Medical Nutrition Therapy (MNT)



Ortonville Area Health Services

What Exactly Do Dietitians Do?

- Dietitians provide nutrition services/Medical Nutrition Therapy to patients who are referred by their physician. They work with the medical team to assess the patient's nutritional needs and develop a care plan.
- Patients with a variety of conditions and illnesses can improve their health and quality of life by receiving medical nutrition therapy.
- Many medical conditions either develop or are made worse by an improper or unhealthy diet.
- During an MNT intervention, Registered Dietitians (RD) counsel clients on behavioral and lifestyle changes required to impact long-term eating habits and health.
- Medical Nutrition Therapy includes:

Performing a comprehensive nutrition assessment including weight, height, BMI (Body Mass Index) status, review of labs, and determining the nutrition diagnosis.

Planning and implementing a nutrition intervention using evidence-based nutrition practice guidelines may include diet counseling, suggestions for improvement, and/or specialized treatments.

Monitoring and evaluating an individual's progress over subsequent visits with the RD.

Registered Dieticians provide Medical Nutrition Therapy and other nutrition services for a variety of diseases and conditions including:

- Cardiovascular Diseases: hypertension, dyslipidemia, congestive heart failure
- Diabetes: Type 1, Type 2, Gestational
- · Disease Prevention: general wellness
- GI Disorders: celiac disease, cirrhosis, Crohn's disease
- Oncology/Cancer including bone marrow transplant patients; HIV/AIDS
- Food allergy
- · Nutritional Support: oral, enteral, parenteral
- Pediatrics: infant/child feeding for growth and development, failure-to-thrive, inborn errors of metabolism, etc.
- Pulmonary Disease: COPD, cystic fibrosis
- Renal Disease: insufficiency, chronic failure, transplantation
- Weight Management: overweight/obesity, bariatric surgery, eating disorders

Does Medicare Cover Nutrition therapy services?

How often is it covered?

- Medicare Part B (Medical Insurance) covers medical nutrition therapy services and certain related services.
- A registered dietician or nutrition professional who meets certain requirements can provide these services, which may in clude nutritional assessment, one-on-one counseling, and therapy services.
- If you get dialysis in a dialysis facility, Medicare covers medical nutrition therapy as part of your overall dialysis care.
- Medicare will pay for 3 hours the first year you receive MNT and 2 hours each additional year, but additional hours may be covered beyond the hours typically covered under an episode of care when the treating physician determines there is a change of diagnosis or medical condition that makes a change in diet necessary.

Who's eligible?

People with Medicare who meet at least one of these conditions:

- · Have diabetes
- Have kidney disease
- Have had a kidney transplant in the last 36 months

Your costs in Original Medicare

 You pay nothing for these services if the doctor or other health care professional accepts assignment.

Note:

Your doctor or other health care provider may recommend you get services more often than Medicare covers. Or, they may recommend services that Medicare doesn't cover. If this happens, you may have to pay some or all of the costs. It's important to ask questions so you understand why your doctor is recommending certain services and whether Medicare will pay for them. You may be asked to sign an Advanced Beneficiary Notice or ABN for services which are likely to be non-covered, whether for medical necessity or for other reasons.

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Please phone Centralized Scheduling at **320-839-4274** for scheduling questions.

Please arrive 15 min. early to register and bring the following items with you to your appointment:

Your medications

— Insurance Cards

Co-pays due

— Adult to Supervise Young Children

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Will my Commercial Insurance Cover Nutrition therapy services?

Most commercial insurance companies will cover outpatient self-management training and education such as Medical Nutrition Therapy provided by a Registered Dietician for a variety of diseases and conditions such as:

- Cardiovascular Diseases: hypertension, dyslipidemia, congestive heart failure
- Diabetes: Type 1, Type 2, Gestational
- Disease Prevention: general wellness
- · GI Disorders: celiac disease, cirrhosis, Crohn's disease
- Oncology/Cancer including bone marrow transplant patients; HIV/AIDS
- Food allergy
- Nutritional Support: oral, enteral, parenteral
- Pediatrics: infant/child feeding for growth and development, failure-to-thrive, inborn errors of metabolism, etc.
- · Pulmonary Disease: COPD, cystic fibrosis
- Renal Disease: insufficiency, chronic failure, transplantation
- · Bariatric surgery & eating disorders

Medical Nutrition Therapy services are billed by Ortonville Area Health Services as a hospital outpatient service which may or may not be covered at 100%, subject to deductible or co-insurance all which is dependent on your specific health plan coverage. We have included the coding and pricing in this packet of information so that you have the necessary information to check with your insurance plan.

Note:

Your doctor or other health care provider may recommend you get services more often than your insurance covers. Or, they may recommend services that your insurance doesn't cover. If this happens, you may have to pay some or all of the costs. It is important to check with your insurance company or review your policy to check coverage for MNT services.

How much does Medical Nutrition Therapy Cost?

CPT/HCPC billing codes used by insurance companies are listed below and the description of the service provided, along with price for each service that OAHS charges.

- 97802 Medical nutrition therapy; initial assessment and intervention, individual, face-to-face with the patient, each 15 minutes \$22.00
- 97803 Medical nutrition therapy; re-assessment and intervention, individual, face-to-face with the patient, each 15 minutes \$22.00
- 97804 Medical nutrition therapy; group (2 or more individu al(s)), each 30 minutes \$28.00

Medicare may cover more than the 3 hours of basic coverage during a calander year when a second referral from your doctor is obtained due to a change in disease, medical condition or treatment regimen during the same calander year.

Generally the cost for the initial visit is \$88.00.

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