



Understanding the Medicare Diabetes Prevention Program (MDPP)

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NATIONAL ASSOCIATION OF
CHRONIC DISEASE DIRECTORS

Promoting Health. Preventing Disease.

Objectives

- Develop an understanding of the key components and timeline for the most recent **Medicare Diabetes Prevention Program (MDPP)** rule as stated in the CMS 2017 Medicare Physician Fee Schedule published 11/2/16
- Gain clarity on the steps organizations can take now to prepare to be an MDPP Supplier



Background and Timeline

2010

- Affordable Care Act (ACA)
 - ❖ Section 1115A(c)

2012

- Center for Medicare and Medicaid Innovation (CMMI)
 - ❖ Healthcare Innovation Award (HCIA) to the Y-USA

2016

- March 2016 – Secretary of Health and Human Services announcement and Office of the Actuary certification
- July 2016 – MDPP Proposal (comment period)
- November 2016 – Physician Fee Schedule – MDPP Final Rule (**first round**)

2017

- Spring/Summer 2017 – MDPP Final Rule (**second round**)
- Spring/Summer 2017 – New CDC DPRP Standards (comment period)

2018

- January 1, 2018 – MDPP reimbursement begins
- By January 1, 2018 – New CDC DPRP Standards begin (3 years)



Key Components from the MDPP Final Rule (first round):

- Framework for expansion
- Details of the MDPP benefit
- Beneficiary eligibility criteria
 - Limitations on coverage
 - Referral policies
- MDPP Supplier eligibility criteria and enrollment policies



Framework for Expansion

- The National DPP will become a covered benefit under Medicare Part B beginning January 1, 2018
 - Part A – inpatient
 - Part B – outpatient
 - Approximately 70% of Medicare beneficiaries
 - Part C – Medicare Advantage program
 - Part A and Part B benefits, and typically Part D benefits
 - Approximately 30% of Medicare beneficiaries
 - Part D – outpatient prescription drugs



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Details of MDPP Benefit:

- **Core benefit** is 12 consecutive months
 - **Core sessions** = at least 16 weekly core sessions over months 1 – 6
 - **Core maintenance sessions** = at least six monthly core maintenance sessions over months 6 – 12. **Offered regardless of weight loss**
- CDC-approved core curriculum
- Session duration requirement – approximately one hour



Details of MDPP Benefit:



Core benefit = 12 months



Details of MDPP Benefit:

- **Ongoing maintenance sessions** are offered **monthly** after the core benefit IF participants achieve and maintain the required minimum weight loss of five percent (5%)
 - **“Maintenance of weight loss”** – achieving the required minimum weight loss (5%) from baseline weight at any point during each 3 months of core maintenance or ongoing maintenance sessions
 - **“Maintenance session bundle”** – each 3-month interval of core maintenance or ongoing maintenance sessions



Payment Model in July 2016 Proposal:

Service Provided	Payment
Core Sessions	
1 session attended	\$25
4 sessions attended	+ \$50
9 sessions attended	+\$100
5 percent weight loss from baseline	+\$160
9 percent weight loss from baseline	+ \$25
Maximum Total for Core sessions in Year 1	<u>\$360</u>
Maintenance Sessions (Maximum of 6 monthly sessions over 6 months in Year 1)	
3 Maintenance sessions attended with maintenance of 5 percent weight loss	\$45
6 Maintenance sessions attended with maintenance of 5 percent weight loss	+ \$45
Maximum Total for Maintenance sessions in Year 1	<u>\$90</u>
Maximum Total for Year 1	<u>\$450</u>
Maintenance Sessions After Year 1 (minimum of 3 sessions attended per quarter with no maximum)	
3 Maintenance sessions plus maintenance of 5 percent weight loss	\$45
6 Maintenance sessions attended plus maintenance of 5 percent weight loss	+ \$45
9 Maintenance sessions plus maintenance of 5 percent weight loss	+ \$45
12 Maintenance sessions attended plus maintenance of 5 percent weight loss	+ \$45
Maximum Annual Total After Year 1	<u>\$180</u>

Core

On-going

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Beneficiary Eligibility Criteria:

- Enrolled in Medicare Part B
- BMI of at least 25 or at least 23 if self-identified as Asian
- Have, within the 12 months prior to attending the first core session:
 - HgbA1c test with a value between 5.7 and 6.4 or
 - Fasting plasma glucose of 110 – 125 mg/dL or
 - 2-hour post-glucose challenge of 140-199 mg/dL
- No previous diagnosis of type 1 or type 2 with the exception of gestational diabetes (GDM)
- Do not have end-stage renal disease (ESRD)
- No previous receipt of MDPP services



Limitations on Coverage:

- Beneficiaries who meet the eligibility criteria would only be able to receive MDPP services once in their lifetime



Referral Policy:

- Self-referral
- Community-referral
- Health care practitioner-referral (which includes non-physician practitioner referrals)



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Who Can Enroll as an MDPP Supplier?

- An organization with preliminary or full recognition from the CDC's Diabetes Prevention Recognition Program (DPRP)
 - **What is preliminary recognition?**
 - Anticipate that CDC will address standards for preliminary recognition in **new DPRP Standards** to begin in 2018.
 - CMS will propose an interim definition in **final rulemaking (round 2)**.
- Existing Medicare suppliers would have to enroll separately as MDPP suppliers



What are the Enrollment Policies for an MDPP Supplier?

- Enrollment regulations set forth in [42 CFR part 424, subpart P](#)
 - Time limits for filing claims
 - Requirements to report and return overpayments
 - Procedures for suspending, offsetting or recouping Medicare payments in certain situations
- Screening regulations set forth in [424.518\(c\)](#) for “High Categorical Risk”
- Obtain an [National Provider Identifier \(NPI\)](#)



What is “High Categorical Risk” Screening for Suppliers?

- Screening regulations set forth in [424.518\(c\)](#) for “High Categorical Risk”
 - Site visit by CMS
 - Fingerprints required from anyone who has 5% or more ownership interest in the organization
 - Background checks



What about Lifestyle Coaches or “Coaches?”

- Coaches need to obtain an [NPI](#)
 - National DPP organizations will need to submit a **roster** of coach **NPIs, names and SSNs** to CMS upon applying for enrollment as an MDPP supplier
- Coaches cannot apply to be an MDPP supplier on their own
 - Just like the CDC DPRP’s definition of recognized programs, MDPP suppliers are at the organizational level
- Any individual can become a Coach



MDPP Suppliers – IT and Infrastructure Needed to Comply with Medicare

- **Submit** claims using standard forms/procedures
- **Attest** to participant session attendance/weight loss at time of claims submission
- **Track** payments and resolve discrepancies between claims submitted and data entered in medical records
- **Comply** with statutes and regulations for Medicare suppliers (e.g. submit claims within time limits; report and return overpayments)
 - [42 CFR part 424, subpart P](#)



MDPP Suppliers – IT and Infrastructure Needed to Comply with Medicare

- **Maintain detailed records** of services provided within a medical record
- **Retain** participant medical records for seven years and provide access to CMS upon request
- **Maintain a crosswalk** between identified beneficiary data submitted to CMS and identified beneficiary data submitted to CDC's DPRP
- Handle protected participant data in **compliance with HIPAA** and other standards



What Can Your Organization Be Doing Now?

- Understand [enrollment regulations](#)
- Understand [High Categorical Risk](#) screening
- Understand the application process to enroll in Medicare - [PECOS](#)
- Download free software to submit claims – [PC-ACE Pro32](#)
- Review process for obtaining an [NPI](#)
- Continue to work toward obtaining full-recognition from the CDC's DPRP
- Work with provider groups to encourage Medicare beneficiary referrals with blood-based values
- Watch for the **new DPRP Standards** and **the next final rule (round 2)** to come out in Spring/Summer 2017



Spring/Summer 2017 – Final Rule (second round):

- Virtual
- Interim definition of “preliminary recognition”
- Payment structure
 - Duration limit for ongoing maintenance sessions
 - Attribution of beneficiaries in the program
- Coach roster – how info will be used during enrollment and monitoring
- Program integrity policies

CMS intends for organizations to be able to apply to enroll as MDPP suppliers at the conclusion of the next round of rulemaking.



For more information:

- Visit the CMS website and sign up to receive updates :
<https://innovation.cms.gov/initiatives/medicare-diabetesprevention-program/>
- Visit the AADE DPP Network to look for workshops, trainings and webinars that review and prepare your program for successful and sustainable DPP implementation
<http://www.diabeteseducator.org/dpp>



Questions?

Thank you

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