Therapeutic Shoes Order Suggested CDEs Draft R1.0a 6/8/2018

Use of the Suggested Clinical Data Elements is Voluntary / Optional

Therapeutic Shoes for Persons with Diabetes Order
Suggested Clinical Data Elements (CDEs)

Version R1.0a (6/8/2018)

Note: If these CDEs are used:
1) CDEs in black Calibri are required
2) CDEs in burnt orange Italics Calibri are required if the condition is met
3) CDEs in blue Times New Roman are recommended but not required

Beneficiary Information CDEs

PBD: Patient/Beneficiary Demographics

- **PBD1**: Patient’s first name, last name, and middle initial (text)
- **PBD2**: Patient’s date of birth (date: MM/DD/YYYY)
- **PBD3**: Patient’s Gender (single selection from the value set: M, F, Other)
- **PBD4**: Patient’s Medicare ID (Medicare ID format and check digit)

Encounter CDEs

PND: Provider/NPP Demographics

- **PND9**: Ordering provider performed the in-person evaluation (single selection from value set: Yes (checked), No)
- **PND1**: Provider or Allowed NPP first name, last name, middle initial, and suffix (text).
- **PND2**: Provider NPI (numeric with check digit)

ENC: Encounter

- **ENC1**: Date of encounter (date: MM/DD/YYYY)

Diagnoses CDEs

TSPDDIAG: Diagnosis for Therapeutic Shoes

- **TSPDDIAG1**: Patient diagnosis: Diabetes Mellitus: ICD-10-CM code (Single selection from the value set in Appendix C)

If other, **TSPDDIAG1a**: Other (text)
Note: If these CDEs are used:
1) CDEs in black Calibri are required
2) CDEs in **burnt orange Italic Calibri** are required if the condition is met
3) CDEs in *blue Times New Roman* are recommended but not required

### Order CDEs

**TSPDORD**: Therapeutic Shoe Order Information (see Appendix A)

- **TSPDORD1**: Start date if different from order date (date: MM/DD/YYYY)
  (repeat as necessary)
- **TSPDORD2**: HCPCS Code (single selection from value set in Appendix A)
- **TSPDORD2a**: Description (text)

### Type of Order CDEs

**TSPDORD**: Therapeutic Shoe Order Type

- **TSPDORD5**: *Type of order (Single selection from value set: Initial order; Revision or change of shoes or inserts, Replacement, Other)*
- **NEBORD5a**: Other (text)

### Provider Signature CDEs

**SIGPNP**: Physician/NPP Signature Elements

- **SIGPNP1**: Physician/NPP Signature (image, electronic, or digital)
- **SIGPNP2**: Physician/NPP Printed Name (text)
- **SIGPNP6**: Date of Order (MM/DD/YYYY)
- **SIGPNP4**: Physician/NPP NPI (NPI format)