

<b>Case Number:</b>	CM14-0047976		
<b>Date Assigned:</b>	07/02/2014	<b>Date of Injury:</b>	12/06/2012
<b>Decision Date:</b>	11/13/2014	<b>UR Denial Date:</b>	03/25/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	04/16/2014

### 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 Occupational Medicine 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:

The applicant is a represented [REDACTED] employee who has filed a claim for chronic low back, knee, and ankle pain reportedly associated with an industrial injury of December 6, 2012. Thus far, the applicant has been treated with the following: Analgesic medications; earlier knee arthroscopy; earlier ankle ORIF surgery; earlier lumbar laminectomy; topical agents; opioid therapy; and subsequent ankle hardware removal. In a Utilization Review Report dated March 25, 2014, the claims administrator denied a request for bilateral ankle braces. The claims administrator stated that it was basing its decision on an RFA form dated March 11, 2014. In an August 18, 2014 progress note, it was incidentally noted that the applicant was using medical marijuana. In another section of the note, somewhat incongruously, it was stated that the applicant denied any illicit drug use. The applicant was given refills of Zofran, Lidoderm, and Norco. It was stated that the applicant was also contemplating introduction of a spinal cord stimulator. The applicant's gait was not described on this occasion. The remainder of the file was surveyed. It did not appear that the March 11, 2014 RFA form and/or associated progress note were incorporated into the IMR packet. On September 15, 2014, the applicant was asked to consider epidural steroid injection therapy. The applicant's gait was not formally described on this occasion, however.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Rebound Ankle Brace - Bilateral:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 376.

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

**Decision rationale:** As noted in the MTUS-adopted ACOEM Guidelines in Chapter 14, page 371, putting joints at rest in a brace or splint should be for "as short a time as possible." In this case, it was not clearly stated why the applicant needed to use ankle braces at this relatively late stage in the life of the claim, some 18 months removed from the date of injury as of the date of the Utilization Review Report, March 25, 2014. The applicant's gait was not described on any of the provided progress notes. While it is acknowledged that the March 11, 2014 RFA form on which the article in question was sought was seemingly not incorporated into the IMR packet, the information which is on file, however, failed to support or substantiate the request. Therefore, the request is not medically necessary.