

CPT and G codes for RDNs

MNT CPT Codes

The MNT CPT codes are unique codes for medical nutrition therapy provided by RDNs. Compared with other CPT codes, the MNT CPT codes best describe the services that RDNs provide to patients/clients receiving medical nutrition therapy services for a particular disease or condition. The codes can be used among private insurance companies, depending on the coding and billing details listed in the RDN's contract with the insurance plan. Additionally, CMS requires use of these codes for the Medicare MNT benefit by RDN providers who perform MNT services for diabetes and non-dialysis kidney disease.

- **97802:** Medical nutrition therapy; *initial assessment* and intervention, *individual*, face-to-face with the patient, each 15 minutes.
- **97803:** ...*reassessment and intervention*, *individual*, face-to-face with the patient, each 15 minutes.
- **97804:** ...*group* (2 or more individuals), each 30 minutes.

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G Codes

CMS also established additional codes for use with Medicare covered services. These G codes should be used when additional hours of MNT services are performed beyond the number of hours typically covered, (3 hours in the initial calendar year, and 2 follow-up hours in subsequent years with a physician referral) when the treating physician determines there is a change of diagnosis or medical condition that makes a change in diet necessary.

- **G0270:** Medical nutrition therapy; reassessment and subsequent intervention(s) following second referral in same year for change in diagnosis, medical condition, or treatment regimen (including additional hours needed for renal disease), *individual*, face-to-face with the patient, each 15 minutes.
- **G0271:** Medical nutrition therapy reassessment and subsequent interventions(s) following second referral in same year for change in diagnosis, medical condition, or treatment regimen (including additional hours needed for renal disease) *group* (2 or more individuals), each 30 minutes.

G Codes: Diabetes Self-Management Trainings

For RDNs providing Diabetes Self-Management Trainings as part of an accredited program, the following G codes should be used for billing:

- **G0108:** Diabetes outpatient self-management training services, *individual*, per 30 min. .
- **G0109:** ...*group session* (2 or more individuals), per 30 minutes

All of the above G codes can be used among private insurance companies, depending on the coding and billing details listed in the RDN's contract with the insurance plan.

Additional Codes Recognized by Medicare

Medicare Part B offers coverage for some services beyond MNT and DSMT that RDNs may be qualified to provide. These codes may also be recognized by some private payers. Refer to individual payer policies for use of code and specific coverage parameters.

- **G0438***: Initial Annual Wellness Visit (AWV)
- **G0439***: Subsequent AWV
- **G0447***: Face-to-Face Behavioral Counseling for Obesity, *15 Minutes, individual*
- **G0473***: ...group (Two to 10 individuals), *30 minutes*.
- **G0436**: Smoking and tobacco cessation counseling visit for the asymptomatic patient; *intermediate, greater than 3 minutes, up to 10 minutes*
- **G0437**: ...*intensive, greater than 10 minutes*

**Indicates RDNs must provide service 'incident to' the physician.*

Codes that may be recognized by Private Payers for RDN Use

Private payers may recognize CPT codes for use in billing by RDNs beyond those recognized by Medicare. RDNs should consider negotiating for inclusion of these codes in their contracts with private payers, depending on the RDN's individual scope of practice. Refer to individual payer policies for specific coverage parameters and CPT book for full code description. CPT codes, descriptions and material only are copyright ©2016 American Medical Association. All Rights Reserved.

- **95250**: Ambulatory continuous glucose monitoring of interstitial tissue fluid via a subcutaneous sensor for a minimum of 72 hours; sensor placement, hook-up, calibration of monitor, patient training, removal of sensor, and printout of recording
- **95251**: Interpretation and report

RDNs may be able to use the following education and training codes for educational services such as community-based cooking classes, grocery store tours to educate consumers on food labels, or wellness nutrition education to prevent or delay diseases such as hypertension, osteoporosis or cardiovascular disease.

This differs from MNT services which involves in-depth individualized nutrition assessment and a duration and frequency of care using the Nutrition Care Process to manage disease.

Per the CPT® Manual, these services must be provided "using a standardized curriculum to an individual or a group of patients for the treatment of established illness(s)/disease(s) or to delay comorbidity(s). This curriculum may be modified as necessary for the clinical needs, cultural norms and health literacy of the individual patient(s)... The content of the educational and training program must be consistent with guidelines or standards

established or recognized by a physician society, non-physician healthcare professional society/association or other appropriate source."

- **98960**: Education and training for patient self-management by a qualified, non-physician health care professional using a standardized curriculum, face-to-face with the patient (could include caregiver/family), each *30 minutes; individual patient*
- **98961**: ...*2-4 patients*
- **98962**: ...*5-8 patients*
- **98966**: Telephone assessment and management service provided by a qualified non-physician health care professional to an established patient, parent, or guardian; *5 to 10 minutes of medical discussion*
- **98967**: ...*11 to 20 minutes of medical discussion*
- **98968**: ...*21 to 30 minutes of medical discussion*
- **98969**: Online assessment and management service provided by a qualified non-physician health care professional, using the Internet or similar electronic communications network.
- **99366**: Medical team conference with interdisciplinary team of health care professionals, face-to-face *with patient/family present*, > 30 minutes
- **99368**: ...*without the patient and/or family*, > 30 minutes
- **99401****: Preventive medicine counseling and/or risk factor reduction intervention(s); *individual; 15 min*
- **99402****: ...*individual; 30 min.*
- **99403****: ...*individual; 45 min.*
- **99404****: ...*individual, 60 min.*
- **99411****: Preventive medicine counseling and/or risk factor reduction intervention(s); *group; 30 minutes*
- **99412****: ... *group; 60 minutes*
- **99406**: Smoking and tobacco use cessation counseling visit; *intermediate, greater than 3 minutes and up to 10 minutes*
- **99407**: ...*intensive, greater than 10 minutes*
- **99487**: Complex chronic care management services; *60 minutes* of clinical staff time directed by a physician or other qualified health care professional, per calendar month
- **99489**: ...*each additional 30 minutes* per calendar month

**Per the CPT® Manual, these services are used for persons without a specific illness. Refer to individual payer policies for use of codes and specific coverage parameters

Source: www.eatright.org