

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 Italics 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)