



Ohio Administrative Code

Rule 5160-8-53 Diabetes prevention and self-management training.

Effective: January 1, 2022

(A) Definitions. For the purposes of this rule, the following definitions apply:

(1) "Diabetes self-management training" (DSMT) is the education and instruction of an individual with diabetes by a qualified provider for the purpose of providing the individual with necessary skills and knowledge to participate in the management of the individual's diabetes, including the self-administration of injectable drugs.

(2) "National Diabetes Prevention Program" (NDPP) is an evidence-based, educational and support program administered by the Centers for Disease Control and Prevention (CDC) designed to assist at-risk individuals from developing Type 2 diabetes.

(B) DSMT.

(1) Providers.

(a) Rendering providers. The following providers may render or supervise a DSMT service:

(i) A physician;

(ii) A physician assistant;

(iii) An advanced practice registered nurse;

(iv) A registered nurse;

(v) A registered dietitian nutritionist; or

(vi) A pharmacist.



(b) Billing ("pay-to") providers. The following providers may receive medicaid payment for submitting a claim for a DSMT service on behalf of a rendering provider:

- (i) A physician;
- (ii) A physician assistant;
- (iii) An advanced practice registered nurse;
- (iv) A licensed or registered dietitian;
- (v) A pharmacist;
- (vi) A professional medical group;
- (vii) A federally qualified health center;
- (viii) A rural health clinic;
- (ix) An ambulatory health care clinic; or
- (x) A hospital.

(2) Coverage.

(a) Payment for diabetes self-management training can be made when the following criteria are met:

- (i) The individual has a current diagnosis of diabetes.
- (ii) The individual has not previously received diabetes self-management training.
- (iii) Training is provided in a setting other than an inpatient hospital or an emergency department.



(b) Payment may be made, with prior authorization in accordance with rule 5160-1-31, for follow-up sessions not to exceed a total of two hours of individual training or group training in any combination.

(C) NDPP.

(1) Providers.

(a) Rendering providers. The following providers may render or supervise an NDPP service:

(i) A physician;

(ii) A physician assistant;

(iii) An advanced practice registered nurse;

(b) Billing ("pay-to") providers. The following providers may receive medicaid payment for submitting a claim for an NDPP service on behalf of a rendering provider:

(i) A physician;

(ii) A physician assistant;

(iii) An advanced practice registered nurse;

(iv) A professional medical group;

(v) A federally qualified health center;

(vi) A rural health clinic; or

(vii) An ambulatory health care clinic;



(2) Coverage.

(a) Payment for an NDPP service can be made when all of the following criteria are met:

(i) The individual is eighteen years or older;

(ii) The individual is overweight;

(iii) The individual is not currently pregnant; and

(iv) The individual does not have a diagnosis of type 1 or type 2 diabetes.

(v) At least one of the following criteria is met:

(A) The individual has been diagnosed with prediabetes;

(B) The individual has a history of gestational diabetes; or

(C) The individual has had a high-risk result on a prediabetes test.

(D) Claim payment.

(1) No payment will be made for a DSMT or NDPP service provided on the same date of service as medical nutrition therapy.

(2) Payment for a covered service performed in a hospital is made in accordance with chapter 5160-2 of the Administrative Code.

(3) Payment for a covered service rendered by a federally qualified health center (FQHC) or rural health clinic (RHC) is made in accordance with chapter 5160-28 of the Administrative Code.

(4) Payment for a covered service rendered in any other setting is the lesser of the submitted charge



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or the amount shown in appendix DD to rule 5160-1-60 of the Administrative Code.