Getting Connected with Medical Nutrition Therapy (MNT) Providers in the Third-Party Revenue Cycle

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Medicare Benefits for MNT

• MNT reimbursement became effective January 1, 2002.

 MNT reimbursement for individual MNT service via Telehealth became effective January 2006.

What is Medical Nutrition Therapy?

The legislation and the regulations established by CMS defines MNT as "nutritional diagnostic, therapy and counseling services provided by a registered dietitian or nutrition professional for the purposes of managing disease."

Source: Federal Register, 42 CFR, Part 405 et al, Vol 66, No. 212, Nov 1, 2001

Medicare MNT Reimbursement

Provider Requirements:

"Registered Dietitian or Nutrition Professional"

Must meet all qualifications:

- Bachelor's degree or higher in nutrition or dietetics
- 900 hrs or more of a supervised dietetic practice, e.g. internship or AP4
- Licensed or certified in state(s) services provided

Medicare MNT Reimbursement

Provider Requirements (Continued):

- Dietitians or nutrition professionals licensed or certified (i.e.: LD, LN) as of 12/21/00 are "grandfathered" in
- "Registered Dietitian" with Commission on Dietetic Registration (CDR) meets education and experience requirements

MNT Qualifying Diagnoses

 Diabetes: Type 1, Type 2, and Gestational Diabetes

 Chronic kidney disease: Stage 1, 2, 3, and 4

Medicare MNT Reimbursement

Practice Settings:

- Coverage
 - Hospital Outpatient
 - Free Standing clinics
 - Home Health
 - Federally Qualified Health Centers (FQHC)
 - Rural Health Centers (RHC)**
- No Coverage
 - Inpatient hospital
 - Skilled nursing home

Medicare MNT Reimbursement

Freestanding clinics:

- Medicare Part B (Carrier): Payment will be at 80% of the amount determined under the physician fee schedule (CMS-1500 form)
- Deductible and Coinsurance Applies

Hospital Outpatient clinic or "grandfathered" clinics:

- Medicare Part A (Fiscal Intermediary): Claims must be billed under All-Inclusive Rate and is not separately billable (UB-04 institutional claim form)
- Deductible and Coinsurance Applies

Sample Billing Form

Medicare MNT Benefits

- 3 hours of MNT in first calendar year
- 2 hours of MNT follow-up in subsequent calendar years
- MNT hours cannot be carried over into next calendar year
- MNT services can be individual or group
- Additional hours have been allowed when physician changes diagnosis/plan of care
 - Need new referral from physician
 - No maximum amount of hours

Medicare MNT Benefit Limitations

- Does not cover dialysis
- Hours of reimbursement are counted toward either diabetes or CKD (not individually)
- Only face-to-face time is reimbursed: includes telehealth services, which are documented by provider
- Cannot provide MNT reimbursement if DM management class is given on same day

CPT and HCPCS Codes for MNT

| MNT Code | Description | Units billed |
|-------------|---|------------------------|
| 97802 | Initial, individual MNT visit Individual face to face visit | 1 unit = 15 minutes |
| 97803 | Follow-up, individual MNT visit Subsequent visit | 1 unit = 15 minutes |
| 97804 | Group MNT, 2 or more individuals | 1 unit = 30 minutes |
| G0270 | Individual MNT visit for changed medical diagnosis, second referral | 1 unit = 15 minutes |
| G0271 | Group MNT, 2 or more individuals for changed medical diagnosis, second referral | 1 unit = 30 minutes |

New: Telehealth Modifiers

- GT: Via interactive audio and video telecommunications system
- GQ: Via asynchronous telecommunications system

International Classification of Diseases, Ninth Revision (ICD-9) Codes for MNT

- 250.02: Series codes for diabetes
- 585.00: Series codes for chronic kidney failure
- Obtain correct diagnosis from treating physician

Other CPT Codes Used by RDs

Diabetes Self-Management Training

- G0108
- G0109

Education and Training

- 98960
- 98961
- 98962

Continuous Glucose Monitoring

95250

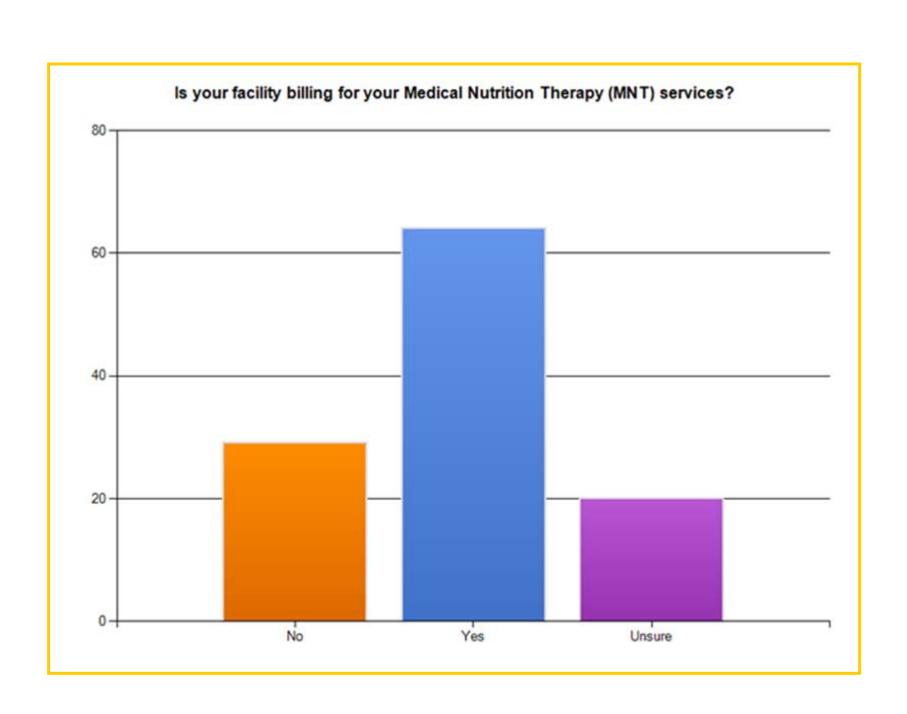
Sample MNT EHR Consult/Referral

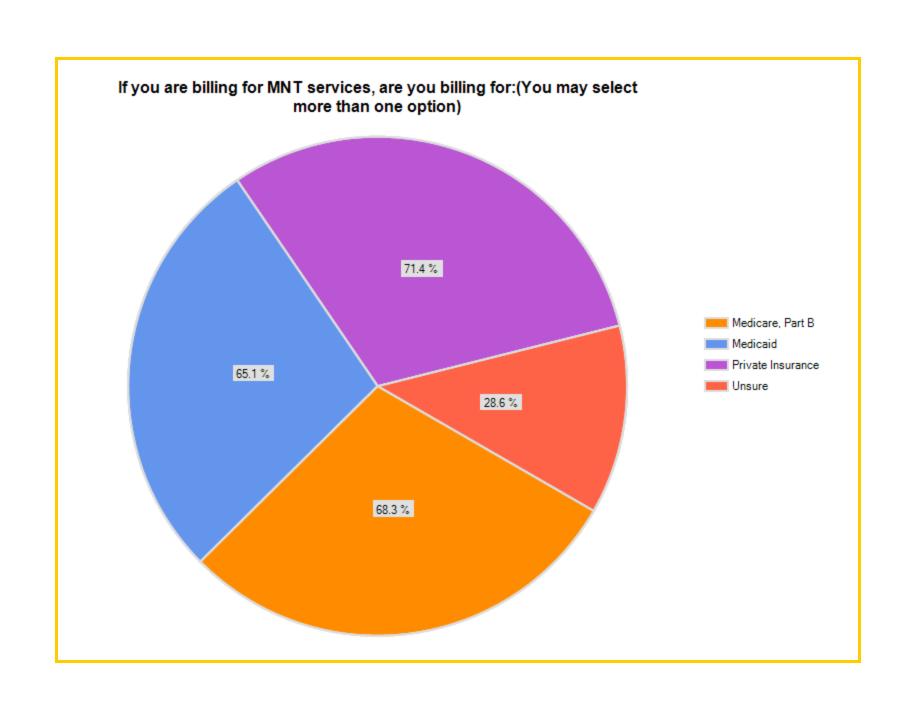
| Reason for Request: KYLE DIETARY | | | |
|--|--|--|--|
| DIETARY CONSULT FORM | | | |
| Diagnosis: | | | |
| Type 1 Controlled Type 2 Controlled | | | |
| Gestational Diabetes Controlled Type 1 Uncontrolled | | | |
| Type 2 Uncontrolled Gestational Diabetes Uncontrolled | | | |
| Clinical data and diabetes medications available in current IHS Health Summary | | | |
| Medical Nutrition Therapy (MNT): (Check services being ordered and provided by a registered dietitian. | | | |
| Initial MNT | | | |
| Annual MNT | | | |
| Additional MNT services in same calendar year, per RD recommendations | | | |
| Please specify change in diagnosis, medical condition or treatment regimen: | | | |
| Your Goals for Patient: Improve AlC Improve Dyslipidemia | | | |
| □ Weight Management □ Change in Medical Management □ Improve B/P | | | |
| □ No previous MNT in past year □ Other: | | | |
| Are there any physical limitations or contraindications to physical exercise? YES NO | | | |
| | | | |
| * Indicates a Required Field Preview OK Cancel | | | |
| 11:26 | | | |

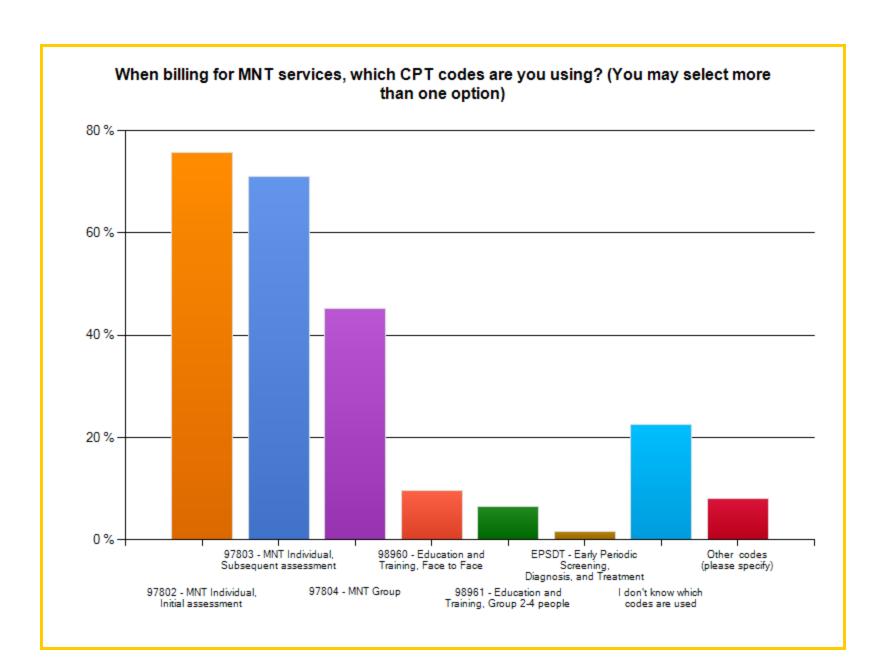
National MNT Reimbursement Survey

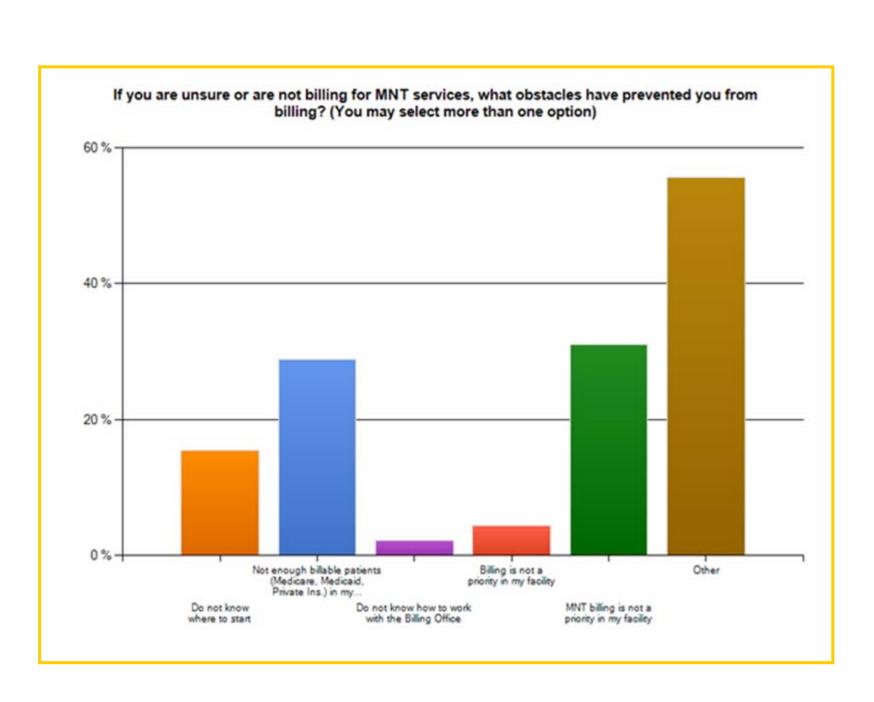
MNT Reimbursement Survey

- Survey is conducted biannually to collect data on billing and collection trends across IHS/Tribal/Urban (I/T/U) facilities
- Uncovered collection successes and obstacles to nationally enhance revenue generation
- Participation by all 12 areas
- Over 100 RDs completed the survey







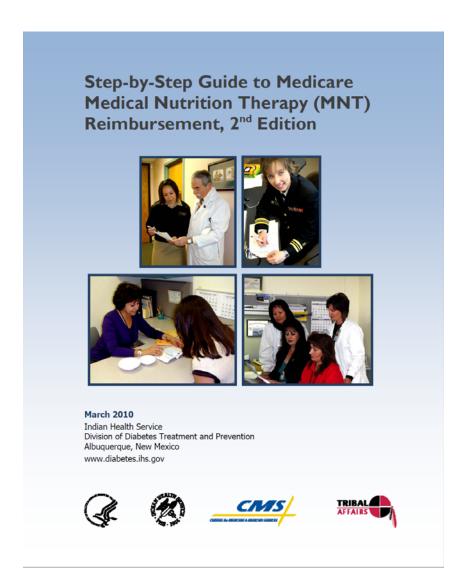


2010 Step-by-Step Guide to MNT Reimbursement

FY 09 MNT Collections

FY 09 MNT Collections By Payer

New 2010 MNT Reimbursement Guide



Maximizing MNT Collections

- We need your help!
- What can we as RDs do to increase collections?
- What are your MNT processes to increase third-party revenue?
- What are your suggestions to establish a better relationship with your MNT providers?