

# HCFA Keeps Public Informed on Medicare

By John West

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People suffering from diabetes and eligible for Medicare coverage got a boost last year from the Health Care Financing Administration (HCFA).

Beginning July 1, 1998, Medicare expanded coverage to an estimated 4 million Medicare beneficiaries with diabetes. The new benefits will now provide the skills and resources that most people need to control their diabetes. Many experts agree that early detection and management of the disease can lead to substantial reductions in life-threatening and serious illness.

According to Ann Albright, MD, director of the California Diabetes Control Program and a member of the National Diabetes Education Program (NDEP) Steering Committee, the new regulation has made a significant difference for diabetes patients.

"Prior to Fiscal Year 1998, people with type 2 diabetes did not have Medicare coverage for a blood glucose meter and testing strips," Dr. Albright said. "Now patients are able to get a blood glucose meter, lancets and, every three months, testing strips, provided particular steps are followed," she added.

Testing strips, glucose meters and lancets are all available at most local drug stores. In order for Medicare to cover these benefits, a doctor must prescribe blood glucose testing supplies to the patient and document how often the patient needs to test on the prescription.

"Some Medicare policies may define how many test strips and lancets a patient is entitled to each month," Dr. Albright said. "As always, physicians and diabetes educators can recommend the right supplies to buy," she added.

Dr. Albright also pointed out that the new regulation change, covering type 2 monitoring, is in its very early stages. "No data has been collected yet on whether the availability of meters and strips has made a difference," Dr. Albright said. "It is extremely likely that as more providers and beneficiaries learn about the benefits and patients begin to test their blood sugar, it should assist in improving the burden of diabetes," she added.

HCFA officials agree that those patients who keep their blood glucose levels within the normal range reduce the risk of complications, such as blindness and amputations, that are often associated with uncontrolled diabetes. In the past, Medicare covered blood glucose monitors and testing strips only for type 1 patients. The new benefits will apply to people with either Medicare Part B or Medicare managed care coverage. Deductibles and co-pays for some Medicare policies may apply to these benefits officials said.

"Testing alone is not going to make significant changes," Dr. Albright said. "The results of blood glucose tests need to be augmented with education to help patients learn to make lifestyle changes and cause the medical care system to intervene if blood glucose monitoring results are not improving," she added.

For those who need help in learning how to monitor themselves, Medicare now covers a wider range of education and training programs to help teach patients to control their blood glucose levels.

A physician must certify that a patient requires the training under a comprehensive plan of care. In the past, Medicare covered only education and training furnished by hospital-based programs. Now, physicians and certain other physician practitioners, such as physician assistants, nurse practitioners, clinical nurse specialists, nurse midwives, clinical psychologists and clinical social workers, can provide diabetes self-management and training services to their patients if their programs are recognized by the National Diabetes Advisory Board of the American Diabetes Association.

The HCFA regulation covering diabetes education was recently published in the February 11, 1999, edition of the *Federal Register* as a Notice of Proposed Rule Making (NPRM). Comments are due back to HCFA on or before April 12, 1999.

NDEP and its partners are continually working with HCFA to inform beneficiaries on Medicare coverage and making it more accessible. HCFA also continues to define standards and implement programs to improve diabetes care.

There are currently 23 quality improvement projects underway in the managed care plans with which HCFA is working to improve care for high risk patients.

In an effort to understand and improve the quality of care for patients with diabetes, HCFA has conducted an eight-state pilot project in fee-for-service and managed care settings. The project has given HCFA an opportunity to identify and evaluate multiple strategies for improving care to people with diabetes.

As for the future, Dr. Albright stressed the need for beneficiaries to stay informed. "I urge individuals to learn as much as they can about the new benefits and take advantage of them," she said.

*More information on recent developments in Medicare, as well as a link to the Federal Register, can be obtained at HCFA's Web site: <http://www.hcfa.gov>.* ❖

