Case Number:	CM15-0143503		
Date Assigned:	08/04/2015	**Date of Injury:**	03/16/2015
Decision Date:	09/01/2015	**UR Denial Date:**	07/14/2015
Priority:	Standard	**Application Received:**	07/23/2015

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: California
Certification(s)/Specialty: Preventive Medicine, Occupational Medicine

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 injured worker is a 60 year old female who sustained an industrial injury on 3-16-15 involving a twisting incident and fall resulting in right foot injury. She currently has pain in the right foot with a pain level of 2-3 out of 10 and this has been an improvement. Medications were not specifically identified. Diagnosis was right 3rd and 4th metatarsal neck fractures- healed. Treatments to date include use of hard soled shoes which are beneficial. Diagnostics include x-rays of the right foot (5-14-15) show healed fractures of the 3rd and 4th metatarsal necks. On 6-29-15 the treating provider requested 2 pairs of stiff sole shoes as she was not reimbursed for prior purchase. The shoes allowed earlier weight bearing and return to work because they provide greater support with decreased pain.

IMR ISSUES, DECISIONS AND RATIONALES

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

Retrospective request for 2 pairs of stiff sole shoes (DOS not indicated): Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Ankles & Foot Procedure Summary online version.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Knee & Leg Chapter/Footwear, Knee Arthritis Section.

Decision rationale: MTUS guidelines do not address the use of special shoes. Per the ODG they are recommended as an option for patients with knee osteoarthritis. Recommend thin-soled flat walking shoes (or even flip-flops or walking barefoot). Recommend lateral wedge insoles in mild OA but not advanced stages of OA. Specialized footwear can effectively reduce joint loads in subjects with knee osteoarthritis, compared with self-chosen shoes and control walking shoes. This study compared the effects of a specialized shoe designed to lower dynamic loads at the knee (referred to as the mobility shoe, a flexible, lightweight shoe engineered to incorporate the potential biomechanic advantages of barefoot walking). The mobility shoe does not contain lifts at the heel, which have been shown to increase knee loads, and its flexible sole is designed to mimic the flexible movement of a bare foot. The results showed that the mobility shoes effectively reduced knee loads while walking. Most studies of wedge orthotics that are inserted into shoes have shown a five to eight percent reduction in load, while the present study showed eight to 13 percent reduction in load with the mobility shoes. Insoles and footwear offer great potential, as simple, inexpensive-treatment strategies for knee osteoarthritis. Walking in shoes increases joint load compared with walking in bare feet. Shoes with a flat or low heel and that are flexible rather than stabilizing may be optimal; however, effects of off-the-shelf shoes on osteoarthritis symptoms are unknown. Promising shoe modifications include shoes that promote foot mobility and those with variable stiffness or laterally wedged soles. In this case, the injured worker has stated that the use of stiff sole shoes has help with her pain. However, she still reports significant pain with the use of shoes and remains on work restriction. The request for retrospective request for 2 pairs of stiff sole shoes (DOS not indicated) is not medically necessary.