

Medicare Diabetes Prevention Program

Fact Sheet December 2019

Key Facts

The MDPP is designed for individuals with pre-diabetes to prevent the onset of Type 2 diabetes.

MDPP has been added as a benefit for all eligible Medicare beneficiaries, including Medicare Advantage beneficiaries.

Medicare Advantage plans can partner with community-based organizations or private vendors to offer the MDPP services in-person.

Policy Recommendation

CMS should allow the virtual delivery of MDPP services to extend access to this evidence-based program to rural and underserved communities, as well as beneficiaries who may experience difficulties leaving home or finding transportation to in-person programs.

Established in 2018, the Medicare Diabetes Prevention Program (MDPP) is an evidence-based chronic disease management program available to Medicare Advantage beneficiaries at risk of diabetes to slow disease progression, decrease costs, and improve the beneficiary experience. The program was added to Medicare to help prevent the incidence of Chronic Kidney Disease (CKD) and reduce the occurrence of End Stage Renal Disease (ESRD), which is a debilitating condition that impacts both health status and quality of life for over 500,000 people in the United States. The number of people who develop CKD is projected to grow significantly due to the high incidence of obesity and diabetes.

Overview of the Medicare Diabetes Prevention Program

- MDPP is an evidence-based chronic disease management program aimed at slowing the progression of pre-diabetes and preventing the onset of Type 2 diabetes.
- MDPP includes a series of in-person, group-based sessions focused on promoting healthier lifestyles through wellness, nutrition, and exercise support to meet healthy behavior goals.

Value of Diabetes Prevention Program

- Diabetes impacts millions of Americans— according to [the most recent government estimate](#), more than 25% of people aged 65 and older have diabetes and almost 50% have pre-diabetes.
- According to a [2018 study](#), most Medicare beneficiaries with diabetes have hypertension and hyperlipidemia, which can lead to complications such as stroke, blindness, and kidney disease.
- Diabetes costs the health care system billions of dollars. In 2016, Medicare spent an estimated [\\$42 billion more](#) on beneficiaries with diabetes compared to those without.
- According to a [series of studies](#), programs that include exercise, nutrition counseling, support, and social engagement have a positive impact on reducing disease progression and on the health status of participants. Of patients diagnosed with ESRD in 2014, [nearly half](#) had diabetes listed as its primary cause. Care for an average Medicare enrollee with ESRD is more than eight times costlier than care for an average non-ESRD Medicare beneficiary. Preventing diabetes improves health status and helps avoid disproportionately high costs for Medicare.

Expansion of MDPP in Medicare Advantage

- After showing positive results in a wide-scale, multi-year demonstration project under the Center for Medicare and Medicaid Innovation, the MDPP was added as a new benefit under Medicare in April 2018.
 - [A study](#) of the MDPP found that participants' risk of diabetes was reduced by 58% overall and 71% for people 60 and older.
 - CMS' MDPP demonstration generated estimated savings of [\\$2,650 for each participant](#) over 15 months. CMS estimates the expanded model will save Medicare [more than \\$180 million over 10 years](#).
- Designated as a preventive service under Medicare, all Medicare Advantage health plans [must offer the MDPP to eligible beneficiaries at no additional cost](#).
- Medicare Advantage health plans are able to engage providers to identify patients who would benefit from the MDPP to improve health and reduce costs.
- The MDPP may be offered through community-based organizations, such as the YMCA or private vendors, such as Silver Sneakers. MDPP must be delivered in-person.
- Medicare Advantage health plans may offer additional coverage of MDPP services (e.g., a longer period of time than the standard program) or non-MDPP diabetes prevention services, delivered virtually rather than in-person, as a supplemental benefit.