

<b>Case Number:</b>	CM15-0051601		
<b>Date Assigned:</b>	03/25/2015	<b>Date of Injury:</b>	09/17/1990
<b>Decision Date:</b>	05/01/2015	<b>UR Denial Date:</b>	02/20/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	03/18/2015

### 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, South Carolina

Certification(s)/Specialty: Preventive Medicine, Occupational Medicine, 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 75-year-old male, who sustained an industrial injury on September 17, 1990. He reported right ankle pain and was diagnosed as having traumatic arthritis of the right ankle. Treatment to date has included radiographic imaging, diagnostic studies, multiple surgical interventions of the affected ankle, and activity modifications, which has not lead to complete resolution of the pain. Evaluation on January 23, 2015, revealed continued pain, so custom orthotics for the right ankle and orthotics for the shoes were recommended. On February 20, 2015, Utilization Review non-certified the requests for bilateral ankle braces (L1930) and bilateral extra depth shoes (for purchase A5500), based on the CA MTUS guidelines

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Bilateral Ankle Brace:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): Table 14-3.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 370. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Ankle & Foot (Acute & Chronic), Ankle foot orthosis (AFO).

**Decision rationale:** The cited CA MTUS guideline is silent concerning ankle bracing for arthritis and only indicates activity as tolerated for nonspecific ankle pain. The ODG cited recommends ankle foot orthosis (AFO) as an option for foot drop, use during surgical or neurologic recovery, and when ankle instability or spasticity is problematic. The injured worker (IW) has had a long history of ankle pain following traumatic arthritis despite various conservative and surgical interventions. In the sparse documentation available, the IW's ankle has minimal range of motion, but there is no documentation of ankle instability. His pain and mobility are improved while using an AFO. However, based on the available guidelines, the request for bilateral ankle braces (L1930) is not medically necessary.

**Bilateral extra depth shoes, for purchase:** Overturned

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): Table 14-3.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Diabetes (Type 1, 2, and Gestational), Foot problems.

**Decision rationale:** The MTUS is silent concerning extra depth shoes; however, the cited ODG recommends screening and appropriate footwear for injured workers (IWs) with diabetes. Custom-made footwear is also recommended for IWs who are at risk for diabetic foot ulcers. In this case of this injured worker, he has had a long history of ankle pain following traumatic arthritis despite various conservative and surgical interventions. In addition, he has diabetes requiring multiple medications and other interventions. Based on the sparse medical records, he has reduced ankle pain and is able to ambulate longer, while wearing extra depth shoes. Therefore, based on the available information to include history of diabetes, the request for bilateral extra depth shoes (for purchase A5500) is medically necessary and appropriate.