



Issue Brief

The Expanding Access to Diabetes Self-Management Training (DSMT) Act

The Association of Diabetes Care & Education Specialists (ADCES), in conjunction with the Diabetes Advocacy Alliance, is working with the co-chairs of the Congressional Diabetes Caucus, Representatives Diana DeGette (D-CO) and Tom Reed (R-NY) and Senators Jeanne Shaheen (D-NH) and Susan Collins (R-ME), to reintroduce the Expanding Access to Diabetes Self-Management Training Act in the 117th Congress. The legislation amends title XVIII of the Social Security Act to improve access to outpatient DSMT services under the Medicare program.

The Problem

DSMT is an evidence-based service that teaches people with diabetes how to self-manage the disease to live better and reduce their risk of diabetes-related complications. DSMT has been a covered benefit under Medicare for more than 20 years. Despite the undisputed benefits of DSMT for people with diabetes – lower hemoglobin A1C, weight loss, improved quality of life, healthy coping skills and reduced healthcare costs – only an estimated 5 percent of Medicare beneficiaries with newly diagnosed diabetes use DSMT services.¹² The COVID-19 pandemic, as well as the disproportionate impact of diabetes on racial and ethnic minority groups, has underscored the urgent need to ensure that Medicare beneficiaries have the support they need to self-manage their diabetes.

How does the Expanding Access to DSMT Act improve access to diabetes self-management services?

This legislation makes necessary changes to help increase access to the DSMT benefit to better meet the needs of Medicare beneficiaries with diabetes. Specifically, the legislation--

- ❖ Allows the initial 10 hours of DSMT to remain available until fully used.
- ❖ Permits DSMT and Medical Nutrition Therapy (MNT) services to be provided on the same day.
- ❖ Excludes DSMT services from Part B cost-sharing and deductible requirements.
- ❖ Permits physicians and qualified nonphysician practitioners (e.g., podiatrists, emergency department providers, physician assistants, nurse practitioners, or clinical nurse specialists) working in coordination with a treating physician or qualified nonphysician to refer for DSMT services.
- ❖ Establishes a Center for Medicare Innovation demonstration program to test the impact of covering virtual DSMT under the Medicare program.

Action Request

On behalf of Medicare beneficiaries with diabetes and the diabetes care and education specialists who support them, we ask that you support the Expanding Access to DSMT Act by becoming a cosponsor upon reintroduction of this legislation.

¹ American Diabetes Association. Standards of Medical Care in Diabetes—2017. *Diabetes Care* 2017; 40 (Suppl.1): S3

² Strawbridge LM, Lloyd JT, Meadow A, et al. Use of Medicare's diabetes self-management training benefit. *Health Education Behavior* 2015; 42: 530-8.