

Case Number:	CM15-0173352		
Date Assigned:	09/15/2015	Date of Injury:	06/01/1994
Decision Date:	10/22/2015	UR Denial Date:	08/03/2015
Priority:	Standard	Application Received:	09/02/2015

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 54-year-old who has filed a claim for chronic low back, shoulder and ankle pain with derivative complaints of fibromyalgia (FM) and major depressive disorder (MDD) reportedly associated with an industrial injury of June 1, 1994. In a Utilization Review report dated August 3, 2015, the claims administrator failed to approve a request for an ankle brace. The claims administrator referenced a July 5, 2015 office visit and an associated July 24, 2015 RFA form in its determination. The claims administrator invoked non-MTUS ODG Guidelines on ankle bracing at the bottom of its note, despite the fact that the MTUS addressed the topic. The applicant's attorney subsequently appealed. On May 28, 2015, the applicant reported ongoing complaints of knee and ankle pain. The applicant reported ongoing complaints of knee buckling. The applicant also had issues with fibromyalgia, shoulder pain, low back pain, obesity and a trigger finger, it was reported. The applicant was wearing an ankle brace of some kind. The applicant had recently twisted her ankle, it was suggested, following an episode where her knee had buckled. The applicant exhibited a labored gait, it was suggested. Physical therapy, ankle MRI imaging, home health services, Oxycontin, Imitrex, and FiberCon were endorsed. The applicant was apparently asked to continue wearing an existing ankle brace. The applicant was deemed "100% disabled," it was reported. The claims administrator's medical evidence log suggested that the May 28, 2015 office visit in fact represented the most recent office visit on file; thus, the July 16, 2015 office visit which the claims administrator based its decision upon was not seemingly incorporated into the IMR packet.

IMR ISSUES, DECISIONS AND RATIONALES

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

Left Ankle Brace New: 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.

MAXIMUS guideline: Decision based on MTUS Ankle and Foot Complaints 2004, Section(s): Summary.

Decision rationale: No, the request for a new ankle brace was not medically necessary, medically appropriate, or indicated here. As noted on in the MTUS Guideline in ACOEM Chapter 14, Table 14-6, page 376, the prolonged usage of ankle supports or bracing without exercise is deemed "not recommended" owing to the risk of debilitation. Here, the applicant was described as using an ankle brace on a historical office visit of May 28, 2015. The July 16, 2015 office visit on which the new ankle brace at issue was sought was not seemingly incorporated into the IMR packet. It was not clearly stated or clearly established why the applicant needed to continue using an ankle brace and/or needed a new ankle brace as of that date. The information that was on file, in short, failed to support or substantiate the request. Therefore, the request was not medically necessary.