MAXIMUS Federal Services

Case Number:	CM14-0190616		
Date Assigned:	11/24/2014	Date of Injury:	04/27/2001
Decision Date:	01/09/2015	UR Denial Date:	10/16/2014
Priority:	Standard	Application Received:	11/14/2014

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, has a subspecialty in Nephrology 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 68-year-old female with a 4/27/01 date of injury. According to a handwritten and largely illegible podiatry report dated 11/13/14, the patient stated that her custom made shoes were loos and almost caused her to fall a couple of times. She has been unable to use nail cutters and stated that her nails were long and painful. According to an appeal note dated 10/28/14, the provider stated that the prior UR used incorrect guidelines referencing "ingrown toenail surgery". The provider has requested nail debridement because the patient had a chronic deformed left hand and was unable to control, hold, or manipulate nail nippers in any manner whatsoever. With the patient's nails getting long over time, these started to hurt her because they pushed into the end and also the bottom of her shoe and caused her a great deal of pain. Objective findings: decreased sensation to light touch of bilateral feet, elongated nails and tender to palpation. Diagnostic impression: metatarsalgia. Treatment to date: medication management, activity modification, electro-acupuncture. A UR decision dated 10/16/14 denied the request for bilateral toe nails debridement. There is no detailed evidence of the lesion or ingrown toenails after any recent detailed non-operative treatment trial and failure.

IMR ISSUES, DECISIONS AND RATIONALES

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

Bilateral toe nail debridement: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG)

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: Aetna Clinical Policy Bulletin: Routine Foot Care

Decision rationale: California Medical Treatment Utilization Schedule (MTUS) and Official Disability Guidelines (ODG) do not address this issue. According to Aetna Clinical Policies, foot care is considered non-routine and may be supported only in the following circumstances when medically necessary: 1) The non-professional performance of the service would be hazardous for the member because of an underlying condition or disease; 2) Routine foot care is performed as a necessary and integral part of an otherwise covered service (e.g., debriding of a nail to expose a subungual ulcer, or treatment of warts); 3) Debridement of mycotic nails is undertaken when the mycosis/dystrophy of the toenail is causing secondary infection and/or pain, which results or would result in marked limitation of ambulation and require the professional skills of a provider. However, in the present case, there is no documentation that the patient has any of the above conditions to support the medical necessity of the requested service. In addition, there is no documentation that the patient does not have a caregiver or family member to assist her in clipping her toenails. Therefore, the request for Bilateral toe nail debridement was not medically necessary.