 <p>group health Cooperative[™] of eau claire</p> <p>KMTSJ, Inc.</p>	DEPARTMENT:	Utilization Management
	SUBJECT:	Dietary Counseling
	PRODUCT LINE:	All
	POLICY NUMBER:	026
	ORIGINAL POLICY EFFECTIVE DATE:	10/01/2012
	LAST REVISED DATE:	04/25/17
	LAST REVIEWED DATE:	2/15/2023

SCOPE: To ensure Group Health Cooperative of Eau Claire consistently and correctly administers dietary counseling benefit to all members according to their policy specifics.


POLICY: Group Health Cooperative of Eau Claire considers dietary counseling to be medically necessary for members with chronic disease states. Services require a prescription from the physician and need to be furnished by an in plan registered dietician.

PROCEDURE: COMMERCIAL

State of Wisconsin/Commercial Members: Prior authorization is required prior the 9th dietary counseling session. A limited dietary counseling benefit is available for members with a diagnosis of obesity OR certain cardiovascular or diet-related chronic disease. This limited benefit is covered for those who meet the criteria below:

For Obesity:

- Physician directed care visits will be covered with no cost share. Must be a GHC Plan Provider.
- Dietary counseling is covered if provided by a participating Registered Dietitian or Plan Provider.
- **HCPCS code G0447 (dietary counseling for obesity), 97802, or 97803, must be utilized in order for payment to be made.** These codes designate an intensive 1:1 service.
- Prior authorization is required for dietary and counseling services prior to the 9th visit. An additional 4 visits will be allowed per plan year or member will be referred to Health Promotion or case management for further counseling depending on the need.
- Total of 12 -26 visits per plan year are covered with authorization if the member is losing on average 1 lb. per week. *Example: if the member has 2 visits per week, member will reach the 12 visits within 6 weeks. At that time the member will have needed to lose, on average 1 lb. per week, with approximately a 6 lb. weight loss in order to continue with the additional visits. Any exceptions will be reviewed by the CMO.
- If the member is not meeting criteria at the end of any authorization period (after the initial 12 visits) the member will be locked out for 6 months.
- Coverage is for members with a BMI > than 30. Once the weight loss brings the member to a BMI of < than or equal to 30, the mandate no longer applies, therefore the benefit stops.
- Claims do not have to have a Primary Diagnosis of Obesity
 - Many of the services will be RD visits with Primary Diagnosis of Obesity
 - This service is for both adults and for children over the age of 6
- Food items, services such as Weight Watchers, Jenny Craig, Medi Fast, Dietary Supplements, HMR, are not a covered benefit.
- Gastric bypass surgery is not a covered benefit.

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- Laboratory services related to this benefit are not required to be covered under this mandate, and are not part of the -0- cost share at this time. However, certain labs may have coverage under other mandates or benefits.

For Cardiovascular Conditions/Chronic disease:

- Physician directed care visits will be covered with no cost share. Must be a GHC Plan Provider. Dietary counseling is covered if provided by a participating Registered Dietician or Plan Provider and no cost share.
- **This benefit is limited to 2 visits per plan year.** Individuals with a cardiovascular/chronic disease diagnosis and obesity will have services provided under the obesity benefit (above; 12-26-visits per plan year provided criteria are met).
- **HCPCS code G0447 (dietary counseling for obesity), 97802, or 97803 must be utilized in order for payment to be made.** These codes designate an Intensive1:1 service.
- Qualifying diagnoses include:
 - Diabetes Mellitus
 - Hypertension
 - Hyperlipidemia
 - Heart Failure
 - Hypercholesteremia
- **Any exceptions to the above diagnoses list should be discussed with the Chief Medical Officer.**

MEDICAID

Medicaid members: Prior authorization for dietary counseling is not required.


- Dietary Counseling is a covered benefit for members with chronic disease states such as diabetes mellitus, cardiovascular disease, kidney disease and gastrointestinal disorders.
- Nutritional therapy treatment for obesity is covered for Medicaid members.
- Covered for members who are attempting to qualify for gastric bypass surgery.

ASSOCIATED CODES: COMMERCIAL:

- G0447 Dietary counseling for obesity
- 97802 Medical nutrition therapy; initial assessment and intervention, individual, face-to-face
- 97803 Re-assessment and intervention, individual, face-to-face

MEDICAID:

- 99201 Office/OP Visit-New Patient (10min)
- 99202 Office/OP Visit-New Patient (20min)
- 99211 Office/OP Visit-Established Patient (5 min)
- 99212 Office/OP Visit-Established Patient (10min)

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Services must be provided by a participating Registered Dietitian and prescribed and billed under the supervising Physician, P-AC, or CNP, not the dietician.

Reference source, if applicable: N/A

APPROVED: *Michele Bauer MD.* DATE: 2/15/2023

Formal policies and procedures require department manager review, approval and signature. Executive and/or administrative policies and procedures require CEO/General Manager review, approval and signature.

REVISION HISTORY:

Rev. Date	Revised By/Title	Summary of Revision
02/25/2013	Carol E. Ebel, RN HM Mgr	This is a continuation of the archived P & P.
7/29/2013	Jennifer Rust Anderson Compliance Manager	Clarification of coverage policy for obesity vs. cardiovascular/diet risk factors per PPACA
02/15/2014	Lynne Komanec, RN HM Manager	Reviewed with no changes
01/23/2015	Betsy Kelly, RN	Removed Core Plan references.
5/6/15	Betsy Kelly, RN	Added codes for Badgercare/Medicaid/bill under supervising provider.
4/22/2016	Betsy Kelly, RN	Reviewed with no changes.
04/25/17	Michele Bauer, MD, CMO	Reviewed with no changes other than formatting.
05/23/2019	Michele Bauer, MD, CMO	Reviewed and updated criteria.
5/14/2020	Michele Bauer, MD, CMO	Reviewed. No changes.
3/10/2021	Michele Bauer, MD, CMO	Reviewed. No changes.
2/15/2022	Michele Bauer, MD, CMO	Reviewed. No changes.
2/15/2023	Michele Bauer, MD, CMO	Reviewed. No changes.