

Working with Medicare Advantage (MA) Plans

Medicare Diabetes Prevention Program (MDPP) Supplier Learning Series

The Medicare Diabetes Prevention Program (MDPP) Supplier Learning Series is an ongoing opportunity for MDPP suppliers to learn from each other and subject matter experts (SMEs) on relevant MDPP topics. The MDPP Supplier Learning Series on April

April 28, 2021 Panelists and Presenters:

- Megan Brown – The Brancati Center
- Andrew Gobble – Lifestyle Medicine Group
- Lavinia Goto – Oregon Wellness Network
- Sareena Oncea – Providence Health Services
- Natalie Albright – CMS
- Lia Winfield – Leavitt Partners

28, 2021 featured presentations from the Centers for Medicare and Medicaid Services (CMS) and Leavitt Partners and a panel discussion with MDPP suppliers currently working with Medicare Advantage (MA) plans. This resource captures best practices discussed during this call. To listen to a recording of this and other MDPP webinars, please visit the CMS MDPP [website](#) and navigate to the “MDPP Supplier Learning Events” portion of the page.

About this Resource

This resource provides information on how MDPP suppliers can work with MA plans. It is divided into eight sections:

1. [What is MA?](#)
2. [MA and the MDPP](#)
3. [Tips for Delivering the MDPP to MA Enrollees](#)
4. [Tips for Billing MA Plans](#)
5. [Tips for Understanding MA Plans in Your Area](#)
6. [Tips for Contracting with MA Plans](#)
7. [Tips for Troubleshooting Challenges](#)
8. [MDPP Updates and Resources](#)

What is Medicare Advantage?

This section provides a brief overview of MA and why MA matters to MDPP suppliers.



Medicare Advantage Plans are another way to get Medicare Part A and Part B coverage. Medicare Advantage Plans, sometimes called “Part C” or “MA Plans,” are offered by Medicare-approved private companies that must follow rules set by Medicare.



Medicare pays MA plans a per member per month amount to provide all Medicare part A and B benefits. Given MA plans take on financial risk for their population of enrollees, they are incentivized to prevent avoidable high-cost conditions and care.



Nearly 4 in 10 of all Medicare beneficiaries are enrolled in an MA plan. [Over 50%](#) of all Medicare beneficiaries are projected to be enrolled in an MA plan by 2030.

Terminology note: “MA plans are provided by Medicare Advantage Organizations (MAOs). An MAO is the legal entity that has a contract with the Medicare program to provide coverage. An MA plan is the package of Medicare benefits offered by the MAO to the beneficiary. An MAO may offer multiple MA plans.”

- [CMS MA MDPP Fact Sheet](#)

MA and the MDPP

In 2017, CMS issued a final rule that made the MDPP a covered Medicare benefit starting April 1, 2018. Both original Medicare and Medicare Advantage are required to reimburse for the MDPP once per lifetime for Medicare beneficiaries who are eligible for the MDPP. The diagram below shows the two options MA plans have for reimbursing MDPP suppliers for the MDPP.

Working with MA Plans

MA Plans and MDPP Payment

Contract between MA plan and MDPP supplier

An MA plan may require its enrollees to get MDPP services only through contracted MDPP suppliers

When an MDPP supplier chooses to contract with an MA plan, both parties negotiate the terms and conditions of payment

MA plans must either contract with MDPP suppliers in their service area or agree to pay an MDPP supplier on a non-contract basis

In covering the MDPP benefit, MA plans must use only Medicare-enrolled MDPP suppliers

No contract between MA plan and MDPP supplier

MA plans may arrange for their enrollees to get MDPP services from non-contract, Medicare-enrolled suppliers

MA plans pay MDPP suppliers on a non-contract basis at the original Medicare payment rate

If the MA plan already has an in-network MDPP supplier, the beneficiary may have cost sharing responsibilities if participating in the program with an out of network MDPP supplier

Cost Sharing

"MDPP services rendered to enrollees in-network must be provided without cost-sharing. MA plans that permit enrollees to use out-of-network providers and suppliers may require enrollees to pay cost-sharing for MDPP services furnished out-of-network; however, MA plans are still required to cover MDPP services without cost sharing if MDPP services cannot be provided in-network because there is no in-network provider." <https://innovation.cms.gov/files/fact-sheet/mdpp-ma-fs.pdf>

Recommendation: It is recommended that MDPP suppliers contact the MA plan for each beneficiary before the cohort begins to determine if the beneficiary will have any cost sharing responsibilities. If there are cost-sharing responsibilities, the MDPP supplier can collect that money from the beneficiary or use available funding to cover the costs for that beneficiary.

Tips for Delivering the MDPP to MA Enrollees

Working with MA Plans



Step 1: Identify MA Enrollees

- Review medical insurance cards to confirm each beneficiary's insurance.
- If enrolled in an MA plan, the beneficiary will have an insurance card from that plan. The plan will have contact information for providers on the back of the card.
- Make a list of participants who have MA insurance cards.



Step 2: Verify MA Enrollment

- Medicare beneficiaries can switch plans each year. Check the beneficiary's coverage on [NGSConnex.com](https://nsgconnex.com). This is a portal provided by CMS to Medicare-enrolled providers and suppliers.
- MDPP suppliers may also be able to check coverage through their billing and claims submission vendor or their MAC.



Step 3a: For In-Network MA Enrollees (MDPP Supplier Has a Contract with MA Plan)

- Confirm with the MA plan that the beneficiary is enrolled in that plan and that the MDPP supplier has a contract with that MA plan.
- Use procedure prescribed by the MA plan to receive payment for MDPP services established in the contractual agreement between the MA plan and the MDPP supplier.



Step 3b: For Out-of-Network MA Enrollees (MDPP Supplier Does Not Have a Contract with MA Plan)

- Confirm with the MA plan that out-of-network coverage is permitted and authorized for the enrollee under the plan. Understand whether the beneficiary has cost-sharing responsibilities.
- When the MDPP supplier is not in the MA plan network, the MDPP supplier should notify the MA enrollee that the enrollee may be responsible for all or part of the cost of the MDPP services and that the enrollee should check with the MA plan about how much, if any, of the cost of the services from an out-of-network supplier will be covered by the MA plan.
- After MDPP services are furnished, the MDPP supplier should submit a request for payment to the appropriate MA plan using the payment and procedure amount determined when the MA plan was contacted prior to furnishing services.

Source: Medicare Diabetes Prevention Program (MDPP) Medicare Advantage Fact Sheet:

<https://innovation.cms.gov/files/fact-sheet/mdpp-ma-fs.pdf>

Tips for Billing MA Plans

You may still bill plans with which you do not have a contract. You will submit claims according to the [original Medicare MDPP fee schedule](#).

- ✓ It is highly recommended that you contact the MA plan before you submit claims to verify the beneficiary is enrolled in the MA plan and that the MA plan will reimburse the claims you submit. Contact **provider services** at the plan. If you have a phone conversation, request written confirmation of your agreed upon process for reimbursement.
- ✓ Before billing the plan, determine how you will bill. This may be through your EMR or through a billing and claims submission vendor such as Welld Health.
- ✓ Timely billing and billing in order (e.g., the claim for the 1st session is submitted before the claim for the 4th session) is very important.
- ✓ Neither CMS nor the MACs are allowed to become involved in contracting talks or billing disputes between the MA plan and the MDPP supplier. To appeal a denied claim, use the MA plan's appeals process.
- ✓ You cannot bill retroactively. If you receive your MDPP supplier status mid-way through a cohort, you cannot bill Medicare or MA plans for that in-flight cohort. You may begin to bill starting with your next cohort.

Tips for Understanding MA Plans in Your Area

Understand the MA landscape in your area

The number of MA plans and the number of Medicare beneficiaries enrolled in MA plans varies considerably from county to county across the U.S. Understanding the MA landscape in your organization's zip code(s) can help inform what type of opportunity you have to work with MA plans. Some zip codes have 20 or more MA plans and understanding how they differ can help you strategically allocate your time and resources. For more detail on how MA varies across the U.S., visit the [Kaiser Family Foundation](#).



Step 1: Identify MA Plans in Your Area

- Get to know which MA organizations and plans are operating in your area by using [Medicare's plan finder](#) website to see which plans are offered in your zip code.



Step 2: Explore how MA Plans in Your Area are Engaging with the MDPP

- Google different search terms such as “[name of MA plan or MAO] and MDPP” or “[name of MA plan or MAO] and diabetes prevention” or call the MA plan and ask how they are engaged with the MDPP.

Working with MA Plans



Step 3: Note Size of Plan

- Take note of whether the MA plan is part of a very large national corporation (e.g., UnitedHealthcare or Humana) or if the MAO is smaller and more localized. Smaller MAOs may be easier to contract with.



Step 4: Explore Plan Networks

- Investigate with which providers/suppliers MA plans in your area are already contracted. Use the [Medicare plan finder](#) website and click on the blue box that says, "Plan Details." Each plan will have a link called "View Provider Network Directory."



Step 5: Crosswalk MDPP Participants with MA Plans

- Find out in which MA plans your MDPP participants are enrolled. Are many enrolled in the same plan or enrolled in plans with the same MAO?

Determine whether to contract

Ask yourself these questions to determine if contracting with an MA plan makes sense for your organization:

Questions	Considerations
✓ Does my organization have an existing relationship with an MAO or MA plan?	If your MDPP organization is part of or affiliated with a health system, that health system may have existing relationships with MA plans, and it may make sense to contract with those plans.
✓ Do many of my MDPP participants come from the same plan?	If many of your participants come from the same plan(s), you may want to consider contracting with that plan to establish a strong relationship.
✓ Are there smaller, more local MA plans in my area?	It may be easier to contract with smaller MA plans rather than one of the large national corporations.
✓ Are MA plans in my area particularly engaged with the MDPP or diabetes prevention generally?	If some MA plans in your area appear to be particularly engaged in the MDPP, the plan may be more amenable to contracting.
✓ Does my organization have the capacity to pursue a contract with an MA plan?	The contracting process can take between 6 and 12 months. It requires patience, persistence, and staff resources, which may be challenging for some smaller MDPP suppliers.

Tips for Contracting with MA Plans

Approach the process with patience and persistence

- Contracting from start to finish with the MA plans can take 6-12 months on average but may take longer.
- If you don't already have a point of contact with the MA plan, call provider services at the plan to initiate the process.
- Your contracting request may pass through multiple channels for approval and require several phone conversations with the MA plan.
- Be prepared to talk with multiple individuals at the MA plan before identifying the correct person at the MA plan with whom to work.
- Keep in mind you'll likely need to fill out an application with the MA plan.

"Be persistent. It is a lot of work to contract, but it is worth it so just continue to follow up and continue to communicate with the plan."

- MDPP supplier

"Something that I found really helpful when working with our MA plan is regular communication can be important, particularly when establishing the relationship."

- MDPP supplier

Build a relationship

- Use your organization's events to build relationships with the MA plan.
 - Invite an MA plan representative to be a guest speaker at a board, community, or advisory meeting.
 - Feature the MA plan and the MDPP in your newsletter or other communications.
 - Invite MA plan representatives to community events your organization hosts.
- Consider a recurring phone call with the MA plan that starts with the contracting process and extends through delivery of the MDPP.

"Make sure that you have a second appointment set up so you know there's always a follow up appointment to reconnect with [the plan]."

- MDPP supplier

Working with MA Plans

Pitch your organization to the MA plan

- Be prepared to discuss your organization, how it is structured, and how it plans to deliver MDPP services to the MA plan's members.
- Leverage your existing relationships with community health care providers for insight into MA health plans.
- Highlight your organization's value proposition.
 - Create a PowerPoint presentation to highlight your organization that may feature:
 - Organization mission, vision, leadership, and staff.
 - Expertise delivering to specific populations (e.g., African American males, immigrant populations, low education populations, etc.).
 - Program statistics (e.g., enrollment, retention, weight loss).
 - Data collection and billing capabilities.
 - Patient and client stories to highlight outcomes.
 - Recruitment and enrollment strategies.
 - Other evidence-based programs (e.g., DSMES, medical nutrition therapy) that your organization offers.
 - The number and location of all your sites or affiliate organizations, if applicable.
- Identify how your services are compatible and can position your organization to be regarded as a business partner rather than a vendor.
 - What does the MA plan value? (patient satisfaction and retention, quality service, reducing emergency department and hospital use, positive return on investment and value).
 - What does your organization do well?
 - Only promise what you can deliver.
 - Be consistent and persistent.

"We always put in our mission and our vision. I think that is important. That we come from a more of a community-based perspective."

- MDPP supplier

"I like to explain that we are statewide because you know that [MA plans] would prefer to contract with one agency rather than all 16."

- MDPP supplier

"I also say that we have the technology to do the billing because that's a big piece to collect all the outcomes data that are required. For us as the MDPP supplier, for the CDC, but also for them as a plan. So, just reassure the plan that this is turnkey, and your organization has the experience, you can do this, and you just need the plan's cooperation and collaboration to do it."

- MDPP supplier



Working with MA Plans

Speak the MA plan's language

- When talking with MA plans about your organization's MDPP, keep in mind that MA plans pay for health care services, **not** programs. Use the MA plan's terminology to describe your organization's services for their members. It may help to refer to the people who attend your MDPP classes as "patients" or "MA members or enrollees" receiving a "preventive health care service" that provides health education to help prevent illness.
- Understand the priorities of the MA plans with whom you are trying to contract. For example:
 - Quality service
 - Improved health of patients
 - Improved social well-being of patients
 - Cost effectiveness
 - Strong relationships with healthcare providers
 - Patient satisfaction
 - Accurate and timely documentation
 - Communication

"If we are working with a local MA plan that might cover a couple of counties or a certain region of the state, I bring the local area agency of aging representative from the area. They have the relationship, and we always talk about the experience that they've had working with us."

- MDPP supplier

"When you are working with one MA plan, you are working with one MA plan. Each one is so different. It's really different when you're working with a national plan versus a local plan."

- MDPP supplier

Take advantage of MA plan resources

- Look for a FAQ section on the MA plan website which may answer many of your questions.
- It may be necessary to reach out to an MA plan before being assigned a Contract Manager. Contact the MA plan provider call center for help with questions and troubleshooting.
- Sign up for email alerts and updates: You may sign up on the MA website or contact the provider call center to ask how to sign up. Alerts may include information about training, rule or process changes, or new resources.
- When your organization has a confirmed contract, you may be granted access to the MA provider portal to do a variety of activities including: verify patient eligibility and benefits, look up medical claims, view electronic provider care notes, and add other staff as users.

"One of the most helpful things for us has been connecting with other DPP organizations in our area and really collaborating with them and thinking, learning, and talking about best practice learned, this is a continual journey navigating the program, especially with MA plans."

- MDPP supplier

Negotiating a higher rate

When entering into a contract, MA plans and MDPP suppliers negotiate a payment rate and schedule. It may be possible to negotiate a higher reimbursement rate than the [original Medicare MDPP fee schedule](#). MDPP suppliers that offer multiple evidence-based programs (e.g., MDPP, DSMES, and medical nutrition therapy) or MDPP suppliers with locations throughout a state or region may be particularly attractive for MA plans because the plan can receive access to multiple services or locations with a single contract.

It may also be possible to include in the contract a process for the MA plan to refer eligible patients to your program.



Tips for Troubleshooting Challenges

- **CMS geo-targeting campaign:** In November 2020, CMS launched a social media campaign to reach out and inform beneficiaries about the MDPP program in certain zip codes. CMS is continuing to add zip codes to the campaign and now have regional staff to help connect providers to the campaign to reach the maximum number of beneficiaries. If you would like your zip code added to this effort or if you have questions regarding the campaign, please reach out to CMS here: MDPP_Communications@cms.hhs.gov
- **Final Physician Fee for Service (PFS) rule:** On December 1, 2020, CMS issued the Calendar Year (CY) 2021 Physician Fee Schedule (PFS) final rule, which revises certain MDPP policies during the remainder of the COVID-19 Public Health Emergency (PHE) and any future applicable 1135 waiver event. View the Calendar Year (CY) 2021 Physician Fee Schedule (PFS) Final Rule MDPP [Fact Sheet](#). Full text of the Calendar Year (CY) 2021 Physician Fee Schedule (PFS) Final Rule can be found [here](#).
- **Subscribe to the CMS MDPP listserv** [here](#).
- **Questions?** Visit the Medicare Diabetes Prevention Program (MDPP) Supplier Support Center: <https://cmsorg.force.com/mdpp/>
- **Webinar recordings and additional resources:** The recording of the April 28th 2021 MDPP Supplier Learning Series call as well as other MDPP webinar recordings, guidance documents and resources can be found on [CMS MDPP webpage](#)

MA plans may be reluctant to contract with many different MDPP suppliers. Moreover, an MA plan that contracts with a large health system that is CDC-recognized already has an in-network supplier and may not be motivated to contract with another MDPP supplier. Consider ways to make your organization more attractive to the MA plan such as:

- **Consider joining an [umbrella arrangement](#) if one is operating in your area.** Umbrella arrangements are networks of MDPP suppliers that aim to leverage economies of scale in contracting with MA plans and other payers. Umbrella arrangements are a new approach and are still being tested by the CDC.
- **Consider alternative arrangements.** For example, if a larger MDPP supplier (e.g., a health system) is operating in your area and already holds contracts with MA plans, reach out to that larger supplier to see if you can contract with them to be an off-site provider of the MDPP. In this case, you might not contract directly with MA plans, but you may be able to receive reimbursement through the larger supplier.
- **Explain how your organization provides unique value with the MDPP.** For example, you could explain how you hold a trusted place within the community, or how you have high retention or weight loss rates, or you can effectively reach underserved populations. Use data and testimonials to back your claims.
- **Ask if the MA plan will reimburse claims you submit without a contract in place.** Consistent claims submission to the plan may result in future contracting conversations with that plan.

MDPP Updates and Resources

