



Routine Foot Care Payment Policy

Line of Business: McLaren Health Plan Medicaid HMO, McLaren Medicare Advantage, McLaren Health Plan Community, McLaren Health Advantage

Effective Date: 10/1/2025

This policy applies to Routine Foot Care services. If there is a conflict between this policy and applicable federal or state laws, regulations or regulatory requirements, the applicable laws or regulations will control. Further, if there is a conflict between this policy and a provider contract, the provider contract will govern. Note – coverage may be mandated by MDHSS or CMS.

Providers are required to submit accurate claims and documentation for all services performed.

Providers must submit claims using valid code combinations required by applicable law. Claims should be coded appropriately according to industry standard coding guidelines. All claims are subject to claim edits and may be subject to further reviews by McLaren or contracted third parties. Providers are expected to promptly work with McLaren and any third parties to provide any requested information related to a claim submission.

Description and Definitions

Routine foot care is covered by McLaren Health Plan when these services are provided by a physician or podiatrist and when the member manifests signs and symptoms from a specific systemic disease of sufficient severity that treatment by a nonprofessional would be hazardous. The medical necessity for these services must be documented in the member's medical record, and the member must be receiving regular care from a physician for the systemic disease. Services that are normally considered routine and not covered include the following:

- The cutting or removal of corns and calluses;
- The trimming, cutting, clipping, or debriding of nails; and
- Other hygienic and preventive maintenance care, such as cleaning and soaking the feet, the use of skin creams to maintain skin tone of either ambulatory or bedfast patients, and any other service performed in the absence of localized illness, injury, or symptoms involving the foot.

The list of procedure codes for routine foot care are listed in Attachment A. The list of applicable diagnosis for routine foot care coverage is listed in Attachment B.

Reimbursement Policy

McLaren reimburses routine foot care services for McLaren Health Plan members as outlined in this payment policy. These routine foot care services are to be reimbursed not more than every 60 days when medically necessary.

Audit

McLaren or a third party may audit or otherwise review all paid claims to ensure the integrity of the paid claims. This includes, but is not limited to coding validation, payment accuracy, compliance with regulations, policies, and contractual requirements. These reviews include clinical claim reviews and payment analytics.

Source: MDHHS Provider Manual, CMS Local Coverage Determination

Attachment A –Routine Foot Care Procedure Codes

Procedure Code	Description
11055	Paring or cutting of benign hyperkeratotic lesion (e.g., corn or callus); single lesion
11056	Paring or cutting of benign hyperkeratotic lesion (e.g., corn or callus); 2 to 4 lesions
11057	Paring or cutting of benign hyperkeratotic lesion (e.g., corn or callus); more than 4 lesions
11719	Trimming of nondystrophic nails, any number
11720	Debridement of nail(s) by any method(s); 1 to 5
11721	Debridement of nail(s) by any method(s); 6 or more
G0127	Trimming of dystrophic nails, any number

Attachment B - Covered Diagnosis for Routine Foot Care

Diagnosis Code	Description
A30.0, A30.1, A30.2, A30.3, A30.4, A30.5, A30.8, A30.9	Leprosy [Hansen's disease]
A52.10, A52.11, A52.12, A52.13, A52.14, A52.15, A52.16, A52.17, A52.19, A52.2, A52.3	Late syphilis
B35.1	Tinea unguium
D51.0, E08.00 - E13.9, E46, E52, E56.9, E64.0, E75.21, E75.22, E75.240, E75.241, E75.242, E75.243, E75.244, E75.248, E75.249, E75.27, E75.28, E75.3, E77.0, E77.1, E77.8, E77.9, K90.0, K90.1	Malnutrition or metabolism/vitamin deficiencies
E85.0, E85.1, E85.2, E85.3, E85.4, E85.81, E85.82, E85.89, E85.9	Amyloidosis
G13.0, G13.1, G35, G60.0, G60.1, G60.2, G60.3, G60.8, G60.9, G61.1, G62.0, G62.1, G62.2, G62.82, G63, G65.0, G65.1, G65.2	Atrophies and Neuropathies
I70.201, I70.202, I70.203, I70.208, I70.209, I70.211, I70.212, I70.213, I70.218, I70.219, I70.221, I70.222, I70.223, I70.228, I70.229, I70.231, I70.232, I70.233, I70.234, I70.235, I70.238, I70.239, I70.241, I70.242, I70.243, I70.244, I70.245, I70.248, I70.249, I70.25, I70.261, I70.262, I70.263, I70.268, I70.269, I70.291, I70.292, I70.293, I70.298, I70.299, I70.301, I70.302, I70.303, I70.311, I70.312, I70.313, I70.321, I70.322, I70.323, I70.331, I70.332, I70.333, I70.334, I70.335, I70.338, I70.339, I70.341, I70.342, I70.343, I70.344, I70.345, I70.348, I70.361, I70.362, I70.363, I70.391, I70.392, I70.393, I70.401, I70.402, I70.403, I70.411, I70.412, I70.413, I70.421, I70.422, I70.423, I70.431, I70.432, I70.433, I70.434, I70.435, I70.438, I70.439, I70.441, I70.442, I70.443, I70.444, I70.445, I70.448, I70.449, I70.461, I70.462, I70.463, I70.491, I70.492, I70.493, I70.501, I70.502, I70.503, I70.511, I70.512, I70.513, I70.521, I70.522, I70.523, I70.531, I70.532, I70.533, I70.534, I70.535, I70.538, I70.539, I70.541, I70.542, I70.543, I70.544, I70.545, I70.548, I70.549, I70.561, I70.562, I70.563, I70.591, I70.592, I70.593, I70.601, I70.602, I70.603, I70.611, I70.612, I70.613, I70.621, I70.622, I70.623, I70.631, I70.632, I70.633, I70.634, I70.635, I70.638, I70.639, I70.641, I70.642, I70.643, I70.644, I70.645, I70.648, I70.649, I70.661, I70.662, I70.663, I70.691, I70.692, I70.693, I70.701, I70.702, I70.703, I70.711, I70.712, I70.713, I70.721, I70.722, I70.723, I70.731, I70.732, I70.733, I70.734, I70.735, I70.738, I70.739, I70.741, I70.742, I70.743, I70.744,	Atherosclerosis

I70.745, I70.748, I70.749, I70.761, I70.762, I70.763, I70.791, I70.792, I70.793, I70.8, I70.90, I70.91, I70.92	
Diagnosis Code	Description
I73.00, I73.01, I73.1, I73.9, I79.0, I79.8, I80.01, I80.02, I80.03, I80.11, I80.12, I80.13, I80.201, I80.202, I80.203, I80.211, I80.212, I80.213, I80.221, I80.222, I80.223, I80.231, I80.232, I80.233, I80.241, I80.242, I80.243, I80.251, I80.252, I80.253, I80.291, I80.292, I80.293, I80.3	Other peripheral vascular diseases
I87.001–I87.003, I87.009, I87.011–I87.013, I87.019, I87.021–I87.023, I87.029, I87.031–I87.033, I87.039, I87.091–I87.093, I87.099, I87.1, I87.2, I87.301–I87.303, I87.309, I87.311–I87.313, I87.319, I87.321–I87.323, I87.329, I87.331–I87.333, I87.339, I87.391–I87.393, I87.399	Post-phlebitis syndrome
L84	Corns and callosities
M21.611, M21.612, M21.619, M21.621, M21.622, M21.629	Bunions and bunionettes
M34.83	Systemic sclerosis [scleroderma]
N18.1, N18.2, N18.30, N18.31, N18.32, N18.4, N18.5, N18.6, N18.9	Chronic kidney disease (CKD)
S86.001A, S86.002A, S86.091A, S86.092A, S86.101A, S86.102A, S86.191A, S86.192A, S86.201A, S86.202A, S86.291A, S86.292A, S86.301A, S86.302A, S86.391A, S86.392A, S86.801A, S86.802A, S86.891A, S86.892A, S86.901A, S86.902A, S86.991A, S86.992A, S89.81XA, S89.82XA, S89.91XA, S89.92XA, S96.001A, S96.002A, S96.091A, S96.092A, S96.101A, S96.102A, S96.191A, S96.192A, S96.201A, S96.202A, S96.291A, S96.292A, S96.801A, S96.802A, S96.891A, S96.892A, S96.901A, S96.902A, S96.991A, S96.992A, S99.811A, S99.812A, S99.821A, S99.822A, S99.911A, S99.912A, S99.921A, S99.922A	Lower Leg Injury