

## **Title 23: Division of Medicaid**

### **Part 202: Hospital Services**

#### **Chapter 2: Outpatient Services**

##### *Rule 2.11: Diabetes Self-Management Training (DSMT)*

- A. The Division of Medicaid defines Diabetes Self-Management Training (DSMT) as an interactive and collaborative process through which beneficiaries with diabetes gain the knowledge and skills needed to modify their behavior and self-manage the disease and its related conditions.
- B. The Division of Medicaid does not enroll a provider for the sole purpose of performing DSMT because DSMT is not a separately recognized provider type. The provider seeking reimbursement for DSMT must meet all of the required criteria set forth in Miss. Admin. Code Part 200, Rule 4.8 in addition to being:
  - 1. A current Mississippi Medicaid provider,
  - 2. Located in the State of Mississippi, and
  - 3. Accredited by the American Diabetes Association (ADA) or the American Association of Diabetes Educators (AADE).
- C. The Division of Medicaid covers DSMT in the outpatient hospital setting when medically necessary, ordered by a physician, physician assistant, or nurse practitioner who is actively managing the beneficiary's diabetes, prior authorized by the Division of Medicaid, the Utilization Management/Quality Improvement Organization (UM/QIO) or designee and when all the following criteria are met:
  - 1. The beneficiary has been diagnosed with diabetes by a physician,
  - 2. The services are provided under the direct supervision of a physician, physician assistant, nurse practitioner, pharmacist or a registered nurse certified as a diabetes educator, and
  - 3. The program meets the current ADA training standards.
- D. The DSMT Plan of Care must include, but is not limited to:
  - 1. An assessment of the beneficiary's specific needs for training,
  - 2. Identification of the beneficiary's specific diabetes self-management goals,
  - 3. Behavioral interventions directed toward helping the beneficiary achieve identified self-management goals, and

4. Evaluation of the beneficiary's progress towards identified self-management goals.

E. DSMT includes:

1. One (1) initial training per lifetime which:

a) Must be provided within a continuous six (6) month period which begins with the initial individual assessment visit.

b) Cannot exceed a total of seven (7) hours, provided in increments no less than thirty (30) minutes, which:

(1) May include up to one (1) hour of individual training for assessment of the beneficiary's training needs.

(2) Includes up to six (6) hours of training in a group setting consisting of two (2) or more individuals except when the ordering physician determines:

(a) A beneficiary would benefit from individual sessions instead of group sessions which the physician's order must include a statement specifying DSMT training in individual sessions along with an explanation, or

(b) A medical condition prevents the beneficiary from completing the seven (7) hours of initial training within six (6) months. Prior authorization for an extension to the six (6) month time-frame must be obtained from the UM/QIO.

2. Follow-up training which:

a) Must be ordered by the physician actively managing the beneficiary's diabetes, including documentation in the medical record of the specific medical condition that the follow-up training must address,

b) Is furnished any time in a year following the year in which the beneficiary completes the initial training,

c) Includes a maximum of two (2) hours each year,

d) Is furnished in increments of no less than thirty (30) minutes, and

e) Is provided in group sessions consisting of two (2) or more individuals unless the ordering physician determines a beneficiary would benefit from individual sessions instead of group sessions. The physician's order must include a statement specifying DSMT training in individual sessions along with an explanation.

- F. Beneficiaries under the age of eighteen (18) must be accompanied by a parent/guardian/legal representative.
- G. The Division of Medicaid pays for all medically necessary services for EPSDT-eligible beneficiaries in accordance with Part 223 of Title 23, without regard to service limitations and with prior authorization.

Source: 42 CFR § 410.141; Miss. Code Ann. §§ 43-13-117, 43-13-121.

History: New Rule eff. 04/01/2015.