



# INDIANA HEALTH COVERAGE PROGRAMS

## PROVIDER REFERENCE MODULE

# Diabetes Self-Management Training Services

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## Revision History

Version	Date	Reason for Revisions	Completed By
1.0	Policies and procedures as of Oct. 1, 2015 Published: Feb. 25, 2016	New document	FSSA and HPE
1.1	Policies and procedures as of April 1, 2016 Published: July 28, 2016	Scheduled update	FSSA and HPE
1.2	Policies and procedures as of April 1, 2016 ( <i>CoreMMIS</i> updates as of Feb. 13, 2017) Published: Feb. 13, 2017	<i>CoreMMIS</i> update	FSSA and HPE
2.0	Policies and procedures as of April 1, 2017 Published: July 6, 2017	Scheduled update	FSSA and DXC
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6.0	Policies and procedures as of June 1, 2022 Published: Aug. 8, 2022	Scheduled update: <ul style="list-style-type: none"> <li>• Edited text as needed for clarity</li> <li>• Updated web links</li> <li>• In the <a href="#">Coverage for DSMT Services</a> section, updated the list of healthcare professionals that can order DMST services</li> <li>• Added clarification about rendering provider in the <a href="#">DSMT Billing and Reimbursement</a> section</li> <li>• Updated the <a href="#">Documentation for DSMT Services</a> section</li> </ul>	FSSA and Gainwell



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# Diabetes Self-Management Training Services

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*Note: The information in this module applies to Indiana Health Coverage Programs (IHCP) services provided under the **fee-for-service (FFS)** delivery system. For information about services provided through the **managed care** delivery system – including Healthy Indiana Plan (HIP), Hoosier Care Connect or Hoosier Healthwise member services – providers must contact the member’s managed care entity (MCE) or refer to the MCE provider manual. MCE contact information is included in the [IHCP Quick Reference Guide](#) available at [in.gov/medicaid/providers](http://in.gov/medicaid/providers).*

*For updates to information in this module, see [IHCP Banner Pages and Bulletins](#) at [in.gov/medicaid/providers](http://in.gov/medicaid/providers).*

## Introduction

The Indiana Health Coverage Programs (IHCP) covers diabetes self-management training (DSMT) services for eligible members. The IHCP intends these services to enable the member (or enhance the member’s ability) to properly manage a diabetic condition.

Examples of DSMT activities include but are not limited to the following:

- Instruction regarding the diabetic disease state, including an understanding of the prevention, detection and treatment of acute and chronic complications
- Medication counseling
- Self-monitoring of blood glucose and interpreting results for use in self-management decision making
- Instruction regarding foot, skin and dental care
- Behavior changes, strategies and risk-factor reduction
- Instruction on incorporating nutritional management and physical activity into lifestyle
- Developing personal strategies to address psychosocial issues and concerns
- Developing personal strategies to promote health and behavior change
- Instruction regarding insulin injection
- Instruction regarding preconception care, pregnancy and gestational diabetes
- Accessing community healthcare systems and resources

*Note: This module presents information about diabetes self-management training only. For information about diabetes **supplies**, such as blood glucose monitors, test strips and lancets, see the [Durable and Home Medical Equipment and Supplies](#) and the [Pharmacy Services](#) modules.*

## Coverage for DSMT Services

The IHCP covers DSMT services that meet all the following conditions:

- Medically necessary
- Ordered in writing by one of the following healthcare professionals licensed under applicable Indiana law:
  - Physician
  - Podiatrist
  - Nurse practitioner
  - Clinical nurse specialist
  - Certified nurse midwife
  - Physician assistant
- Provided by a healthcare professional with specialized training in the management of diabetes
- Provided by one of the following healthcare professionals – licensed, registered or certified under applicable Indiana law:
  - Chiropractors
  - Dentists
  - Health facility administrators
  - Physicians
  - Nurses
  - Optometrists
  - Pharmacists
  - Podiatrists
  - Environmental health specialists
  - Audiologists
  - Speech-language pathologists
  - Psychologists
  - Hearing aid dealers
  - Physical therapists
  - Respiratory therapists
  - Occupational therapists
  - Social workers
  - Marriage and family therapists
  - Physician assistants
  - Athletic trainers
  - Dietitians

IHCP coverage of DSMT is limited to the following circumstances:

- After receiving a diagnosis of diabetes
- After receiving a diagnosis that represents a significant change in the member's symptoms or condition
- For reeducation or refresher training



## DSMT Billing and Reimbursement

Providers must bill for DSMT services on a professional claim (*CMS-1500* claim form, 837P transaction or Provider Healthcare Portal professional claim).

The National Provider Identifier (NPI) of the IHCP-enrolled practitioner who delivered the DSMT service (or the IHCP-enrolled supervising practitioner, if the service was delivered by a healthcare professional that is not eligible for IHCP enrollment) must be entered as the rendering provider. The rendering provider listed on the claim must be enrolled under an allowable specialty for DSMT (see the [Coverage for DSMT Services](#) section).

The service must be billed using one of the following procedure codes along with the indicated modifier:

- G0108 U6 – *Diabetes outpatient self-management training services, individual, per 15 minutes*
- G0109 U6 – *Diabetes self-management training service, group session (two or more), per 15 minutes*

The U6 modifier designates that these codes are billed “per 15 minutes.” Providers should not round up to the next unit. Instead, providers should accumulate billable time equivalent to whole units and then bill.

The IHCP limits reimbursement for this service to 16 units (or the equivalent of four hours) per member per calendar year. Providers can request authorization for additional units through the standard prior authorization (PA) process. The IHCP reviews the documentation for additional requested units of service for evidence of medical necessity.

Providers should bill the *usual and customary charge* for the units of service rendered. Providers are not entitled to reimbursement for any services provided to the general public at no charge. Adherence to this program parameter is closely monitored by the Family and Social Services Administration (FSSA) Program Integrity team.

For more information about billing procedures, see the [Claim Submission and Processing](#) module.

## Documentation for DSMT Services

Billing and rendering practitioners should maintain sufficient documentation of the respective functions to substantiate the medical necessity of the DSMT service rendered and the provision of the service itself. This requirement is in accordance with existing policies and regulations for all providers and all services.

Examples of documentation that the provider of the service should maintain include (but are not limited to):

- Written orders for the service
- Date service was rendered
- Name, credentials and signature of the provider that rendered the service
- Amount of time used for the training session
- General content of the training session
- Units of service billed and charge amount
- Pertinent patient history and clinical data
- Practitioner notes from the training sessions

The provider that *ordered* the service should maintain documentation in the usual manner.