

Policy References: [Local Coverage Determination Therapeutic Shoes for Persons with Diabetes \(L33369\)](#)

Documentation References: [Standard Documentation Requirements Policy Article \(PA\) A55426](#)

The treating and prescribing clinician(s) must complete the following items:

Certifying Physician: Must be the MD or DO responsible for diagnosing and treating the beneficiary's diabetes.

- In-person visit with the beneficiary during which diabetes management is addressed within 6 months prior to delivery of the shoes/inserts
- Sign a statement on or after the date of the in-person visit and within 3 months prior to delivery of the shoes/inserts, certifying that the beneficiary has diabetes mellitus, has undergone an exam which demonstrates one of conditions below, is being treated by the certifying physician under a comprehensive plan of care for his/her diabetes, and needs diabetic shoes.
 - History of partial or complete amputation of either foot
 - History of previous foot ulceration of either foot
 - History of pre-ulcerative calluses of either foot
 - Peripheral neuropathy with evidence of callus formation of either foot
 - Foot deformity of either foot
 - Poor circulation in either foot

OR

- When another provider completes the in-person foot exam within 6 months prior to the delivery of the shoes/insert, the Certifying Physician must obtain those medical records, and initial and date them to indicate agreement, prior to completing a certification statement.
- Complete a Certification Statement within 3 months prior to beneficiary receiving shoes.

Prescribing Provider:

- [Standard Written Order \(SWO\)](#)
- An in-person visit with the prescribing practitioner within 6 months prior to delivery of shoes/inserts.

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