

The purpose of this document is to describe the Medi-Cal coverage policy for the Medi-Cal DPP benefit, as mandated by the Welfare and Institutions Code Section 14149.9.

This DPP coverage policy will be published in the Medi-Cal Provider Manual when the fee-for-service billing system becomes available.

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Provider Requirements

Medi-Cal providers offering DPP services must comply with guidelines issued by the Centers for Disease Control and Prevention (CDC) and obtain CDC pending, preliminary, or full recognition in connection with the National DPP (NDPP).

Medi-Cal providers offering DPP services are required to use a CDC-approved lifestyle change curriculum that does all of the following:

- (1) Emphasizes self-monitoring, self-efficacy, and problem solving.
- (2) Provides for coach feedback.
- (3) Includes participant materials to support program goals.
- (4) Requires participant weigh-ins to track and achieve program goals.

DPP services shall be provided by peer coaches. Please see the "Peer Coaches" subsection below for more information.

Enrollment Requirements

Currently enrolled or newly enrolling Medi-Cal providers within the following provider types: home health agency, physician group, physician, Indian health services, rural health facility, community hospital (outpatient), county hospital (outpatient), and DPP suppliers may become DPP providers by submitting *Medi-Cal Supplemental Changes* form (DHCS 6209) and submitting it to DHCS for approval. Once the eligible Medi-Cal provider is approved to become an DPP provider, the provider will receive a newly established category of service (COS) containing the DPP billing codes, as outlined in this RFO. Only enrolled and eligible Medi-Cal providers who have the DPP COS may bill for DPP services.

Coverage Policy

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Medi-Cal providers may identify and recommend participation in the DPP to a beneficiary who meets the eligibility requirements of the federal Centers for Disease Control and Prevention Diabetes Prevention Recognition Program.

If a beneficiary is diagnosed with diabetes while participating in the DPP, the beneficiary may continue in the DPP.

For beneficiaries who have completed the entire DPP core services period or who have had an unsuccessful attempt at completing the DPP core services period once in the prior five years, the medical provider must maintain documentation of the beneficiary's medical condition or circumstance that warrants additional participation in the beneficiary's medical file, which shall be made available to DHCS upon request.

Frequency Limits

Program Structure

A beneficiary who participates in the DPP shall be allowed to participate in 22 peer coaching sessions over a 12-month period, including weekly core sessions in the first 6 months and monthly core maintenance sessions in the last 6 months, using a curriculum approved by the CDC.

A beneficiary is eligible to receive ongoing maintenance sessions in 3-month intervals, for no more than 12 months after the core services period, if:

- The beneficiary attended at least 1 session during the final core maintenance session interval (months 9 to 12 of the DPP services period) and had weight measured, and
- The beneficiary achieved or maintained the required minimum weight loss at least once during the final core maintenance session interval (months 10 to 12 of the DPP services period).

Medi-Cal providers offering DPP services must use a CDC-approved lifestyle change curriculum that does all of the following:

- Emphasizes self-monitoring, self-efficacy, and problem solving,

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- Provides for coach feedback,
- Includes participant materials to support program goals,
- Requires participant weigh-ins to track and achieve program goals.

Delivery Methods

The Medi-Cal DPP can be offered through the following delivery methods:

- In-person: Participants are physically present in a classroom or classroom-like setting. Peer coaches may supplement in-person sessions with handouts, emails, or reminder texts. Organizations that conduct make-up sessions online, via another virtual modality, or over the phone are still considered to be delivering the program in-person.
- Distance Learning: Trained peer coaches deliver sessions via remote classroom or telehealth where the peer coach is present in one location and participants are calling or video-conferencing in from another location.

Curriculum Translations

Enrolled DPP providers are required to follow all policies and procedures for participation in the Medi-Cal program, including all state and federal translation and interpretation requirements. For more information regarding applicable state and federal statutes and regulations for Medi-Cal providers, their designated agents, all public and private agencies and/or individuals that are engaged in planning, providing or securing Medi-Cal services for or on the behalf of recipients or applicants, please see the Provider Regulations section of the Medi-Cal Provider Manual. For more information about changing the CDC's curriculum through translations or cultural adaptations, please contact the CDC at dprpAsk@cdc.gov. The CDC will explain the next steps for submission and review of the adapted or translated curriculum.

Peer Coaches

DPP services shall be provided by peer coaches, who promote realistic lifestyle changes, emphasize weight loss through healthy eating and physical activity, and implement the DPP curriculum.

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A trained peer coach may be a physician, a non-physician practitioner, or an unlicensed person who has been trained to deliver the required curriculum content and possess the skills, knowledge, and qualities specified in the NDPP guidelines.

For purposes of Medi-Cal reimbursement, only enrolled, licensed practitioners may bill for the provision of DPP services. Any unlicensed providers rendering DPP services need to have a contractual arrangement in place with an enrolled Medi-Cal provider in order to receive reimbursement.

**Billing
Requirements**

Each DPP provider may bill one of the fourteen payable codes when all the requirements for billing the code have been met, including the session attendance for specific core and ongoing maintenance session intervals and achievement and/or maintenance of weight loss, as applicable to the specific code.

DPP providers must maintain signed documentation on file attesting to the fact that a DPP beneficiary has met the requirements for billing each code, which is available to DHCS upon request.

**Core
Sessions
(Months 1-6):**

A core session is a DPP service that: (1) is furnished by a DPP provider during months 1 through 6 of the DPP services period; (2) is approximately 1 hour in length; and (3) adheres to a CDC-approved curriculum for core sessions.

Core sessions may be billed with any of the following codes:

HCPCS Code	Description
G9873	First Medi-Cal DPP core session was attended by a DPP beneficiary.
G9874	Four total Medi-Cal DPP core sessions were attended by a DPP beneficiary.
G9875	Nine total DPP core sessions were attended by a DPP beneficiary.

Note: Payment is without regard to weight loss.

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*Core Maintenance
Session Intervals
(Months 7-12)*

A core maintenance session is a DPP service that: (1) is furnished by a DPP provider during months 7 through 12 of the DPP services period; (2) is approximately 1 hour in length; and (3) adheres to a CDC-approved curriculum for core sessions.

Core maintenance session intervals in which the beneficiary has not met the minimum 5% weight loss may be billed with any of the following codes:

HCPCS Code	Description
G9876	Two DPP core maintenance sessions were attended by a DPP beneficiary in months 7-9, and the beneficiary did not achieve the minimum 5% weight loss.
G9877	Two DPP core maintenance sessions were attended by a DPP beneficiary in months 10-12, and the beneficiary did not achieve the minimum 5% weight loss.

Core maintenance session intervals in which the beneficiary has met the minimum 5% weight loss may be billed with any of the following codes:

HCPCS Code	Description
G9878	Two DPP core maintenance sessions were attended by a DPP beneficiary in months 7-9, and the beneficiary achieved the minimum 5% weight loss.

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G9879	Two DPP core maintenance sessions were attended by a DPP beneficiary in months 10-12, and the beneficiary achieved the minimum 5% weight loss.
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*Ongoing
Maintenance
Session Intervals
(Months 13-24)*

An ongoing maintenance session is an DPP service that: (1) is furnished by an DPP provider during months 13 through 24 of the DPP services period; (2) is approximately 1 hour in length; and (3) adheres to a CDC-approved DPP curriculum for maintenance sessions.

Ongoing maintenance session intervals may be billed with any of the following codes:

HCPCS Code	Description
G9882	Two DPP ongoing maintenance sessions were attended by a DPP beneficiary in months 13 through 15. The beneficiary maintained at least 5% weight loss from his/her baseline weight, as measured by at least one weight measurement during months 13 through 15.
G9883	Two DPP ongoing maintenance sessions were attended by a DPP beneficiary in months 16 through 18. The beneficiary maintained at least 5% weight loss from his/her baseline weight, as measured by at least one weight measurement during months 16 through 18.
G9884	Two DPP ongoing maintenance sessions were attended by a DPP beneficiary in months 19 through 21. The beneficiary maintained at least 5% weight loss from his/her baseline weight, as measured

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	by at least one weight measurement during months 19 through 21.
G9885	Two DPP ongoing maintenance sessions were attended by a DPP beneficiary in months 22 through 24. The beneficiary maintained at least 5% weight loss from his/her baseline weight, as measured by at least one weight measurement during months 22 through 24.

Note: A beneficiary has coverage of a subsequent ongoing maintenance session interval (for up to 9 months after the end of the first ongoing maintenance session interval) if the beneficiary attended at least 2 sessions and maintained the required minimum weight loss from baseline at least once during the previous ongoing maintenance session interval.

Weight Loss Performance

A DPP provider may bill for weight loss performance payments with any of the following codes, provided all conditions are satisfied:

HCPCS Code	Description
G9880	The DPP beneficiary achieved at least 5% weight loss, or an absolute reduction of waist circumference (cm) of 3.2 centimeters on the date a DPP provider furnishes any session during the 12 months of the core services period.
G9881	The DPP beneficiary achieved at least 9% weight loss on the date a DPP provider furnishes any session during the 24 months of the DPP services period.

Bridge Payments

A bridge payment is a one-time payment for the first DPP core session, core maintenance session, or ongoing maintenance session furnished by a DPP provider to a DPP beneficiary during months 1 through 24 when the beneficiary previously received DPP services from a different DPP provider. A provider may only receive one bridge payment per DPP beneficiary.

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HCPCS Code	Description
G9890	Bridge payment: A one-time payment for the first DPP session furnished by a DPP provider to a DPP beneficiary during the DPP services period who has previously received DPP services from a different DPP provider.

*Telehealth
Modifiers*

DPP providers that offer online, virtual, or distance learning programs may bill one of the fourteen HCPCS codes in conjunction with an appropriate telehealth modifier when all requirements for billing the HCPCS code have been met. Refer to the Medicine: Telehealth section for information about telehealth requirements.

Modifier	Description
95	Synchronous telemedicine service rendered via a real-time interactive audio and video telecommunications system