight gain as he has gained over 32 lbs giving him a weight of 232 since his injury, when he weighed 195 to 200 lbs. He reported difficulty with walking and climbing a flight of stairs. He can tolerate 10-15 minutes at a time and with regular breaks, he can walk for a half an hour. On exam, plantar flexion is 40 on the right and 55 on the left; inversion of the subtalar joints is 20 bilaterally; and eversion is 7 bilaterally; and midtarsal joints revealed flexion of forefoot valgus at 5 degrees bilaterally. The patient is diagnosed with retrocalcaneal bursitis; fusiform swelling of the right Achilles with probable adhesive tendinopathy; anteromedial soft tissue impingement right ankle; low back mechanical pain to the right side from the pelvic asymmetry; reduced dorsiflexion of the right ankle due to pain and stiffness; and poor balance. He was recommended for temporary foot supports/ one pair of extra depth boots as the patient has edema that progresses during the course of a day in his right foot and ankle as well as Achilles tendon. Prior utilization review dated 09/20/2014 states the request for 1 pair of extra depth boots is not certified as it does not appear to be medically necessary.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 pair of extra depth boots: 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 Page(s): 370-371, Chronic Pain Treatment Guidelines Methods of Symptoms Control for Ankle and Foot Complaints Page(s): 370-371. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: <http://www.craryshoes.com/pages/extra-depth-shoes>

Decision rationale: An extensive review of the current guidelines and literature did not have any strong supporting clinical data for the use of extra depth boots. There have been inadequate research and clinical trials performed to support the medical coverage of extra depth boots. The clinical documents provided did not adequately discuss the indication for the boots. The documents did not provide recent clinical based evidence that the extra depth boots have been shown to be beneficial for patients with similar conditions. Based on the guidelines and criteria as well as the clinical documentation stated above, the request is not medically necessary.