

KNOWLEDGE • RESOURCES • TRAINING

Medicare Diabetes Prevention Program Expanded Model



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What's Changed?

- Participating patients can virtually self-report weight for distance learning sessions until December 31, 2027 (pages 4–5)
- Suppliers must have or maintain CDC's Diabetes Prevention Recognition Program codes for either "in-person" or the new "in-person with a distance learning component" (page 4)
- Suppliers must add modifier 76 to any claim for G9886 or G9887 to indicate a make-up session was held on the same day as a regularly scheduled session (pages 4–5)
- Starting in 2025, we removed the bridge payment (page 8)

Substantive content changes are in dark red.





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The Medicare Diabetes Prevention Program (MDPP) expanded model is a structured behavior change intervention that aims to prevent type 2 diabetes in Medicare patients with an indication of prediabetes. The primary goal of the MDPP expanded model is to help patients achieve at least 5% weight loss, which is associated with reducing type 2 diabetes in people at high risk for it. MDPP has been shown to reduce the diabetes incidence by 71% in people age 60 or older.

Together we can advance health equity and help eliminate health disparities for all minority and underserved groups. Find resources and more from the CMS Office of Minority Health:

- Health Equity Technical Assistance Program
- **Disparities Impact Statement**

Diabetes Prevention Programs: Equity Tailored Resources has more information.

CMS and CDC have distinct but complementary roles in running this program. We pay Medicare-enrolled MDPP suppliers to offer a CDC-approved, group-based, classroom-style curriculum that teaches:

- Long-term dietary change
- Increased physical activity
- Behavioral change strategies for weight control and diabetes risk







Coaches (like trained community health professionals) provide these services on behalf of MDPP suppliers.

Diabetes Prevalence

Half of adults age 65 or older have prediabetes. the condition that may lead to type 2 diabetes,



1 in 4 adults over 65 currently have diabetes, and that's expected to double by 2050



but only **1 in 7** know it



2.3x People with diabetes spend 2.3 times more money on health care each year than those without the disease

\$104 billion

Medicare spends an estimated \$104 billion each year on patients over 65 with diabetes



Adults with diabetes have more emergency department visits, are hospitalized more often, and take more prescription drugs

MDPP Services

A patient's MDPP set of services may last up to 1 year and include 22 sessions:



16 in-person or distance learning weekly sessions during months 1–6, at least 1 week apart



1 in-person or distance learning session each month during months 7–12, at least 1 month apart

MDPP sessions are about 1 hour and follow a <u>CDC-approved curriculum</u>. You can develop your own curriculum if it includes all CDC-required elements and CDC approves it.

During the <u>extended flexibilities period</u> (2024–2027), MDPP suppliers may provide sessions in person or virtually; they:

- May allow patients to self-report weight for distance learning sessions until December 31, 2027, by doing 1 of these:
 - Using online video technology, like chatting or video conferencing, where the MDPP coach sees the patient weighing themselves and views the weight shown on the at-home digital scale.
 - Sending 2 date-stamped photos: 1 with their weight on the digital scale and 1 of the patient visible in their home. Patients may send 1 date-stamped photo if they're able to capture themselves and their weight on the digital scale. Patients may send a video recording with them and their weight visible on the scale.
 - Using digital technology, like a digital scale to transmit their weight measurements securely through wireless or cellular transmission.

Note: While we don't cover digital scales and other items or services that advance MDPP goals (like food-measuring devices, wearable activity tracking devices, discounted gym memberships), suppliers may offer them as optional beneficiary engagement incentives.

- Must have or maintain CDC's Diabetes Prevention Recognition Program (DPRP) codes for either "in-person" or the new "in-person with a distance learning component."
 - In-person with a distance learning component means MDPP sessions that are delivered in person by trained coaches where participants have the option of attending sessions through MDPP distance learning
 - Distance learning sessions must be provided in a manner consistent with DPRP Standards for in-person and distance learning sessions, and all virtual sessions must be delivered in real-time
- May offer either distance learning or in-person make-up sessions for patients who miss a regularly scheduled session.
- Must add modifier 76 to any claim for G9886 or G9887, to indicate a make-up session was held
 on the same day as a regularly scheduled MDPP session.

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The 2024 CDC DPRP Standards include these MDPP session delivery modes:

- In-person
- Distance learning (live)
- In-person with a distance learning component
- Online (non-live), which isn't covered by Medicare
- Combination with an online component, which isn't covered by Medicare

Patient Eligibility

Patients don't need a referral to get MDPP services and can get them if they meet all these criteria:

- Are enrolled in Medicare Part B (or a Medicare Advantage (Part C) Plan)
- Have a body mass index (BMI) of at least 25 (23 if the patient self-identifies as Asian) at their first session





- Meet 1 of these 3 blood test requirements within 12 months before attending their first session:
 - A hemoglobin A1C test with a value from 5.7%–6.4%
 - Normal A1C = below 5.7%



- Prediabetes A1C = 5.7%-6.4%
- Diabetes A1C = 6.5% or above
- A fasting plasma glucose test of 110–125 mg/dL
- A 2-hour plasma glucose test (oral glucose tolerance test) of 140–199 mg/dL
- Have no previous diabetes diagnosis before the date of their first session (except gestational diabetes)
- Doesn't have ESRD
- Hasn't previously received MDPP services

Optimal 5.7%

Elevated 5.7%-6.4% Prediabetes



☐ High 6.5%

We cover an A1C blood test when a

patient gets a diabetes screening.

Patients who meet these criteria can participate in MDPP sessions for up to 1 year, regardless of attendance or weight loss. They can get the full set of MDPP services only once in their lifetime.

MDPP is a Medicare preventive service, and there's no patient cost sharing.

Patients can switch MDPP suppliers at any time during their MDPP set of services. Once a patient attends their first session, the MDPP set of services period starts, and they meet the once-per-lifetime limit.



MDPP suppliers should <u>check eligibility</u> to see if the patient qualifies for MDPP services before their first session. They can also check if a patient's previous supplier billed MDPP sessions, the supplier's NPI, and the dates of service.

If a patient develops diabetes during an MDPP services period, they can continue participating in the MDPP set of services.

MDPP Suppliers

Hospitals, community organizations, churches, clinics, and other kinds of organizations can become MDPP suppliers. Only organizations, not people, can become MDPP suppliers.

MDPP suppliers must have an NPI. See the Medicare Enrollment section below for information on getting an NPI.

CDC Recognition

Before enrolling in Medicare as an MDPP supplier, organizations must first meet recognition status requirements and then apply with CDC DPRP. Organizations must meet the DPRP's most current standards and operating procedures, which are updated every 3 years.

To enroll in Medicare, you must get preliminary, full, or full-plus recognition. Organizations must submit evaluation data to CDC every 6 months, regardless of recognition status. To check an organization's recognition status, visit CDC's Registry of All Recognized Organizations.

Medicare Enrollment

Learn about the Medicare enrollment process by reviewing the Medicare Provider Enrollment educational tool and the checklist for a provider or supplier organization using PECOS. Be sure to include:

- Coach names, SSNs, NPIs, and start dates
- Recognition status, with effective and expiration dates (this includes that they've achieved preliminary, full, or full-plus in-person modality recognition)
- Organizational code

Enroll in Medicare as an MDPP supplier by applying via <u>PECOS</u> or the paper application.

Organizations that want to provide MDPP services must enroll as an MDPP supplier, even if they're already enrolled in Medicare as another type of provider. There's no provider enrollment application fee for all organizations enrolling in Medicare as MDPP suppliers.

Your Medicare Administrative Contractor (MAC) will process your enrollment application within 90 days and will notify you if it needs fingerprints or any additional documents.



Supplier Standards

In their Medicare enrollment application, an MDPP supplier must certify that they meet and will continue to meet the supplier standards, including:

- Maintaining at least 1 administrative location to meet in-person recognition to deliver MDPP services through distance learning requirements
- Maintaining a primary business phone number that's available to the public
- Reporting changes of ownership, changes to coach rosters, and any final adverse legal actions within 30 calendar days, and reporting all other changes within 90 calendar days

Want to get involved in MDPP services, but don't have all the necessary resources? Consider partnering with an existing MDPP supplier to be their community location, or with an organization that can track data, reporting, or billing for MDPP services.

Coaches

Trained coaches conduct MDPP sessions and must meet all <u>eligibility requirements</u> and get <u>training</u> consistent with CDC's requirements. Coaches, including both clinical and non-clinical professionals, can be MDPP supplier employees, contractors, or volunteers.

We screen each person on the coach roster included with the supplier's Medicare enrollment application. MDPP suppliers may conduct background checks on coaches before and after enrolling in Medicare.

Coaches must have an NPI but can't bill Medicare directly. Instead, they're listed on claims as the rendering provider.

Payment

Medicare-enrolled MDPP suppliers must accept the Medicare-allowed amount as payment in full for their services, regardless of the MDPP supplier's participation status in the Medicare Program.

MDPP services have a payment structure that allows for Fee-for-Service (FFS) payments for patient attendance while offering performance-based payments for diabetes risk reduction (weight loss):

 Attendance payments: We make FFS payments to an MDPP supplier if a patient attends a session. We pay for up to 22 sessions billed with codes G9886 and G9887, combined, in a 12-month period.



Performance payments: We'll make 1 or more types of performance payments to an MDPP supplier after the patient:



- Achieves the required 5% weight loss (one-time payment)
- Maintains the 5% weight loss goal during a session in months 7–12 (one payment per month)
- Achieves 9% weight loss (one-time payment)



Coding & Billing

Use the HCPCS codes below to bill for MDPP expanded model services:

HCPCS Codes & Billing Descriptors

Code	Descriptor	2025* PFS Payment
G9886	Behavioral counseling for diabetes prevention, in-person, group, 60 minutes	\$26
G9887	Behavioral counseling for diabetes prevention, distance learning, 60 minutes	\$26
G9880	5% weight loss (WL) achieved from baseline weight	\$149
G9881	9% WL achieved from baseline weight	\$26
G9888**	Maintenance 5% WL from baseline weight in months 7–12	\$8
Subtotal maximum attendance-based payment		\$572
Total possible maximum payment		\$795

^{*}For dates of service starting January 1, 2025, we removed the bridge payment. You may still bill G9890 if the patient changed suppliers on or before December 31, 2024.

When submitting claims for MDPP services, don't include codes for other non-MDPP services.

Submit claims with this information:

- Patient information and MBI
- ICD-10 diagnosis code
- Demo code 82
- Place of service code (use "other" (99) for distance learning sessions)
- MDPP service details (dates of service, etc.)
- HCPCS code
- Coach's NPI
- MDPP supplier's NPI

If you're an MDPP supplier, you can submit claims yourself or through a third-party billing agent. List all codes associated with a performance payment on the same claim and submit claims when a patient meets a performance goal. If you have claims submission or billing questions, find your MAC's website.



^{**}Submit a claim for G9880 before submitting a claim for G9888.

Crosswalk File

MDPP suppliers must maintain and submit an MDPP crosswalk file that lists patient identifiers used for claims with those used for CDC performance data submissions for each patient getting MDPP services from the supplier. Submit this crosswalk file 6 months after you start providing MDPP services and then quarterly thereafter.

Medicare Advantage

Medicare Advantage (MA) Plans must offer MDPP as a preventive service and may offer supplemental MDPP benefits (for example, extended coverage length). MA Plans must contract with Medicare-enrolled MDPP suppliers to provide MDPP services to their enrollees and cover out-of-network services, or the MA Plan itself may enroll in Medicare as an MDPP supplier.

MDPP suppliers must check with the MA Plan for information on eligibility, coverage, and payment. Each plan can have different patient out-of-pocket costs and specific rules for getting and billing for services. MDPP suppliers must follow the plan's terms and conditions for payment.

Documentation Requirements

Organizations must comply with documentation requirements to maintain MDPP Medicare enrollment.

At the first MDPP session, suppliers must record:

- MDPP supplier name, CDC DPRP number, and NPI
- Patient information, including, but not limited to, patient name, MBI, and age
- Evidence each patient meets eligibility requirements

At each additional MDPP session, suppliers must record:

- Session type (regularly scheduled or make-up)
- Coach's NPI
- Session date and place
- Curriculum topic
- Each patient's weight (including date it was recorded)

Note: MDPP suppliers must keep all books, contracts, weight records, and related documents for 10 years. The retention period starts from the last day the patient got MDPP services or the date of completion of any audit, evaluation, inspection, or investigation, whichever is later. <u>Exceptions apply</u>.



CMS & CDC Roles

CMS and CDC share responsibility for the MDPP, and each plays an important role in its success.



CMS implements and evaluates the MDPP expanded model. In this role, we:



Define the MDPP set of services and the Medicare-covered MDPP services period



Provide resources to support successful supplier enrollment and claims submissions



Review and process Medicare enrollment applications of organizations with CDC preliminary, full, or full-plus recognition



Provide resources to verify certain elements of patient eligibility for MDPP



Process claims submitted by MDPP suppliers for payment



Monitor MDPP suppliers' compliance with Medicare requirements, including the MDPP supplier standards



CDC oversees and ensures MDPP quality. In this role, they:



Develop and maintain CDC DPRP Standards



Evaluate organizations for achievement and maintenance of recognition status



Maintain a national registry of recognized organizations



Provide resources to support organizations in achieving and maintaining CDC recognition



Review and approve alternative curriculum submitted by organizations seeking recognition



Update curriculum as needed based on current evidence

Resources

- CY 2024 Medicare Physician Fee Schedule Final Rule: MDPP
- CY 2025 Medicare Physician Fee Schedule Final Rule: MDPP
- MDPP FAQs
- MDPP Supplier Support Center
- National Diabetes Prevention Program Customer Service Center
- Notice of Waiver of Certain Fraud and Abuse Laws in Connection with the MDPP Expanded Model
- Provider Information on Medicare Diabetes Self-Management Training

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