

Reimbursement for Umbrella Hub Arrangements

This section includes:

- Enrolling as an MDPP supplier
- Barriers UHOs encountered when enrolling as MDPP suppliers
- Description of the role of the Medicare Administrative Contractors (MACs)
- Additional healthcare payers

For the Demonstration, umbrella hub organizations (UHOs) were required to become Medicare Diabetes Prevention Program (MDPP) suppliers and connect subsidiary organizations to fee-for-service (FFS) Medicare reimbursement. However, having multiple healthcare payers for the National Diabetes Prevention Program (National DPP) lifestyle change program is essential for the sustainability of the UHA.

Demonstration UHOs were encouraged to also enroll in Medicaid (if applicable) and contract with Medicaid managed care organizations (MCOs), Medicare Advantage (MA) plans, commercial health plans, and self-insured employers. This section provides a brief introduction into the components of the MDPP supplier application and claims submission, as well as provides information on other payer types. For detailed instructions on completing the MDPP supplier application and completing MDPP claims, please reference the UHO MDPP Supplier Enrollment Guide, available on the [Umbrella Hub Arrangements](#) page of the National DPP Coverage Toolkit.

Fee-For-Service Medicare

Enrolling in Medicare as a Medicare Diabetes Prevention Program Supplier

UHAs interested in becoming a MDPP supplier need to apply through the Centers for Medicare and Medicaid Services (CMS). For additional information on how to enroll your UHA as a MDPP supplier refer to the UHO MDPP Supplier Enrollment Guide, available on the [Umbrella Hub Arrangements](#) page of the National DPP Coverage Toolkit. After an organization is approved by the Centers for Disease Control and Prevention (CDC) to become a UHA, the UHA will submit a single MDPP supplier application on behalf of all the subsidiary organizations in the UHA.

Medicare Administrative Contractors (MACs)

For UHOs, Medicare Administrative Contractors (MACs) approve MDPP applications and process Medicare FFS claims. MACs are multi-state, regional contractors responsible for administering Medicare FFS claims. CMS relies on a network of MACs to serve as the primary operational contact between the Medicare FFS program and the healthcare providers (including MDPP suppliers) enrolled in the program. For more information on MACs, see CMS' [What is a MAC](#) webpage and the UHO MDPP Supplier Enrollment Guide, available on the [Umbrella Hub Arrangements](#) page of the National DPP Coverage Toolkit.

UHOs will develop a relationship with their MAC that starts with the MDPP application and extends through the claims submission and reimbursement process. Different regions across the United States have different MACs. UHOs can find out in which MAC region they operate [here](#).

Provider Enrollment Chain and Ownership System (PECOS)

The Provider Enrollment Chain and Ownership System (PECOS) is where organizations manage the details of their MDPP supplier application. For a subsidiary organization to utilize the UHOs billing services, it will need to be listed on the UHA's MDPP application in PECOS.

To provide timely payment of claims, UHOs are responsible for keeping PECOS updated, including additions to the lifestyle coach roster and location changes for community settings or administrative sites. UHOs are encouraged to create a plan with their subsidiary organizations for communicating any changes to their coach roster so that the UHO may make necessary changes in PECOS. Claims will not be paid for any sessions delivered by a coach not listed on the roster.

MDPP Application and Claims Submission Components

Completion of the MDPP supplier application will require UHOs to establish themselves as a business entity, which involves acquiring and understanding several business components. These include National Provider Identifiers (NPIs), Provider Transaction Access Numbers (PTANs), Legal Business Names (LBNs), and Tax Identification Numbers (TINs). Brief descriptions of these components are provided below. For more information on these components and how they relate to the MDPP application and claims submission, please see the UHO MDPP Supplier Enrollment Guide, available on the [Umbrella Hub Arrangements](#) page of the National DPP Coverage Toolkit.

- **National Provider Identifier (NPI):** Unique 10-digit numbers to be used by health care providers in standard transactions, such as health care claims. There are two types of NPIs: A Type 1 NPI is for individual suppliers of services; for example, physicians, or National DPP lifestyle change program coaches. A Type 2 NPI is for the organization; for example, the UHO with CDC recognition. **UHOs need to get a Type 2 NPI.**
- **Provider Transaction Access Number (PTAN):** The number issued by the UHO's MAC after processing of the UHO's MDPP application. This number is required to enroll and submit claims for Medicare FFS, as well as many Medicare Advantage plans. No claims can be submitted for service dates that pre-date the effective date of your PTAN.
- **Legal Business Name (LBN):** The official name of the individual or organization under which the company conducts business.
- **Tax Identification Number (TIN):** Unique identifier used by regulatory bodies to identify every legal organization. It is recommended the UHO obtain a new TIN for the UHA. Benefits of establishing a unique TIN for the UHA include taxation and risk mitigation, separation of UHA-related deposits, ease-of-use when engaging with commercial payers, and increased likelihood of approval during Electronic Remittance Advice (ERA) enrollment (method to receive electronic notification of remittance on claims).



Demonstration Insights

Completion of the MDPP supplier application has been a learning process during the Demonstration. One of the three Demonstration UHOs has achieved MDPP supplier status and each UHO has contributed valuable insights to the MDPP supplier application process. Challenges faced by the Demonstration UHOs while completing the MDPP supplier application are provided below. As an overall learning when completing the MDPP supplier application, UHOs are encouraged to thoroughly review, understand, and obtain the information necessary for completion prior to submitting the application. Ensuring accuracy of the MDPP supplier application can help expedite the process of the UHO obtaining MDPP supplier status.

Challenges to Completing the MDPP Supplier Application	Description
Obtaining required information from the UHO's leadership and board members	<p>Demonstration UHOs needed to educate their organization's leadership on the MDPP supplier enrollment process and on the required information for the MDPP supplier application. Of particular concern from leadership and board members was sharing their personal information, such as social security numbers, birthdates, and fingerprints. For MDPP supplier applications, the requirement to share personal information is dependent on the ownership structure of the enrolling entity. For example, non-profit 501(c)(3) organizations generally do not have owners and typically only have individuals with managing control, and therefore, would not be subject to the fingerprint requirements. For more information on these requirements, please refer to the CMS MDPP FAQ site for additional information.</p>
Designating a person who can talk to the UHO's MAC representative	<p>Demonstration UHOs were made aware of the need for a designated spokesperson to communicate with their MAC representative. Only the individual identified as the authorized user on the MDPP supplier application may communicate with the assigned MAC. Opportunities may present for the authorized user and another UHO team member to join a call with the MAC, at which time the authorized user may give permission for the other UHO team member to communicate with the MAC representative and leave the call. However, these decisions are up to individual MACs.</p>
Ensuring consistency of organizational information on the MDPP supplier application	<p>One Demonstration UHO submitted their MDPP supplier application and listed their entity name. However, the name included on the application did not match up word-for-word with their LBN. Since the correction was not received by CMS in a timely manner their application was denied, which resulted in time consuming delays. To help resolve this, UHOs are encouraged to ensure accuracy prior to completing the MDPP supplier application and to promptly respond to application feedback to avoid approval delays.</p>

Obtaining an organizational NPI

As part of the MDPP supplier application, the UHO is required to get an organizational NPI (Type 2 NPI). To keep MDPP services and payer enrollments separate from existing lines of business, organizations that are planning to submit an MDPP supplier application should obtain a new Type 2 NPI that will be used for all National DPP lifestyle change program transactions. One Demonstration UHO had concerns with being the entity to get the organizational NPI because they do not have healthcare billing and claims submission experience, however, this UHO formed a partnership with an internal department with MDPP billing experience to assist in completing this process and with billing.

Committing adequate time and resources to the completion of the MDPP application

The Demonstration UHOs found it took more time than anticipated to assemble, submit, and get approval for their MDPP supplier applications. This can also include application follow up. For example, after one Demonstration UHO submitted its MDPP application, the MAC had additional follow-up requests, which delayed the UHO becoming an MDPP supplier. Additionally, one Demonstration UHO experienced a loss of application data after several months of inactivity in the application portal. It is recommended to keep back-up files of all documents gathered for the MDPP supplier application.

Additional Healthcare Payers

Having multiple healthcare payers for the National DPP lifestyle change program supports the sustainability of the UHA by increasing the quantity and stability of UHA revenue. In the context of a UHA, sustainability refers to when the subsidiary organizations are receiving reimbursement for delivering the National DPP lifestyle change program from reliable reimbursement dollars that can be maintained over a protracted period, rather than receiving reimbursement from short-term funding, such as grant funding.

Since the inception of the National DPP in 2012, CDC and its partners have focused on expanding the reach and coverage of the program so that all payers are involved – Medicare, Medicaid, state employee benefit plans, commercial health plans, and employers. A growing number of state Medicaid agencies offer coverage, and so do an increasing number of commercial and employer payers.

UHOs may consider enrolling as a Medicaid provider if the National DPP lifestyle change program is a covered Medicaid benefit in their state. Even if a state has not achieved coverage of the National DPP lifestyle change program, opportunities may be present to contract with Medicaid MCOs offering reimbursement for the program. For more information, see the [Engaging MCOs to Attain Coverage](#) page of the National DPP Coverage Toolkit. UHOs can also contract with Medicare Advantage plans, commercial health plans, and self-insured employers. An organization still must be a recognized Medicare supplier to be able to provide services for Medicare Advantage plan members. To see which public and private healthcare payers are covering the National DPP lifestyle change program, see the [Participating Payers](#) page of the National DPP Coverage Toolkit.

Because many healthcare payers are unfamiliar with UHAs, UHOs can expect to have multiple conversations with healthcare payers before securing a commitment to the UHA, particularly with those where there was not a previous relationship. For resources to assist in communicating and marketing the UHA to payers and other partners, see the [Umbrella Hub Arrangements](#) page of the National DPP Coverage Toolkit.



Demonstration Insights

- **Prepare to educate Medicaid agencies on UHAs:** One Demonstration UHO successfully enrolled as a Medicaid provider in their state’s Medicaid program. The UHO held multiple meetings with the Medicaid agency and state health department to raise awareness of the purpose and structure of their UHA.
- **Prepare for multiple meetings with payers:** One Demonstration UHO reported several Medicaid MCOs were enthusiastic about the UHA; however, as of December 2021, the UHO and the MCOs remained in negotiations over the reimbursement rate.
- **Engage the state health department:** The state health department may be able to convene partners, including payers, for a meeting or webinar that features the UHA. Considering the novelty of the UHA approach, plan to spend time educating state health departments or other partners on the basics of a UHA. For additional resources, direct partners to the [UHA Basics webinar](#) and other resources on the National DPP Coverage Toolkit [Umbrella Hub Arrangements](#) page.

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