

Quick Guide to Medicare DSMT Benefit: Updated March, 2005

Diabetes Definition	<ul style="list-style-type: none"> Diabetes is "condition of abnormal glucose metabolism" diagnosed using ONE of these criteria: FBG \geq 126 mg on 2 tests, OR, two hour post glucose challenge test of \geq 200 mg on 2 tests, OR random glucose of \geq 200 mg with symptoms of uncontrolled diabetes
Medicare DSMT Coverage	<ul style="list-style-type: none"> <i>Initial</i> DSMT, one time benefit: 10 hours furnished in 12 consecutive months; 9 hours to be in group format and 1 hour may be used for individual instruction and/or assessment <i>Follow-up</i> DSMT: 2 hours each year after first, group or individual training
Practice Settings	<ul style="list-style-type: none"> Ambulatory only: physician office, clinics, hospital outpatient department, etc. Excluded: inpatient hospital setting; skilled nursing facilities
DSMT and MNT	<ul style="list-style-type: none"> Medicare covers DSMT and Medicare diabetes MNT in <i>initial</i> and <i>follow-up</i> years without decreasing either benefit as long as DSMT and MNT not provided on same date of service
Pt Eligibility	<ul style="list-style-type: none"> Part B insurance + documentation of ONE of criteria (in first row) used to diagnose diabetes
Provider Eligibility	<ul style="list-style-type: none"> Medicare providers (individual or entity) who are billing and receiving direct reimbursement for other individual Medicare services; includes: physicians, DMEs, renal dialysis facilities, hospital outpatient departments, Registered Dietitians, etc.
Claim Forms	<ul style="list-style-type: none"> Hospital outpatient: CMS 1450 (UB 92) claim form; sent to Part A Fiscal Intermediary Private practice: CMS 1500 claim form; sent to Part B Carrier
Required Documentation	<ul style="list-style-type: none"> Plan of diabetes care to be maintained in beneficiary's medical record by referring physician or qualified non-physician practitioner (NPP) who is managing beneficiary's diabetes Original written referral by physician or NPP for DSMT (which may include special conditions noted by physician/NPP) must be maintained by DSMT provider in beneficiary's medical record. Another referral for follow-up DSMT required. <i>Referral to include or specify:</i> <ul style="list-style-type: none"> Beneficiary's name and referral date Statement that DSMT is needed Whether DSMT is to be individual or group <ul style="list-style-type: none"> For individual initial DSMT, substantiating reason required on referral For follow-up DSMT, substantiating reason for <i>individual</i> training not required Topics to be addressed in DSMT Number of initial or follow-up DSMT hours to be furnished <ul style="list-style-type: none"> Less than 10 hrs can be ordered Initial hours can be used for all topics in full program, or for specific topics, such as nutrition or insulin training On follow-up DSMT referral, specific reason for follow-up training to be documented Diagnosis of diabetes (narrative or 5 digit ICD-9 diagnosis code) Physician's or NPP's signature
Procedure, Revenue Codes	<ul style="list-style-type: none"> HCPCS code G0108: individual, new or established pt, initial or follow-up, each 30 minutes HCPCS code G0109: group, new or established patient, initial or follow-up, each 30 minutes Hospital outpatient: Revenue code 942 on UB 92 claim; not required on CMS 1500 claim
Payment Rates and Billing Guidelines	<ul style="list-style-type: none"> Unadjusted rates: G0108: \$31 per 30 minute unit.....G0109: \$18 per 30 minute unit Geographical adjustment factor applied to rates in regions of country (may \uparrow or \downarrow in regions) Provider does <u>not</u> have to accept Medicare assignment; can bill beneficiary and/or coinsurance for difference between Medicare's allowed adjusted rate and provider's fee
DSMT Program Certification	<ul style="list-style-type: none"> DSMT Program must have Education Program Recognition certification from American Diabetes Association, Indian Health Services or from CMS <ul style="list-style-type: none"> American Diabetes Association uses <i>National Standards for Diabetes Self-Management Education</i> as certification criteria; NSDSME do not require CDE on instructional team, but do mandate that RD and RN receive specific number and type of CEUs <i>if not CDE</i>

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