

Podiatry Services

Adjudication Guideline

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1. Abstract

1.1 For Members

Podiatrists are allied health care professionals, whose clinical practice is further governed by the healthcare provider after evaluating their credentials and competencies. They must follow the regulatory and federal laws and clinical practice protocols and guidelines published by national or international professional organizations.

Podiatrists are advanced practice professionals (APP) who are specialized in the treatment of disorders of foot, ankle, and lower extremity.

Common services rendered by Podiatrists include diabetic foot care, treatment of recurring ingrown toenails, and fitting of orthopedic shoes.

Coverage of podiatry services will be based on medical necessity criteria for medical conditions and subject to policy terms and conditions.

Services determined to be cosmetic in nature will not be covered.

1.2 For Medical Professionals

Podiatrists are allied health care professionals, upon evaluating the credentials and competencies by healthcare provider they can practice as advanced practice professional (APP) who are qualified to provide services collaboratively with a supervising physician.

In order, to practice podiatric surgery, a qualified podiatrist should successfully complete an accredited post graduate training or residency in podiatric surgery.

“Standard practices” are part of the routine scope and licencing, while “advance practices” require evidence of training and competency (privileging).

Service restrictions arise from the local regulator’s classification of Podiatrists as “clinical support” or “allied health care,” not as physicians.

2. Scope

This adjudication guideline specifies Daman's coverage of medically necessary inpatient and outpatient podiatry services and subject to coverage of policy terms and conditions administered by Daman, which are defined as services:

1. For the anatomical region of foot, ankle, and low extremity.
- 2a. Ordered and/or performed by UAE-licensed Podiatrists or
- 2b. Performed by UAE-licensed Podiatrists as ordered by a UAE-licensed physician.

The same services (CPTs) performed by other clinician specialties (ex. General surgeon, Dermatologist, etc.) are outside the scope of this guideline.

3. Adjudication Policy

3.1 Eligibility / Coverage Criteria

1. Podiatry services are covered for all plans if medically necessary, not experimental/ investigational, and within the anatomic region of foot, ankle, and lower extremity.
2. Anatomic location of the condition needing Podiatric services should be coded to the highest level of specificity.
3. Authorization is not required for Podiatry services (CPTs). However, HCPCS, such as Orthosis and Orthopedic Shoes are subject to pre-approval.
4. Prescribe only topical antimicrobial medications for wound care, including diabetic ulcer infection under the supervision of collaborative physicians.
5. Prescribe and fit prosthetic appliances and foot and ankle orthotics such as shoe insoles and medical shoes for foot pathologies and deformities including lower limb length discrepancies, to improve foot function and reduce pain, evaluating the suitability of these appliances to the pathological condition.
6. Mobilize and manipulate joints through non-invasive interventions such as padding, taping, foot, and ankle orthoses.
7. Prescribe compression stockings after lower limb vascular assessment in consultation with other physicians.
8. The following services are considered as advanced practices which require evidence of training and competency:
 - a. Order and interpret x-rays and other medical imaging.

- b. Order and interpret microbiological investigations.
 - c. Order and interpret histopathology investigations.
 - d. Order and interpret blood investigations.
 - e. Use Doppler ultrasound and perform ankle brachial / toe pressure testing and transcutaneous oxygen measurements.
 - f. Employ diagnostic modalities to investigate specific pathologic processes, confirm the diagnosis, and establish the extent of a disease process.
9. Conduct diagnostic tests such as postural and gait analysis to ensure appropriate use of orthosis and footwear.
10. Podiatrists can perform the following activities:
- a. Diagnose foot deformities including congenital and acquired conditions involving structural abnormalities or muscular imbalances that affect foot and leg function.
 - b. Diagnose foot injuries including sports injuries such as ankle sprains, tendonitis, foot traumas using conservative methods such as taping, ankle bracing and foot and ankle orthoses.
 - c. Work with multidisciplinary team to diagnose and manage Charcot foot deformity, Diabetic foot ulcers of ischemic and neuropathic origins and identify risk factors that may affect healing.
 - d. Diagnose different skin conditions including dermatitis, fungal infection, bacterial infection, and viral skin infection and skin pathologies such as corns and callous, fissures, blisters, disorders of the nails including nail deformities, nail fungal infection, trauma, and ingrown toenails.
 - e. Diagnose peripheral arterial disease of the lower limbs and refer to vascular disease physician.
 - f. Diagnose, stage, and monitor pressure injuries of the foot and ankle, working with wound care teams to aid healing and prevent further occurrence.
11. Podiatrists following case assessment and diagnosis can:
- a. Refer patients with podiatry related conditions to a physician for further investigations, and management.
 - b. Refer patients with observed non-podiatry related conditions for the care of a physician.

- c. Refer patients that require surgical intervention of the foot and ankle to the appropriate surgical section.

Requirements for Coverage

ICD and CPT codes must be coded to the highest level of specificity.

Failure to document additional systemic conditions to justify "Routine Foot Care" services may result in rejection of the claim.

3.2 Non-Coverage

Daman does not consider "Routine Foot Care" services (such as routine cutting of nails or paring of corns/callosities) in the absence of documented systemic disease being actively managed by a physician as medically necessary.

The services under advanced practices without evidence of training and competency.

Computerized dynamic post urography and Comprehensive computer-based motion analysis by videotaping and 3D kinematics; with dynamic plantar pressure measurements during walking are not covered as they are still considered investigational.

Services performed by Podiatrists at the following locations will not be covered:

- Hand
- Knee and above-knee
- Unspecified locations

3.3 Payment and Coding Rules

4. Denial Codes

Code	Code Description
MNEC-003	Service is not clinically indicated based on good clinician practise.
MNEC-004	Service is not clinically indicated based on good clinician practise, without additional supporting diagnosis /activities.
MNEC-005	Service / supply may be appropriate, but too frequent.
CODE-010	Activity/diagnosis inconsistent with clinician speciality.

5. Appendices

5.1 References

- <https://www.doh.gov.ae/-/media/235C6FA88C2C480B90DB5E1913B5A68E.ashx>
- <https://www.aapc.com/blog/37661-long-lasting-tips-for-superior-nail-coding/>
- [https://coder.aapc.com/cpt assistant/cpt assistant details/1095](https://coder.aapc.com/cpt%20assistant/cpt%20assistant%20details/1095)
- [https://coder.aapc.com/cpt assistant/cpt assistant details/415](https://coder.aapc.com/cpt%20assistant/cpt%20assistant%20details/415)
- <https://www.msmanuals.com/professional/dermatologic-disorders/nail-disorders/nail-deformities-and-dystrophies>
- <https://www.aafp.org/afp/2009/0215/p303.html>
- <https://emedicine.medscape.com/article/80811-overview>
- <https://emedicine.medscape.com/article/1126725-treatment#d10>
- <https://emedicine.medscape.com/article/83116-overview>
- [https://www.uptodate.com/contents/nail-biopsy-indications-and-techniques?search=nail%20avulsion&topicRef=16202&source=see link](https://www.uptodate.com/contents/nail-biopsy-indications-and-techniques?search=nail%20avulsion&topicRef=16202&source=see_link)
- [https://www.uptodate.com/contents/nail-avulsion-and-chemical-matricectomy?search=nail%20avulsion&source=search result&selectedTitle=1~150&usage type=default&display rank=1](https://www.uptodate.com/contents/nail-avulsion-and-chemical-matricectomy?search=nail%20avulsion&source=search_result&selectedTitle=1~150&usage_type=default&display_rank=1)
- <https://www.apma.org/Patients/content.cfm?ItemNumber=992&navItemNumber=24198>
- <https://cop.org.uk/>
- <https://www.aapsm.org/eight-test.html>
- <https://dermnetnz.org/topics/nail-disorders>
- [HAAD Claims & Adjudications Rules V2012](#)
- <https://rcpod.org.uk/>
- <https://www.albertapodiatry.com>
- [https://www.acfas.org/ACFAS/media/ACFAS Media/Credentialing-and-Surgical-Privileges- 2020.pdf](https://www.acfas.org/ACFAS/media/ACFAS_Media/Credentialing-and-Surgical-Privileges-2020.pdf)

5.2 Revision History

Date	Change(s)
30/05/2019	Release of V1.0 Creation of Adjudication Guideline-External Instruction Template.
25/12/2024	Release of V2.0 Content and Reference update
30/03/2025	Release of V2.1 General Content update
22/09/2025	Release of V2.2 Content Review and reference update

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