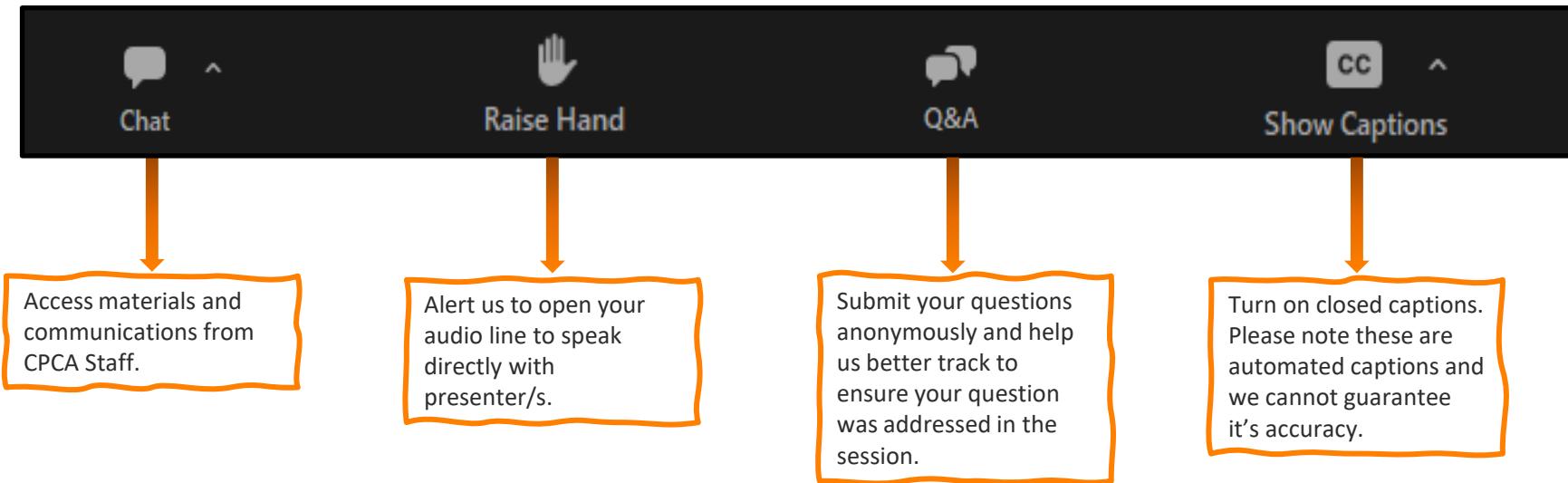


Support for Diabetes Self Management Education in FQHCs

Thursday, September 5th 2024

Zoom Webinar Toolbox



AI Note-Taking Tools Policy

Effective **11/01/23**, CPCA **prohibits** the use of AI note-taking tools during virtual events. This policy is based on the following principles:

1. Preservation of Intellectual Property: Virtual events often involve the sharing of proprietary information, copyrighted materials, or confidential data. The use of AI note-taking tools can lead to unauthorized duplication and distribution of such content.
2. Active Participation: Encouraging active human engagement during virtual events fosters a more interactive and enriching experience. AI note-taking can deter participants from actively engaging in discussions and interactions.
3. Data Privacy: The use of AI note-taking tools may inadvertently capture and process sensitive information shared during virtual events. This can lead to concerns regarding data privacy and security.

Session facilitators have the authority to deny and or dismiss all AI Note-Taking tools from the event.





Date: 9-5-2024

**CDC Funded Training Support For
Diabetes Self-Management Education (DSMES/T)
In Community Health Centers (CHCs)**

WELCOME

Part 1 of 2 (occurred live on 8/29/2024)



[Click here to
view the
recording:](#)

1. Increase understanding of National Diabetes Prevention Program (NDPP)
2. Identify the benefits of NDPP in CHCs
3. Increase awareness of support for NDPP in CHCs

Part 1: Learning Objectives

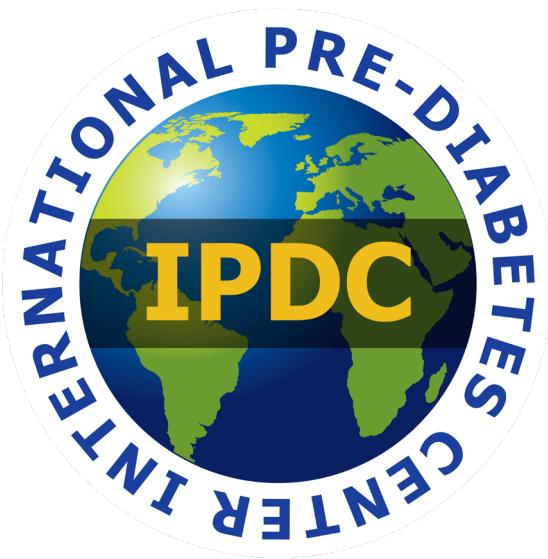
Agenda (Part 2 of 2)



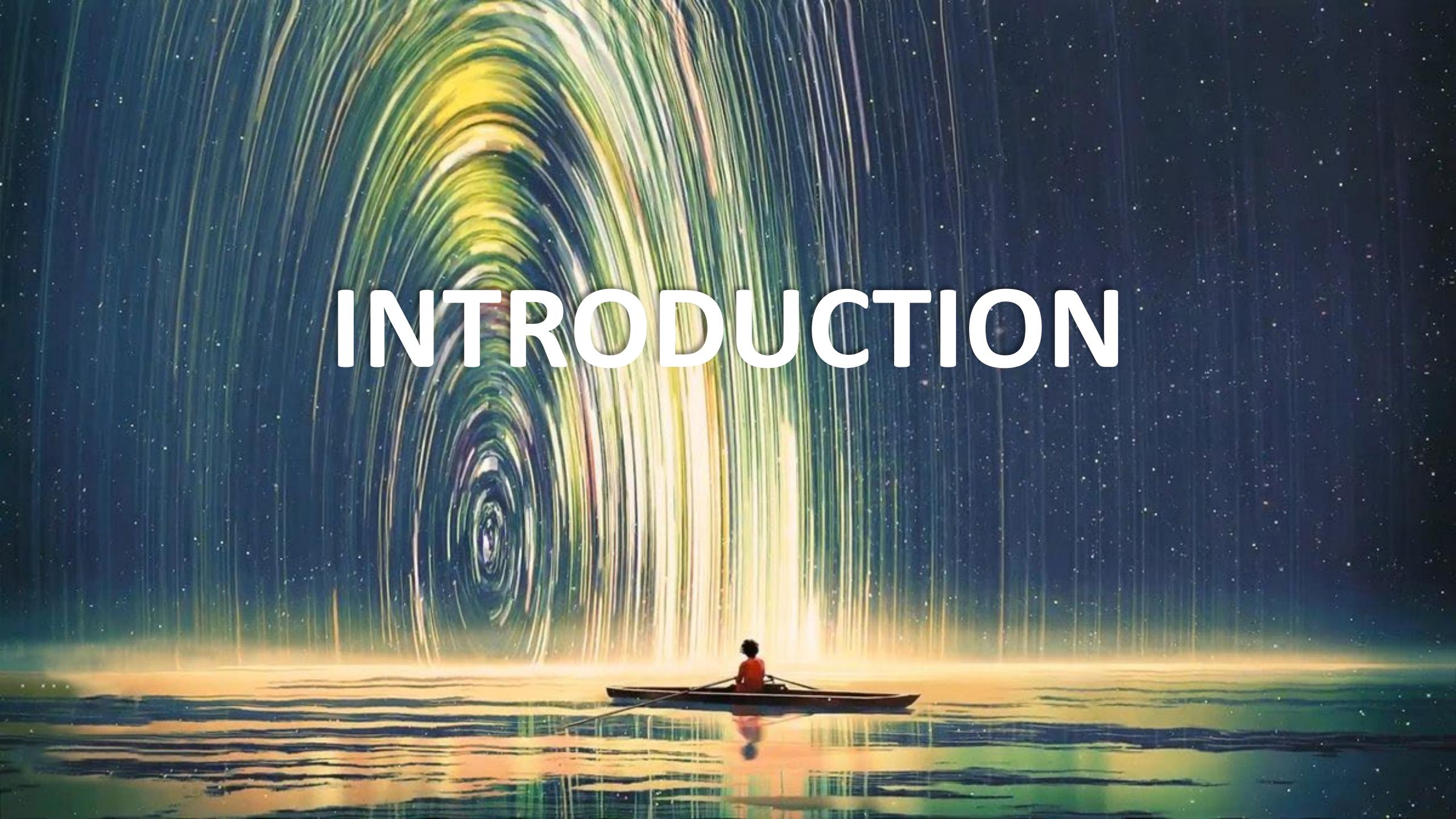
- 1. Introduction**
Background, Partnership/ Overview
- 2. DSMES/T**
What is DSMES/T?
Benefits of DSMES in CHCs
- 3. DSMES/T CHC Support**
Training, Technical Assistance, Financial
Q & A

Learning Objectives

1. Increase understanding of DSMES/T
2. Identify the benefits of DSMES/T in CHCs
3. Increase awareness of CDC funded support for DSMES/T in CHCs



INTRODUCTION



Speaker



Dr Yvonne Grant,
CEO & Program
Manager for
International Pre-
Diabetes Center

IPDC Training Center



IPDC

- IPDC's houses the Diabetes Professional Training Center (DPTC)
- DPTC is Accredited by the ADCES
- IPDC working in partnership with CPCA, funded by the CDC, to increase DSMES/T in CHCs.
- IPDC has been supporting CHCs to implement DSMES/T for more than 10 years.

Why Support HCs?

- They serve the poor, under-insured and uninsured
- With un-met social needs & barriers to care
- Poor health outcomes
- Healthcare workforce shortages
- Provider burnout



California Primary Care Association (CPCA)



Working Together For Collective Impact!

A person in a small boat on a calm lake, looking at a massive, colorful, swirling aurora borealis in the sky.

DSMES/T

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

**CMS Reimburses for Training
(NOT Education)**

Diabetes TRAINING and Diabetes Education

Training includes 7 Self Care Behaviors:

- Healthy Eating
- Being Active
- Taking medications as prescribed
- Monitoring (blood sugar levels, eating and physical activity)
- Reducing risks for complications
- Healthy coping (and diabetes emotional wellbeing).
- Problem solving (to find solutions and take action)

Diabetes Education

- ❑ There are many diabetes education programs available:
Diabetes education classes include:
Type 1 diabetes, Type 2 diabetes, living with diabetes and
gestational diabetes
- ❑ Diabetes education is not reimbursed in the same way as
diabetes training
- ❑ CMS approved Accreditation/ Recognition is required for
Diabetes Training, - not required for Diabetes Education

Requirements for DSMES TRAINING

- ☐ Provider must ensure that the patient has Medicare Part B Insurance
- ☐ DSMET: the program must have achieved Accreditation or Recognition in order to bill for Training
- ☐ Billing for up to 10 hours of training in the first year, and 2 hours annually thereafter as needed
- ☐ Must be ordered by a provider

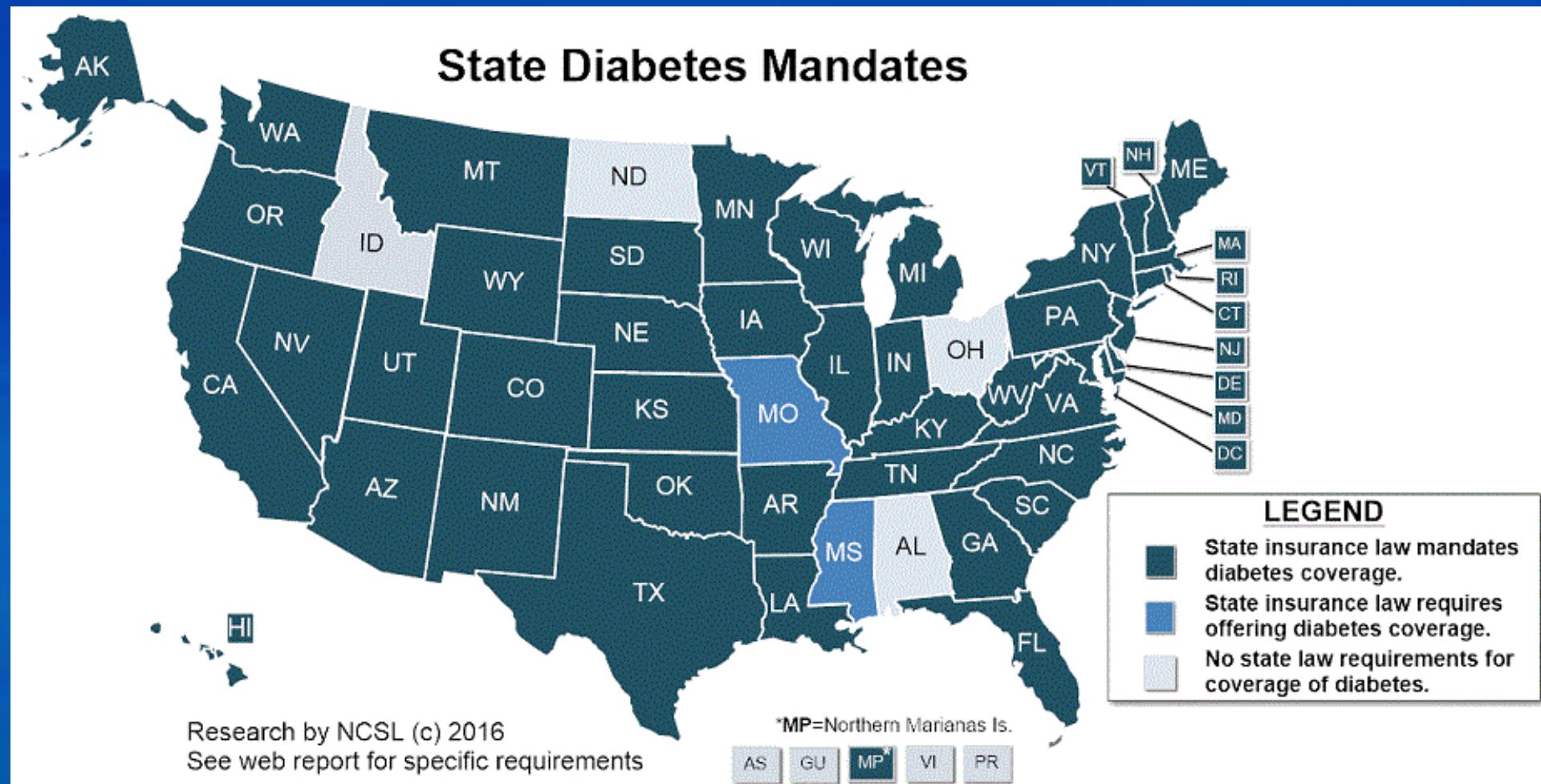
Why DSMES/T?

- ❑ DSMES/T is a critical component of diabetes care that has demonstrated improvement in diabetes outcomes
- ❑ DSMES/T: assesses at baseline and after training: for improvement in 7 core areas of learning and skills building
- ❑ DSMES/T develops a Plan (following assessment): for training; (7 core areas) ensure that the necessary skills are present for daily living and self-managing diabetes.

What Is DSME/T ?

- Teaching patients to monitor and selfmanage their diabetes is an important method for controlling this disease.
- Many states require all public and private health insurance plans to cover diabetes self-management education and training (DSME/T).
- The map on next slide shows which states have laws that require diabetes coverage for both private insurance plans and Medicaid

States With Mandates for Diabetes

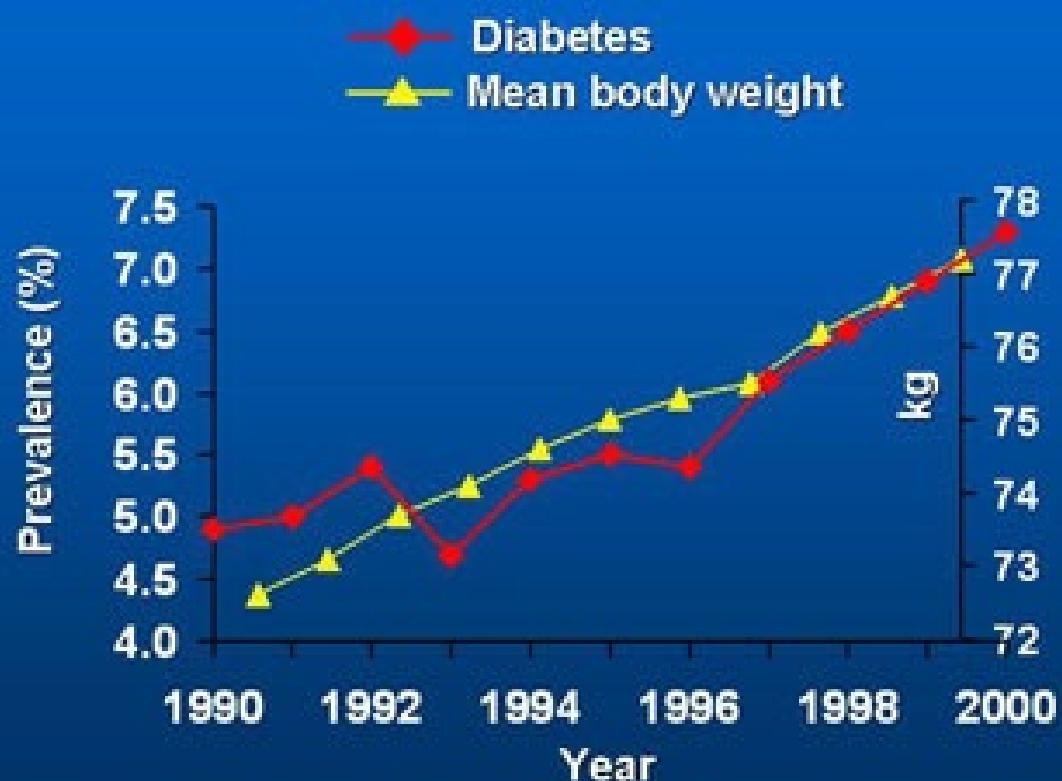


Why Support For DSMES/T in CHCs?

- ❑ Despite advances made in diagnosis and treatment for diabetes, it continues to grow in prevalence
- ❑ Approximately 90% of those with Diabetes have Type 2 Diabetes (4)
- ❑ Compounding the problem, is that treatment targets for diabetes are not being met.

Diabetes: Is A Most Rapidly Growing Epidemic

Diabetes and Obesity: The Continuing Epidemic



Mokdad AH et al. *Diabetes Care*. 2000;23:1278-83.

Mokdad AH et al. *JAMA*. 1999;282:1519-22.

Mokdad AH et al. *JAMA*. 2001;286:1195-200.

Support For DSMES/T in CHCs

- Support with accreditation and recognition process
- CMS has authorized 2 organizations to conduct Accreditation/ Recognition for DSMES/T
 - Association of Diabetes Care & Education Specialists (ADCES) – Accreditation
 - American Diabetes Association (ADA) - Recognition
- Program Accreditation/Recognition is a requirement to bill for DSMES/T services

Support For DSMES/T in CHCs

- ❑ CPCA works with IPDC to provide staff training and technical assistance to implement and sustain DSMES/T
- ❑ Organizational commitment to support DSMES/T is what is needed to Receive Support for DSMES/T
- ❑ Recommendation: all people with diabetes should receive DSMES/T at diagnosis and as needed

Support For DSMES/T in CHCs

- ❑ Support with meeting the National Standards for Accreditation/ Recognition
- ❑ Conducts a gap analysis to determine what standards are missing from any existing Diabetes Education program (Example: Stanford Model, any Diabetes Education in Medical Model)
- ❑ Designs a plan for meeting program standards and requirements

Support For DSMES/T in CHCs

- Support with completing the application online
- Financial support with the application fee
- Support with packaging the necessary documents that demonstrate that the required standards are met
- Support with a “mock” interview prior to the accreditation/recognition interview
- Support with quality and performance annual reports.

QUICK REVIEW

A person in a small boat on a calm body of water, looking at a massive, colorful, swirling vortex in the sky. The vortex is composed of many vertical streaks of light in shades of green, yellow, and blue, creating a tunnel-like effect that stretches from the horizon up into the dark blue night sky. The person is sitting in the boat, facing away from the camera, looking towards the vortex. The water in the foreground is calm, reflecting the colors of the sky. The overall mood is mysterious and awe-inspiring.

Why We Need DSME/T?

- More than 30 million U.S. adults have diabetes
- About 84 million US adults have pre-diabetes
- Diabetes: A1C : $>/= 6.5$
- Pre-Diabetes: A1c: 5.7 to 6.4
- You Should Know Your Numbers

PREVIEW BILLING



Who Can Bill For DSMES/T

- Accredited Programs
- Evidence-based Programs
- Only 2 Accrediting Organizations
- ADCES, ADA
- Submit your Certificate to Medicare Provider Clearinghouse

Key Concepts And Reminders



- Once Accredited, notify and send accreditation certificate to Medicare Administration Contractor (MAC).
- Complete the same process for state Medicaid program.
- Work closely with billers, business office, and finance team
- Ensure correct billing and appropriate claim processing for DSME/T

Billing For DSME/T In FQHC

- There is one national, unadjusted “base” prospective payment system (PPS) rate for the FQHC-approved qualifying visit codes for all FQHCs.
- The rate is \$187.90 (January through December 2022).
- CMS updates this rate annually to reflect inflation and adjusts for each FQHC based on the facility’s location (referred to as the “geographical adjustment factor” or GAF).

Working Together For Sustainability

- Check guidelines for multiple provider billing on the same day
- Ensure billing requirements are met:
 - Need Provider referral
 - Diagnosis
 - Billing codes and duration of service
- Work as a Team



Multidisciplinary Care Team

Billing Codes

Service	HCPCS Code	Short Description	Paid Under the PPS Methodology
Diabetes Self-Management Training (DSMT)	G0108	Diabetes management treatment per Indiv.	Yes
Intensive Behavioral Therapy for Obesity	G0447	Behavior counsel obesity 15m	Yes
Medical Nutrition Therapy (MTN)	97803	<i>Med Nutrition Indiv. subsequent</i>	Yes
	G0270	For change Dx	

Components Specific to FQHC

- Higher level of reimbursement for 1:1 education
- Do Not Bill for Group Education in FQHC
- It is assumed that patients are more challenging in FQHC and therefore 1:1 billing is approved for reimbursement for DSMES/T



COMMUNITY HEALTH CENTER

SIGN UP: @ipdcnttac.org

DSMES/T Technical Assistance/ Support
A Partnership for Collective Impact

Thank You

Contact: ygrant@internationalprediabetescenter.org

**References, Additional
Materials,
And Course Curriculum
Are Provided Upon Request**

QUESTIONS?



THANK YOU!