



# MDPP Enrollment Project- Informational Webinar FAQs

On September 29<sup>th</sup>, September 30<sup>th</sup>, and October 5<sup>th</sup>, 2020, the National Association of Chronic Disease Directors (NACDD) held informational webinars for the Medicare Diabetes Prevention Program (MDPP) Enrollment Project. Throughout the duration of the webinars, participants asked a series of questions that have been answered below. Similar questions have been consolidated into a single question.

This FAQ document includes three sections:

1. RFA Questions
2. Project Questions
3. Well Health Questions

## RFA Questions

1. **If our organization already has a billing platform with our EHR system, can that be utilized or are there certain features we must have for this purpose?**

You may use your organization's existing billing platform. If you elect to use an existing platform, you will select Funding Option 2 on the application.

2. **Are organizations that are ready to apply for MDPP status, but have not yet done so, eligible to apply for this project?**

This project is available only to those organizations classified as MDPP suppliers; however, if your organization is not yet an MDPP supplier but is working toward that status and plans to achieve MDPP supplier status by the end of 2020, you may still fill out the RFA. In the open text box, explain your situation and provide your projected date for approval as an MDPP supplier.

3. **Will all the awardees be announced the week of October 26<sup>th</sup> even if the awardee is in a later grouping?**

Yes, any MDPP supplier that submits an RFA will be notified during the week of October 26<sup>th</sup> of award status and any next steps around the timing of the award.

## Project Questions

### Funding

4. **How is it anticipated that the \$3000 incentive will work?**

The full amount of funds (\$3000) will be provided to the MDPP supplier / project awardee when a memorandum of understanding (MOU) between the MDPP supplier / project awardee and

NACDD is fully executed. The MOU will list the general parameters of this project that the MDPP supplier / project awardee is agreeing to upon signature.

## Enrollees/Referrals

### **5. What is the penalty for not enrolling 80 participants by the end of the award year?**

We understand circumstances may arise that could affect your organization's ability to enroll 80 participants; however, the purpose of this project is to address capacity issues to support increased enrollment. The NACDD, the Centers for Disease Control and Prevention (CDC), the American Medical Association (AMA), and Well Health are prepared to help you meet this goal. If you are interested in applying for this project but do not think you will be able to meet the 80 participant enrollment goal, please indicate this in your application and NACDD may possibly be able to connect you with another organization to become part of an umbrella hub organization.

### **6. What assistance is offered to help a program enroll 80 participants by the end of the reward year?**

While the primary responsibility to enroll participants rests with the MDPP supplier, both Funding Options 1 and 2 include technical assistance (TA) from the AMA for referral best practices and TA from the CDC's Division of Diabetes Translation for effective communication and outreach strategies to reach and engage eligible participants.

### **7. When does a beneficiary count toward the 80 (i.e., at time of enrollment, after attending one session, after billing)?**

A beneficiary counts toward the goal of enrolling at least 80 participants after they have attended at least one session.

### **8. In reference to enrolling 80 participants by the end of the grant year, does this mean that the last cohort will need to begin by the end of the grant year or will we just need commitment from participants and the last cohort could start soon after the grant year ends?**

Beneficiaries in an organization's final cohort will need to have attended at least one session by the end of the 12 month award period to 'count' toward the goal of enrolling 80 participants.

### **9. How would you like us to achieve the goal of enrolling at least 80 MDPP participants? Would you encourage the program to train more coaches, to lead more cohorts, or to increase enrollment per cohort?**

The goal of the project is to increase participation in a way that is sustainable for the MDPP supplier and in a way that strives to increase (not decrease) retention. The exact details of increasing the number of cohorts and participants may vary across MDPP suppliers.

**10. Will this project provide technical assistance regarding billing and claims issues?**

This project's goal is to focus on increasing enrollment into the MDPP. Therefore, the technical assistance will focus on increasing referrals and marketing/communications. The Centers for Medicare and Medicaid Services (CMS) has the lead on billing and claims issues. If it is determined that the MDPP suppliers participating in the project need additional support on billing and claims, NACDD and CDC can work with CMS to determine how to best meet those needs.

Other

**11. How many MDPP programs will be selected for this opportunity?**

Up to 100 MDPP suppliers will be selected to participate in the MDPP Enrollment Project; however, NACDD is planning to onboard selected applicants for this project in groups or on a rolling basis. There are two questions in the RFA (that are not scored) asking the applicant to estimate their timing. The first one only applies to applicants who previously selected "Option 1" or the option that they would like to work with Welld Health. Since Welld Health will not have the capacity to onboard all 100 programs at once, NACDD will be awarding successful applicants in groups or on a rolling basis. It is important for applicants to estimate how long it will take their organization and Welld to execute a contract.

The second timing estimate question is about an applicant's readiness to start enrolling participants. If an applicant indicates a need for more time to be ready to enroll participants, NACDD may include them in a later group.

NACDD does not know the timing of the groups yet as this will depend on how many applications are received and how these two questions are answered.

**12. For the MDPP, is a history of Gestational Diabetes Mellitus (GDM) allowed as an eligibility criterion?**

No, Medicare does not allow GDM as a criterion for eligibility. Enrollees must meet blood test requirements for eligibility.

**13. Will there be a marketing agency that organizations can work with to help with strategy and print materials?**

No, working with a specific marketing agency will not be part of this project. Both Funding Options 1 and 2 include communication and marketing support for each MDPP supplier from communication experts at CDC's Division of Diabetes Translation. CDC has recently promulgated a marketing portfolio for the MDPP for both physicians and beneficiaries and will assist MDPP suppliers with strategic use of those materials.

## Welld Health Questions

### **14. What if we have already contracted with Welld Health or we are in the process of contracting with Welld Health?**

If an organization is already contracted with Welld Health, this project will not pay for that current contract, but you could still be eligible for the \$3000 incentive and technical assistance part of this project.

If your organization is in the process of contracting with Welld Health or have an existing contract with Welld Health, please select Funding Option 1 on the application. The question “Please note that your organization will be required to enter a contract with Welld Health to utilize their data management and billing and claims platform, but NACDD will fund Welld Health directly for that access (valued at approximately \$2000)” includes an open comment box. Please use this box to provide details on the status of your contracting process with Welld Health (i.e., if you already have a contract in place, for how long has it been in place; if you are in contracting conversations with Welld Health, when do you expect to sign a contract, etc.).

### **15. Is there allowance for using other curriculums that may have a slightly different schedule than Prevent T2?**

Yes, Welld Health can accommodate other curriculums that are approved by CDC. Welld Health also allows you to modify the schedule as needed. Welld Health has designed the user interface so that participants do not see the session topic ahead of time, which can encourage attendance. (Remember, you must use a CDC-approved curriculum for the MDPP).

### **16. Can you track changes in the A1c in Welld Health under program outcomes?**

Yes, Welld Health has a biometric screening that can be layered in and includes waist circumference, A1c, and blood pressure.

### **17. How are the referrals generated?**

Welld Health does not generate referrals but rather manages referrals. The Welld Health platform can receive referrals electronically from electronic health records (EHRs) via these different methods: fax, direct HISP/email, or directly from EHR via FHIR\*.

\*FHIR stands for Fast Healthcare Interoperability Resources and enables data to be shared through open application programming interfaces (APIs).

### **18. Where is the Health Insurance Portability and Accountability Act (HIPAA) data stored in Welld Health and what are Welld Health’s protection measures?**

Welld Health was built using AWS resources and is 100% compliant with HIPAA regulations and is SOC2 Type2 Certified. A security statement and copy of the SOC audit report are available upon request to seriously interested parties.

### **19. What is the cost of the Welld Health program?**

Welld Health's full costs include:

- Annual license fee of \$1,200 (If awarded, this fee is covered for the first 12 months by NACDD)
- One-time set up fee of \$500 (If awarded, this one-time fee is covered by NACDD)
- Per Medicare enrollee fee of \$10-\$35 (\$10 per enrollment plus \$25 per MDPP enrollment billed at session 4= \$35 total).

The MDPP Enrollment Project does not cover the per Medicare enrollment fee that Welld Health charges; however, awardees may use their \$3,000 incentive for these fees.

**See the the chart below for examples of the costs of using Welld Health to bill Medicare. Please note that costs per participant decrease significantly as the volume of enrolled participants increases.**

- The true value of the MDPP Enrollment Project in the first 12 months of working with Welld Health is that it allows organizations to more easily bill Medicare and establish a sustainable income stream (\$465 for year 1 of the two year MDPP benefit if maximum retention and weight loss goals are met). Since the project will be covering all billing costs, all revenue generated during the first year of the project will go directly to the organization.
- After the 12 month MDPP Enrollment Project, if organizations continue to enroll 80 MDPP beneficiaries annually, the administrative costs of using Welld Health could be as low as 10% of total revenue. This will vary depending on retention and weight loss.

Example Costs		MDPP Reimbursement (\$465 max for year 1)			
Fixed	Variable	During 12-months of the MDPP Enrollment Project <b>(10 participants)</b>	During 12-months of the MDPP Enrollment Project <b>(80 participants)</b>	After MDPP Enrollment Project <b>(10 participants)</b>	After MDPP Enrollment Project <b>(80 participants)</b>
		\$4,650	\$37,200	\$4,650	\$37,200
		Per person	Per person	Per person	Per person
One-time set up (\$500)		\$0 (covered by project)	\$0 (covered by project)	\$0 (one-time cost covered by project in year 1)	\$0 (one-time cost covered by project in year 1)
Annual license (\$1,200)		\$0 (covered by project)	\$0 (covered by project)	\$1,200	\$1,200
	\$10/enrolled participant	\$0 (covered by project)*	\$0 (covered by project)*	\$10 (\$100 total)	\$10 (\$800 total)
	\$25/enrolled participant after 4 sessions	\$0 (covered by project)*	\$0 (covered by project)*	\$25 (\$250 total)	\$25 (\$2000 total)
Total costs for allenrolled participants		\$0 (covered by project)	\$0 (covered by project)	\$1,550 total	\$4,000
Total revenue for all enrolled participants		\$4,650	\$37,200	\$4,650	\$37,200

Net revenue (revenue – costs)		\$4,650	\$37,200	\$3,100	\$33,200
Net revenue per participant		\$465	\$465	\$310 (67%)	\$415 (89%)

\*Per enrollee costs are covered by the project if MDPP suppliers choose to use their \$3,000 incentive for these costs.

**20. Can we use Welld Health to bill payers other than Medicare?**

Yes, Welld Health can bill any payer that you work with, accommodating claims-based or direct pay submission pathways. The processing fees associated with those enrollments are listed in the webinar or you can contact Welld Health to discuss.

**21. Is it possible to import data into the Welld Health system?**

Yes, Welld Health can import data for “inflight” cohorts and conduct a legacy import for past cohorts. However, to import a legacy import for past cohorts is beyond the scope of the MDPP Enrollment Project and would involve the inclusion of a separate fee.

**22. Will Welld Health include billing for managed Medicare and fee-for-service (FFS) Medicare patients, or just one of the classifications?**

Welld Health can submit claims to FFS Medicare and submit claims or invoices to Medicare Advantage (MA) plans.

**23. For 1705, we were directed to proceed with covering Welld Health for our affiliates? Please explain.**

For 1705 grantees, please use your 1705 funding first to support your affiliate sites in procuring the Welld Health platform. If 1705 funds are not available for this purpose, then your affiliate sites may apply for this project.

**24. For a business agreement with umbrella hub organizations, will there need to be business agreements with both the umbrella hub organization and the subsidiary?**

Yes, while the hub organization may be the entity holding the license with Welld Health, both the hub organization and the affiliate organizations need to have a business associate agreement (BAA) with Welld Health. Note: in an umbrella arrangement, only the hub organization needs to procure a license and pay the annual licensing fee.

**25. Will organizations have access to 100% of the payout that Medicare pays, including extra that may be paid for managed Medicare patients, or will Welld Health take a percentage of the amount paid?**

Welld Health does not take a percentage of Medicare (or other) payer reimbursement for payer contracts that use milestone-based fee-schedules like Medicare FFS or Medicare Advantage plans. However, there is a flat-fee charged for processing all of the claims for the entire enrollment starting with the 4<sup>th</sup> session attended. MDPP suppliers that contract with Welld will

receive a separate invoice for the fees owed to Welld Health. Note: for year 1 of the MDPP Enrollment Project, the organization will receive 100% of the MDPP payout for up to 80 enrollees since a component of project is the \$3,000 incentive, which can be used to cover the costs of the Welld Health billing fees

**26. Can Welld Health submit claims to Medicaid, including California's Medi-Cal?**

Yes, Welld Health is able to submit claims to state Medicaid programs, including Medi-Cal.

**27. Can Welld Health work with an EHR for billing?**

Claims created in Welld Health can be exported in a flat file and be uploaded into a separate billing system or claims information in Welld Health can be keyed into a separate billing system. If a billing EHR has an API integration, Welld Health can work with that health system to transmit claims electronically. This would represent a special customer development project and new service order.

**28. For the Welld Health program, you demonstrated a wellness software app for participants to use and communicate, is this app free?**

Yes, the Welld Health app for the participants is included with your subscription. MDPP suppliers will not incur a separate fee for the app.

**29. Our organization already uses a billing and claims system is there a way to utilize Welld Health to track data without using the billing and claims features?**

While the Welld Health platform is available to use for referral management, data tracking and reporting, [this project](#) will not support a contract with Welld Health solely for the purpose of referral management, data tracking and reporting without using the billing and claims features of the platform.

**30. Can Welld Health create new participant IDs?**

New enrollments added in Welld Health automatically create new participant IDs. If an organization decides to import legacy or in-flight cohorts, Welld Health will use the existing participant ID for the duration of the enrollment.

**31. Are Zoom and Webex links able to be embedded into the Welld Health website and software?**

Yes. Meeting links can be added to cohort events and other scheduled interactions in Welld Health.

**32. How do you add physicians into the network in the Welld Health software?**

To add physicians in Welld it is a simple two-screen wizard where you connect a physician and his or her practice to a specific referral and then you can that same physician and/or practice over and over again for subsequent referrals.