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| Case Number: | CM15-0024050 | | |
| Date Assigned: | 02/13/2015 | Date of Injury: | 08/31/2011 |
| Decision Date: | 04/22/2015 | UR Denial Date: | 01/14/2015 |
| Priority: | Standard | Application Received: | 02/09/2015 |

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: North Carolina 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:

The injured worker is a 45 year old female, who sustained an industrial injury on 8/31/11. She reported pain and tingling in the right arm from the injury. Current complaints are bilateral ankle and foot pain and also neck and shoulder pain. It is documented the current orthotics in use are about one year old and needs a new one. The injured worker was diagnosed as having Achilles bursitis or tendinitis; plantar fascial fibromatosis. Treatment to date was not submitted in the medical documentation for this review.

IMR ISSUES, DECISIONS AND RATIONALES

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

Orthotics, one (1) pair: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 369-371.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 371.

Decision rationale: The ACOEM chapter on foot complaints states: Rigid orthotics (full-shoe length inserts made to realign within the foot and from foot to leg) may reduce pain experienced during walking and may reduce more global measures of pain and disability for patients with plantar fasciitis and metatarsalgia. The patient has the diagnoses of Achilles

tendonitis/bursitis. Therefore, criteria per the ACOEM for orthotics has not been met and the request is not medically necessary.