Medicare Diabetes Prevention Program Model Expansion Overview of Final Rule in CY 2017 Medicare Physician Fee Schedule

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Agenda

• Context
• Overview of finalized Medicare Diabetes Prevention Program Model Expansion (MDPP) policies
• Preparing your organization for enrollment into Medicare as MDPP suppliers
• Questions and answers
25% of Americans 65 or older have type 2 diabetes

Health care costs are $104 billion annually, and growing.

Health Care Innovation Award (HCIA) to the Young Men’s Christian Association (YMCA) of the USA (Y-USA)

7,800 beneficiaries

Results
- 83% ≥4
- Avg Weight loss of 9 lbs

CMS Authority to Expand Model
Rulemaking Process

✓ CMS proposed the MDPP expansion in the CY 2017 Medicare Physician Fee Schedule

✓ Public comments accepted from July 15, 2016 through September 6, 2016

✓ Received approximately 700 timely comments

✓ Final rule published November 2, 2016

✓ Future rulemaking to establish remaining MDPP policies
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Medicare Diabetes Prevention Program Core Benefit Description

- CDC-approved DPP curriculum
- 12 month Core Benefit
  - Additional Preventive Service
  - Monthly maintenance sessions
  - Second 6 months
- Maintenance Sessions
  - After 1st YEAR: monthly maintenance sessions IF patient achieves & maintains minimum weight loss

• Minimum of 16 core sessions
• First 6 months
Beneficiary Eligibility (Proposed and Final)

• Enrolled in Medicare Part B
• BMI of at least 25 (at least 23 if self-identified as Asian)
• Present 1 of 3 of the following blood glucose tests
  • Hemoglobin A1c test with a value between 5.7 and 6.4 percent
  • Fasting plasma glucose of 110-125 mg/dL
  • 2-hour post glucose of 140-199 mg/dL (oral glucose tolerance test)
• No previous diagnosis of type 1 or type 2 diabetes (gestational is OK)
• Do not have end-stage renal disease (ESRD)
Limitations on Coverage

- MDPP benefit is once per lifetime per MDPP eligible beneficiary
- Ongoing maintenance sessions are available only if the MDPP eligible beneficiary has achieved maintenance of weight loss
  - Intend to propose a limit in future rulemaking
Referrals

Methods of entry into program:

• Community-referral
• Self-referral of patient
• Physician-referral or other health care practitioners
Enrollment of MDPP Suppliers (Proposed & Final)

CDC Recognition

• **Proposed:** DPP organizations must have either **preliminary** or **full** CDC DPRP recognition in order to be eligible to enroll in Medicare as MDPP suppliers
  – **Finalized:** We finalize our proposal that an entity must have full CDC DPRP recognition as a requirement to enroll in Medicare as an MDPP supplier
  – **Future Rulemaking:** We intend to address preliminary recognition in future rulemaking
Enrollment of MDPP Suppliers (Proposed & Final)

• **Proposed Eligibility:** Organizations with CDC DPRP recognition would be eligible for enrollment in Medicare as MDPP suppliers
  – **Finalized:** As proposed

• **Proposed Screening:** High categorical risk category defined in §424.518(c)
  – **Finalized:** As proposed

• **Proposed for Existing Medicare Providers:** Existing Medicare providers and suppliers would not need to enroll a second time
  – **Finalized:** Alternate proposal to enroll separately as MDPP supplier
Enrollment of MDPP Suppliers (Proposed & Final)

• **Proposed & finalized:** MDPP suppliers will be subject to enrollment regulations set forth in 42 CFR part 424, subpart P.
  – Time limits for filing claims (§424.44)
  – Requirements to report and return overpayments (§401.305)
  – Procedures for suspending, offsetting or recouping Medicare payments in certain situations (§405.371)
Coach Requirements

• **Proposed:**
  – Coaches to obtain a National Provider Identifier (NPI)
  – MDPP suppliers to submit roster of coach identifying information.

• **Finalized:**
  – Coaches will not enroll in Medicare for purposes of furnishing MDPP services.
  – Coaches must obtain NPIs.
  – Submit roster of all affiliated coaches during enrollment and update CMS within 30 days of a coach beginning to or ceasing to furnish MDPP services.
    ◦ First and last name, SSN, and NPI
Enrollment of MDPP Suppliers (Proposed & Final)

Revocation of MDPP Supplier Enrollment

• **Proposed:** MDPP suppliers must comply with 42 CFR part 424. Those who lose CDC DPRP recognition would lose their Medicare billing privileges with respect to MDPP services

  – **Finalized:** MDPP *supplier enrollment* revoked if eligibility criteria no longer met (e.g., upon loss of CDC DPRP recognition or noncompliance with Medicare requirements, in 42 CFR part 424

• **Proposed:** MDPP suppliers may appeal revocation decisions in accordance with the procedures specified in 42 CFR part 405, subpart H, 42 CFR part 424, and 42 CFR part 498.

  – **Finalized:** As proposed
Enrollment of MDPP Suppliers (Proposed)

Virtual Providers - Deferred to Future Rulemaking

- **Proposed:** to allow MDPP suppliers to furnish MDPP services through remote technologies
  - Not enough information to finalize at this time
  - Intend to address detailed policies in future rulemaking
Information Technology (IT) Infrastructure and Capabilities – Proposed and Finalized

- Required to submit claims to Medicare using standard claims forms and procedures.
- Maintain a crosswalk between the beneficiary identifiers they submit to CMS for billing purposes (HICNs) and the participant identifiers they provide CDC through session-level performance data.
- Provide this crosswalk to the CMS evaluator on a regular basis. Further details will be made available on the frequency and format.
Information Technology (IT) Infrastructure and Capabilities – Proposed and Finalized

- Maintain records that contain detailed documentation of the services furnished to beneficiaries.
- Detailed documentation includes documentation of the beneficiary’s eligibility, including blood test results, sessions attended, the coach furnishing the session(s) attended, the date and location of service(s), and weight, with further details provided in future guidance or rulemaking.
- Maintain and handle any beneficiary PII and PHI in compliance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA), other applicable privacy laws, and CMS standards.
Major Policies for Future Rulemaking

• Supplier Enrollment – How information on the coach roster will affect the MDPP supplier
• MDPP Payment Structure
• Program Integrity Policies
• Virtual Providers
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Preparing Your Organization to Enroll as MDPP Supplier

What to do right now:

• Work towards becoming CDC recognized. For more information visit the CDC’s National DPP website here.
• Familiarize yourself and your organization and coaches with the NPI requirements.
• Familiarize yourself and your organization with the PECOS system.
• Begin researching claims submission software. CMS offers a free software package that creates a patient database and allows organizations to submit claims to Medicare Part A & B.
Preparing Your Organization to Enroll as MDPP Supplier

What to do in 2017:

• Continue to look out for guidance and communications from CMS regarding enrollment preparation
• Visit our website and sign up to receive updates:
  https://innovation.cms.gov/initiatives/medicare-diabetes-prevention-program/
• Read and comment on the next rule
• Plan to begin enrollment in 2017 (before benefit goes live in 2018) Note: enrollment into Medicare typically takes 45-60 days if all information is submitted correctly.
Question & Answer Session
Acronyms in this Presentation

- Centers for Medicare and Medicaid Services (CMS)
- Centers for Disease Control and Prevention (CDC)
- Centers for Medicare and Medicaid Innovation (CMMI)
- Medicare Diabetes Prevention Program Model Expansion (MDPP)
- Centers for Disease Control and Prevention Diabetes Prevention Recognition Program (CDC DPRP)
- National Diabetes Prevention Program (DPP)
- Physician Fee Schedule (PFS)
- Tax Identification Number (TIN)
- National Provider Identifier (NPI)
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• For more information about the Medicare Diabetes Prevention Program Model Expansion, contact mdpp@cms.hhs.gov

• Please send questions about the CDC Recognition Process and Standards to dprpAsk@cdc.gov

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