

NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES

# GUIDANCE DOCUMENT

“This guidance document is advisory in nature but is binding on an agency until amended by such agency. A guidance document does not include internal procedural documents that only affect the internal operations of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules and regulations made in accordance with the Nebraska Administrative Procedure Act. If you believe that this guidance document imposes additional requirements or penalties on regulated parties, you may request a review of the document.”

Pursuant to  
Neb. Rev. Stat. § 84-901.03



## PROVIDER BULLETIN

No. 17-22

DATE: August 7, 2017

TO: All Providers Participating in Nebraska Medicaid Program

FROM: Thomas 'Rocky' Thompson, Interim Director <sup>TNT</sup>  
Division of Medicaid & Long-Term Care

BY: Denise Woolman, Program Specialist RN

RE: Medical Nutrition Therapy

### **Please share this information with administrative, clinical, and billing staff.**

Effective July 1, 2017, medical nutrition therapy services are available to all Medicaid clients and will be administered through both managed care and fee for service. These services include the assessment, intervention and counseling provided by a medical nutritional therapist when prescribed by a physician or nurse practitioner. The coverage specifics are as follows:

Adults 21 years of age and older - Clients will receive one on one counseling to develop a plan to address identified nutritional problems based on the health objectives, resources, and capacity of the client. The client must have one of the following medical conditions and require medical nutritional therapy for that condition:

1. Type I or type II diabetes
2. Have kidney disease
3. Have had a kidney transplant in the last 36 months.

Children 20 years of age and younger - As part of an EPSDT screening there must be a diagnostic finding from the exam that indicates a nutritional problem or condition of such severity that nutritional counseling beyond that normally expected as part of the standard medical management is warranted. Clients/caregivers will receive the following counseling services:

1. Individual counseling to explain the nutritional assessment and the implementation of a plan of nutritional care. Caregivers may only receive services when for the direct benefit of the child, and when the child is present.
2. Individual counseling to develop a plan to address identified nutritional problems based on the health objectives, resources, and capacity of the child/caregiver. Caregivers may only receive services when for the direct benefit of the child, and when the child is present.
3. Group counseling caregivers may only receive services when for the direct benefit of the child, and when the child is present.

To bill for services provided to Medicaid fee for service clients 21 years of age and older, utilize the appropriate codes listed on the physicians fee schedule. CPT codes 97802 and 97803 are billed for in 15 minute increments. HCPCS code G0270 is for Medicare crossover claims only.

To bill for services provided to Medicaid fee for service clients 20 years of age and younger, utilize the appropriate codes listed on the EPSDT fee schedule and use the EP modifier. CPT codes 97802, 97803, and 97804 are billed for in 15 minute increments.

To bill for services provided to Managed Care clients please contact the appropriate Managed Care Organization (MCO) for specific billing instructions.

These services are subject to all other Medicaid requirements, including medical necessity and prior authorization (if applicable). As with all other Medicaid services, these services must be appropriately documented in the clinical record.

If you have questions regarding this bulletin, please contact the Department via email at [DHHS.MLTCPhysicalHealth@nebraska.gov](mailto:DHHS.MLTCPhysicalHealth@nebraska.gov).