

Payment Policy | Nutritional Counseling/Medical Nutritional Therapy



EFFECTIVE DATE: 02|19|2018

POLICY LAST UPDATED: 02|07|2017

OVERVIEW

This is a reimbursement policy that documents the claims filing for nutritional counseling/medical nutritional therapy. Please see related policy section for diabetes education or services that would be covered as a preventive service.

PRIOR AUTHORIZATION

Prior authorization review is not required

POLICY STATEMENT

BlueCHiP for Medicare and Commercial

Nutritional counseling/medical nutritional therapy is a covered service for when ordered by a physician and provided by a registered dietician/nutritionist

MEDICAL CRITERIA

Not applicable

BACKGROUND

Nutritional counseling/Medical Nutritional Therapy (MNT) is an important part of the prevention and treatment of many diseases and conditions. It consists of a nutritional assessment, the assignment of a specific diet, counseling services, and/or specialized therapies to treat an illness or condition.

COVERAGE

Benefits may vary between groups/contracts. Please refer to the appropriate Evidence of Coverage or Subscriber Agreement for the applicable "Office visits/nutritional counseling" benefits.

CODING

BlueCHiP for Medicare and Commercial

The following codes are covered only when services are provided by a Registered Dietician/Nutritionist
97802 Medical nutrition therapy; initial assessment and intervention, individual, face-to-face with the patient, each 15 minutes

97803 Medical nutrition therapy, re-assessment and intervention, individual, face-to-face with the patient, each 15 minutes

97804 Medical nutrition therapy; group (two or more individuals), each 30 minutes

Claims filed with one of the following codes will deny as use alternate codes as claims must be filed with one of the above CPT codes in this policy.

S9452 Nutrition classes, non-physician provider, per session

S9470 Nutritional counseling, dietitian visit

G0270 Medical nutrition therapy; reassessment and subsequent intervention(s) following second referral in same year for change in diagnosis, medical condition or treatment regimen (including additional hours needed for renal disease) individual, face-to-face with patient, each 15 minutes

G0271 Medical nutrition therapy; reassessment and subsequent intervention(s) following second referral in same year for change in diagnosis, medical condition or treatment regimen (including additional hours needed for renal disease), group (two or more individuals), each 30 minutes

RELATED POLICIES

Diabetes Self-Management Education Mandate
Preventive Services for Commercial Members
Preventive Services for BlueCHiP for Medicare

PUBLISHED

Provider Update, April 2017
Provider Update, June 2010
Provider Update, April 2008
Policy Update, June 2007
Policy Update, October 2000

REFERENCES:

Medicare Medical Nutrition Therapy Services – Overview. Retrieved on 01/25/08 from www.cms.hhs.gov/MedicalNutritionTherapy/

CLICK THE ENVELOPE ICON BELOW TO SUBMIT COMMENTS

This medical policy is made available to you for informational purposes only. It is not a guarantee of payment or a substitute for your medical judgment in the treatment of your patients. Benefits and eligibility are determined by the member's subscriber agreement or member certificate and/or the employer agreement, and those documents will supersede the provisions of this medical policy. For information on member-specific benefits, call the provider call center. If you provide services to a member which are determined to not be medically necessary (or in some cases medically necessary services which are non-covered benefits), you may not charge the member for the services unless you have informed the member and they have agreed in writing in advance to continue with the treatment at their own expense. Please refer to your participation agreement(s) for the applicable provisions. This policy is current at the time of publication; however, medical practices, technology, and knowledge are constantly changing. BCBSRI reserves the right to review and revise this policy for any reason and at any time, with or without notice. Blue Cross & Blue Shield of Rhode Island is an independent licensee of the Blue Cross and Blue Shield Association.

