

Dear Staff,

In order to have my Pedorthist provide me with therapeutic shoes and inserts under Medicare guidelines, they must have a copy of the progress notes related to the physician's treatment of my diabetic condition that justifies the medical necessity for the referral to a Pedorthist for therapeutic shoes and inserts. The copy of the progress notes from my current medical records validates that I am under a comprehensive plan of care for my diabetes for Medicare. The copy of the progress notes must show that I have one or more of the following conditions:

1. Previous amputation of the other foot, or part of either foot (895.0, 895.1, 896.0, 896.1, 896.2, 896.3), or
2. History of previous foot ulceration of either foot (707.14, 707.15), or
3. History of pre-ulcerative calluses of either foot (700), or
4. Peripheral neuropathy with evidence of callus formation of either foot (250.60, 250.62, 250.61, 250.63), or
5. Foot deformity of either foot (736.70), or
6. Poor circulation in either foot (250.70, 250.72, 250.71, 250.73)

Please note that this is in addition to the Statement of Certifying Physician and prescription.

Please fax a copy of the relevant progress note page(s) to:

Company

Fax Number

I would like to pick these up in person.

Please mail a copy to:

Company

Address

City

State

Zip

Thank you,

Patient Name (Print)

Patient Signature

Date

Social Security Number

Date of Birth