

Case Number:	CM14-0097596		
Date Assigned:	09/16/2014	Date of Injury:	04/29/2012
Decision Date:	10/16/2014	UR Denial Date:	06/05/2014
Priority:	Standard	Application Received:	06/16/2014

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 Physical Medicine and Rehabilitation and is licensed to practice in Illinois. 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 injured worker is a 41-year-old male who reported an injury on 04/29/2012. The mechanism of injury occurred when he stepped onto a piece of asphalt that was not paved and he severely twisted his left ankle. His diagnoses included complaint of orthopedic injuries and hypertension. His previous treatments included a boot, a cane, and physical therapy, which he claimed made his pain worse. Diagnostic studies included an MRI scan of the left ankle and a CT scan of the left ankle. It was noted that he had 2 left ankle surgeries, with the last one on 11/01/2013, and both were ineffective. On 03/06/2014, the injured worker complained of still having soreness in his ankle. The physical examination revealed the injured worker was still walking with a boot and using a cane. He walked favoring his left ankle and had problems going on his tiptoes and heels. He had minimal tenderness to palpation and no swelling. His range of motion was noted as essentially full. His medications on 03/04/2014 were noted as atenolol, pravastatin, Ambien 5 mg as needed, and tapentadol. The treatment plan was for an articulated custom ankle foot arthrosis (AFO). The rationale for the request was that he continued to have soreness in his left ankle post surgery. The Request for Authorization form was not submitted.

IMR ISSUES, DECISIONS AND RATIONALES

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

Articulated Custum Ankle Foot Orthosis (AFO): Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Ankle and Foot, Arizona Brace

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Ankle and Foot, Ankle foot orthosis (AFO).

Decision rationale: Based on the clinical information submitted for review, the request for articulated custom ankle foot orthosis (AFO) is not medically necessary. As stated in the Official Disability Guidelines, ankle foot orthosis is recommended as an option for foot drop and it is used during surgical or neurologic recovery. The injured worker was status post left ankle surgery and continued to complain of soreness. He wore a boot and used a cane to ambulate. The guidelines indicate that an ankle foot orthosis is recommended as an option for foot drop. Within the provided documentation, there is no indication that the injured worker has footdrop. The physician noted the injured worker was wearing a boot, utilizing a cane for ambulation, and he walked favoring his left ankle. The requesting physician did not provide documentation which indicated the injured worker had a condition with associated functional deficits which would require the use of a custom orthosis. It was noted the injured worker wore a boot but it was not specified how an ankle foot orthosis would be more beneficial. Furthermore, the request failed to provide information regarding which lower extremity required the orthosis. As such, the request for articulated custom ankle foot orthosis is not medically necessary.