



## RB.029.B Diabetes Prevention Program (DPP)

**Original Implementation Date :** 6/1/2022

**Version [B] Date :** 5/8/2023

**Last Reviewed Date:** 4/7/23

**30-day Notification Released:** 4/7/2023

### PRODUCT VARIATIONS

This policy applies to all Jefferson Health Plans lines of business unless noted below.

Application of Claim Payment Policy is determined by benefits and contracts. Benefits may vary based on product line, group, or contract. Payment may vary based on individual contract.

### POLICY STATEMENT

Jefferson Health Plans considers participation in the Diabetes Prevention Program (DPP) eligible for reimbursement when the following criteria are met:

- Member is at least 18 years old, and
- Member is overweight (Body mass index  $\geq 25$ ;  $\geq 23$  if Asian), and
- Member has no previous diagnosis of type 1 or type 2 diabetes, and
- Female member is not pregnant at the time of enrollment.

And meet one of the following:

- Member received a high-risk result after completing the Centers for Disease Control and Prevention (CDC) "Prediabetes Risk Test," or
- Member has had a blood test result in the prediabetes range within the past year as evidenced by any of the following:
  - Hemoglobin A1C: 5.7-6.4%.
  - Fasting plasma glucose: 100-125 milligrams per deciliter (mg/dL).
  - Two-hour plasma glucose (after a 75 gram [gm] glucose load): 140-199 mg/dL, or
- Member was previously diagnosed with gestational diabetes.

## POLICY GUIDELINES

The Diabetes Prevention Program (DPP) is limited to one year (25 one-hour sessions) and prospective participants should be motivated to complete the program and make the necessary lifestyle changes. Due to the comprehensive lifestyle changes required, insufficiently motivated individuals are not recommended as candidates for the DPP. Individuals must be screened for prediabetes prior to acceptance into the program, meet the eligible criteria, and acceptance is at the sole discretion of the applicable DPP provider.

- The Virtual Modifier, “VM”, should be appended to any G-code that is provided as a virtual session.
- For Medicare members only, claims reported with a diabetic (excluding gestational diabetes) or an End Stage Renal Disease diagnosis code will deny as ‘not a covered benefit’.
- G9873, G9874, G9875, G9876, G9877, G9878, G9879, G9880, G9881 *are limited to once per lifetime per member.*
- The official *CDC Prediabetes Risk Test* is available through the following link: <https://www.cdc.gov/prediabetes/takethetest/>.
- The official *DPP curriculum and participant handouts* are available on the CDC website: <https://www.cdc.gov/diabetes/prevention/resources/curriculum.html> .

For reimbursement under the Jefferson Health Plans benefit, the participating program must be recognized by the CDC in its registry of approved programs (Diabetes Prevention Recognition Program, or DPRP). The additional requirements are as follows:

- For Medicaid, the provider must be enrolled with specialty code 223:
  - [https://www.dhs.pa.gov/docs/Publications/Documents/FORMS%20AND%20PUBS%20MAP/c\\_291473.pdf](https://www.dhs.pa.gov/docs/Publications/Documents/FORMS%20AND%20PUBS%20MAP/c_291473.pdf)
- For Medicare, the provider must be enrolled with CMS and included in the following listing: [Medicare Diabetes Prevention Program - Centers for Medicare & Medicaid Services Data \(cms.gov\)](#)
  - <https://innovation.cms.gov/files/x/mdpp-enrollmentcl.pdf>

## CODING

*Note: The Current Procedural Terminology (CPT®), Healthcare Common Procedure Coding System (HCPCS), and the 10th revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10) codes that may be listed in this policy are for reference purposes only. Listing of a code in this policy does not imply that the service is covered and is not a guarantee of payment. Other policies and coverage guidelines may apply. When reporting services,*

*providers/facilities should code to the highest level of specificity using the code that was in effect on the date the service was rendered. This list may not be all inclusive.*

*CPT® is a registered trademark of the American Medical Association.*

CPT Code	Description
N/A	

HCPCS Code	Description
G9873	1st core session attended
G9874	4 total core sessions attended
G9875	9 total core sessions attended
G9876	2 core maintenance sessions attended in months 7-9 (weight loss goal not achieved or maintained)
G9877	2 core maintenance sessions attended in months 10-12 (weight loss goal not achieved or maintained)
G9878	2 core maintenance sessions attended in months 7-9 and weight loss goal achieved or maintained
G9879	2 core maintenance sessions attended in months 10-12 and weight loss goal achieved or maintained
G9880	5 percent weight loss from baseline achieved
G9881	9 percent weight loss from baseline achieved

ICD-10 Codes	Description
N/A	

## BENEFIT APPLICATION

This Reimbursement Policy does not constitute a description of benefits. Rather, this assists in the administration of the member's benefits which may vary by line of business. Applicable benefit documents govern which services/items are eligible for coverage, subject to benefit limits, or excluded completely from coverage.

## DESCRIPTION OF SERVICES

The Centers for Disease Control and Prevention-led National Diabetes Prevention Program is an evidence-based lifestyle change program for preventing type 2 diabetes among people with prediabetes or at high risk for type 2 diabetes. The year-long program helps participants make real lifestyle changes such as eating healthier, including physical activity in their daily lives, and improving problem-solving and coping skills. Participants meet with a trained lifestyle coach and a small group of people who are making lifestyle changes to prevent type 2 diabetes. The program is offered in-person and online. The one-hour sessions are weekly for 6 months and then monthly for 6 months. This proven program can help people with prediabetes or at risk for type 2 diabetes make achievable and realistic lifestyle changes and cut their risk of developing type 2 diabetes by 58 percent, 71 percent if over 60 years of age.

## DEFINITIONS

N/A.

## DISCLAIMER

Approval or denial of payment does not constitute medical advice and is neither intended to guide nor influence medical decision making.

Policy Bulletins are developed by Jefferson Health Plans to assist in administering plan benefits and constitute neither offers of coverage nor medical advice.

This Policy Bulletin may be updated and therefore is subject to change.

## POLICY HISTORY

This section provides a high-level summary of changes to the policy since the previous version.

Summary	Version	Version Date
Policy guidelines updated to reflect how providers can enroll with the Medicaid and Medicare DPP.	B	5/8/2023
This is a new policy	A	6/1/2021



## REFERENCES

1. Jefferson Health Plans Diabetes Prevention Program:  
<https://www.healthpartnersplans.com/providers/clinical-resources/diabetes-prevention-programs>
2. PA Department of Human Services (DHS) Diabetes Prevention Program. Enrollment in the Medical Assistance Program.  
<https://www.dhs.pa.gov/docs/Publications/Documents/FORMS%20AND%20PUBS%20MAP/c291473.pdf>
3. CMS.gov. Medicare Diabetes Prevention Program. [Medicare Diabetes Prevention Program - Centers for Medicare & Medicaid Services Data \(cms.gov\)](#)