

PARTNERSHIP HEALTHPLAN OF CALIFORNIA

POLICY / PROCEDURE

Policy/Procedure Number: MPCP2026 (previously MCCP2026)			Lead Department: Health Services Business Unit: Care Coordination	
Policy/Procedure Title: Diabetes Prevention Program			<input checked="" type="checkbox"/> External Policy <input type="checkbox"/> Internal Policy	
Original Date: 03/13/2019 Effective Date: 01/01/2019 per DHCS		Next Review Date: 06/11/2026 Last Review Date: 06/11/2025		
Applies to:	<input type="checkbox"/> Employees	<input checked="" type="checkbox"/> Medi-Cal	<input checked="" type="checkbox"/> Partnership Advantage	
Reviewing Entities:	<input checked="" type="checkbox"/> IQI <input type="checkbox"/> OPERATIONS	<input type="checkbox"/> P & T <input type="checkbox"/> EXECUTIVE	<input checked="" type="checkbox"/> QUAC <input type="checkbox"/> COMPLIANCE <input type="checkbox"/> DEPARTMENT	
Approving Entities:	<input type="checkbox"/> BOARD <input type="checkbox"/> CEO <input type="checkbox"/> COO	<input type="checkbox"/> COMPLIANCE <input type="checkbox"/> CREDENTIALS	<input type="checkbox"/> FINANCE	<input checked="" type="checkbox"/> PAC <input type="checkbox"/> DEPT. DIRECTOR/OFFICER
Approval Signature: Robert Moore, MD MPH MBA			Approval Date: 06/11/2025	

I. RELATED POLICIES:

- A. MCUP3052 - Medical Nutrition Services
- B. MPCR701 - Ancillary Care Services Provider Credentialing and Re-credentialing Requirements

II. IMPACTED DEPTS:

- A. Health Services
- B. Claims
- C. Member Services

III. DEFINITIONS:

- A. Diabetes Prevention Program (DPP): An evidence-based lifestyle change program, taught by lifestyle coaches designed to prevent or delay the onset of type 2 diabetes among individuals diagnosed with pre-diabetes.
- B. Lifestyle Coach (also known as Peer Coaches): A person formally trained in Centers for Disease Control and Prevention (CDC) approved curriculum for a minimum of 12 hours or approximately two days. A lifestyle coach may have credentials [e.g. Physician, Registered Dietician (RD), and Registered Nurse (RN)], but they are not required. The CDC approved training may be provided by one of the following:
 - 1. A training entity listed on the CDC website
 - 2. A private organization with a national network of CDC recognized program sites
 - 3. A CDC recognized virtual organization with national reach or
 - 4. A Master Trainer, as designated by the CDC recognized program, who has delivered that lifestyle change program for at least one year and has completed a Master Trainer program offered by a training entity listed on the CDC website.
- C. Medicare Diabetes Prevention Program (MDPP): An evidence-based lifestyle change program for individuals eligible for Medicare, available to Partnership Advantage members, taught by lifestyle coaches designed to prevent or delay the onset of type 2 diabetes among individuals diagnosed with pre-diabetes.
- D. Partnership Advantage: Effective January 1, 2027, Partnership HealthPlan of California will operate a Centers for Medicare & Medicaid Services (CMS) - approved Dual-Eligible Special Needs Plan (D-SNP) in specific counties as described in the Department of Health Care Services (DHCS) CalAIM Dual Eligible Special Needs Plan Policy Guide. This line of business will be known as Partnership Advantage and will be a Medicare Advantage plan offered to all full-benefit, dual-eligible beneficiaries 21 years of age or older who reside in the applicable counties. Partnership Advantage Members will be qualified to receive both Medi-Cal and Medicare services as described in the Partnership Advantage Member Handbook.

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IV. ATTACHMENTS:

A. NA

V. PURPOSE:

To provide an overview of these external programs; Diabetes Prevention Program and Medicare Diabetes Prevention Program, including eligibility requirements and participation processes.

VI. POLICY / PROCEDURE:

A. Program Description

The Diabetes Prevention Program (DPP) and Medicare Diabetes Prevention Program (MDPP) are evidence-based lifestyle change programs established by the CDC, taught by lifestyle coaches and designed to prevent or delay the onset of type 2 diabetes among individuals diagnosed with pre-diabetes. Members must meet certain criteria to join, reference the Member Handbook for more information.

<https://www.partnershiphp.org/Members/Medi-Cal/Pages/Member-Handbooks.aspx>

B. Eligibility Criteria

1. DPP Eligibility Criteria:

Medi-Cal Members must meet the CDC Diabetes Prevention Program eligibility requirements to qualify for participation in the DPP benefit. The requirements are as follows:

- a. Must be 18 years or older
- b. Must not be pregnant at the time of enrollment. (A participant who becomes pregnant during the program may continue at the discretion of their health care provider and the program delivery organization.)
- c. Must have a body mass index (BMI) of $\geq 25 \text{ kg/m}^2$ ($\geq 23 \text{ kg/m}^2$ if Asian American)
- d. Participants cannot have a previous diagnosis of type 1 or type 2 diabetes prior to enrollment.
- e. Must have a positive screening for pre-diabetes based on the CDC Prediabetes Screening Test
- f. Clinically diagnosed gestational diabetes mellitus (GDM) during a previous pregnancy (allowed for CDC recognition and may be self-reported; not allowed for MDPP participants)

2. MDPP Specific Eligibility Criteria:

a. Partnership Advantage Members must meet the CDC Medicare Diabetes Prevention Program (MDPP) eligibility requirements to qualify for participation in the MDPP benefit. The requirements are as follows:

- 1) Must be enrolled as a Partnership Advantage Member
- 2) Participants cannot have end-stage renal disease (ESRD) at any point during the MDPP services period. A Member who previously had ESRD may be eligible to participate in MDPP if:
 - a) It has been 12 months after the month the Member stops dialysis treatments, or
 - b) It has been 36 months after the month the Member had a kidney transplant.
- 3) Participants cannot have received MDPP services previously.
- 4) All other requirements for MDPP are listed above in VI.B.1.b-e for reference.

3. All DPP & MDPP program eligible members must also meet one of the following clinical requirements:

- a. A blood test within the past year meeting one of the following specifications:
 - 1) Fasting glucose of 100 to 125 mg/dl
 - 2) Plasma glucose reading of 140 to 199 mg/dl measured 2 hours after a 75 g glucose load
 - 3) HbA1c of 5.7 to 6.4%
- b. Clinically diagnosed gestational diabetes mellitus (GDM) during a previous pregnancy
- c. Received a high-risk result (score of 5 or higher) on the [Prediabetes Risk Test](#).
- d. A health care professional may refer potential participants to the program, but a referral or treatment authorization are not required for participation. Members meeting the eligibility

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criteria may self-refer.

C. Provider Requirements

1. Diabetes Prevention Program and Medicare Diabetes Prevention Program providers must comply with the most current CDC Diabetes Prevention Recognition Program (DPRP) guidelines and obtain pending, preliminary or full CDC recognition.
2. DPP and MDPP Providers must use a CDC approved lifestyle change curriculum that includes all of the following;
 - a. Emphasizes self-monitoring, self-efficiency and problem solving
 - b. Provides for coach feedback
 - c. Includes participant materials to support program goals
 - d. Requires participant weigh-ins to track and achieve program goals

D. Program Structure

1. DPP Program Structure
 - a. The core DPP benefit includes a minimum of 22 DPP sessions for the first 12 months of the DPP benefit. These visits are typically once a week for the first 6 months.
 - b. The core benefit is followed by maintenance sessions once a month for the next 6 months.
 - c. Thereafter, Partnership will cover 12 months of ongoing maintenance sessions to qualified members to promote continued healthy behavior. A member qualifies for the ongoing maintenance sessions if:
 - 1) The member achieves and/or maintains a minimum weight loss of 5% from the first core session, and
 - 2) The member meets the attendance requirement as outlined in the Medi-Cal Manual in accordance with Department of Health Care Services (DHCS) All Plan Letter [\(APL\) 18-018](#) Diabetes Prevention Program (11/16/2018) and [The Medi-Cal Provider Manual](#) (March 2022)
 - 3) Weigh-ins are required, but may be obtained in these ways:
 - 4) In person at a DPP Session or DPP Provider location
 - 5) Remote weigh-in at the member's home using scales with digital or Bluetooth communications ability
 - d. Self-reported weigh-ins with or without confirmatory documentation
2. MDPP Program Structure
 - a. The core MDPP benefit includes 16 weekly core sessions over months 1-6, and 6 monthly core maintenance sessions in months 7-12.
 - b. The remaining details of the MDPP Program Structure are listed above in VI.D.1.c-e for reference.

E. Delivery Methods for DPP and MDPP Sessions

Partnership will cover the following methods for DPP sessions and MDPP sessions (for Partnership Advantage members) as deemed clinically appropriate:

1. In-Person: Members must be physically present in a classroom or classroom-like setting with a lifestyle coach.
2. Distance Learning: Distance learning occurs when lifestyle coach(es) deliver sessions via remote classroom or telehealth. The lifestyle coach is present in one location while participants call in or participate by videoconference from another location.
3. Online: Online delivery can be conducted either through synchronous real-time interactive audio and video telehealth communication or through asynchronous store and forward telehealth communication.
4. Combination: Members may use a combination of in-person, distance learning or online delivery methods.

F. DPP Frequency

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The DPP benefit for Medi-Cal Members only may be offered as often as necessary, but the Member's medical record must indicate that the Member's medical condition or circumstance warrants repeat or additional participation in the DPP benefit. Examples of circumstance that may warrant repeat or additional participation include:

1. Member switched enrollment from one Managed Care Plan (MCP) to a different MCP
2. Member transitioned from Fee for Service Medi-Cal into an MCP
3. Member moved to a different county
4. Member experienced a lapse in Medi-Cal enrollment
5. Member has or had medical conditions that hinder DPP session attendance

G. Curriculum and Translations

1. Partnership will ensure that MDPP & DPP providers use a CDC approved curriculum. MDPP & DPP Providers may use either the official CDC curriculum or a modified curriculum that has been approved by the CDC.
2. Partnership will monitor the MDPP & DPP providers to ensure that the MDPP & DPP services are provided in a culturally and linguistically appropriate manner and that the curriculum materials are translated and made available to members in a timely manner and meet all the requirements per Welfare and Institutions Code (WIC) Section [14029.91](#), [Part 92](#) of Title 45 of the Code of Federal Regulations (CFR) and Section 1557 of the federal Patient Protection and Affordable Care Act [42 United States Code (USC) Section [18116](#)].

H. Documentation of Performance-Based Codes

Partnership will ensure that any MDPP and DPP providers are informed and comply with all applicable state and federal laws and regulations, contract requirements and other Department of Health Care Services (DHCS) guidance, including All Plan Letters (APLs) and Policy Letters.

I. Ancillary Care Services Provider

Partnership credentials and re-credentials all the types of ancillary care service providers which includes MDPP and DPP, refer to Partnership Policy MPCR701 - Ancillary Care Services Provider Credentialing and Re-credentialing Requirements for more details.

J. Partnership Medical Equipment Distribution Services (PMEDS) Program

Members may be able to obtain certain medical devices that do not require a Treatment Authorization Request (TAR) through the Partnership Medical Equipment Distribution Services (PMEDS) program when their Provider submits a request form on their behalf. The PMEDS program serves all Partnership Members as an efficient means of fulfilling orders for certain home medical devices that are prescribed by medical providers. Form and information can be found on the Partnership website at <https://www.partnershiphp.org/Providers/Medi-Cal/Pages/PMEDS%20Program.aspx>

VII. REFERENCES:

- A. [DHCS All Plan Letter \(APL\) 18-018](#) Diabetes Prevention Program (11/16/2018)
- B. Medi-Cal Provider Manual/Guidelines: Diabetes Prevention Program ([diabetes](#))
- C. Welfare and Institutions Code (WIC) Section [14029.91](#)
- D. [Part 92](#) of Title 45 of the Code of Federal Regulations (CFR)
- E. Section 1557 of the federal Patient Protection and Affordable Care Act [42 United States Code (USC) Section [18116](#)]
- F. Prediabetes Risk Test Sheet <https://www.cdc.gov/diabetes/prevention/pdf/Prediabetes-Risk-Test-Final.pdf>
- G. Centers for Disease Control and Prevention, Diabetes Prevention Recognition Program Standards and Operating Procedures (03/01/2021) <https://ncpa.org/sites/default/files/2021-05/2021-DPRP-Standards-and-Operating-Procedures.pdf>

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- H. National Diabetes Prevention Program, Preventing Type 2 Diabetes with Medicare (05/15/2024)
<https://www.cdc.gov/diabetes-prevention/lifestyle-change-program/ndpp-medicare-program.html>
- I. Medicare Diabetes Prevention Program (MDPP) Expanded Model Fact Sheet
https://www.cms.gov/priorities/innovation/Files/x/MDPP_Overview_Fact_Sheet.pdf
- J. Medicare Diabetes Prevention Program (MDPP) Medicare Advantage Fact Sheet
<https://www.cms.gov/priorities/innovation/files/fact-sheet/mdpp-ma-fs.pdf>
- K. Medicare Diabetes Prevention Program (MDPP) Basics (04/30/2024)
<https://coveragetoolkit.org/medicare/mdpp-basics/>

VIII. DISTRIBUTION:

- A. Partnership Department Directors
- B. Partnership Provider Manual

IX. POSITION RESPONSIBLE FOR IMPLEMENTING PROCEDURE: Chief Health Services Officer

X. REVISION DATES:

Partnership Advantage (Program effective January 1, 2027)
06/11/25

Medi-Cal

06/12/19; 06/10/20; 06/09/21; 06/08/22; 06/14/23; 06/12/24; 06/11/25

PREVIOUSLY APPLIED TO:

In accordance with the California Health and Safety Code, Section 1363.5, this policy was developed with involvement from actively practicing health care providers and meets these provisions:

- Consistent with sound clinical principles and processes
- Evaluated and updated at least annually
- If used as the basis of a decision to modify, delay or deny services in a specific case, the criteria will be disclosed to the provider and/or enrollee upon request

The materials provided are guidelines used by Partnership to authorize, modify or deny services for persons with similar illnesses or conditions. Specific care and treatment may vary depending on individual need and the benefits covered under Partnership.

Partnership's authorization requirements comply with the requirements for parity in mental health and substance use disorder benefits in 42 CFR 438.910.