Session Title: Medicaid Coverage for the National Diabetes Prevention Program: An Unfinished Symphony

Session Coordinators:

- Jean Gearing, PhD, MPH
- Jennifer Barnhart, MPH, National Association of Chronic Disease Directors

1815/1817 Category A Virtual Showcase

Presentation Date (February 2, 2022)

Medicaid Coverage for the National Diabetes Prevention Program: An Unfinished Symphony

- Introduction & Facilitation: National Association of Chronic Disease Directors
  - Jennifer Barnhart, MPH
- Maryland's HealthChoice and Public Health Collaboration
  - Kristi Pier, MHS, MCHES
- Medicaid Coverage for the National Diabetes Prevention Program: A New York Story
  - Susan Millstein, MSW, MPH
- Medicaid Coverage for the National Diabetes Prevention Program & Diabetes Self-Management Education and Support in Illinois
  - Philip Pittman, MPH, MS
- Medicaid Beneficiary Enrollment Pilot: Creating a Pathway for National Diabetes Prevention Program Sustainability in Rhode Island
  - Benvinda Santos, MPA
- Question and Answer
  - Jean Gearing, CDC

Maryland’s HealthChoice and Public Health Collaboration

Centers for Disease Control and Prevention
Category A Virtual Showcase

Kristi Pier, MHS, MCHES

Director, Center for Chronic Disease Prevention and Control

February 2, 2022

Objectives

- Identify the role of public health in supporting the development and implementation of the HealthChoice DPP
  - HealthChoice DPP is based on the National Diabetes Prevention Program Lifestyle Change Program
- Identify 2-3 aspects that support integrated public health and Medicaid collaborations
- Understand the current structure of the Maryland HealthChoice DPP

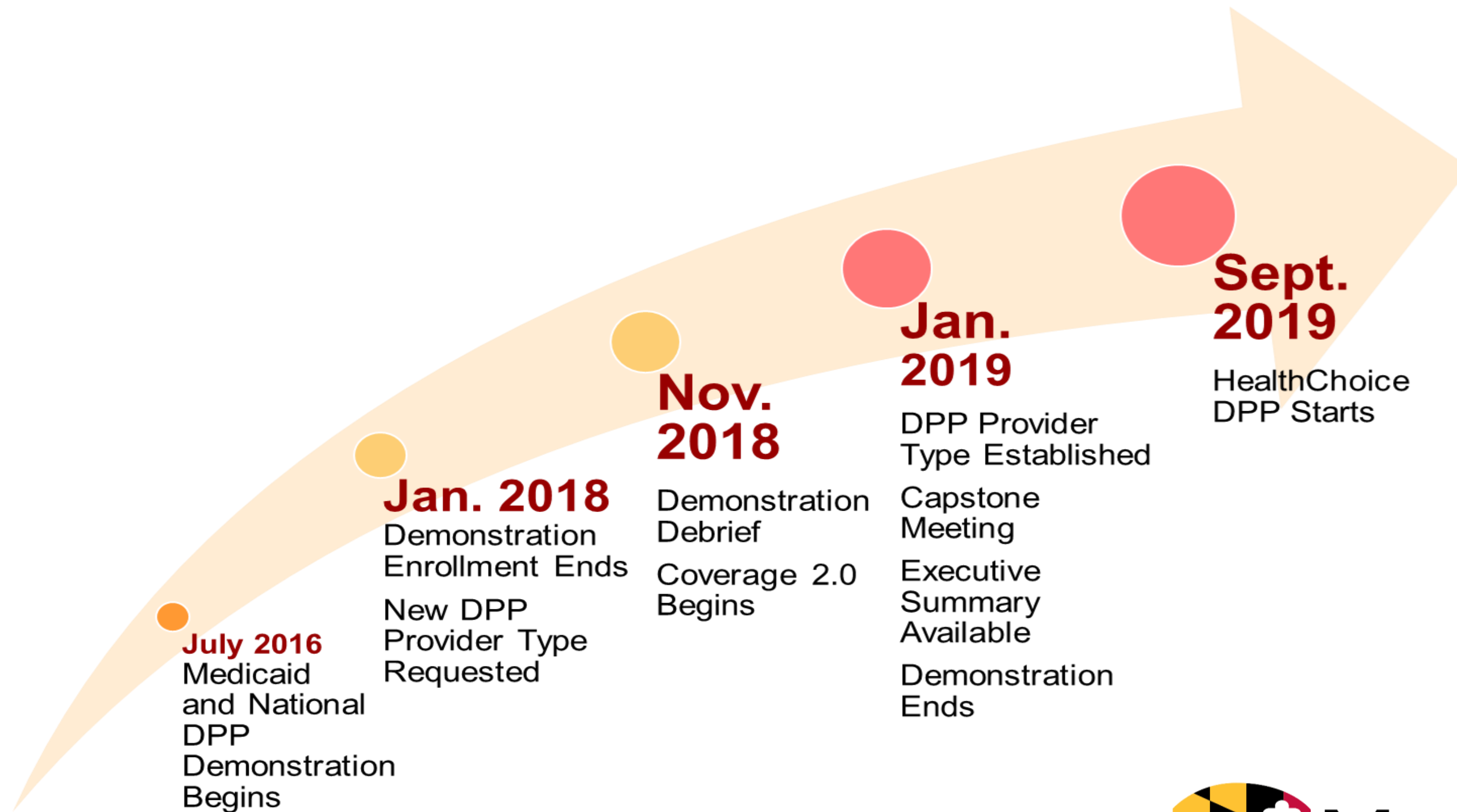
Maryland
DEPARTMENT OF HEALTH

The start of a lovely partnership

- Laying the groundwork for Medicaid and public health collaboration
- Seizing opportunities–1305 and CDC/National Association of Chronic Disease Directors (NACDD) Diabetes Prevention Demonstration Project
- Building on expertise
- Identifying roles based on traffic lanes
- Ongoing communication
- Dedicated staff support

Maryland
DEPARTMENT OF HEALTH

Demonstration to Coverage Timeline



Maryland Medicaid (January 2022)

Fiscal Impact

- Approximately $13.5 billion in state and federal funds
- Typically accounts for about 24% of State budget

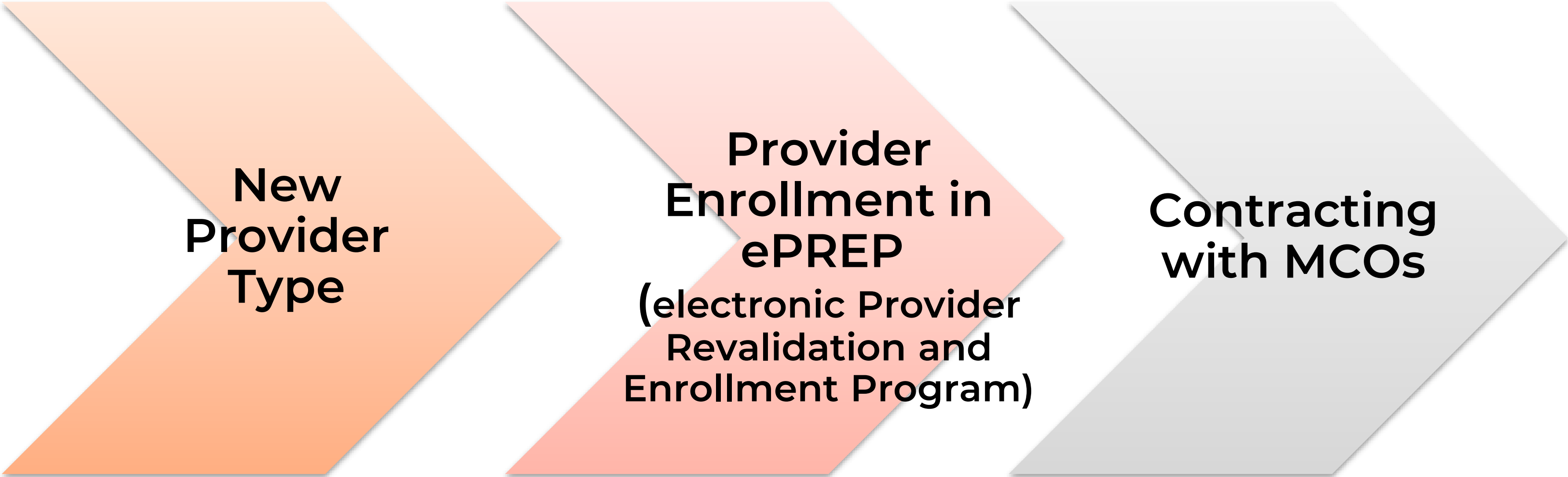
Reach

- Provides benefits for approximately 1.6 million people
  - 1.4 million (87%) are enrolled in HealthChoice
  - 427,356 adults are enrolled as a result of the Affordable Care Act Medicaid expansion

Maryland HealthChoice National DPP

- Statewide implementation of the National DPP LCP through HealthChoice Managed Care Organizations (MCOs)
- Required changes to Maryland Medicaid regulations
- Built into MCO capitation rates
- Aligns with CDC Diabetes Prevention Recognition Program (DPRP) eligibility criteria
- Closely aligns with the Medicare Diabetes Prevention Program (MDPP) Expanded Model
- Includes both in-person and virtual CDC-recognized organizations
- Effective Date: September 1, 2019

National DPP Provider Enrollment



Maryland
DEPARTMENT OF HEALTH

Overview of the Public Health and Medicaid roles to support HealthChoice DPP implementation

CDC-recognized National DPP provider training on how to enroll in Medicaid

- MDH National DPP Website: https://health.maryland.gov/mmcp/Pages/HealthChoice-DPP.aspx
- Technical Assistance offered through the Center for Chronic Disease Prevention and Control
- Facilitated 8 information sessions for new Medicaid-enrolled National DPP providers to meet with MCOs and describe their programs in order to facilitate potential contracting

CDC-recognized National DPP provider supports (e.g., business plan assistance, facilitating meetings between providers and MCOs)

- Monthly meetings with MCOs, Maryland Medicaid, and Maryland Public Health
- Workshop Wizard: Data management and new claims report functionality (837p)

Algorithm development to identify potentially eligible HealthChoice DPP participants

- Developed by the Hilltop Institute at UMBC concurrently with prediabetes flag development by CRISP (Statewide HIE)

Use of Chesapeake Regional Informational Systems for Our Patients (CRISP) -- statewide HIE to alert providers about potentially eligible HealthChoice DPP participants

- Care Alerts (those with prediabetes or at risk for type 2 diabetes)
- Smart Alerts (reports to MCOs of those members receiving Care Alerts)

Maryland
DEPARTMENT OF HEALTH

CRISP/Medicaid Collaborations

Prediabetes Flag

- Aligned prediabetes flag logic with Medicaid's eligibility algorithm
- Worked with MCOs to develop uniform:
  - Care Alert language
  - Smart Alert reporting structure and secure methods for transferring the reports.

Referrals to HealthChoice DPP

- Part of broader statewide collaborative workgroup discussing how to map referrals, including Workshop Wizard integration, with input from the Medicaid perspective
- Supporting onboarding of MCOs as intermediaries
- Convening Regional Partnerships and MCOs to build relationships around referrals and hand-offs and to share best practices and challenges

Developing a Prediabetes Flag

Scope of Work:

- CRISP developed a prediabetes (or an at-risk for type 2 diabetes) flag based on the following use cases:

  - Clinicians see the flags at the point of care and can take appropriate action to address the condition (e.g. referral to HealthChoice Diabetes Prevention Program (National DPP LCP)

  - Flags will enable population-based reporting on individuals with prediabetes (or at-risk for type 2 diabetes), in support of the Maryland Total Cost of Care Model's population health goal related to diabetes prevention.

Maryland
DEPARTMENT OF HEALTH

Initial Results

- Care Alerts went live in June 2021
- Initially identified ~75,000 individuals who were likely eligible for HealthChoice DPP
  - Care Alerts created and updated monthly
- 9 MCOs receiving monthly Smart Alert reports
  - Continuously updated
  - About 14,000 new/updated individuals last month

Next steps for HealthChoice DPP in Maryland

Sustainability with focus on:

- **Increased number of CDC-recognized National DPP providers engaged and participating Medicaid MCOs**
- **Increased member enrollment and retention for HealthChoice DPP**
- **Continued MCO collaboration and capacity-building; public health partnership for CDC-recognized National DPP provider network development**
- **CRISP: National DPP Referral Tool and Reporting Refinement around prediabetes flag care alerts**

Maryland
DEPARTMENT OF HEALTH

Resources/Contact

- HealthChoice DPP Website: https://mmcp.health.maryland.gov/Pages/HealthChoice-DPP.aspx
- HealthChoice DPP Email: MDH.MedicaidDPP@maryland.gov
- Medicaid:

  Sandy Kick, Senior Manager, sandra.kick@maryland.gov

  Liz Herrick, Policy Analyst, elizabeth.herrick@maryland.gov
- Public Health

  Kristi Pier, Director, Chronic Disease, kristi.pier@maryland.gov

Maryland
DEPARTMENT OF HEALTH

Department of Health

Medicaid Coverage for the National Diabetes Prevention Program (National DPP): A New York Story

1815/1817 Virtual Showcase

Introduction

Agenda

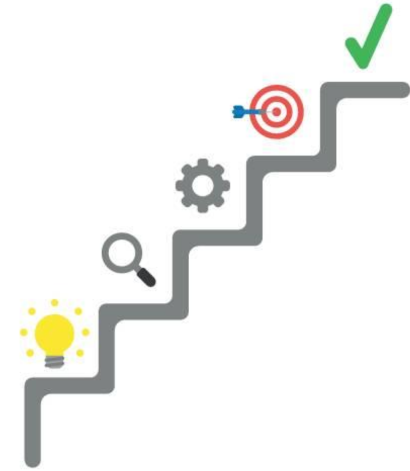
Topic
Background
Overview of steps to coverage
Implementation and beyond

Background

Background

- In New York State (NYS), diabetes rates have almost tripled over the past two decades.
- An estimated 1.4 million adult New Yorkers (10.5%) have been diagnosed with prediabetes
- You are more likely to report being diagnosed with prediabetes if you are:
  - living with obesity, older, Black, a person living with a disability, living in New York City
- In 2014, NYS Medicaid spent $1.2 billion on diabetes-related expenses for 460,000 beneficiaries with diabetes

Overview of Steps to Coverage



Timeline

2014 2015 2016 2017 2019 2020 2021

CDC/NACDD Medicaid National DPP Intensive TA grant
July 2019 – July 2021

Relationship-building/Making the case

Implementation and Beyond

Implementation

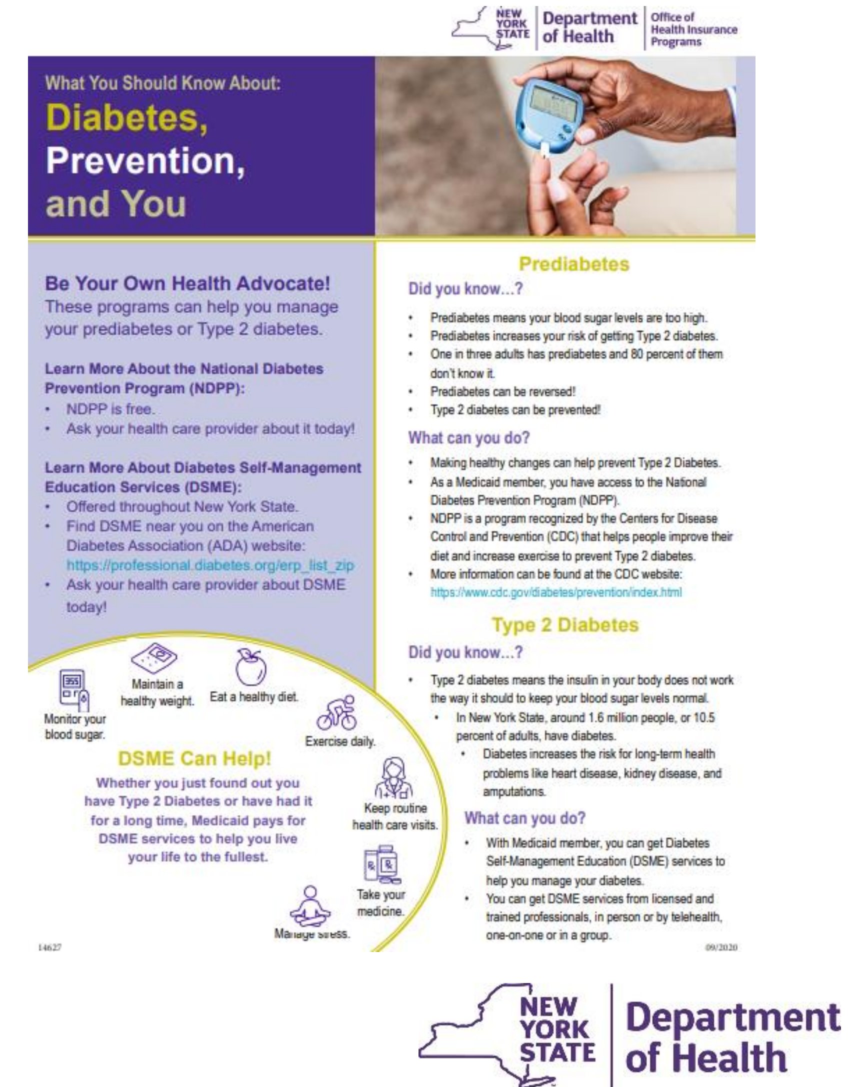
- Kick-off Webinar

- Establishment of dedicated e-mailbox for National DPP inquiries

- Medicaid Managed Care Plan Quarterly Meeting with Medical Directors
- ~~Statewide Symposia~~

Implementation

- National DPP LCP Fact Sheet for Medicaid members
- eMedNY (electronic Medicaid of NY) Provider Enrollment Webinar
- Bronx Project



NEW YORK STATE | Department of Health | Office of Health Insurance Programs

What You Should Know About:

Diabetes, Prevention, and You

Be Your Own Health Advocate!
These programs can help you manage your prediabetes or Type 2 diabetes.

Learn More About the National Diabetes Prevention Program (NDPP):
- NDPP is free.
- Ask your health care provider about it today!

Learn More About Diabetes Self-Management Education Services (DSME):
- Offered throughout New York State.
- Find DSME near you on the American Diabetes Association (ADA) website: https://professional.diabetes.org/erp_list_zip
- Ask your health care provider about DSME today!

Monitor your blood sugar.
Maintain a healthy weight.
Eat a healthy diet.
Exercise daily.
Keep routine health care visits.
Take your medicine.
Manage stress.

DSME Can Help!
Whether you just found out you have Type 2 Diabetes or have had it for a long time, Medicaid pays for DSME services to help you live your life to the fullest.

Prediabetes

Did you know...?
- Prediabetes means your blood sugar levels are too high.
- Prediabetes increases your risk of getting Type 2 diabetes.
- One in three adults has prediabetes and 80 percent of them don't know it.
- Prediabetes can be reversed!
- Type 2 diabetes can be prevented!

What can you do?
- Making healthy changes can help prevent Type 2 Diabetes.
- As a Medicaid member, you have access to the National Diabetes Prevention Program (NDPP).
- NDPP is a program recognized by the Centers for Disease Control and Prevention (CDC) that helps people improve their diet and increase exercise to prevent Type 2 diabetes.
- More information can be found at the CDC website: https://www.cdc.gov/diabetes/prevention/index.html

Type 2 Diabetes

Did you know...?
- Type 2 diabetes means the insulin in your body does not work the way it should to keep your blood sugar levels normal.
  - In New York State, around 1.6 million people, or 10.5 percent of adults, have diabetes.
    - Diabetes increases the risk for long-term health problems like heart disease, kidney disease, and amputations.

What can you do?
- With Medicaid member, you can get Diabetes Self-Management Education (DSME) services to help you manage your diabetes.
- You can get DSME services from licensed and trained professionals, in person or by telehealth, one-on-one or in a group.

14627 09/2020

Beyond…..

- Managed Care Organization contracting challenges
- Organization-level administrative and billing capacity challenges
- Network adequacy (enough National DPP providers in a region)
- Enrollment and retention
- COVID-related telehealth expansion

Thank you!

Please contact me with questions

Presenter	Contact Information
Susan Millstein, MSW, MPH Diabetes Program Manager Susan.Millstein@health.ny.gov	NYS Department of Health Bureau of Community Chronic Disease Prevention 150 Broadway, Suite 350 Albany, NY 12204 518-408-5142

NEW YORK STATE | Department of Health

Medicaid Coverage for the National Diabetes Prevention Program (National DPP) & Diabetes Self-Management Education and Support (DSMES) in Illinois

Philip Pittman, MPH, MS
Chronic Disease Epidemiologist
Illinois Department of Public Health

February 2, 2022

Contributors
Cara Barnett, MPH – Illinois Department of Public Health
Wendy Childers, MPH, MA – National Association of Chronic Disease Directors
Janna Simon, MPH – Illinois Public Health Institute

Medicaid Coverage of The National DPP and DSMES in Illinois

- Coverage began August 1, 2021
- Partners involved in achieving coverage
  - Illinois Public Health Institute (IPHI)
  - Illinois Department of Healthcare and Family Services (DHFS)
  - Illinois Department of Public Health (IDPH)
  - Managed Care Organizations in Illinois (MCO)
  - U.S. Centers for Disease Control and Prevention (CDC)
  - National Association of Chronic Disease Directors (NACDD)
  - County Health Rankings and Roadmaps
  - National Network of Public Health Institutes (NNPHI)
  - Meridian Health
  - Federally Qualified Healthcare Centers (FQHCs)
  - Chicago Department of Public Health (CDPH)
  - Statewide National DPP Partners

IDPH
Illinois Department of Public Health

How We Arrived at Coverage 2014

- Illinois Public Health Institute (IPHI) received a $5,000 grant from County Rankings and Roadmap to start discussion about Medicaid coverage of the National DPP lifestyle change program (LCP)

- Initial convening with Illinois Departments of Healthcare and Family Services and Public Health, Medicaid Managed Care Organizations (MCOs), and National DPP providers

- Initiated a roadmap to coverage for the state

IDPH
Illinois Department of Public Health

How We Arrived at Coverage 2015 - 2017

- Further developed the roadmap toward a pilot project and toward coverage with additional grants
- Convenings with partners
  - Conducted research
  - Worked with NACDD on the concept of a hub

ILLINOIS DEPARTMENT OF PUBLIC HEALTH
IDPH
PROTECTING HEALTH, IMPROVING LIVES

How We Arrived at Coverage 2018

- Cooperative agreement funding awarded by CDC
  - Illinois Department of Health (IDPH) - **1815**
  - Chicago County Department of Public Health - **1817** (IPHI acting as bona fide agent)
- Illinois joined the CDC/NACDD **6|18** cohort focusing on Medicaid coverage for the National DPP LCP.
  - IDPH and DHFS collaboratively applied for 6|18
  - Technical assistance and coordination from NACDD
  - Learning opportunities from other states' experiences
  - **IPHI** played a central role in coordination

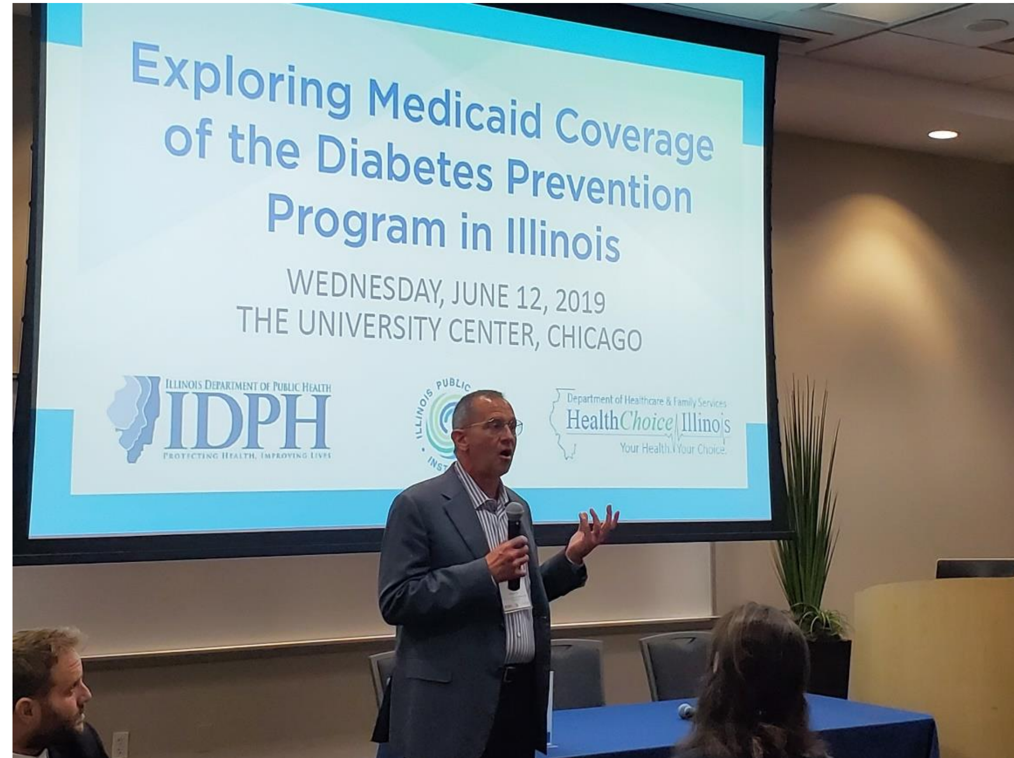
IDPH
Illinois Department of Public Health

How We Arrived at Coverage
2019 - 2020

- **Fall 2019** - DHFS decided to proceed with initiating Medicaid coverage of the National DPP LCP and DSMES

- IPHI, IDPH, and stakeholders provided recommendations for coverage to DHFS, including amending the State Medicaid Plan

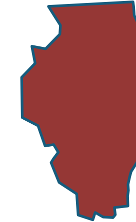
- A pilot project began with an MCO and National DPP providers to test the exchange of data and referrals



IDPH
ILLINOIS DEPARTMENT OF PUBLIC HEALTH

How We Arrived at Coverage 2020 - 2021

Pilot with Meridian Health MCO and FQHCs offering the National DPP LCP



Who

- Funded by Meridian Health Plan (MCO) in partnership with the Illinois Public Health Institute (IPHI).
- 4 CDC-recognized FQHCs

Why

- Shape and test proposed National DPP Medicaid benefit design

How

- Documented and identified effective recruitment strategies
- Implemented mock claims and data sharing processes

Outcomes

Pilot revealed key gaps in systems related to data-sharing, referrals, staff awareness/ engagement, and checking for Medicaid eligibility

IDPH
Illinois Department of Public Health

How We Arrived at Coverage 2021

- Medicaid coverage of both the National DPP LCP and DSMES announced in the spring
- Focus shifted to implementation in the summer
- Coverage started August 1, 2021
- Illinois awarded a one-year $100,000 NACDD Medicaid Beneficiary Enrollment Project grant supported by CDC

IDPH
Illinois Department of Public Health

Coverage / Reimbursement 2020 - 2021

National DPP

Session/Event	HCPCS Code and Description	Payment	Virtual or Telehealth Session Modifier	Virtual or Telehealth Make-Up Session Modifier	Limitation
Milestone 1	G9873 – 1st core session attended	$180	GT	None	Can be used 1 time in 365 days
Milestone 2	G9874 – 4 total cores sessions attended	$150	GT	VM	Can be used 1 time in 365 days (use GT or VM)
Milestone 3:	G9875 – 9 core sessions attended	$140	GT	VM	Can be used 1 time in 365 days (use GT or VM)
Milestone 4:	G9876 – 2 sessions in months 7-9, 5% weight loss not achieved or maintained OR G9878 – 2 sessions in months 7-9, 5% weight loss achieved or maintained	$30 (without WL/$50 with WL)	GT	VM	Can be used 1 time in 365 days (use GT or VM)
Milestone 5:	G9877 (5% weight loss not achieved or maintained) or G9879 (5% weight loss achieved or maintained)– 2 sessions in months 10-12	$30 (without WL)/$50 (with WL)	GT	VM	Can be used 1 time in 365 days (use GT or VM)
Performance: 5% weight loss achieved	G9880 – 5% weight loss from baseline achieved	$100	GT	None	Can be used 1 time in 365 days

DSMES

Session	HCPCS Code and Description	Payment	Telehealth Modifier	Limitation
Individual Outpatient DSMES	G0108 – Diabetes outpatient self-management training services, individual per 30 minutes	$55/unit	GT	3 hours (6 units) per 12 months
Group Outpatient DSMES – 2 or more participants in the group	G0109 – Diabetes outpatient self-management training services, group session (two or more), per 30 minutes	$16/unit	GT	15 hours (30 units) per 12 months

IDPH
Illinois Department of Public Health

Lessons Learned

- Engage all partners early in the process.
- Recognize that different partners may have very little knowledge about other partners' systems, workflows, and terminologies.
- The value of an outside advocacy organization (IPHI)
  - A neutral, non-governmental honest broker
  - Buy-in among decision-makers
- Continuity of leadership is important.
- Communicate with other states and learn from each other.

IDPH
Illinois Department of Public Health

Six Month Status Report and Focus for 2022

- Enrollment
  - A handful of providers are up and running.
  - Many more have applied.
  - Very high level of interest in the National DPP Lifestyle Coach training
- 10 National DPP LCP providers selected to receive $10,000 each to support Medicaid enrollment using CDC funds received from NACDD and 1817 grants
- DSMES – hospital providers need technical assistance in understanding the need to build a different provider type
- Umbrella Hub Organization (UHO) planning to meet the needs of community-based partners

IDPH
Illinois Department of Public Health

THANK YOU

Philip Pittman, MPH, MS

Chronic Disease Epidemiologist

Illinois Department of Public Health

philip.pittman@illinois.gov

https://dph.illinois.gov

Medicaid Beneficiary Enrollment Pilot: Creating a Pathway for National Diabetes Prevention Program Sustainability in Rhode Island

Benvinda Santos, MPA
Sustainability Manager
Diabetes, Heart Disease, and Stroke Program
Rhode Island Department of Health
Benvinda.Santos@health.ri.gov

Rhode Island Medicaid Landscape

Population approx. 1.1 million (Census 2020)

	2019	2021
Number of adults aged (18-64) enrolled in Medicaid	**Approximately 133,000**	**Approximately 331,538**
Estimated number of adults aged (18-64) with prediabetes	**44,055**	**65,000**
Medicaid Cost	**$1,982,250**	**$2,924,668**

Medicaid Beneficiary Enrollment Pilot

Title: Medicaid Beneficiary Enrollment Pilot (MBEP)

Timeline: August 1, 2021 – July 31, 2022

MBEP Award: $100,000.00

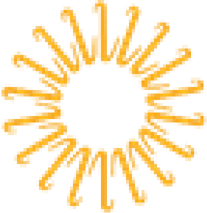
Pilot Goals:

- Enroll 75-80 Medicaid beneficiaries in the National DPP lifestyle change program that complete at least 1 session (not session zero)
- Make the case for Medicaid coverage for National DPP

Medicaid Beneficiary Enrollment Pilot Partners

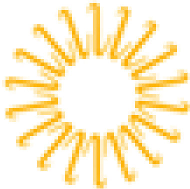
Sustainability Planning:

MBEP Planning Partners:



Coastal Medical

Lifespan. Delivering health with care.®



Lifespan
Community Health
Institute

Delivering health with care.®

Medicaid Beneficiary Enrollment Workflow

Identify Eligible Beneficiaries	Electronic Health Record (EHR); Prediabetes or at high risk
Outreach and Recruitment	Letter from provider and texting
Referrals & Rosters	Batch referrals to RIPIN/ Community Health Network (CHN)
Patient Navigators/Community Health Workers (CHWs)	Readiness, identify/address social Determinants of health (SDOH)
National DPP Enrollment	CDC-recognized program delivery organizations
Retention	Follow-up calls, texting, supports
Close Loop	Provider updates: 3x

Community Health Network Workflow

Referral Source

Sent to CHN via EHR, fax, email, website, or phone call

CHN

Patient Navigators call Patient

- No answer = Leave Message
- Two Follow-up calls, different times of day

Patient

Address needs and barriers to find the right program

Program

Provider notified of status:

- Unable to reach
- Declined
- Agreed
- Enrolled in Program

Steps Toward Sustainability

- Continue to receive technical Assistance from National Association of Chronic Disease Directors (NACDD)/Centers for Disease Control and Prevention (CDC)
- Enroll and retain (75-80) Medicaid beneficiaries
- Implement Sustainability Action Plan
  - Maintain and expand partnerships
  - Leverage Community Health Worker reimbursement
  - Develop a reimbursement workflow map
  - Refine outreach, recruitment, and engagement to boost enrollment and retention (e.g., texting, coordinating classes)
  - Continue to identify and address SDOH (e.g., digital resources)
  - Document process and lessons learned
  - Engage the State Medicaid Office

Benvinda Santos, MPA
Sustainability Manager
Diabetes, Heart Disease, and Stroke Program
Rhode Island Department of Health
Benvinda.Santos@health.ri.gov