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VDC Secretary 2017-2018

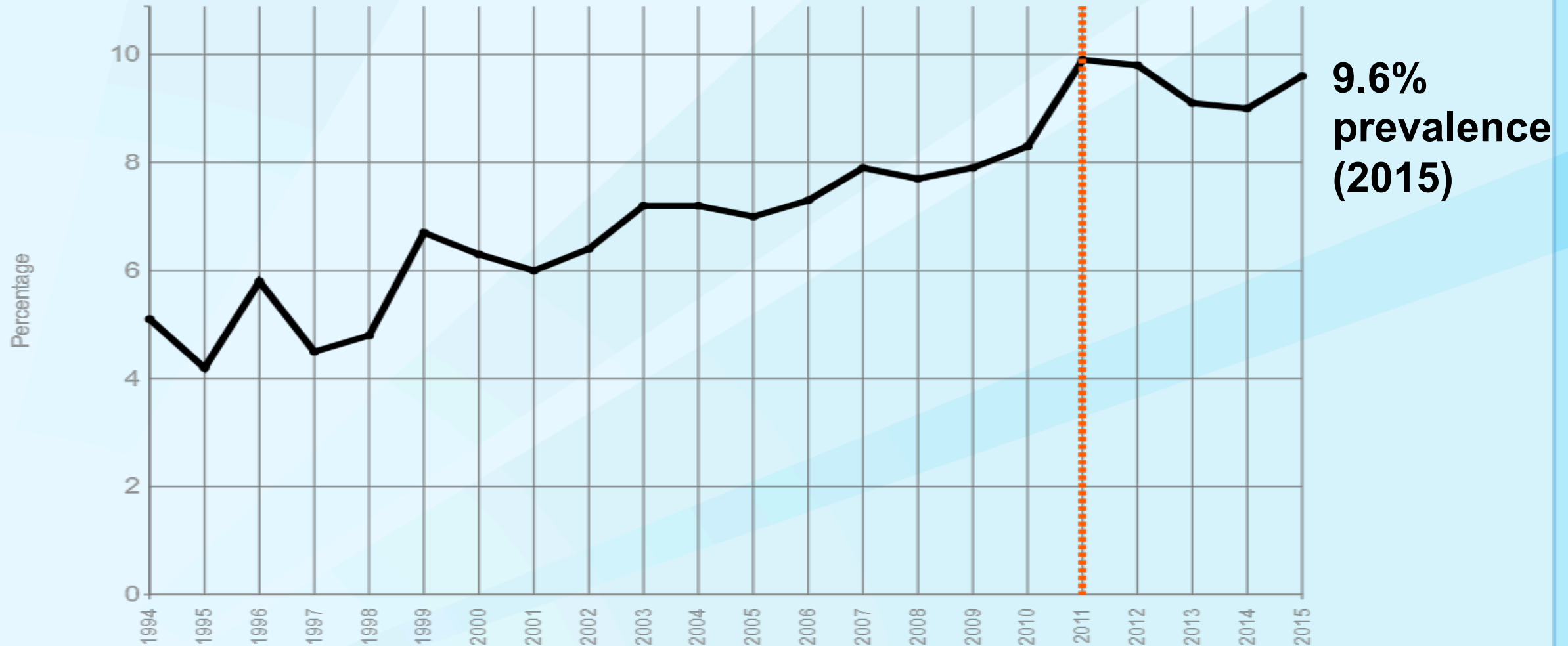


Diabetes Self-Management Education/Training in the Commonwealth of Virginia

LEARNING OBJECTIVES

- Discuss the burden of diabetes in Virginia.
- Define DSME/T.
- State the components of DSME/T.
- Outline the requirements for referral to DSME/T programs in Virginia.
- Describe the process of referral to DSME/T programs in Virginia.
- Demonstrate how to find local DSME/T programs
- Explain the regulations governing reimbursement of DSME/T in Virginia.

Diagnosed Diabetes, Age-Adjusted Percentage, Adults with Diabetes, Virginia 1994 - 2015



Vertical dotted line indicates major changes to the survey methods in 2011

Source: www.cdc.gov/diabetes/data

Disclaimer: This is a user-generated report. The findings and conclusions are those of the user and do not necessarily represent the views of the CDC.

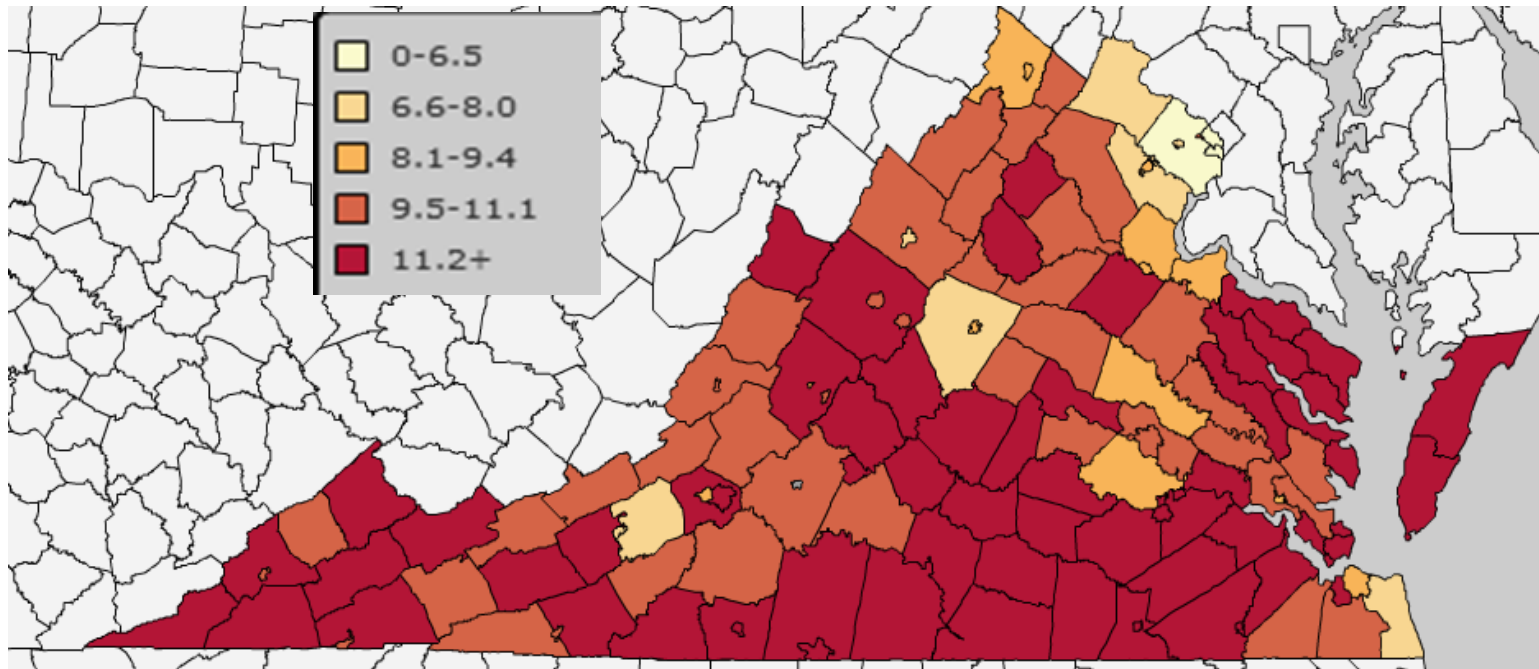
National Center for Chronic Disease Prevention and Health Promotion

Division of Diabetes Translation



BURDEN OF DIABETES IN VIRGINIA

Diagnosed Diabetes Percentage | 2013* Virginia



The Southern and Eastern parts of Virginia have the highest prevalence of diabetes. Most (73%) health districts have prevalence rates of diabetes that approach state prevalence levels of 9.6%.

Centers for Disease Control and Prevention. State Diabetes Burden Toolkit. Accessed January 2018.

BURDEN OF DIABETES IN VIRGINIA



In Virginia, the total cost of diabetes was \$11.0 billion in 2013, consisting of approximately \$4.6 billion in direct medical costs and \$6.4 billion in indirect costs.

BURDEN OF DIABETES IN VIRGINIA

| Preventive and Management Behavior | Percent of Adults with Diabetes in Virginia |
|--|---|
| Saw health professional for diabetes in last year | 85.5% |
| Have feet checked by health professional annually | 72.7% |
| Have A1c checked by health professional twice/year | 69.4% |
| Have taken a course or class in how to manage diabetes | 53.7% |

CDC. 2015. Behavioral Risk Factor Surveillance Survey.

WHAT IS DSME?

DSME

- is a collaborative process through which people with diabetes gain the knowledge, skills, and abilities needed for optimal diabetes self-care.
- Incorporates the needs, goals, and life experiences of the person with diabetes.

American Diabetes Association. 4. Lifestyle management: Standards of Medical Care in Diabetes—2018. *Diabetes Care* 2018;41(Suppl.1):S38-S50.



WHAT IS DSMT?

DSMT (Diabetes Self-Management Training)

- Is the term used by the Centers for Medicaid and Medicare Services (CMS) when defining the reimbursement benefit of DSME.
- When referring to DSME, DSMT is considered to have the same meaning.
- To reflect this, referral forms use DSME/T.

Powers et al. (2015). DSMES in T2DM: A Joint Position Statement of ADA, AADE, and AND. *Journal of the Academy of Nutrition and Dietetics*, 115(8), 1323-1334.

Diabetes Self-Management Education/Training (DSME/T)

Check type of training services and number of hours requested

- | | |
|--|---|
| <input type="checkbox"/> Initial group DSME/T: | <input type="checkbox"/> 10 hours or _____ no. hrs. requested |
| <input type="checkbox"/> Follow-up DSME/T: | <input type="checkbox"/> 2 hours or _____ no. hrs. requested |
| <input type="checkbox"/> Telehealth | |

DSME/T Content

- | | |
|--|--|
| <input type="checkbox"/> Monitoring diabetes | <input type="checkbox"/> Diabetes as disease process |
| <input type="checkbox"/> Psychological adjustment | <input type="checkbox"/> Physical activity |
| <input type="checkbox"/> Nutritional management | <input type="checkbox"/> Goal setting, problem solving |
| <input type="checkbox"/> Medications | <input type="checkbox"/> Prevent, detect and treat acute complications |
| <input type="checkbox"/> Preconception/pregnancy management or GDM | |
| <input type="checkbox"/> Prevent, detect and treat chronic complications | |

Medicare coverage: 10 hrs initial DSMT in 12 month period from the date of first class or visit

COMPONENTS OF DSME/T PROGRAMS

- 10 Standards
 - 1. Internal Structure - document a mission statement and goals.
 - 2. Stakeholder Input – ongoing, to promote quality and enhance participation.
 - 3. Evaluation of Population Served – community assessment
 - 4. Quality Coordinator Oversight
 - 5. DSMES Team – interdisciplinary, at least one RN, RD, or Pharm.D. who holds CDE or BC-ADM
 - 6. Curriculum – dynamic, evidence-based, core content, outcome evaluation
 - 7. Individualization
 - 8. Ongoing Support
 - 9. Participant Progress
 - 10. Quality Improvement

<https://doi.org/10.2337/dci17-0025>



REFERRAL REQUIREMENTS FOR DSME/T

Who can refer? MDs, NPs, PAs, Podiatrists

The DSMT Referral must reflect that the treating physician or advanced practice provider or other treating provider certifies the medical necessity of the referral. Using an Order Form facilitates this.

The order must include:

- a statement signed by the referring provider that the service is medically necessary
- the number of initial or follow up hours ordered (maximum of 10)
- topics to be covered
- individual or group

Initial DSME/T referral – a one time Medicare benefit for 10 hours in the first consecutive 12 months. Hours not used are forfeited. The first hour must be individual.

Follow up DSME/T referral – 2-hours per year beginning at Month 13 after the first DSME/T is billed or the January after the initial 10 hours are billed, whichever is first. A follow up referral must be completed.

Diabetes Self-Management Education/Training (DSME/T)

Check type of training services and number of hours requested

- | | |
|--|--|
| <input type="checkbox"/> Initial group DSME/T: | <input type="checkbox"/> 10 hours or _____no. hrs. requested |
| <input type="checkbox"/> Follow-up DSME/T: | <input type="checkbox"/> 2 hours or _____no. hrs. requested |
| <input type="checkbox"/> Telehealth | |

Patients with special needs requiring individual (1 on 1) DSME/T

Check all special needs that apply:

- | | | |
|---|---|-----------------------------------|
| <input type="checkbox"/> Vision | <input type="checkbox"/> Hearing | <input type="checkbox"/> Physical |
| <input type="checkbox"/> Cognitive Impairment | <input type="checkbox"/> Language Limitations | |
| <input type="checkbox"/> Additional training | <input type="checkbox"/> additional hrs requested _____ | |
| <input type="checkbox"/> Telehealth | Other _____ | |

DSME/T Content

- | | |
|--|--|
| <input type="checkbox"/> Monitoring diabetes | <input type="checkbox"/> Diabetes as disease process |
| <input type="checkbox"/> Psychological adjustment | <input type="checkbox"/> Physical activity |
| <input type="checkbox"/> Nutritional management | <input type="checkbox"/> Goal setting, problem solving |
| <input type="checkbox"/> Medications | <input type="checkbox"/> Prevent, detect and treat acute complications |
| <input type="checkbox"/> Preconception/pregnancy management or GDM | |
| <input type="checkbox"/> Prevent, detect and treat chronic complications | |

Medicare coverage: 10 hrs initial DSMT in 12 month period from the date of first class or visit

DIAGNOSIS

Please send recent labs for patient eligibility & outcomes monitoring

- | | |
|--------------------------------------|---------------------------------|
| <input type="checkbox"/> Type 1 | <input type="checkbox"/> Type 2 |
| <input type="checkbox"/> Gestational | Diagnosis code _____ |

Complications/Comorbidities

Check all that apply:

- | | | |
|--|---------------------------------------|----------------------------------|
| <input type="checkbox"/> Hypertension | <input type="checkbox"/> Dyslipidemia | <input type="checkbox"/> Stroke |
| <input type="checkbox"/> Neuropathy | <input type="checkbox"/> PVD | |
| <input type="checkbox"/> Kidney disease | <input type="checkbox"/> Retinopathy | <input type="checkbox"/> CHD |
| <input type="checkbox"/> Non-healing wound | <input type="checkbox"/> Pregnancy | <input type="checkbox"/> Obesity |
| <input type="checkbox"/> Mental/affective disorder | Other _____ | |

REFERRAL ELIGIBILITY

Medicare covers outpatient DSMT for beneficiaries who meet the following criteria:

- Recently diagnosed with Type 1 and Type 2 diabetes **AND**
 - Determined to be at risk for complications from diabetes by a physician or qualified non-physician provider.
- OR**
- Were previously diagnosed with diabetes before meeting Medicare eligibility requirements and are now eligible for coverage.

Diagnostic Criteria

According to Medicare guidelines, diabetes is defined as a condition of abnormal blood glucose metabolism using the following diagnostic criteria:

- Fasting glucose > 126 mg/dL on two separate occasions **OR**
- Two-hour post glucose challenge > 200 mg/dL on two separate occasions **OR**
- A random glucose test > 200 mg/dL for a person with symptoms of uncontrolled diabetes

<http://qioprogram.org/sites/default/files/DSME-Toolkit.pdf>

REFER PATIENTS TO DSME/T PROGRAMS

Use a guided search:

■ DiabetesLocal

<http://www.diabeteslocal.org>



The screenshot shows the DiabetesLocal website interface. The browser title is "Search Results | Diabetes Local - Windows Internet Explorer". The address bar shows "http://www.diabeteslocal.org/education". The page features a "DIABETES LOCAL" logo with a magnifying glass icon. Below the logo are three icons: "TIPS FINDING RESOURCES", "TIPS ADDING RESOURCES", and "BENEFITS OF REGISTERING". A section titled "SET LOCATION THEN BROWSE BY CATEGORY" includes icons for "HEALTHY EATING", "BEING ACTIVE", "MONITORING", "TAKING MEDICATION", "PROBLEM SOLVING", "HEALTHY COPING", "REDUCING RISKS", and "EDUCATION". The "EDUCATION" category is selected, and the page displays a "Knowledge of diabetes is the key to good health..." text and an image of an elderly woman. On the right, a "Set Location" section allows users to enter a zip code (20001) and a radius (15 Miles), with a "Set" button. Below this is a "Search Resources" section with a search bar and radio buttons for "Within this category" and "All Categories". A "NOW SELECT SUB-CATEGORY" section lists various education programs: "Diabetes Education Programs", "Exercise Classes", "Gestational Diabetes Education Programs", "Health Promotion", "Nutrition Education Programs", and "Smoking Cessation". A green button at the bottom right says "Add a Resource to our library".


- #1 Set your location:** zip code or city, state
- #2 Choose a category of interest**
- #3 Learn a little about the category**
- #4 Select a subcategory**
- #5 See the resources in your local community**

REFER PATIENTS TO DSME/T PROGRAMS

Use a Word Search

■ DiabetesLocal

<http://www.diabeteslocal.org>



SET LOCATION THEN BROWSE BY CATEGORY

HEALTHY EATING BEING ACTIVE MONITORING TAKING MEDICATION PROBLEM SOLVING HEALTHY COPING REDUCING RISKS EDUCATION

Search Results

Good Service Sample Resource

This is a few words about the very good service we provide.

#5 See the resources in your local community

Sample Resource

123 Street Rd
Somewhere, VA 20171
(213) 456-1234

Updated: 07/03/2011 : [4073]

Good Product Sample Resource

Sample Resource is for a Product to demonstrate displays. The full description allows for many, many lines of text. It is an opportunity to include detail information as well as links and contact information in addition to the single items available through the widgets.

Please copy and past the following link for more information:
<http://diabeteslocal.org/resource/good-service-sample-resource>

Or you may also call 213-555-1234 to learn of additional support for those impacted by diabetes

Updated: 07/10/2011 : [4074]

Set Location
Zip Code or Town, State
20001
25 Miles
Set

Search Resources
or Browse Categories on Left

Sample Resource

☐ Within this category
☒ All Categories

#1 Set your location: zip code or city, state

#2 Type terms of interest This is simple word search only.

#3 Click the magnifying glass or hit enter

#4 Select Within this category or subcategory or All Categories

#5 See the resources in your local community

Provided by:
DIABETES RESEARCH & WELLNESS
MEET OUR SUPPORTERS

VIRGINIA PRIVATE INSURANCE DSME/T REIMBURSEMENT

Virginia requires private health insurance policies

- to provide coverage for in-person outpatient DSME/T
- when prescribed by a health care professional.
- DSME/T must be provided by a certified, registered, or licensed health care professional.
- Insurers may impose the same cost-sharing requirements applicable to similar covered benefits; however, insurers may not impose annual limits on DSME/T coverage.

VIRGINIA MEDICARE DSME/T REIMBURSEMENT

Medicare provides recipients with

- up to 10 hours of outpatient DSME/T in the year following their first referral for DSME/T.
- with limited exceptions, recipients may receive 1 hour of private training and 9 hours of group training.
- recipients may qualify for up to 2 hours of follow-up training each year after they receive initial training.

To receive coverage for DSME/T, a Medicare recipient must

- obtain a referral from the health care professional treating the recipient's diabetes.
- Attend a training program that is ADA-recognized or AADE-accredited.
- Pay any applicable deductible and a copay of up to 20% of the total cost of DSME/T services.

VIRGINIA MEDICAID DSME/T REIMBURSEMENT



Virginia's Medicaid program provides coverage for

- certain low-income populations, including low-income pregnant women, parents or other caretaker relatives, children, individuals 65 years of age or older, and individuals with disabilities.
- at this time, in Virginia, the program does not explicitly indicate that beneficiaries receive coverage for DSME/T.

REIMBURSEMENT FOR DSME/T IN VIRGINIA

Summary

| Insurance Type | Private | Medicare | Medicaid | Other |
|----------------------------|---|---|----------|-------|
| % of Virginia's Population | 61% | 14% | 11% | 14% |
| Coverage Required for DSME | Yes | Part B only | No | - |
| Cost Sharing | Varies by plan | Up to 20% copay Deductible | - | - |
| Limitations | No annual benefit limits permitted Prescription required | 10 hours within 12 months of initial referral 2 hours annual follow-up training Referral required | - | - |



REFERENCES

American Diabetes Association. 4. Lifestyle Management: Standards of Medical Care in Diabetes – 2018. *Diabetes Care* 2018;41(Suppl. 1):S38-S50. <https://doi.org/10.2337.dc18-S004>

American Diabetes Association. The burden of diabetes in Virginia fact sheet. <http://main.diabetes.org/dorg/PDFs/Advocacy/burden-of-diabetes/virginia.pdf>

<http://care.diabetesjournals.org/content/diacare/early/2017/08/17/dci17-0025.full.pdf>

<http://lawatlas.org/datasets/diabetes-self-management-education-laws>

<http://qioprogram.org/sites/default/files/DSME-Toolkit.pdf>

<http://www.diabeteslocal.org>

<https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R13BP.pdf>

Powers M, Bardsley J, Cypress M, et al. (2015). Diabetes self-management education and support in type 2 diabetes: A joint position statement of the American Diabetes Association, the American Association of Diabetes Educators, and the Academy of Nutrition and Dietetics. *Journal of the Academy of Nutrition and Dietetics*, 115(8), 1323-1334.

Powers M, Bardsley J, Cypress M, et al. (2015). Diabetes self-management education and support in type 2 diabetes: A joint position statement of the American Diabetes Association, the American Association of Diabetes Educators, and the Academy of Nutrition and Dietetics. *Diabetes Educator*. 41(5), 417-430.



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THANK YOU

NAME OF PRESENTER AND EMAIL