



MLN Matters®



Information for Medicare Fee-For-Service Health Care Professionals

MLN Matters Number: MM3185

Related Change Request (CR) #:3185

Related CR Release Date: May 28, 2004

Effective Date: January 1, 2004

Related CR Transmittal #: R13BP

Implementation Date: June 28, 2004

Diabetes Self-Management Training Services

Note: This article was updated on May 7, 2013, to reflect current Web addresses. All other information remains unchanged.

Provider Types Affected

Physicians, suppliers, and providers

Provider Action Needed



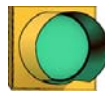
STOP – Impact to You

Physicians, suppliers, and providers should note that the definition for diabetes mellitus has been changed.



CAUTION – What You Need to Know

This instruction revises the current Internet Only Manual (IOM) for Diabetes Self-Management Training (DSMT), and changes the definition for diabetes mellitus. Also, material that was not originally included from previous instructions has been added to the IOM.



GO – What You Need to Do

Refer to the *Background* and *Additional Information* sections of this instruction for additional information regarding these changes.

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Background

This instruction, recently issued by the Centers for Medicare & Medicaid Services (CMS), revises the current Internet Only Manual (IOM) for diabetes self-management training (DSMT) (Section 300 through 300.5), and the definition for diabetes mellitus has been changed per Volume 68, #216, November 7, 2003, page 63261 of the *Federal Register*.

Section 4105 of the Balanced Budget Act of 1997 permits Medicare coverage of Diabetes Self-Management Training (DSMT) services when these services are furnished by a certified provider who meets certain quality standards. This program is intended to educate beneficiaries in the successful self-management of diabetes. The program includes instructions in self-monitoring of blood glucose; education about diet and exercise; an insulin treatment plan developed specifically for the patient who is insulin-dependent; and motivation for patients to use the skills for self-management.

Diabetes self-management training services may be covered by Medicare only if the treating physician or treating qualified nonphysician practitioner who is managing the beneficiary's diabetic condition certifies that such services are needed. The referring physician or qualified nonphysician practitioner must maintain the plan of care in the beneficiary's medical record and documentation substantiating the need for training on an individual basis when group training is typically covered, if so ordered. The order must also include a statement signed by the physician that the service is needed as well as the following:

- The number of initial or follow-up hours ordered (the physician can order less than 10 hours of training);
- The topics to be covered in training (initial training hours can be used for the full initial training program or specific areas such as nutrition or insulin training); and
- A determination that the beneficiary should receive individual or group training.
- The provider of the service must maintain documentation in file that includes the original order from the physician and any special conditions noted by the physician.

Beneficiaries Eligible for Coverage and Definition of Diabetes

Medicare Part B covers (not to exceed) 10 hours of initial training for a beneficiary who has been diagnosed with diabetes. Diabetes is defined as diabetes mellitus, a condition of abnormal glucose metabolism diagnosed using the following criteria:

- A fasting blood sugar greater than or equal to 126 mg/dL on two different occasions;

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- A two-hour post-glucose challenge greater than or equal to 200 mg/dL on two different occasions; *or*
- A random glucose test over 200 mg/dL for a person with symptoms of uncontrolled diabetes.

Related Instructions

The following sections of the *Medicare Benefit Policy Manual* (Pub 100-2), Chapter 15 (Covered Medical and Other Health Services) have been revised:

Section 300 (Diabetes Outpatient Self-Management Training Services)

- Subsections 300.1 (Coverage Requirements)
- 300.2 (Certified Providers)
- 300.3 (Frequency of Training)
- 300.4 (Outpatient Diabetes Self-Management Training).

The Medicare Benefit Policy Manual, Chapter 15 can be found at

<http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Internet-Only-Manuals-IOMs.html> on the CMS website.

Additional Information

The official instruction issued to your carrier regarding this change may be found by going to <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R13BP.pdf> on the CMS website.

If you have any questions, please contact your carrier/intermediary at their toll-free number, which may be found at <http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/provider-compliance-interactive-map/index.html> on the CMS website.

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