ATTACHMENT 3.1-A Item 13c, Page 1 Applies to both Categorically and Medically Needv

# STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT State Nebraska

## LIMITATIONS - PREVENTATIVE SERVICES

### **Nutrition Services**

Medical Nutritional Therapy for adult clients:

Medical Nutritional Therapy (MNT) is the assessment, intervention and counseling provided by a medical nutrition practitioner when prescribed by a physician or nurse practitioner. MNT is done for the purpose of managing the nutritional needs of clients whose nutritional status affects their health and medical conditions.

This service is available to a select adult population of eligible clients with medical needs that require nutritional assessment, intervention, and continued monitoring.

Referral: Medical Nutritional Therapy is available only with a physician or nurse practitioner referral. This referral must be made based on the need for nutritional diagnosis, therapy, and counseling to manage a qualifying medical condition. Therapies will be in accordance with currently accepted dietary and nutritional protocols.

#### MNT services:

#### 1. Assessment

A nutritional assessment is done by a client's primary care provider. The diagnostic finding from the exam must indicate that a nutritional problem or condition of such severity that nutritional counseling beyond that normally expected as part of the standard medical management is warranted.

## 2. Intervention

Assessment information is used to develop a plan to prevent, improve, or resolve identified nutritional problems.

## 3. Counseling

 Clients receive individual counseling to explain the nutritional assessment and the implementation of a plan of nutritional care.

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ATTACHMENT 3.1-A Item 13c, Page 2 Applies to both Categorically and Medically Needy

# STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT State Nebraska

#### LIMITATIONS – PREVENTATIVE SERVICES

b. Clients receive individual counseling to develop a plan to address identified nutritional problems based on the health objectives, resources, and capacity of the client.

#### 4. Providers

- a. Be a currently licensed medical nutritional therapist in the State of Nebraska.
- b. Act within their scope of practice.

Provider Qualifications: Providers must be licensed to practice medical nutrition therapy pursuant to the Uniform Credentialing Act and hold a current license issued by the Nebraska Department of Health and Human Services Division of Public Health.

Intervention and counseling provided under Medical Nutrition Services are provided by licensed Medical Nutritional Therapist.

- 5. Client Eligibility
  - a. Be an adult age 21 or over

#### **Nutrition Counseling**

Nebraska Medicaid covers nutrition counseling for pregnant women who are assessed to be at risk of having negative maternal or infant health outcomes. Nutrition counseling is education and guidance by a licensed medical nutrition therapist or a prenatal care provider. Nutrition counseling is offered for the purpose of educating pregnant individuals who are at risk of having negative maternal or infant health outcomes.

Up to 6 nutrition counseling sessions per pregnancy are allowed. Additional sessions will be allowed if deemed medically necessary.

#### Vaccinations

Nebraska Medicaid covers vaccines and vaccine administration in compliance with section 1905(a)(13)(B) of the Social Security Act. Nebraska Medicaid staff monitor for changes in recommendations from the Advisory Committee on Immunization Practices (ACIP) to ensure Nebraska Medicaid coverage of vaccines and vaccine administration aligns with current ACIP recommendations.

Vaccinations are a preventative service. Preventive services mean services recommended by a physician or other licensed practitioner of the healing arts acting within the scope of authorized practice under State law to - (1) Prevent disease, disability, and other health conditions or their progression; (2) Prolong life; and (3) Promote physical and mental health and efficiency.

ATTACHMENT 3.1-A Item 13c, Page 2a Applies to both Categorically and Medically Needy

# STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT State Nebraska

# LIMITATIONS – PREVENTATIVE SERVICES

# **Breast-Feeding Support**

Nebraska Medicaid covers breastfeeding support for pregnant women who are assessed to be at risk of having negative maternal or infant health outcomes. Breast-feeding support is education, guidance, and instruction by a medical nutrition practitioner or international board-certified lactation consultant. Breast-feeding support is offered for the purpose of educating pregnant individuals who are at risk of having negative maternal or infant health outcomes.

One 60 minute breastfeeding instruction class will be reimbursed. Additional sessions will be allowed if deemed medically necessary.

- 1. Providers
  - a. Licensed Medical Nutritional Therapist
  - b. International board-certified lactation consultant (IBCLC)

Provider Qualifications: Providers must be licensed to practice medical nutrition therapy or lactation counseling pursuant to the Uniform Credentialing Act and hold a current license issued by the Nebraska Department of Health and Human Services Division of Public Health.