Participants in the Medicare Diabetes Prevention Program: CMS Flexibilities to Fight COVID-19

The Trump Administration is issuing an unprecedented array of temporary regulatory waivers and new rules to equip the American healthcare system with maximum flexibility to respond to the 2019 Novel Coronavirus (COVID-19) pandemic. Made possible by President Trump’s recent emergency declaration and emergency rule making, these temporary changes will apply immediately across the entire U.S. healthcare system for the duration of the emergency declaration. The goals of these actions are to 1) to ensure that local hospitals and health systems have the capacity to handle a potential surge of COVID-19 patients through temporary expansion sites (also known as CMS Hospital Without Walls); 2) remove barriers for physicians, nurses, and other clinicians to be readily hired from the community or from other states so the healthcare system can rapidly expands its workforce; 3) increase access to telehealth in Medicare to ensure patients have access to physicians and other clinicians while keeping patients safe at home; 4) expand in-place testing to allow for more testing at home or in community based settings; and 5) put Patients Over Paperwork to give temporary relief from many paperwork, reporting and audit requirements so providers, health care facilities, Medicare Advantage and Part D plans, and States can focus on providing needed care to Medicare and Medicaid beneficiaries affected by COVID-19.

The Medicare Diabetes Prevention Program (MDPP) expanded model aims to prevent progression to type 2 diabetes in individuals with an indication of prediabetes. The majority of services furnished under the MDPP expanded model are currently required to be furnished in-person, except for limited virtual make-up sessions. Read more about MDPP at: https://innovation.cms.gov/initiatives/medicare-diabetes-prevention-program/.

In addition, the program includes clear interval timeframes in which beneficiaries must attend a prescribed number of classes and meet weight loss goals in order to remain eligible for MDPP services. For example, a beneficiary must meet the five percent weight loss goal in order to meet the eligibility criteria to move on to the second year of services. Furthermore, once a beneficiary loses eligibility, they are ineligible for services for their lifetime.

CMS understands the health and safety of MDPP staff and beneficiaries are paramount and realizes that concerns about COVID-19 may result in the suspension of MDPP in-person class sessions during this national emergency. The CDC has released guidance to CDC-recognized organizations on its National Diabetes Prevention Program (National DPP), providing alternative delivery options during the COVID-19 national emergency, including encouraging organizations to use virtual make-up sessions as necessary, regardless of usual delivery mode; if virtual make-up sessions are not possible, organizations may pause offering classes. When classes resume, CDC is allowing DPP providers to pick up where they left off, or to restart the program from week one. Our goal is to align MDPP model-specific changes as much as possible to what the CDC has released for the duration of the PHE.
For suppliers and beneficiaries enrolled in the benefit as of the beginning of the public health emergency, CMS is making the following temporary changes to MDPP:

- Increase the number of virtual make-up sessions that can be offered by MDPP suppliers.
- Allow MDPP suppliers that have the capability, to deliver certain sessions virtually.
- Waive the once per life time benefit and allow MDPP beneficiaries whose sessions were suspended to resume sessions or start over.

**Additional Guidance**
