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| Case Number: | CM14-0198267 | | |
| Date Assigned: | 12/08/2014 | Date of Injury: | 09/25/2000 |
| Decision Date: | 02/18/2015 | UR Denial Date: | 11/10/2014 |
| Priority: | Standard | Application Received: | 11/25/2014 |

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:
State(s) of Licensure: Arizona, California
Certification(s)/Specialty: Family Practice

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 42 yr. old male claimant who sustained a work injury on 9/25/2000 involving the low back and left ankle. An MRI of the lumbar spine showed a focal disc protrusion in L4-L5. He was diagnosed with lumbar disk disease and chronic left ankle pain. A progress note on 4/1/14 indicated the claimant had 8/10 pain with medications in the low back radiating to the legs. Exam findings were notable for painful decrease range of motion in the left ankle and paravertebral tenderness in the lumbar spine. The treating physician provided a left ankle brace for the claimant.

IMR ISSUES, DECISIONS AND RATIONALES

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

Left ankle brace: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints. Decision based on Non-MTUS Citation Official Disability Guidelines

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

Decision rationale: According to the guidelines, immobilization or bracing is recommended for acute injuries of the ankle. Prolonged supports are not recommended. In this case, the claimant was provided with an ankle brace from April 2014 to present. The long-term use of an ankle brace years after an injury is not medically necessary.