Medicare Part B beneficiaries have access to care by choosing and working with their choice of primary care provider. Current law provides that Diabetes management can be provided by all the primary care providers with the exception of therapeutic footwear, which can be ordered by a nurse practitioner but must be certified by a physician. This creates a fragmentation of care and can lead to increased costs to Medicare.

Statement of Problem: Fragmentation of care be avoided and access for diabetic shoes be provided for all Medicare beneficiaries by allowing Nurse Practitioners (NPs) and Physician Assistants (PAs) to certify diabetic shoes for their patients.

Background: Historically, diabetic footwear was not allowed but this changed with the Therapeutic Shoes for Persons with Diabetes benefit (TSD), which was included in the Omnibus Budget Reconciliation Act of 1987 provided Medicare part B coverage of diabetic footwear beginning May 1, 1993. The Medicare Access and CHIP Reauthorization Act of 2015 was signed by President Obama. This allowed NPs and PAs to perform the face-to-face encounter and documentation to certify need for durable medical equipment (DME) for Medicare and Medicaid beneficiaries. This legislation, however, does not include diabetic footwear as DME, thus the requirement for a physician to certify the need for diabetic footwear remained requiring they become the provider treating the beneficiary’s diabetic condition.

House Bill 1617 (2017) was introduced March 24, 2017 and Senate Bill 3067 was introduced June 14, 2018 that would amend Title XVIII of the Social Security Act and allow NPs and PAs to certify a patient’s need for diabetic footwear under Medicare part B and thus improve access to diabetic therapeutic shoes to Medicare beneficiaries.

Organization’s Interest: Gerontological Advanced Practice Nurses Association’s interest is to promote access and quality of care for the older adult population. Medicare beneficiaries with Diabetes are at high risk for developing foot ulcers. That risk can be decreased with therapeutic footwear. Thus the beneficiary must decide to switch clinicians in order to obtain the footwear or not change increasing their risk for non-healing ulcerations.

Nurse Practitioners who provide the health care management for the beneficiaries, must negotiate with a physician to see their patient for this one chronic issue and then manage the beneficiary’s care for other health care issues. This can lead to fragmentation of care and potentially increased costs for Medicare with multiple providers.

Policy Recommendation: House Bill 1617 and Senate Bill 3067 is currently under consideration in Congress to amend Title XVIII of the Social Security Act. Support this amendment to Title XVIII of the Social Security Act to allow nurse practitioners and physician assistants to certify need for diabetic footwear under Medicare part B.

References