

Case Number:	CM14-0163002		
Date Assigned:	10/08/2014	Date of Injury:	07/08/2013
Decision Date:	12/19/2014	UR Denial Date:	09/24/2014
Priority:	Standard	Application Received:	10/03/2014

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. The expert reviewer is Board Certified in Internal Medicine and is licensed to practice in California. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

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 patient had his injury on 7/8/13. On 8/27/14 he was noted to have cervical sprain, lumbar sprain and he was to have physical therapy. A PR2 from the summer of 2014 noted that the patient had pain in his neck and back. He also had pain on excessive sitting and had pain radiating down his leg. Objective signs included pain on palpation of his neck and lumbar pain associated with range of motion. His diagnoses were cervical sprain, lumbar radiculopathy, and right foot sprain. Authorization for a foot brace was sought but denied by the UR.

IMR ISSUES, DECISIONS AND RATIONALES

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

Foot Brace: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints, Chapter 14 Ankle and Foot Complaints Page(s): 340; 376.

Decision rationale: The MTUS states that braces are used at times with knee pathology. They can be used with ACL or MCL sprains. However; their benefit may be more emotional than medical. Bracing in these instances is only needed if the joint is being stressed with such activities as carrying boxes or climbing ladders. However, the average patient derives no benefit

from braces. If braces are used with knee problems, it is necessary that proper fitting is provided and their use is accompanied by a program of physical rehabilitation. In the ankle and foot chapter, rest and immobilization techniques such as braces and supports are recommended for acute injuries. The immobilization with braces or supports should be accompanied with rest and elevation. Such bracing as rigid orthotics, metatarsal bar, and heel donator toe separator may be useful at times for diagnosis in foot injuries. Prolonged bracing without exercise is not recommended. In the above patient, the M.D. note does not specify specific foot complaints or physical exam. Also, the injury occurred more than 1 year ago and bracing is more appropriate for acute injuries. Therefore, the request for Foot Brace is not medically necessary and appropriate.