DIABETES PREVENTION PROGRAM SERVICES FOR ADULTS
Effective: September 1, 2020
Applies to: Provider of Diabetes Prevention Program Services

CONTENTS
- DIABETES PREVENTION PROGRAM SERVICES
- PATIENT ELIGIBILITY
- PRIOR AUTHORIZATION
- PROVIDER QUALIFICATIONS
- PROVIDER ENROLLMENT
- MO HEALTHNET MANAGED CARE PARTICIPANTS
- PROCEDURE CODES AND LIMITS

DIABETES PREVENTION PROGRAM (DPP) SERVICES
On September 1, 2020, the MO HealthNet Division (MHD) implemented a DPP for eligible adult participants.

These services are Centers for Disease Control and Prevention (CDC) recognized DPP services for at risk individuals, intended to prevent Type-2 Diabetes or delay the progression. DPP services are provided during sessions that occur at regular periodic intervals over the course of one year, and, if eligible based upon individual measurable health-outcomes, additional ongoing maintenance sessions at regular, periodic intervals for another year. At these sessions, DPP services include ongoing nutrition or behavioral counseling focusing on weight reduction and lifestyle changes and physical activity and fitness assessments.

PATIENT ELIGIBILITY
For participants to be eligible for DPP services the following criteria must be met:
- Be 21 years of age and older and currently enrolled as a MO HealthNet participant; and
- Not currently pregnant; and
- Have, as of the date of attendance at the first core session, a BMI equal to or greater than 25 or a BMI of 23 if of Asian descent; and
- Have no previous diagnosis of type one (1) or two (2) diabetes, but may have had a previous diagnosis of gestational diabetes; and
- Have had within the last twelve (12) months:
  - Hemoglobin A1C test with a value of 5.7% to 6.4%; or
  - A fasting plasma glucose of 100 mg/dl to 125 mg/dl; or
A 2-hour plasma glucose of 140 to 199 mg/dl after the 75 oral glucose tolerance test.

For participants to be eligible for the ongoing maintenance services the following criteria must be met:

- The participant has achieved and maintained a minimum of 5% weight loss at the end of the first 12 months.

**PRIOR AUTHORIZATION**

DPP services require a referral or prescription in the participant’s plan of care by a physician or other licensed practitioner, and require a prior authorization for the first 12 months of services. A prescribing provider is defined as a licensed practitioner authorized to prescribe within their scope of practice either directly or by protocol consistent with their scope of practice under State law. For participants that meet the continuation criterion an additional prior authorization will be required for the additional 12 months of ongoing maintenance sessions.

To obtain prior authorization, enrolled providers can call 800-392-8030, Option 7, or use the CyberAccess website, a web tool that automates this process for MO HealthNet providers. To become a CyberAccess user, contact the help desk at 888-581-9797 or 573-632-9797, or email cyberaccesshelpdesk@conduent.com.

**PROVIDER QUALIFICATIONS**

Providers of DPP services include individuals and/or organizations with diabetes prevention programs that have pending, preliminary, or full recognition status from the CDC’s Diabetes Prevention Recognition Program, and are enrolled as MO HealthNet providers.

DPP service providers use lifestyle coaches for delivery of DPP services to participants. The lifestyle coaches must have completed nationally recognized training for delivery of DPP services. Lifestyle coaches may be:

- Physicians;
- Licensed nonphysician practitioners;
- Unlicensed practitioners under the supervision of a DPP services provider or a licensed MO HealthNet practitioner.

For DPP services delivered by unlicensed lifestyle coaches, the supervising MO HealthNet provider will assume professional liability for care of the patient and furnish services within its scope of practice according to state law.

All lifestyle coaches must complete a minimum of 12 hours of training in DPP services from an organization recognized by the CDC for DPP.

**PROVIDER ENROLLMENT**
If you are already an enrolled provider and would like to participate in this new program to provide DPP services and have the proper CDC recognition status, you will need an additional provider number to bill for these services (Provider Type 37).

The link to complete the electronic application is: https://peu.momed.com/peu//momed/presentation/commongui/PeHome.jsp

Any questions regarding enrollment should be emailed to: MMAC.ProviderEnrollment@dss.mo.gov

**MO HEALTHNET MANAGED CARE PROVIDERS**

Managed Care enrolled providers should contact their Managed Care Organization with questions regarding diabetes prevention program services billing and reimbursement.

**PROCEDURE CODES AND LIMITS**

Covered procedure codes are listed in the table below.

<table>
<thead>
<tr>
<th>Procedure Code</th>
<th>Code Description and Limits</th>
<th>Reimbursement Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>0403T</td>
<td>Preventive behavior change, intensive program of prevention of diabetes using a standardized DPP curriculum, provided to individuals in a group setting, minimum sixty (60) minutes, per day. Maximum 26 session (units) months 1 through 12.</td>
<td>$19.23 per session/unit</td>
</tr>
<tr>
<td>99412</td>
<td>Preventive Medicine Service, group counseling for ongoing maintenance. Maximum four sessions months 13 through 24.</td>
<td>$19.23 per session/unit</td>
</tr>
</tbody>
</table>

Additional DPP services requests beyond the initial allocation must be submitted as a new prior authorization request and must be deemed medically necessary.

DPP services are beyond the scope of those services covered under the Rural Health Clinic and/or FQHC designation. These services must be separately billed (as appropriate) under the appropriate performing provider furnishing the services, using their active non-RHC Clinic and/or non-FQHC provider number.
**Provider Bulletins** are available on the MO HealthNet Division (MHD) (Formerly the Division of Medical Services) Web site at [http://dss.mo.gov/mhd/providers/pages/bulletins.htm](http://dss.mo.gov/mhd/providers/pages/bulletins.htm). Bulletins will remain on the Provider Bulletins page only until incorporated into the provider manuals as appropriate, then moved to the Archived Bulletin page.

**MO HealthNet News:** Providers and other interested parties are urged to go to the MHD Web site at [http://dss.missouri.gov/mhd/global/pages/mednewssubscribe.htm](http://dss.missouri.gov/mhd/global/pages/mednewssubscribe.htm) to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official MO HealthNet communications via E-mail.

**MO HealthNet Managed Care:** The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- Services not included in MO HealthNet Managed Care

Questions regarding MO HealthNet Managed Care benefits should be directed to the patient’s MO HealthNet Managed Care health plan. Before delivering a service, please check the patient’s eligibility status by swiping the MO HealthNet card or by calling the Provider Communications Interactive Voice Response (IVR) System at 573-751-2896 and using Option One for the red or white card.

**Provider Communications Hotline**

573-751-2896