

SHOULD YOU BE BILLING UNDER THE THERAPEUTIC SHOE BILL (Medicare Part B)

You Can't Afford Not To!

How Patients Qualify:

The physician (M.D. or D.O.) who is managing the patient's systemic diabetic condition must certify that:

1. The patient has diabetes mellitus (ICD-9 diagnosis codes 250.00 - 250.91)

2. The patient has one or more of the following conditions:

Previous amputation of the other foot, or part of either foot,

or

History of previous foot ulceration of either foot,

or

History of pre-ulcerative calluses of either foot,

or

Peripheral neuropathy with evidence of callus formation of either foot,

or

Foot deformity of either foot,

or

Poor circulation in either foot; and

3. The physician who is managing the patient's systemic diabetes condition has certified that indications 1 & 2 are met and that he/she is treating the patient under a comprehensive plan of care for his/her diabetes and that the patient needs therapeutic shoes.

The "SHOE" MATH:

YOU NET \$166.43* PER PAIR!	
Reimbursement	\$104.66/Pair Shoes
	+ \$159.27/3 Pair Insoles
	<u>\$263.93</u>
Your Cost	- \$97.50*/Shoe Bill Kit
Your Profit	<u>\$166.43*/Pair Dispensed</u>



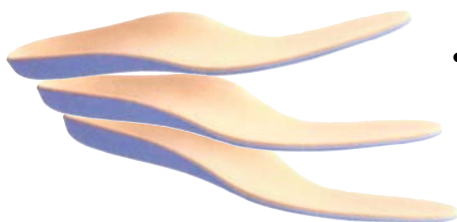
YOUR COST!
From **\$97.50***
Plus Shipping

Advance
orthopedic footwear

Advance Shoe Kit

Includes:

- One Pair Of Advance Shoes
- Three Pair of Diabetic Insoles (Required to file under the Therapeutic Shoe Bill)
- Forms for prescribing and filing with the HCFA for reimbursement.



3 x PT# E5202



Men's Nubuck

Men's Sport White

Advance Shoes Available in:
Men's Brown
Men's Black
Men's Nubuck
Velcro Black
Velcro Sport White

Women's Black
Women's Taupe
Women's Moss Nubuck
Velcro Black
Velcro Bone

*Women's Advance Shoes cost a little less; Men's Velcro cost a little more.

ATLAS
INTERNATIONAL

Distributed By:

(800) 545-6287 • (916) 454-3447

Fax: (916) 457-1330

www.atlasortho.com

8231 Alpine Avenue, Suite 7 • Sacramento • California • 95826