



Diabetic Shoes/Inserts Order and Documentation Requirements

Medicare, along with other insurance providers who follow Medicare guidelines, requires that a **Certifying Physician (MD or DO)**, who is responsible for diagnosing and treating the patient's diabetic condition through a comprehensive plan of care, have an in-person visit with the patient during which diabetes management is addressed. **The Certifying Physician CANNOT be a podiatrist, PA, NP or CNS.**

The **Prescribing Physician** is the person who actually writes the order for the shoes, inserts and/or modifications, and may be a podiatrist, MD, DO, PA, NP, or CNS. The written order must be completed **on or after the date of the in-person visit** and contain all of the following:

- Patient's name
- Date of the order and the start date, if start date is different from date of order
- Detailed description of the item(s)
- Quantity of items to be dispensed
- Ordering Practitioner's National Provider Identifier (NPI)
- Signature of ordering practitioner and signature date. Signature and date stamps are not allowed. Signatures must be legible and/or physician's name must also be printed.

Coverage Criteria:

Therapeutic shoes, inserts and/or modifications are covered if all of the following are met:

1. The patient has diabetes mellitus ; and
2. The Certifying Physician has information in the patient medical record that documents management of the patient's diabetes along with detailed documentation of **one or more** of the following conditions:
 - a. Previous amputation of the other foot, or part of either foot, or
 - b. History of previous foot ulceration of either foot, or
 - c. History of pre-ulcerative calluses of either foot, or
 - d. Peripheral neuropathy with evidence of callus formation of either foot, or
 - e. Foot deformity of either foot, or
 - f. Poor circulation in either foot; and
3. The Certifying Physician must certify that criteria (1) and (2) above are met and that he/she is treating the patient for diabetes and that the patient needs diabetic shoes. **In order to meet criterion 2**, the certifying physician must EITHER
 - **Personally document** one or more of above criteria conditions a-f in the medical record of an in-person visit ***within 6 months prior to delivery*** of the shoes/inserts; *OR*
 - **Obtain, initial, date and indicate agreement** with information from the medical records of an in-person visit with a podiatrist, other MD or DO, PA, NP, or CNS that documents one or more of criteria conditions a-f above and is ***within 6 months prior to delivery*** of the shoes/inserts.
4. The Certifying Physician must sign the **Certification Statement** *on or after the date of the in-person visit* and ***within 3 months prior to delivery*** of the shoes/inserts.

Thank you for making Rice Home Medical part of your healthcare team. Please call 320-235-8434 with questions.

Rice Home Medical Supplier Requirements:

1. The supplier ***must*** have an in-person evaluation of the patient ***at the time of selecting the items*** that includes:
 - a. Examination of the patient's feet noting the abnormalities that will need to be accommodated
 - b. Measurements of the patient's feet
 - c. For custom molded shoes and inserts, taking impressions, making casts, or obtaining other images
2. The supplier ***must*** have an in-person evaluation of the patient ***at the time of delivery*** that documents that the patient is wearing the shoes/inserts and if they fit properly.