

Diabetes-Related Services

508-Compliant Version

1. The Medicare-Covered MNT Service benefit provides (blank) hours of one-on-one MNT services for the first year and 2 hours of coverage each year for subsequent years.
 - a. Answer: Three
2. One of the risk factors that beneficiaries must have to be eligible for the diabetes screening tests.
 - a. Answer: Hypertension
3. Medicare provides coverage for one diabetes screening test within a (blank)-month period (i.e., at least 11 months have passed following the month in which the last Medicare-covered diabetes screening test was performed) for beneficiaries who were previously tested and were not diagnosed with pre-diabetes, or who have never been tested.
 - a. Answer: Twelve
4. A condition of abnormal glucose metabolism that is diagnosed from a fasting blood glucose greater than or equal to 126 mg/dL on two different occasions; a 2-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.
 - a. Answer: Diabetes
5. A condition of abnormal glucose metabolism diagnosed from a previous fasting glucose level of 100-125 mg/dL or a 2-hour post-glucose challenge of 140-199 mg/dL.
 - a. Answer: Prediabetes
6. Medicare provides coverage of MNT for beneficiaries diagnosed with diabetes or renal disease (except for those receiving (blank)).
 - a. Answer: Dialysis
7. How much does a beneficiary have to pay for diabetes screening tests?
 - a. Answer: Nothing
8. Medicare provides coverage for a maximum of (blank) diabetes screening tests within a 12-month period (but not less than 6 months apart) for beneficiaries diagnosed with pre-diabetes.
 - a. Answer: Two
9. One of the services that a qualified DSMT program includes is an (blank) treatment plan developed specifically for (blank)-dependent beneficiaries.

- a. Answer: Insulin
10. Medicare provides coverage of (blank) services for beneficiaries who have been recently diagnosed with diabetes, were determined to be at risk for complications from diabetes, or were previously diagnosed with diabetes before meeting Medicare eligibility requirements and have since become eligible for coverage under the Medicare Program.
- a. Answer: DSMT

Link to MLN Product: <https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/DiabetesSvcs.pdf>