

Case Number:	CM14-0064902		
Date Assigned:	07/11/2014	Date of Injury:	01/24/2013
Decision Date:	09/12/2014	UR Denial Date:	04/16/2014
Priority:	Standard	Application Received:	05/07/2014

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 foot and ankle pain reportedly associated with an industrial injury of January 24, 2013. Thus far, the applicant has been treated with analgesic medications; transfer of care to and from various providers in various specialties; consultation with a podiatrist, apparently intended to pursue a calcaneal osteotomy procedure. In a utilization review report dated April 16, 2014, the claims administrator denied a request for a DME ramp on the grounds that it was not stated why the applicant could not employ crutches to negotiate steps at his home. The claim administrator did not invoke any guidelines in its denial. In a June 3, 2014 request for authorization letter, the applicant was described as status post calcaneal navicular coalition resection and calcaneal osteotomy surgery on April 16, 2014. The attending provider retrospectively sought authorization for the hospitalization, stating that the applicant had significant postoperative pain control issues, which resulted in a three-day hospital stay. In an April 10, 2014 progress note, the applicant was described as planning to pursue a calcaneal navicular coalition resection and ostomy surgery with Achilles tendon lengthening. The applicant would have to remain non weight bearing in a cast it was suggested. Authorization for hospital stay, knee scooter, and wheelchair were sought. A ramp to the house would be useful on the grounds that this would limit the applicant's navigation of stairs, it was suggested. A helper to drive the applicant to and from postoperative appointments and help with other household chores was sought.

IMR ISSUES, DECISIONS AND RATIONALES

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

Durable Medical Equipment: Ramp: Overturned

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines CRPS, Treatment topic Page(s): 40. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Knee Chapter, Durable Medical Equipment.

Decision rationale: While the MTUS does not specifically address the topic of ramps or other articles of durable medical equipment, page 40 of the MTUS Chronic Pain Medical Treatment Guidelines does state that ergonomic modifications at home and work are recommended as part and parcel of treatment for CRPS. By implication, then, postoperative provision of a ramp at home so as to ameliorate the applicant's gait deficits would have been indicated following the foot and ankle surgery in question, after which the applicant was described as immobile and having to use crutches and a walker for a span of several months. It is further noted that Official Disability Guidelines knee chapter durable medical equipment topic states that durable medical equipment is defined as articles which could withstand repeated use, could be rented, could be used by successive applicants, is primarily intended to serve a medical purpose, and is generally not useful to an applicant in the absence of illness or injury. In this case, the ramp in question would not be useful to the applicant outside of the period of mobility associated with the applicant's surgery. The attending provider suggested that the applicant would have to use a Cam walker for a span of several months and would have difficulty negotiating stairs at home. Provision of a ramp to offset the same was indicated. Therefore, the request is medically necessary.