



MEDICARE DIABETES PREVENTION & DIABETES SELF-MANAGEMENT TRAINING



UPDATES

Note: No substantive content updates.

INTRODUCTION

This fact sheet explores these topics:

- Diabetes Definition and Background
- Medicare Diabetes Prevention Program (MDPP)
- Diabetes Self-Management Training (DSMT)
- DSMT Accrediting Organizations (AOs)
- Oversight and Validation
- Resources

DIABETES DEFINITION & BACKGROUND

Diabetes is a condition occurring when the body can't use glucose properly. This causes high blood glucose levels. Insulin produced by the pancreas lowers blood glucose. Absence or insufficient production of insulin or an inability to properly use insulin causes diabetes.

Diabetes Complications

Diabetes complications may result in small and large artery diseases which can result in kidney disease, blindness, amputation, and/or stroke.

Diabetes Prevalence & Cost

The CDC's [2020 National Diabetes Statistics Report](#) says diabetes is the seventh-leading cause of death in the United States and estimated:

- 34.2 million people of all ages have diabetes (10.5% of the U.S. population)
- 88 million adults 18 and older have prediabetes, but only 7.3 million were aware of or did not report having diabetes (a higher percentage of men [37.4%] have prediabetes than women [29.2%])
- In 2016, 7.8 million hospital discharges listed diabetes as any diagnosis among adults 18 years or older
- In 2017, the total direct and indirect costs of diagnosed diabetes in the United States was \$327 billion
- Adult diabetes percentage increases with age, with 26.8% among those aged 65 or older

MEDICARE DIABETES PREVENTION PROGRAM

The MDPP includes an evidence-based set of services aimed to help prevent the onset of type 2 diabetes among eligible Medicare patients with an indication of prediabetes. This service includes:

- Structured coaching sessions, using a CDC-approved curriculum, to provide training in dietary change, increased physical activity, and weight loss strategies

- 12 months of core sessions for patients with an indication of prediabetes, and an additional 12 months of ongoing maintenance sessions for participants who meet weight loss and attendance goals

Organizations who wish to furnish MDPP services to eligible patients and bill Medicare for those services must enroll in Medicare as an MDPP supplier. If you are already a Medicare provider, you need to enroll separately as an MDPP supplier.

To enroll as an MDPP supplier, organizations must:

- Have and maintain MDPP preliminary recognition or full CDC Diabetes Prevention Recognition Program (DPRP) recognition
- Have an active and valid Tax Identification Number (TIN) or National Provider Identifier (NPI)
- Pass the high categorical risk level enrollment screening
- On the MDPP enrollment application, submit a list of MDPP coaches who will lead sessions including full name, date of birth, SSN, and active and valid NPI and coach eligibility start and end dates (if applicable)
- Meet MDPP supplier standards and requirements, and other existing Medicare provider or supplier requirements
- Revalidate enrollment every 5 years

For MDPP conditions of coverage, refer to [42 CFR Section 410.79](#).

Legal Authority

The MDPP is an expansion of the CMS Center for Medicare and Medicaid Innovation's (Innovation Center) Diabetes Prevention Program (DPP) model test under [SSA Section 1115A](#). HHS expanded the DPP model test in duration and scope under [SSA Section 1115A\(c\)](#) authority.

DIABETES SELF-MANAGEMENT TRAINING

DSMT is another Medicare preventive service which helps providers serving patients already diagnosed with diabetes. This preventive service helps patients manage their current diabetes diagnosis to prevent additional complications. DSMT providers cooperate to offer patients with diabetes type 1 or type 2 a full range of service options.

The DSMT program goals include educating and empowering Medicare patients diagnosed with diabetes to better manage and control their conditions, reduce hospitalizations and complications, and reduce costs.

Legal Authority

The [SSA Section 1861\(qq\)](#) established DSMT services and gives CMS legal authority to regulate Medicare DSMT outpatient coverage services.

Definitions

The SSA defines DSMT educational and training services as medically reasonable and necessary. A certified provider (one who meets standards originally set by the National Diabetes Advisory Board and revised and maintained by participating organizations) must offer these services to help patients comply with therapy or developing skills and knowledge to manage their condition. Providers must describe and document these services in a comprehensive plan of care in the patient's medical record.

Regulations for DSMT Accrediting Organizations

Refer to the DSMT and DSMT Accrediting Organization (AO) [42 CFR Section 410.140–410.146](#) regulations.

CMS requires DSMT AOs to use 1 of the following accreditation standards:

1. The organization uses and enforces CMS quality standards that meet or exceed the quality standards described in or uses the National Standards for Diabetes Self-Management Education Programs (NSDSMEP) quality standards described in [Section 410.144\(b\)](#).
2. The organization meets the approved organizational [Section 410.143](#) requirements.
3. The organization isn't owned or controlled by the entities it accredits, defined in [Section 413.17\(b\)\(2\) or \(b\)\(3\)](#).
4. The organization doesn't accredit any entity it owns or controls.

CMS approved 2 national DSMT AOs to accredit DSMT entities:

1. American Diabetes Association (ADA)
2. American Association of Diabetes Educators (AADE)

CMS approves DSMT AOs for 6-year terms. [Section 410.143\(a\)](#) identifies the ongoing DSMT AO responsibilities. [Section 410.143\(b\)](#) identifies CMS' or its agents' oversight requirements ensuring a CMS-approved DSMT AO and the entities the organization accredits continue meeting [Section 410.144](#) quality standards.

[Section 410.145](#) identifies DSMT requirements entities must meet. [Section 410.146](#) requires an approved entity to collect and record the following patient assessment information at least quarterly:

- Medical information, including:
 - Diabetic condition duration
 - Insulin or oral agents use
 - Height and weight by date
 - Lipid test results and date
 - HbA1C results and date
 - Self-monitoring frequency and results



- Blood pressure and corresponding dates
- Last eye exam date
- Other information, including:
 - Educational goals
 - Educational needs assessment
 - Training goals
 - Follow-up assessment plan to review training goals achievement between 6 months and 1 year after the patient's training ends
 - Training goals assessment documentation

DSMT entities may also collect follow-up assessment information.

DSMT ACCREDITING ORGANIZATIONS

General Information

Refer to [Section 410.142](#) for a complete description of CMS' national accrediting organizations' approval process.

Applying to be a CMS-approved DSMT AO is voluntary. To apply for accreditation, you must be a nonprofit or not-for-profit organization with demonstrated experience in working with individuals with diabetes.

When you apply, input the following information:

- If you don't use 1 of the [Section 410.144\(a\) or \(b\)](#) established standards, submit a detailed comparison of your accrediting requirements and quality standards to CMS' standards
- Details about your organization's accreditation process, including accreditation frequency, copies of accreditation forms, guidelines, and instructions to evaluators, monitoring and enforcing compliance process details, and types and categories of accreditation offered
- The procedures used to notify a deemed entity of deficiencies in its DSMT program and procedures to monitor deficiency correction
- Detailed evaluator background and qualifications information
- A description of the organization's major operational policies and procedures, such as:
 - Data management and analysis
 - Responding to and investigating complaints and non-compliance issues, which includes improvements made from issues found and reporting final disposition of review
- Contact information for owners and others with controlling interest
- Your organization's documentation of accreditation and ability to carry out the necessary tasks

SPECIFIC ACCREDITATION PROGRAMS

ADA Education Recognition Program (ERP)

The ADA ERP DSMT AO application process includes 3 main elements:

1. The entity must already supply diabetes self-management education and support (DSMES) under current national standards to apply.
2. You must contact the ERP to access the online application portal; you may submit supporting documents online, by fax, or regular mail.
3. An ERP team member reviews the application and notifies the entity through the application portal. If approved for a 4-year recognition period, the ERP team member notifies entities not approved in the same way and gets feedback on specific application recognition elements still needed.

To monitor approved AOs, the ADA will:

- Perform an annual, random site visit audit of less than 5% of all recognized programs
- Notify entities 10 working days before a site visit; there are no unannounced visits
 - Give the entity's DSMES quality coordinator an [Audit Toolkit](#)
 - Inform the entity about the required documentation

You can search recognized [DSMES programs](#) by zip code.

AADE Accreditation Program

The AADE has a one-level DSMT AO accreditation program.

- Any DSMT entity that meets DSMES standards may complete an [online application](#)
- The AADE conducts an in-depth, comprehensive review to see if the entity fulfilled all quality standards
- An approved program is accredited for 4 years

To monitor approved AOs, the AADE will:

- Perform an annual, random site audit of approximately 5% of all programs
 - Notify entities 10 working days before an audit

Find an AADE accredited [DSMT diabetes education program](#) in your area.

OVERSIGHT & VALIDATION

- CMS must offer external DSMT AO oversight to ensure DSMT AO entities meet federal requirements.
- CMS created the DSMT oversight and validation process to evaluate CMS-approved DSMT AO performance.
- CMS' DSMT AO accreditation oversight and validation process helps determine if approved DSMT AOs meet Medicare regulations.
- CMS uses a contractor to perform the oversight and validation process and report findings.
- The oversight and validation process uses a survey tool and a scoring mechanism.

KEY TAKEAWAYS

- Diabetes is a condition occurring when the body can't use glucose properly, which causes high blood glucose levels.
- Treatment of diabetes is costly. In 2017, the total direct and indirect costs of diagnosed diabetes in the U.S. was \$327 billion.
- CMS developed 2 specific programs to address prevention and treatment of diabetes: the Medicare Diabetes Prevention Program and Diabetes Self-Management Training.
- Providers wishing to participate in these programs must get accreditation by an approved CMS organization. The 2 organizations CMS approved are ADA and AADE.
- CMS oversees accreditation organizations to ensure compliance with program guidelines.

RESOURCES

- [American Association of Diabetes Educators \(AADE\)](#)
- [American Diabetes Association \(ADA\)](#)
- [DSMT Accreditation Program](#)
- [Diabetes Statistics and Prevalence](#)
- [DSMT Coding and Billing](#)
- [MDPP-CDC Roles Fact Sheet](#)
- [MDPP Coding and Billing](#)
- [MDPP Expanded Model](#)
- [National Standards for DSMES](#)

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