Documentation Guidelines for the Medicare Therapeutic Shoe Program

The Centers for Medicare and Medicaid Services (CMS) implemented the Therapeutic Shoes for Persons with Diabetes benefit ("therapeutic shoe program") in 1993. Since that time, the rules for the program have evolved with Medicare DME contractors issuing Local Coverage Determinations (LCDs) that created additional documentation requirements for suppliers (including physician-suppliers). The American Podiatric Medical Association (APMA) has developed documentation guidelines to assist members to meet coverage and reimbursement requirements for the therapeutic shoe program.

The Helping Ensure Life- and Limb-Saving Access to Podiatric Physicians (HELLPP) Act seeks to improve the therapeutic shoe program by clarifying and strengthening coordination of care. Under this proposal, 1) MDs or DOs who are managing a patient's diabetes would certify that the patient is, in fact, under a comprehensive program of management of the disease; 2) podiatrists/orthopedists or other qualified healthcare providers could determine medical necessity for diabetic therapeutic shoes and inserts, 3) podiatrists/orthopedists or other qualified healthcare providers would prescribe the appropriate therapeutic shoes and inserts; and 4) suppliers would fit, provide, and evaluate fit of the shoes and inserts. The HELLPP Act does not alter the benefit. It does, however, clarify the process in order to avoid the confusion and frustration now surrounding the program. More information about the HELLPP Act is located at ***www.apma.org/savings***.

If you are a supplier of therapeutic shoes and inserts for your patients, you must be clear on the documentation requirements of the therapeutic shoe program. APMA has worked to make those requirements clear for members in the form of guidelines, available at ***www.apma.org/ShoeDocumentation*****,** consisting of a flowchart and set of forms. These were prepared by J. Kevin West of Parsons Behle & Latimer in consultation with members of the DME Workgroup of the APMA Health Policy and Practice Committee, through sponsorship by the Podiatry Insurance Company of America (PICA). Though the APMA cannot guarantee that use of the forms will result in Medicare reimbursement, it is believed that proper usage of the forms, along with good medical record documentation practices, will improve the likelihood of submitting "cleaner" claims while lowering potential financial liability resulting from nonpayment.

In using the documentation guidelines, podiatric physicians need to be mindful of the following:

1. The medical record of the MD/DO who is managing the patient's diabetes must contain evidence of active management of the diabetes, a detailed lower extremity examination that qualifies at least one of the six listed lower extremity conditions for therapeutic shoes and inserts, and that therapeutic shoes/inserts are medically necessary under Medicare rules. The documentation supporting the presence of one or more of the six lower extremity conditions can be either from direct examination of the patient by the certifying MD/DO, or a report (e.g., medical record note) duly obtained from the prescribing podiatrist that provides examination details of the lower extremity condition(s). If the prescribing podiatrist's report/medical record note is the source of lower extremity examination detail used to support medical necessity for therapeutic shoes, its findings must be agreed with (validating the prescribing podiatrist's findings), signed, and dated by the certifying MD/DO prior to entering the report into the patient's medical record.

2. The therapeutic shoe program requires interaction and cooperation between the podiatrist-supplier and the MD or DO managing the patient's diabetes. Because securing the cooperation of the MD/DO, who may either not be aware of the benefit or its requirements, is often challenging, the documentation guidelines are designed to be simple and clear for the certifying MD/DO to follow. In this regard, however, four critical steps must occur:

- The certifying MD/DO must sign off on the prescribing podiatrist's consultation report (which contains the examination findings by the podiatrist);
- The certifying MD/DO must fill out and sign the Statement of Certification required under the therapeutic shoe program;
- The certifying MD/DO must fax or otherwise deliver copies of the completed, signed documents to the podiatrist-supplier; and
- Both the certifying MD/DO and the podiatrist-supplier must keep the above-described documents in their respective records (originals within the MD/DO's medical record for the patient; copies for the podiatrist-supplier's records).

Failure to follow any of these 4 steps may result in denial of payment.

3. Podiatric physicians often act in a dual role under the therapeutic shoe program. The podiatrist is the specialist who examines his/her patient, determines medical necessity for treatment(s) that include therapeutic shoes and inserts, and prescribes or orders the appropriate shoes and/or inserts. In doing so, the prescribing podiatrist typically would be expected to bill for an evaluation and management (E/M) service.

   In addition, the prescribing podiatrist may often function as the supplier of the therapeutic shoes and/or inserts for their own patients. In so doing, the podiatrist "removes" his/her "prescribing hat" and now functions as the podiatrist-supplier. The podiatrist-supplier when all the required documentation is received from the certifying MD/DO may order these devices and bill for the therapeutic shoes and inserts when they are dispensed to the patient. Suppliers, including podiatrist-suppliers, must recognize that they must meet all DMEPOS supplier standards.

4. The therapeutic shoe program does have required time frames that must also be kept in mind. Therapeutic shoes/inserts must be dispensed:

   - Within 3 months of the certification by the MD/DO
   - Within 6 months of the MD/DO's last face-to-face visit with the patient for the management of their diabetes
   - Within 6 months of the examination by the podiatrist showing that the patient meets the qualifying criteria

5. When functioning as the supplier and dispensing shoes/inserts, a separate note must document that the patient was examined while wearing the shoes/inserts and that they fit well. The supplier should be able to demonstrate that they provided the patient with written proof of delivery, a copy of the current supplier standards and complaint protocol. Suppliers are encouraged to maintain business records which provide proof of purchase of shoes, inserts and any DMEPOS.

6. DMEPOS billing and documentation requirements are very exact with failure by the podiatrist-supplier to follow even one requirement may result in denial of payment.

Visit ***www.apma.org/ShoeGuidelines*** to review the documentation guidelines available to APMA members. This resource and other APMA DME resources can be found at ***www.apma.org/DME***.