

<b>Case Number:</b>	CM15-0160756		
<b>Date Assigned:</b>	08/27/2015	<b>Date of Injury:</b>	01/16/2013
<b>Decision Date:</b>	10/05/2015	<b>UR Denial Date:</b>	07/31/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	08/17/2015

### 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: Texas, New York, 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 applicant is a represented 56-year-old who has filed a claim for chronic foot pain reportedly associated with an industrial injury of January 16, 2013. In a Utilization Review report dated July 3, 2015, the claims administrator failed to approve a request for foot specialist consultation. The claims administrator referenced a progress note and an associated RFA form of July 7, 2015 in its determination. Non-MTUS Chapter 7 ACOEM Guidelines were also cited and were, furthermore, mislabeled as originating from the MTUS. The applicant's attorney subsequently appealed. In a handwritten progress note dated July 7, 2015, the applicant was placed off of work, on total temporary disability, for six weeks. The note comprised, in large part, of preprinted checkboxes, with little in the way of supporting commentary. The note was difficult to follow and did not seemingly state why a foot specialist consultation was sought. On June 18, 2015, the applicant reported ongoing complaints of low back pain with radiation of pain to the foot, 7/10. The applicant was given refills of Zantac and Motrin. There was no mention of the need for a foot specialist consultation on this date. Overall commentary was sparse.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Referral to foot specialist for left foot:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Chapter 7-Independent Medical Examinations and Consultations, page 127.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 5 Cornerstones of Disability Prevention and Management Page(s): 92.

**Decision rationale:** No, the request for a foot specialist referral was not medically necessary, medically appropriate, or indicated here. While the MTUS Guideline in ACOEM Chapter 5, page 92 does acknowledge that a podiatry referral may be appropriate when a practitioner is uncomfortable treating or addressing the particular cause of delayed recovery, here, however, progress notes of July 7, 2015 and July 18, 2015 were thinly and sparsely developed, made little to no mention of the claimant's foot and ankle pain complaints (if any) and did not, in short, establish a clear or compelling rationale for the foot specialist referral at issue. Therefore, the request is not medically necessary.