



# **Medicare Diabetes Prevention Program (MDPP)**

## **Billing and Payment Office Hours**

***March 12<sup>th</sup>, 2025***

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# Disclaimer

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# Webinar Objectives

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- Describe recent changes to the payment structure and claim requirements for MDPP
- Review common billing and payment issues based on MDPP supplier inquiries
- Provide an opportunity for attendees to ask questions to the MDPP Model Team and Medicare Administrative Contractors (MACs)

# Webinar Outline

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## Outline:

1. [Recent Changes to Billing and Payment](#)
2. [Submitting an MDPP Claim](#)
3. [Resources and Additional Information](#)
4. [Common Billing and Payment Issues](#)
5. [Questions for MACs and the CMS MDPP Team](#)

# **Recent Changes to Billing and Payment**

# Overview of CY 2025 PFS Changes for MDPP Billing and Payment

- **Removal of Bridge Payments:** Bridge payments (*G9890*) are no longer necessary after the CY 2024 PFS changes to the MDPP payment structure
- **Clarifying Same-day Make-up Sessions:** Suppliers can hold and bill for same-day make-up sessions by adding Current Procedural Terminology (CPT) Modifier 76 to the claim line
- **Updated Payment Rates for MDPP Services:** Payments for certain MDPP services have increased to account for inflation

# Removal of Bridge Payment

Bridge Payments (claimed after a beneficiary switches MDPP suppliers) are no longer deemed necessary after the CY 2024 PFS update to the MDPP payment structure

## What's new:

- The MDPP **Bridge Payment (G9890)** has been removed from the list of HCPCS G-Codes that will be accepted for MDPP service dates from January 1<sup>st</sup>, 2025 and later
  - Bridge Payments can still be claimed for dates of service prior to January 1<sup>st</sup>, 2025.

# Billing for Same-Day Make-Up Sessions

To enable MDPP suppliers the flexibility of scheduling make-up sessions on the same day as a regularly scheduled session, suppliers must append a modifier code on the claim for the make-up session

- MDPP suppliers will need to append **Current Procedural Terminology (CPT) Modifier 76** (“repeat services by same physician”) to any claim for an in-person session (G9886) or a distance learning session (G9887) that indicates a make-up MDPP session that was held on the same day as a regularly scheduled session
  - The **CPT Modifier 76** is ONLY for the specific claim for a same-day make-up session
    - Failure to append the **CPT Modifier 76** to claims for same-day make-up sessions may lead to denials or rejections by the Medicare Administrative Contractors (MACs)
  - MDPP make-up sessions can only be furnished using the modalities permitted by the CY2024 PFS final rule for MDPP sessions: **in-person** and **distance learning** service delivery



# Updated Payment Rates for MDPP Services

The payment rate for G9880, G9881, G9886, and G9887 has been increased to account for inflation

	CORE SESSIONS	CORE MAINTENANCE SESSIONS
	MONTHS 1-6 (MAX 16 SESSIONS)	MONTHS 7-12 (MAX 6 SESSIONS)
Fee-For-Service Payments	G9886 (\$26): MDPP participant attended an in-person session for 60 minutes	
	G9887 (\$26): MDPP participant attended a distance learning session for 60 minutes	
Performance Payments	G9880 (\$149): MDPP participant achieved 5% weight loss from baseline weight	
	G9881 (\$26): MDPP participant achieved 9% weight loss from baseline weight	
		G9888 (\$8): MDPP beneficiary maintained 5 percent weight loss from baseline weight in months 7-12

**Note:** The G-codes presented in this table are based on the CY 2025 PFS and are relevant for claims with dates of service starting January 1, 2025<sup>1</sup>

Source: 1) [CY 2025 PFS Final Rule - Payment for MDPP Services](#).

# Submitting an MDPP Claim

# MDPP FFS Claim Submission



## 1. Use a Vendor/Third Party Billing Agent:

Providers and suppliers may use a third-party billing agent to manage billing and payment processes on their behalf. If using a billing agent, the billing agent's information must be listed on your **MDPP Enrollment Application** (at <https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/Downloads/CMS20134.pdf>).

**OR**

## 2. Self-Submit Claims:



If not using a billing agent, a MDPP supplier can submit claims to its MAC directly. The MDPP supplier must install claims software and obtain a submitter ID from the MAC(s). Organizations may obtain **PC-Ace Pro 32** claims submission software (at <http://www.edissweb.com/cgp/software/pace.html>) or other recommended software from their MACs.

**Note:** *Please contact your MAC for additional information on claims software.*

# Communicating with Medicare Administrative Contractors (MACs): Introducing MACs

- **What are MACs?**
  - MACs process Medicare enrollment applications and claims for Medicare FFS providers and suppliers in their assigned state(s)
- **What do MACs do?**
  - Review and process enrollment applications;
  - Process of FFS Medicare claims;
  - Respond to inquiries; and
  - Provide information on billing and coverage requirements

***You should contact your MAC if you have questions about enrolling in Medicare or submitting MDPP claims.***

**Each MAC covers a specific jurisdiction - contact the MAC in your jurisdiction for FFS billing and payment support**

A map of the United States divided into 12 regions, each labeled with a code and a geological period. The regions are color-coded and labeled as follows:

- JE Noridian** (Blue): California
- JF Noridian** (Pink): Washington, Oregon, Idaho, Nevada, Arizona, New Mexico, Utah, Wyoming, Colorado, Montana, North Dakota, South Dakota, Nebraska, Kansas, Oklahoma, Texas, New Jersey, Connecticut, Rhode Island, Massachusetts, Vermont, New Hampshire, Maine, Alaska, and Hawaii
- JH Novitas** (Light Blue): Texas, New Mexico, Oklahoma, Texas, New Jersey, Connecticut, Rhode Island, Massachusetts, Vermont, New Hampshire, Maine
- JJ Palmetto** (Pink): Georgia, South Carolina, North Carolina, Virginia, West Virginia, Maryland, Delaware, Pennsylvania, New York, New Jersey, Connecticut, Rhode Island, Massachusetts, Vermont, New Hampshire, Maine
- JM Palmetto** (Light Green): Georgia, South Carolina, North Carolina, Virginia, West Virginia, Maryland, Delaware, Pennsylvania, New York, New Jersey, Connecticut, Rhode Island, Massachusetts, Vermont, New Hampshire, Maine
- JN FCSO** (Dark Blue): Florida
- J5 WPS** (Yellow): Kansas, Oklahoma, Texas, New Mexico, Oklahoma, Texas, New Jersey, Connecticut, Rhode Island, Massachusetts, Vermont, New Hampshire, Maine
- J6 NGS** (Brown): Minnesota, Wisconsin, Illinois, Indiana, Michigan, Ohio, Pennsylvania, New York, New Jersey, Connecticut, Rhode Island, Massachusetts, Vermont, New Hampshire, Maine
- J8 WPS** (Green): Michigan, Indiana, Ohio, Pennsylvania, New York, New Jersey, Connecticut, Rhode Island, Massachusetts, Vermont, New Hampshire, Maine
- J15 CGS** (Cyan): Michigan, Indiana, Ohio, Pennsylvania, New York, New Jersey, Connecticut, Rhode Island, Massachusetts, Vermont, New Hampshire, Maine
- JL Novitas** (Purple): New York, New Jersey, Connecticut, Rhode Island, Massachusetts, Vermont, New Hampshire, Maine
- JK NGS** (Orange): New York, New Jersey, Connecticut, Rhode Island, Massachusetts, Vermont, New Hampshire, Maine

<https://www.cms.gov/Medicare/New-Medicare-Card/Providers/MACs-Provider-Portals-by-State.pdf>

<https://www.cms.gov/Medicare/Medicare-Contracting/FFSProvCustSvcGen/MAC-Website-List.html>

**Working with MACs is key to billing success:**  
We strongly encourage you to visit your MAC's website and contact your MAC soon after your Medicare enrollment is approved to ensure proper set up of your claim submission systems and procedure.

**Multiple MACs:** if an MDPP supplier has billing locations in multiple states, the MDPP supplier may work with more than one MAC.

# MDPP FFS Claim Submission

Each claim (regardless of how it is submitted) should contain the following:

- ☐ Demo Code **(82)**
- ☐ Billing Provider/MDPP supplier organizational National Provider Identifier (NPI)
- ☐ Rendering Provider/Coach information for each session including NPI
- ☐ International Classification of Diseases, 10th Revision (ICD-10) diagnosis code
  - MDPP suppliers can get the appropriate ICD-10 diagnosis code from a referral or can use the most appropriate ICD-10 code that captures the nature of the encounter (e.g., Z71.89, Other specified counseling)
- ☐ Date of service (DOS) for each MDPP session
- ☐ Beneficiary first name, last name, and Medicare Beneficiary Identifier (MBI)
- ☐ HCPCS G-Code for each MDPP service
- ☐ Place of Service (POS) code to indicate where the MDPP service was furnished
  - e.g., **“Office” (11)**, **“Outpatient Facility Code” (19 or 22)**, or **“Other” (99)** if the service was furnished in a community setting or as a distance learning session

# MDPP FFS Claim Submission: Reminders



## Remember these MDPP-specific billing requirements:

- Must enroll separately in Medicare as an MDPP supplier to bill for MDPP services
- Requesting a MDPP-specific NPI is highly encouraged, even if your organization has an existing NPI
  - Claim rejections / denials may occur if multiple enrollments are associated with a single NPI
- Use the MDPP-specific NPI to bill for MDPP services only
  - Claims submitted to Medicare may not contain non-MDPP HCPCS and MDPP HCPCS codes on the same claim form, though MDPP claims may include multiple MDPP HCPCS G-codes on a claim for a single beneficiary
- Only bill Medicare for MDPP-eligible beneficiaries
  - MDPP suppliers are **not** allowed to bill Medicare for participants ineligible for MDPP

# Post FFS Claim Submission: Rejected or Denied Claims



- If you receive a denied or returned claim from the MAC:
  - Review the documentation sent from the MAC
  - Contact your MACs for claims-specific questions
- If a claim is unable to be processed, you must correct the errors and submit a new claim
- If a claim is denied, you can file an appeal if you think the claim was denied incorrectly
  - Check your MAC's website for more information on appealing a claim
  - Review the various levels of the [Medicare claim appeals process](#)
- Some MACs offer MDPP specific resources and educational events
  - Suppliers can visit their MACs' websites and join their listservs to learn more



# Resources and Additional Information

# MDPP Resources and General Medicare Claim Submission Resources

Topic	Resource	Description
MDPP Resources	MDPP Website	<a href="http://go.cms.gov/mdpp">http://go.cms.gov/mdpp</a>
	MDPP Supplier Support Center	<a href="https://cmmi.my.site.com/mdpp">https://cmmi.my.site.com/mdpp</a>
	MDPP Orientation Video	<a href="https://www.youtube.com/watch?v=23jNI6EgnfM">https://www.youtube.com/watch?v=23jNI6EgnfM</a>
	MDPP Enrollment Preparation Guide	<a href="https://innovation.cms.gov/Files/x/mdpp-enrollmentfs.pdf">https://innovation.cms.gov/Files/x/mdpp-enrollmentfs.pdf</a>
	MDPP FAQs	<a href="https://www.cms.gov/priorities/innovation/innovation-models/medicare-diabetes-prevention-program/faq">https://www.cms.gov/priorities/innovation/innovation-models/medicare-diabetes-prevention-program/faq</a>
	MDPP Calendar of Learning Activities	"February/March 2025 Calendar coming soon"
MDPP FFS claims forms and submission	How to Verify an MDPP Beneficiary's Medicare Coverage	<a href="https://www.cms.gov/priorities/innovation/files/x/mdpp-verify-medicare-coverage.pdf">https://www.cms.gov/priorities/innovation/files/x/mdpp-verify-medicare-coverage.pdf</a>
	2024 MDPP Billing and Payment Fact Sheet	<a href="https://www.cms.gov/files/document/mdpp-ffs-bill-pay-fs-2024.pdf">https://www.cms.gov/files/document/mdpp-ffs-bill-pay-fs-2024.pdf</a>
	2025 PFS MDPP Changes Factsheet	<a href="https://www.cms.gov/priorities/innovation/files/mdpp-cy25-pfs-final-rule-fact-sheet.pdf">https://www.cms.gov/priorities/innovation/files/mdpp-cy25-pfs-final-rule-fact-sheet.pdf</a>
	2025 Payment Rates	"Coming Soon"
General MA Claims Submission Assistance	MDPP Medicare Advantage Fact Sheet	<a href="https://innovation.cms.gov/Files/fact-sheet/mdpp-ma-fs.pdf">https://innovation.cms.gov/Files/fact-sheet/mdpp-ma-fs.pdf</a>
	Guidance for Medicare Advantage Plans from CY 2018 PFS	<a href="https://www.cms.gov/priorities/innovation/files/x/mdpp-maguidance.pdf">https://www.cms.gov/priorities/innovation/files/x/mdpp-maguidance.pdf</a>
	Medicare Advantage Appeals Process	<a href="https://www.cms.gov/priorities/innovation/files/mdpp-ma-appeals-process.pdf">https://www.cms.gov/priorities/innovation/files/mdpp-ma-appeals-process.pdf</a>

# MDPP Resources and General Medicare Claim Submission Resources

Topic	Resource	Description
<b>Communicating with MACs</b>	What's a MAC?	<a href="https://www.cms.gov/medicare/coding-billing/medicare-administrative-contractors-macs/whats-mac#WhatIsAMac">https://www.cms.gov/medicare/coding-billing/medicare-administrative-contractors-macs/whats-mac#WhatIsAMac</a>
	Find my MAC's contact information	<a href="https://www.cms.gov/mac-info">https://www.cms.gov/mac-info</a>
	Who are the MACs?	<a href="https://www.cms.gov/medicare/coding-billing/medicare-administrative-contractors-macs/who-are-macs#MapsandLists">https://www.cms.gov/medicare/coding-billing/medicare-administrative-contractors-macs/who-are-macs#MapsandLists</a>
	A/B MAC Jurisdiction Map	<a href="https://www.cms.gov/files/document/ab-jurisdiction-map03282023pdf.pdf">https://www.cms.gov/files/document/ab-jurisdiction-map03282023pdf.pdf</a>
<b>General FFS Medicare Claims Submission Assistance</b>	CMS Transmittals Website	<a href="https://www.cms.gov/medicare/regulations-guidance/transmittals">https://www.cms.gov/medicare/regulations-guidance/transmittals</a>
	Electronic Health Care Claims	<a href="https://www.cms.gov/medicare/coding-billing/electronic-billing/electronic-healthcare-claims">https://www.cms.gov/medicare/coding-billing/electronic-billing/electronic-healthcare-claims</a>
	Medicare Learning Network (MLN) Booklet – Medicare Billing: Form CMS-1500 and the 837 Professional	<a href="https://www.cms.gov/files/document/mln006976-medicare-billing-837p-form-cms-1500.pdf">https://www.cms.gov/files/document/mln006976-medicare-billing-837p-form-cms-1500.pdf</a>
	Medicare Claims Processing Manual	<a href="https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Internet-Only-Manuals-IOMs-Items/CMS018912?DLPage=1&amp;DLSort=0&amp;DLSortDir=ascendin">https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Internet-Only-Manuals-IOMs-Items/CMS018912?DLPage=1&amp;DLSort=0&amp;DLSortDir=ascendin</a>
	Electronic Funds Transfer	<a href="https://www.cms.gov/Medicare/Billing/ElectronicBillingEDITrans/EFT.html">https://www.cms.gov/Medicare/Billing/ElectronicBillingEDITrans/EFT.html</a>
	Electronic Remit Advice and Standard Paper Remit	<a href="https://www.cms.gov/Medicare/Billing/ElectronicBillingEDITrans/Remittance.html">https://www.cms.gov/Medicare/Billing/ElectronicBillingEDITrans/Remittance.html</a>

# Common Billing and Payment Issues

# Questions for MACs and the CMS MDPP Team

*Please contact the CMS MDPP Team with any further questions at <https://cmmi.my.site.com/mdpp/>*