



# Medicare Diabetes Prevention Program (MDPP) Expanded Model

## *MDPP 101 Orientation Webinar*

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*Centers for Medicare and Medicaid Services (CMS)*

*December 13, 2017*

# Disclaimer

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# Acronyms

Below is a list of acronyms frequently used throughout this presentation.

Acronym	Description
CMS	Centers for Medicare and Medicaid Services
CMMI	Center for Medicare and Medicaid Innovation
MDPP	Medicare Diabetes Prevention Program
CDC	Centers for Disease Control and Prevention
CDC DPRP	Centers for Disease Control and Prevention Diabetes Prevention Recognition Program
National DPP	National Diabetes Prevention Program
PFS	Physician Fee Schedule
NPI	National Provider Identifier
TIN	Tax Identification Number
MACs	Medicare Administrative Contractors
NPPES	National Plan and Provider Enumeration System
PECOS	Provider Enrollment Chain and Ownership System

# Terminology

The table below defines terminology specific to MDPP services.

Term	Description
MDPP Set of Services	Structured health behavior change sessions aimed at lowering the risk of type 2 diabetes by engaging eligible beneficiaries to promote weight loss through healthy eating and physical activity
MDPP Beneficiary	Eligible Part B Medicare beneficiary engaged in MDPP services
MDPP Supplier	An organization with DPP recognition that has enrolled in Medicare as an MDPP supplier to furnish MDPP services to eligible beneficiaries and bill Medicare for these services
MDPP Coach	Employees, contractors, or volunteers who provide MDPP sessions on behalf of an MDPP supplier to MDPP beneficiaries
Supplier Support Needs	Specific needs that MDPP suppliers have as they enroll and furnish MDPP services to eligible beneficiaries
Supplier Support Product	Materials and resources developed to meet the specific support needs of MDPP suppliers
Supplier Support Package	Complementary set of supplier support products developed to meet supplier support needs in different phases of the expanded model

# Objectives

The primary objectives for today's webinar are outlined below.

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1. Provide an overview of Medicare and MDPP
2. Enhance knowledge and understanding of the following MDPP supplier support needs
  - Orientation
  - Enrollment
  - Delivery
  - Billing and claims
  - Sustainability
3. Highlight the benefits of enrolling as an MDPP supplier
4. Discuss additional resources and address questions related to MDPP services.

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# Medicare Overview

Medicare is health insurance for three groups of people.

- 65 and older
- Under 65 with certain disabilities
  - ALS (Amyotrophic Lateral Sclerosis, also called Lou Gehrig's disease) without waiting period
- Any age with End-Stage Renal Disease

## Agencies Responsible for Medicare

**They Handle Enrollment, Premiums, and Replacement Medicare Cards**



**Social Security Administration (SSA)**  
enrolls most people in Medicare



**Railroad Retirement Board (RRB)**  
enrolls railroad retirees in Medicare



**Centers for Medicare & Medicaid Services (CMS)**  
administers the Medicare Program

# MDPP Overview

The MDPP is a preventive service to respond to high rates of type 2 diabetes among older Americans.

## Problem

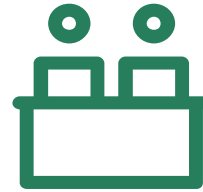


**25% of Americans 65 years and older are living with type 2 diabetes**, which negatively impacts health outcomes



Diabetes care for older Americans (65+ years) costs Medicare **\$104 billion annually, and is growing**

## MDPP Services



**Health behavior change sessions promoting weight loss** through healthy eating and physical activity

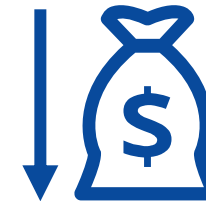


**Up to 2 years of in-person sessions**, dependent on eligible beneficiary weight loss and attendance

## Impact



**Promotes healthier behaviors** for eligible Medicare beneficiaries at risk for type 2 diabetes












**Decreases Medicare costs** associated with diabetes



# Medicare Overview

Medicare has four parts, but only organizations in Part B and Part C are eligible to be MDPP suppliers.

Original Medicare	Medicare Advantage Part C	Medicare Prescription Drug Coverage
 <p><b>Part A</b> Hospital Insurance</p>	 <p><b>Part B</b> Medical Insurance</p>	 <p><b>Part A</b> Hospital Insurance</p>  <p><b>Part B</b> Medical Insurance</p>  <p><b>Part D</b> Medicare prescription drug coverage</p>
<b>Beneficiary Eligibility for MDPP</b>		
 <p>These beneficiaries are not eligible for MDPP</p>	 <p>These beneficiaries are eligible for MDPP</p>	 <p>*These beneficiaries are eligible for MDPP if their specific MA plan has contracted with an MDPP enrolled supplier</p>
 <p>These beneficiaries are not eligible for MDPP</p>		

Source: <https://www.cms.gov/Outreach-and-Education/Training/CMSNationalTrainingProgram/Medicare-Modules/Understanding-Medicare-Medicare-101.html>

# Medicare Overview

From the suppliers' perspective, there are different MDPP requirements for Part B and Part C.

## Coverage

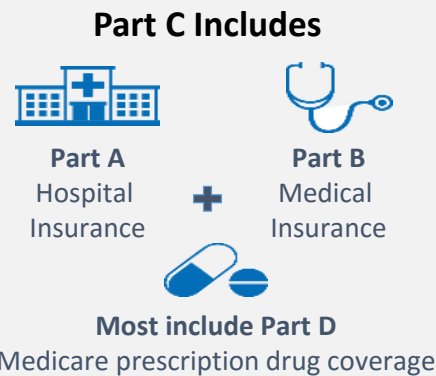
## Action for Prospective MDPP Suppliers

### Part B Medical Insurance

- Part B—Medical Insurance** helps cover medically necessary
- ✓ Preventive services (like MDPP, flu shots and a yearly wellness visit)
  - ✓ Doctors' services
  - ✓ Outpatient medical and surgical services and supplies
  - ✓ Clinical lab tests
  - ✓ Durable medical equipment (may need to use certain suppliers)
  - ✓ Diabetic testing supplies
  - ✓ Home health care

- Part B—Medical Insurance** requires MDPP suppliers to enroll into Medicare
- ✓ Enables MDPP suppliers to submit claims for payment
  - ✓ Helps to ensure that all suppliers are appropriately screened prior to serving Medicare beneficiaries

### Part C Medicare Advantage



- ✓ Medicare Advantage is sometimes called Part C—includes both Part A, Part B, and usually Part D
- ✓ Private insurance companies approved by Medicare provide your Medicare coverage
- ✓ In most MA Plans, you need to use plan doctors, hospitals, and other providers or you pay more or all of the costs (networks)

- Part C—Medical Insurance** requires suppliers to have contracts with Medicare Advantage Plans
- ✓ MA must contract with Medicare-enrolled suppliers
  - ✓ MA plans pay suppliers directly

# Knowledge Check

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**Which parts of Medicare cover MDPP?**

- Part A
- Part B
- Part C
- Both Part B and Part C

**Participate in the poll using the pop-up window.**

# Objectives

Our primary objectives for today's webinar are outlined below.

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1. Provide an overview of Medicare and MDPP

**2. Enhance knowledge and understanding of MDPP supplier support needs**

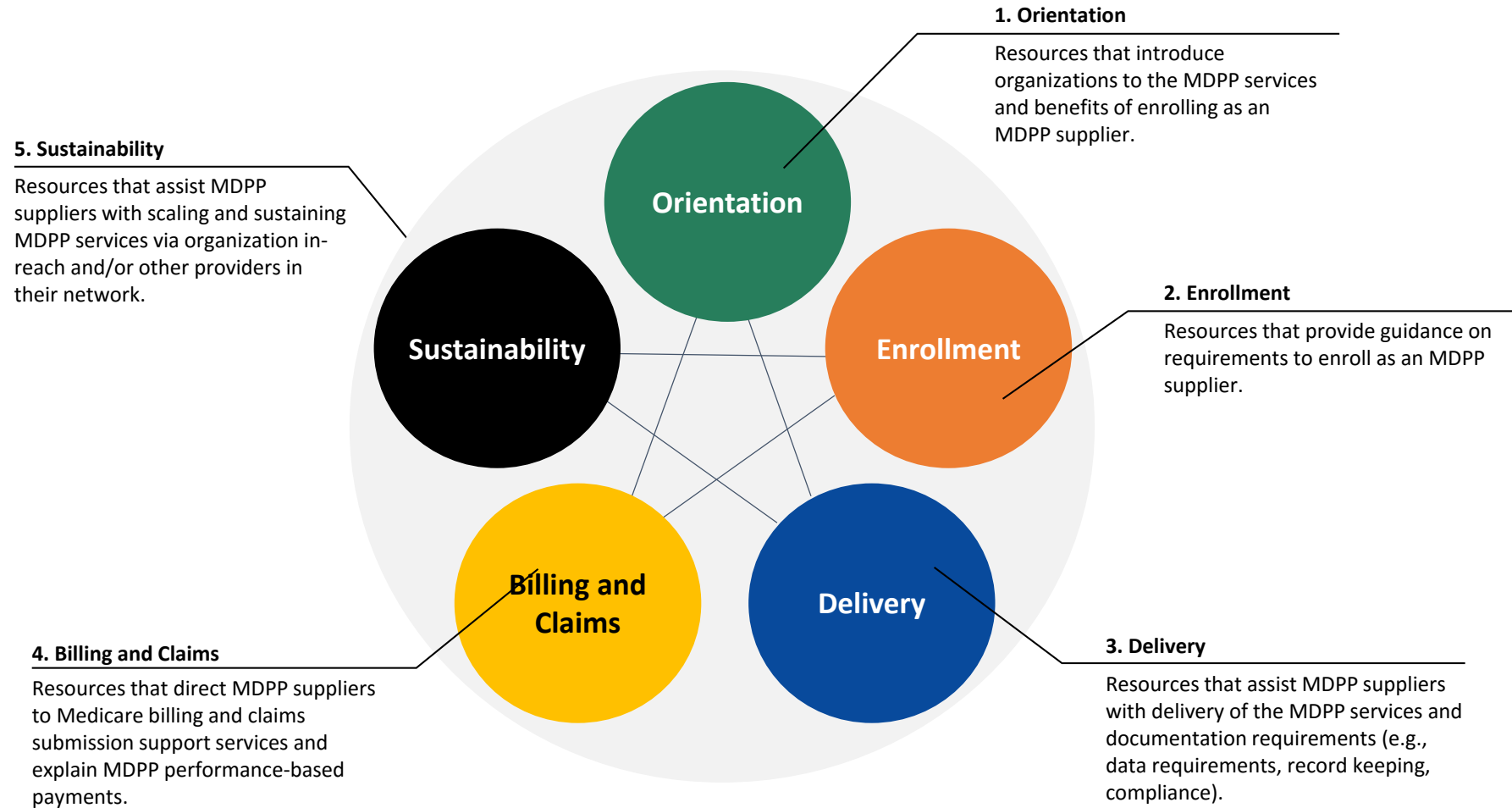
- **Orientation**
- **Enrollment**
- **Delivery**
- **Billing and claims**
- **Sustainability**

3. Highlight the benefits of enrolling as an MDPP supplier

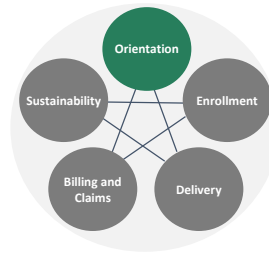
4. Discuss additional resources and address questions related to MDPP services.

# MDPP Supplier Support

MDPP suppliers will be able to access helpful tools and resources to meet their specific needs.



# Orientation



**CMS and CDC each have unique roles and responsibilities with respect to the MDPP services.**

## CMS

Interested MDPP suppliers should reach out to CMS for information and support related to:

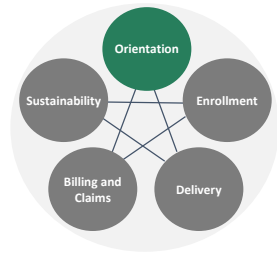
- MDPP supplier standards and compliance
- Achieving and maintaining enrollment as an MDPP supplier
- MDPP coach eligibility
- MDPP beneficiary eligibility
- Delivery of MDPP services
- Documentation and record keeping requirements
- Billing and claims process
- Performance-based payments

## CDC

Interested MDPP suppliers should reach out to CDC for information and support related to the:

- CDC DPRP Standards and Operating Procedures
- CDC recognition requirements
- CDC data collection and submission requirements
- CDC curricula requirements
- Effective delivery of the National DPP

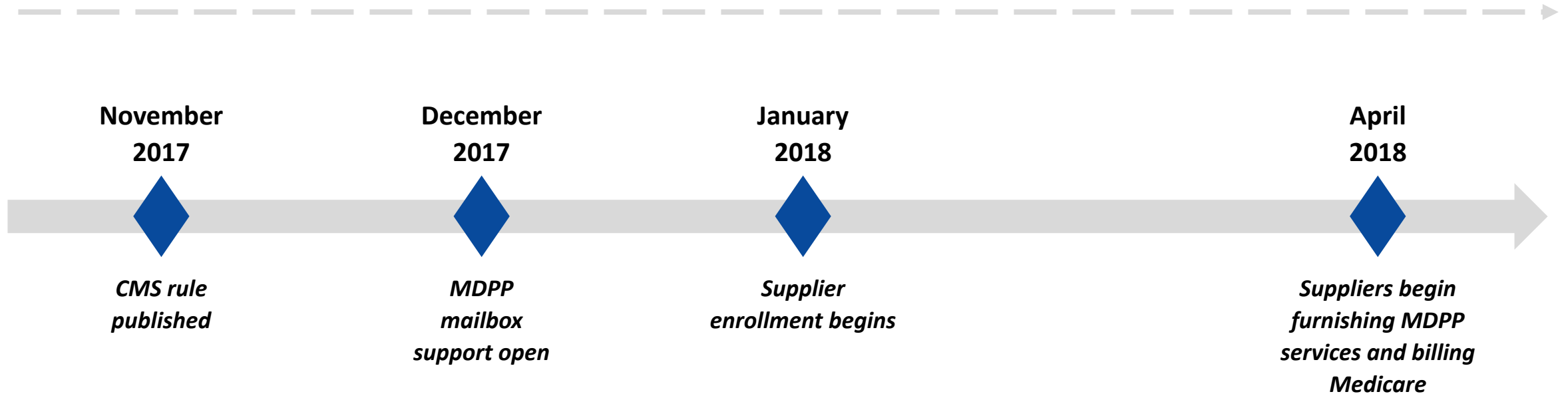
# Orientation (cont.)



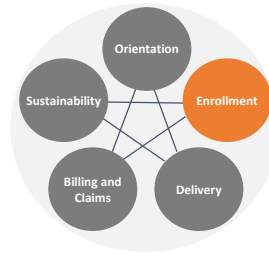
Key upcoming dates related to the MDPP expanded model are highlighted below.

## Interested MDPP Suppliers:

*Organizations interested in becoming MDPP suppliers can begin obtaining National Provider Identifiers (NPIs)*



# Enrollment



**MDPP suppliers must adhere to the following requirements to maintain enrollment.**

**MDPP suppliers must meet one of the following recognition requirements:**

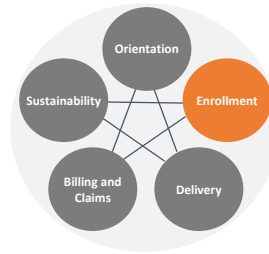
- ✓ **MDPP Preliminary Recognition:** *MDPP Preliminary Recognition includes Interim Preliminary Recognition from CMS and Preliminary DPRP Recognition from CDC once the 2018 CDC DPRP Standards are in effect*
- ✓ **Full CDC DPRP Recognition:** *More information on the CDC DPRP Standards can be found via the following link:*  
<https://www.cdc.gov/diabetes/prevention/lifestyle-program/requirements.html>

**To maintain enrollment, MDPP suppliers must:**

Meet and maintain recognition requirements	Have an active or valid TIN and NPI	Pass screening at high categorical risk
Obtain and provide information on MDPP coaches	Meet Medicare Provider requirements	Follow the MDPP Supplier Standards and Compliance

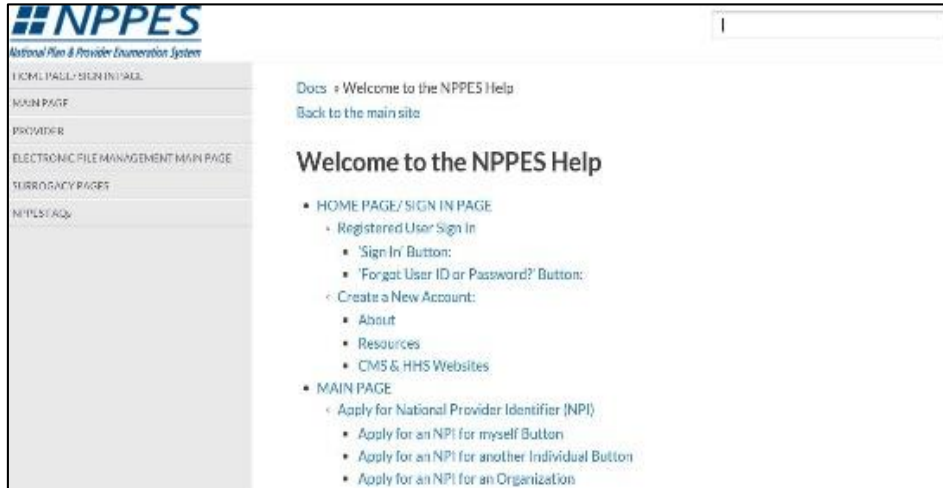


# Enrollment (cont.)



The following steps must be completed to enroll as an MDPP supplier.

## 1. Obtain an NPI

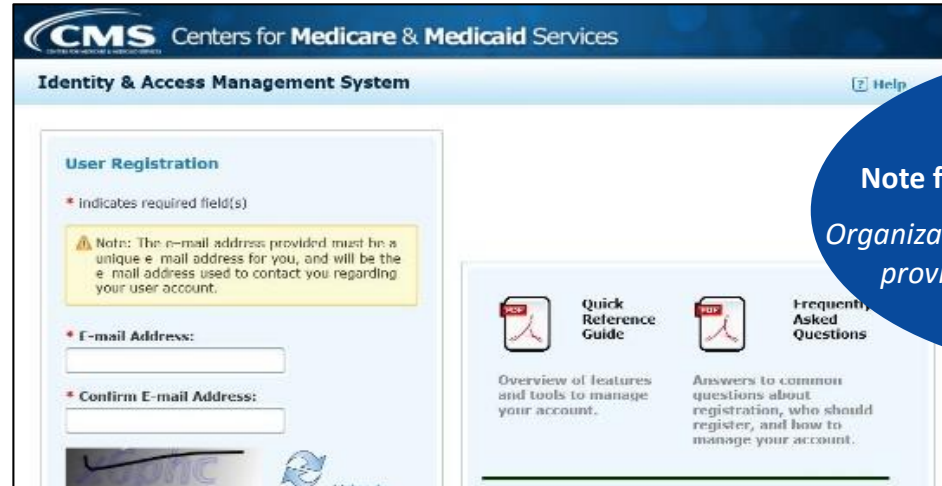



An NPI can be obtained using the National Plan and Provider Enumeration System (NPPES).

**Find additional information on NPPES:**

<https://nppes.cms.hhs.gov/webhelp/index.html>

## 2. Choose an enrollment option (online or paper)



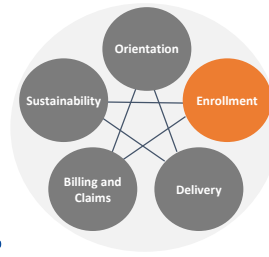
  
**Note for Current Medicare Providers:**  
*Organizations already enrolled as Medicare providers must re-enroll to become MDPP suppliers.*

Organizations can enroll online using the Provider Enrollment Chain and Ownership System (PECOS) or submit a paper CMS-20134 form. If an organization chooses to enroll online, they must create an Identity and Access (I&A) account if they do not already have one. An I&A account connects MDPP suppliers to important CMS systems and gives others access to enrollment information.

**To register for an I&A account, go to:**

<https://nppes.cms.hhs.gov/IAWeb/register/startRegistration.do>

# Enrollment (cont.)



PECOS is an internet-based system that can expedite the enrollment process for MDPP suppliers.

## 3. Learn about the online enrollment process through PECOS

PECOS is an internet-based system used to submit enrollment applications, change existing enrollment information, and conduct related processes.

Learn more about PECOS:

<https://pecos.cms.hhs.gov/pecos/login.do>

Use the PECOS provided checklists to understand the information that is required of all Medicare applicants.

To learn more about the basic information needed for enrollment through PECOS visit: <https://pecos.cms.hhs.gov/pecos/help-main/prvdrsplrchecklist.jsp>

# Knowledge Check

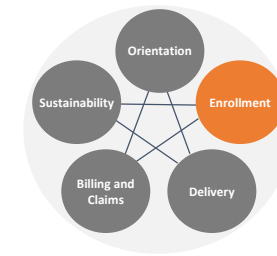
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## What is PECOS?

- An internet-based system used to submit the MDPP enrollment application
- A system used to gain an NPI
- A paper form used for MDPP enrollment

**Participate in the poll using the pop-up window.**

# Enrollment (cont.)



The following steps are strongly encouraged to prepare to enroll as an MDPP supplier.

## 4. Discover Medicare Administrative Contractors (MACs)

## 5. Access available resources and Help Desks

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Learn about your health care options

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Home > Medicare > Medicare Administrative Contractors > What is a MAC

Medicare Administrative Contractors

What's New

What is a MAC

Who are the MACs

MAC Performance Compliance

MAC Performance Evaluations

MACRA Section 628

Provider Assignment

Resources for MACs

Archives

Contact Us

### What is a MAC

On this page:

- What is a MAC and what do they do?
- A/C MACs
- Home Health and Hospice Areas (HHHA)
- DME MACs
- Relationships between MACs and Functional Contractors

#### What is a MAC and what do they do?

A Medicare Administrative Contractor (MAC) is a private health care insurer that has been awarded a geographic jurisdiction to process Medicare Part A and Part B (AMB) medical claims or Durable Medical Equipment (DME) claims for Medicare Fee-For-Service (FFS) beneficiaries. CMS relies on a network of MACs to serve as the primary operational contact between the Medicare FFS program and the health care providers enrolled in the program. MACs are multi-

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Innovation Center Home > Innovation Models > Medicare Diabetes Prevention Program (MDPP) Expanded Model

## Medicare Diabetes Prevention Program (MDPP) Expanded Model

Share

To sign up for updates about this program, please subscribe to the Medicare Diabetes Prevention Program listserv.

### Background

Diabetes affects more than 25 percent of Americans aged 65 or older, and its prevalence is projected to increase approximately two-fold for all U.S. adults (ages 18-79) by 2030 if current trends continue. We estimate that Medicare spent \$42 billion more in the single year of 2016 on beneficiaries with diabetes than it would have spent if those beneficiaries did not have diabetes; per-beneficiary, Medicare spent an estimated \$1,500 more on Part D prescription drugs, \$3,100 more for

### Model Summary

**Stage:** Announced  
**Number of Participants:** N/A  
**Category:** Initiatives to Speed the Adoption of Best Practices  
**Authority:** Section 1115A of the Social Security Act

### Milestones & Updates

Aug 01, 2017

MACs are the contractors that process Medicare enrollment information and claims.

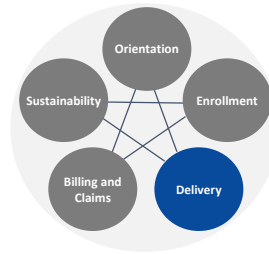
Find additional information on MACs:

<https://www.cms.gov/Medicare/Medicare-Contracting/Medicare-Administrative-Contractors/What-is-a-MAC.html>

Additional resources are available on the MDPP website.

Visit the MDPP website: <http://go.cms.gov/mdpp>

# Delivery



MDPP sessions are offered over a two year period and delivered by MDPP coaches.



Months 0-6  
Core Sessions

- A minimum of 16 sessions offered at least a week apart during the first 6 months
- Available to eligible beneficiaries regardless of weight loss and attendance
- A CDC-approved curriculum is used to guide sessions
- In-person and virtual make-up sessions are available and must meet specific requirements



Months 7-12  
Core Maintenance Sessions

- A minimum of 6 monthly sessions during the second 6 months of core sessions
- Available to eligible beneficiaries regardless of weight loss and attendance
- A CDC-approved curriculum is used to guide sessions
- In-person and virtual make-up sessions are available and must meet specific requirements



Months 13-24  
Ongoing Maintenance Sessions\*

- Monthly maintenance sessions for an additional 12 months
- Available to eligible beneficiaries who achieve and maintain weight loss and attendance goals
- Eligible beneficiaries have coverage for 3 month intervals of monthly maintenance sessions for up to 1 year
- A CDC-approved curriculum is used to guide sessions
- In-person and virtual make-up sessions are available and must meet specific requirements

\* The ongoing maintenance sessions are unique to the MDPP services and are not included in the National DPP.

# Knowledge Check

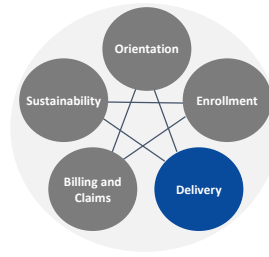
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**What do beneficiaries need to meet to be eligible for ongoing maintenance sessions?**

- Weight loss goals
- Attendance goals
- All of the above

**Participate in the poll using the pop-up window.**

# Delivery (cont.)



**MDPP suppliers must keep records, collect and submit data, and adhere to certain standards.**



## **MDPP Locations**

**MDPP suppliers must maintain compliance with specific administrative standards and location requirements.**

Examples of these standards include:

- *Administrative location(s)*
- *Community setting(s)*
- *Appropriate signage onsite*
- *Working telephone onsite*



## **Record Keeping**

**MDPP suppliers are required to keep and maintain records when furnishing MDPP services.**

Examples of records MDPP suppliers must keep and submit include:

- *Beneficiary Personally Identifiable Information (PII) and Protected Health Information (PHI)*
- *Documentation of MDPP session type, coach information, date and place of service, and beneficiary information*

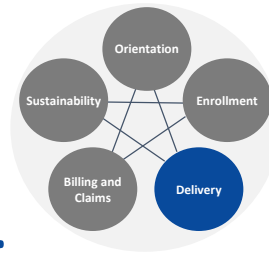


## **Data Collection and Submission**

**MDPP suppliers must submit a crosswalk of MDPP beneficiaries receiving MDPP services.** The data collected for submission include:

- *Crosswalk of how CDC participant identifiers correspond to Health Insurance Claim Numbers (HICNs) or Medicare Beneficiary Identifiers*

# Delivery (cont.)



Specific criteria determine Medicare beneficiary eligibility throughout the MDPP services period.



## **Beneficiary Eligibility Requirements**

MDPP suppliers may only furnish the MDPP services to eligible beneficiaries.

Medicare beneficiaries are eligible for MDPP services if they meet the following criteria:

- *Enrolled in Medicare Part B or Part C*
- *Body Mass Index (BMI) of at least 25 (23 if self-identified as Asian) on the date of the first core session*
- *Meet **1** of 3 blood test requirements within the 12 months prior to attending the first core session:*
  1. *A hemoglobin A1c test with a value between 5.7% and 6.4%, or*
  2. *A fasting plasma glucose of 110-125 mg/dL, or*
  3. *A 2-hour plasma glucose of 140-199 mg/dL (oral glucose tolerance test)*
- *No previous diagnosis of diabetes prior to the date of the first core session (with exception of gestational diabetes)*
- *Do not have end-stage renal disease (ESRD)*
- *Has not previously received MDPP services*



# Knowledge Check

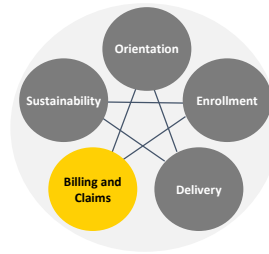
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**If a beneficiary has a BMI of 24, and meets all other eligibility criteria, will the beneficiary be eligible for MDPP services?**

- Yes
- No
- No, unless the beneficiary is Asian

**Participate in the poll using the pop-up window.**

# Billing and Claims



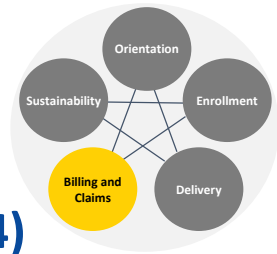
Step 1 in paying Medicare Part B suppliers: Service furnished and claim submitted (step 1/4)

Beneficiary receives a service (e.g., MDPP session)

↓

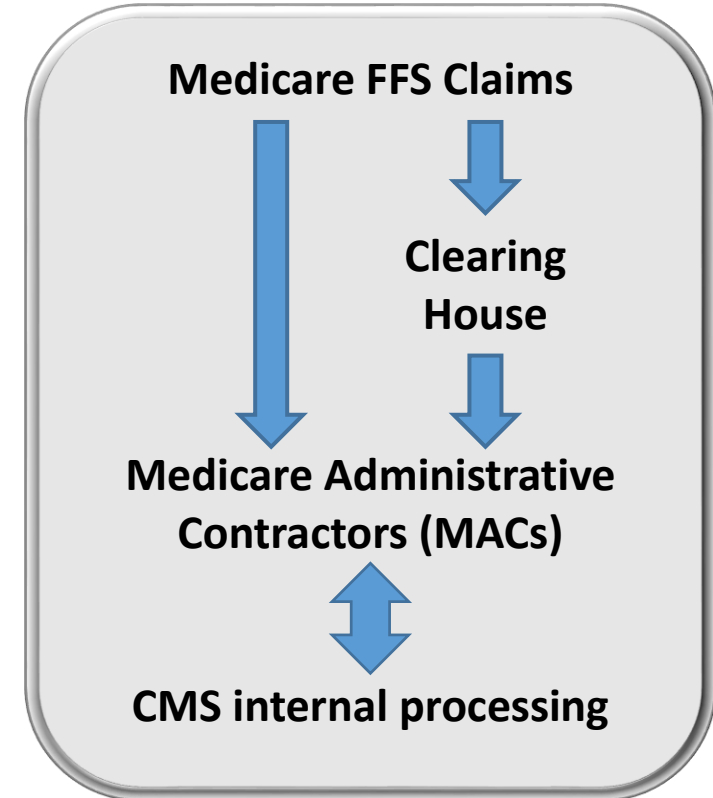
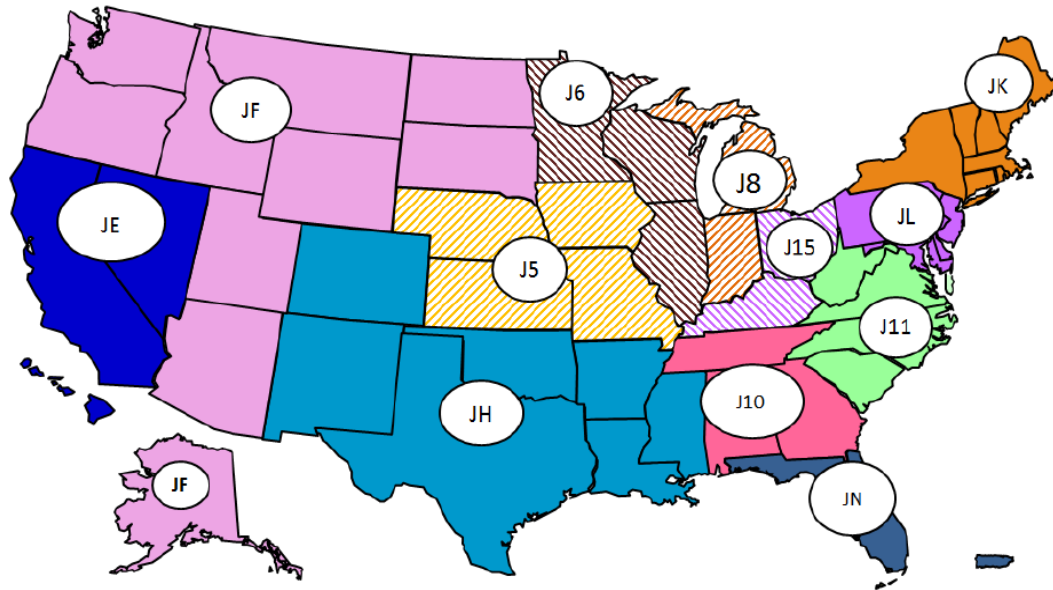
Service provider submits claim

# Billing and Claims (cont.)

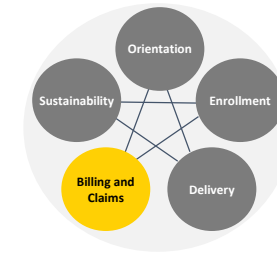


Step 2 in paying Medicare Part B suppliers: Claim submitted and processed by the MACs (step 2/4)

Consolidated A/B MAC Jurisdictions



# Billing and Claims (cont.)



## Step 3 in paying Medicare Part B suppliers: Receipt of payment (step 4/4)



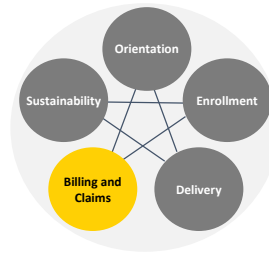
**MACs**



**Providers/Suppliers & Beneficiaries**

- Providers/Suppliers receive payment and remittance
- Beneficiaries receive MSN

# Billing and Claims (cont.)



Performance-based payments are based on beneficiary attendance and weight loss (WL).



## Medicare Payments

Medicare payments are made to MDPP suppliers based on specific requirements.

The following requirements must be met for MDPP suppliers to receive payments:

- *Beneficiary is eligible*
- *Supplier meets all program and Medicare requirements*
- *Sessions are furnished by an eligible coach*
- *Weight loss measurements are taken in-person at an MDPP session*
- *Beneficiary meets attendance and/or weight loss goal(s), or the supplier is eligible for a bridge payment at most 3 times during the ongoing services period*



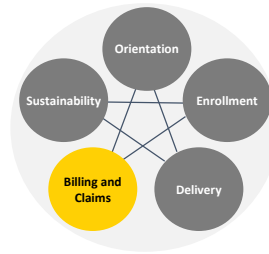
## Performance-based Payments

Performance-based payments are given based on specific requirements.

Below, are the requirements for MDPP suppliers to receive payments based on the session type:

- **Core sessions:** *Payment is based on attendance goals only*
- **Core maintenance sessions:** *Payment is based on attendance of 2 sessions and achievement of 5% weight loss during each interval*
  - *Achievement of 5% WL provides a higher payment, but payment for only meeting attendance goals is still possible*
- **Ongoing maintenance sessions:** *Payment is based on attendance of 2 sessions and achievement of 5% weight loss for each interval*
  - *No payments are made based on only meeting attendance goals*
  - *Beneficiaries lose eligibility if they do not maintain 5% weight loss during these sessions*

# Billing and Claims (cont.)



Performance-based payments are given based on beneficiary attendance and weight loss (WL).

MDPP Core Services			Ongoing Maintenance Sessions (12 months, 4 intervals)			
Core Sessions (6 months)	Core Maintenance Sessions (6 months, 2 intervals)					
(Months 0 – 6)	Interval 1 (Months 7-9)	Interval 2 (Months 10-12)	Interval 1 (Months 13-15)	Interval 2 (Months 16-18)	Interval 3 (Months 19 – 21)	Interval 4 (Months 22-24)
1 session: \$25 4 sessions: \$50 9 sessions: \$90	2 sessions (with WL requirement): \$60	2 sessions (with WL requirement): \$60	2 sessions: \$50	2 sessions: \$50	2 sessions: \$50	2 sessions: \$50
<b>Requirement:</b> Core session payments are made with or without the 5% WL requirement	2 sessions (without WL requirement): \$15	2 sessions (without WL requirement): \$15	<b>Requirement:</b> 5% WL requirement must be achieved for payment during ongoing maintenance sessions			
<b>5% weight loss achieved: \$160; 9% weight loss achieved: \$25</b>			<b>9% weight loss achieved: \$25</b>			

**Notes to MDPP suppliers:** The WL requirement for payment is 5% WL from the first core session; A \$25 bridge payment is available to MDPP suppliers when the MDPP supplier furnishes a core sessions to a beneficiary who has previously received MDPP services from another MDPP supplier

## Payment per Eligible Beneficiary

**Minimum** payment per eligible beneficiary\*: \$195    **Maximum** payment per eligible beneficiary: \$670

*\*Assumes the eligible beneficiary completes one year of MDPP but does not achieve 5% WL*

# Knowledge Check

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**What is the percentage weight loss requirement for a beneficiary to be eligible for ongoing maintenance sessions?**

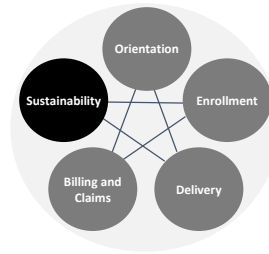
3%

4%

5%

**Participate in the poll using the pop-up window.**

# Sustainability



MDPP suppliers can leverage tools and resources to scale and sustain MDPP services.



- Once MDPP suppliers are successfully enrolled, delivering services to eligible beneficiaries, and effectively billing Medicare and submitting claims, they will have a variety of tools and resources available to help sustain their services.
- These tools and resources will help MDPP suppliers apply leading practices to help sustain and expand MDPP services.



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4. Discuss additional resources and address questions related to MDPP services.

# MDPP Supplier Benefits

Beyond improving outcomes in your local community, there are direct benefits for MDPP suppliers.



**Reduce the risk** of type 2 diabetes among community members aged 65 years and older



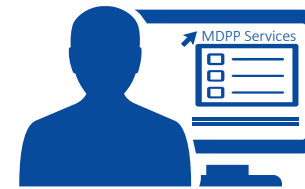
Recognized by Medicare as a **health care provider**



Enhance your **community impact** at the local level by promoting healthier behavior



Receive **performance-based payments** for effectively delivering MDPP services



Access to **fact sheets, videos, webinars, and other helpful resources** to deliver MDPP services

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  - Billing and claims
  - Sustainability
3. Highlight the benefits of enrolling as an MDPP supplier
- 4. Discuss additional resources and address questions related to MDPP services.**

# Additional Resources and Information

There are many existing resources available to support MDPP suppliers.

## About MDPP

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- [Previous MLN webinars](#)
- [MDPP website](#)
- [CDC DPRP standards](#)

## Medicare Enrollment / NPIs

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- Enrollment: [PECOS](#)
- NPIs: [NPPES](#)
- [MAC jurisdictions](#)
- [CMS Medicare website](#)

## Billing / Claims

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- [MAC jurisdictions](#)

If you cannot find what you are looking for:



mdpp@cms.hhs.gov

# Question and Answer Session

There will now be an opportunity for a live question and answer session.

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***Please unmute your phone to ask a question. The call operator will provide additional guidance.***

***If you have additional questions that are not addressed by this webinar today, please submit them to [mdpp@cms.hhs.gov](mailto:mdpp@cms.hhs.gov).***

***Contact the CDC's help desk for CDC recognition and curriculum related questions: [dprpask@cdc.gov](mailto:dprpask@cdc.gov).***

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# Evaluate Your Experience

Please share your thoughts to help us improve by evaluating today's webinar.

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