

## **Medicaid Medical Nutritional Therapy (MNT) Policy as of 1/2008**

<http://www.ncdhhs.gov/dma/physician/1-I.pdf> - link to Policy

### **Populations covered**

#### **Patients meeting medical necessity criteria**

Children through 20 years of age

Pregnant and Post-partum women

Must Meet Medical Necessity Criteria within those populations (Page 3 of policy)

ICD-9 codes of 278.00, 278.01, 783.7, 783.41

Medicaid-enrolled providers who employ or contract with licensed dietitians/nutritionists or registered dietitians (for example, local health departments, rural health centers, federally qualified health centers, physician or medical diagnostic clinics, outpatient hospitals and physicians) are eligible to bill for this service.

MNT needs to be provided by:

A dietitian/nutritionist currently licensed by the NC Board of Dietetics/Nutrition or

A dietitian currently registered with the Commission of Dietetic Registration

Initial assessment -

97802 - Medical nutrition therapy; initial assessment and intervention, individual, face-to-face with the patient, each 15 minute unit

Limit 4 units of service (1hr) per date of service and max of four units per 270 days

Initial visit - 30-60 minutes (2-4 15 minute units)

Follow up -

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

Limits – Four units of service per service date and max of 20 units per 365 days by same or different provider

Follow up visit – 30-60 minutes