

Case Number:	CM15-0091978		
Date Assigned:	05/18/2015	Date of Injury:	02/13/2014
Decision Date:	06/24/2015	UR Denial Date:	04/28/2015
Priority:	Standard	Application Received:	05/12/2015

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
 Certification(s)/Specialty: Internal 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 injured worker is a 36 year old male, who sustained an industrial injury on 2/13/14. The injured worker has complaints of low back pain which radiates to the left buttock/leg; left foot pain which is diffuse and radiates to the submetatarsal, lateral foot peroneal tendon area that includes the left ankle and heel and right buttock pain. The documentation noted that the injured worker had positive mild diffuse dorsal mid forefoot and good range of motion. The diagnoses have included crushing injury of ankle and foot excluding toe(s) alone. Treatment to date has included physical therapy; injections; aleve and tylenol. The request was for soft molded custom orthotics (one pair) for the left foot injury. Several documents within the submitted medical records are difficult to decipher.

IMR ISSUES, DECISIONS AND RATIONALES

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

Soft Molded Custom Orthotics (one pair) for the left foot injury: Overturned

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): 370-372, 376-377.

Decision rationale: Medical Treatment Utilization Schedule (MTUS) addresses foot orthotics and shoes. American College of Occupational and Environmental Medicine (ACOEM) 2nd Edition (2004) Chapter 14 Ankle and Foot Complaints (pages 370-372) states that rigid orthotics are treatment options for plantar fasciitis and metatarsalgia. Shoes are a treatment option for foot conditions, including plantar fasciitis, tendinitis, tenosynovitis, forefoot sprain, neuroma, and heel spur. 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. Activities and postures that increase stress on a structurally damaged ankle or foot tend to aggravate symptoms. Correct undesirable correlated and compensatory motions and postures if possible. Weight bearing may be limited during the first few weeks, with gradual return to full weight bearing. Weight bearing with orthotics often returns function toward normal very quickly. Table 14-6 Summary of Recommendations for Evaluating and Managing Ankle and Foot Complaints (page 376) recommends for acute injuries, immobilization and weight bearing as tolerated, taping or bracing later to avoid exacerbation or for prevention. For appropriate diagnoses, rigid orthotics, metatarsal bars, heel donut, toe separator are recommended. The orthopedic report dated 4/16/15 documented a history of multiple metatarsal fractures and left fifth toe dislocation. Examination of the left foot and ankle revealed submetatarsal tenderness. There was lateral tenderness along the fifth metatarsal. ACOEM guidelines recommend foot orthotics and shoes to improve structural stress with weight bearing and symptoms and correct undesirable motions and postures for prevention and treatment purposes. ACOEM guidelines support the request for soft molded custom orthotics for the left foot. Therefore, the request for soft molded custom orthotics (one pair) for the left foot is medically necessary.