DATE: February 1, 2017

TO: Eligible Medicaid Providers of Medical Nutrition Therapy Services,
Registered Dietitians, Federally Qualified Health Centers, and Rural Health Clinics
Chief Executive Officers, Managed Care Plans
Other Interested Parties

FROM: Barbara R. Sears, Medicaid Director

SUBJECT: **Payment of Medical Nutrition Therapy Services Rendered by a Registered Dietitian at a Federally Qualified Health Center or Rural Health Clinic**

When submitting a claim to the Ohio Department of Medicaid for medical nutrition therapy (MNT) services rendered by a registered dietitian at a Federally Qualified Health Center (FQHC) or Rural Health Clinic (RHC), an FQHC or RHC provider must use their fee-for-service ambulatory health care clinic provider type number 50.

The CPT codes for MNT services along with payment amounts are contained in Appendix DD of Ohio Administrative Code rule 5160-1-60, and include: (1) CPT code 97802 (medical nutrition therapy; initial assessment and intervention, individual, face-to-face with the patient, each 15 minutes), (2) CPT code 97803 (medical nutrition therapy; re-assessment and intervention, individual, face-to-face with the patient, each 15 minutes), and (3) CPT code 97804 (medical nutrition therapy; group (2 or more individuals), each 30 minutes). Services rendered by a registered dietitian are signified by reporting an AE modifier on the procedure code.

MNT services provided by a registered dietitian at an FQHC or RHC are not included in the list of FQHC or RHC covered services that may be reimbursed as an encounter under Medicaid as defined under Section 1905(a)(2)(C) of the Social Security Act. MNT services provided by a registered dietitian do not meet this requirement and cannot be paid as an FQHC or RHC encounter. The Deficit Reduction Act of 2005 amended Section 1861(aa)(3) of the Act and allowed Medicare to consider a visit with a registered dietitian as an encounter subject to payment; since Medicaid services are defined in Section 1861(aa)(1) and not (aa)(3), the change to that section of the Act does not affect Medicaid.
Additional Information

Information about the services and programs of the Ohio Department of Medicaid (ODM) may be accessed through the main ODM webpage at http://www.medicaid.ohio.gov.

Questions

Questions pertaining to this letter may be directed to the Ohio Department of Medicaid’s provider call center at (800) 686-1516, noninstitutional_policy@medicaid.ohio.gov, or:

Ohio Department of Medicaid
Bureau of Health Plan Policy
Non-Institutional Services
P.O. Box 182709
Columbus, OH 43218-2709