
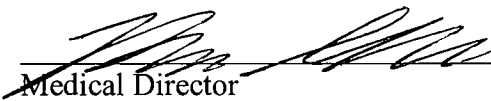

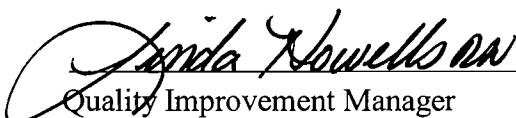


**KERN HEALTH SYSTEMS
POLICIES AND PROCEDURES**

SUBJECT: Specialty Nutrition Consultation		INDEX NUMBER 3.37-P	PAGE 1 of 3
RESPONSIBLE DEPARTMENT HEAD: Director of Health Services			
Review Date	06/00	10/2005	08/2008
Effective Date		02/23/06	10/14/08
Revision Date	06/00	2005-11	2008-10

Approved		Date	10/14/08
	Carol Sorrell, R.N. Chief Executive Officer		
Approved		Date	9-11-08
	Medical Director		
Approved		Date	9/11/08
	Director of Health Services		
Approved		Date	8/21/08
	Quality Improvement Manager		

POLICY¹:

Kern Health Systems' (KHS) members who are identified, on a case by case basis, as medically high risk and who would benefit from a specialty nutrition consultation will be referred to a contracted Registered Dietician for an initial consultation and appropriate follow-up if needed and authorized.

PURPOSE:

To define the process for identifying, referring and monitoring medically high risk members who would benefit from specialty nutrition consultation and to define the process for billing and payment for the services.

PROCEDURE:

1.0 AUTHORIZATION

All providers, including OB/GYN, should utilize the KHS Referral/Prior Authorization form to request specialty nutrition consultations. Referrals are forwarded to the KHS Health Education Department for review and members are contacted prior to authorizing. If authorized, the KHS Health Education Department schedules the appointment or faxes the KHS Referral/Prior Authorization form to the contacted nutrition consultants to schedule the appointment. Once processed, the KHS Health Education Department faxes the KHS Referral/Prior Authorization form to the prescribing Provider, (PCP, OB/GYN, and /or any other specialist), for inclusion in

**KERN HEALTH SYSTEMS
POLICIES AND PROCEDURES**

SUBJECT: Specialty Nutrition Consultation	INDEX NUMBER 3.37-P	PAGE 2 of 3
--	------------------------	----------------

the member's medical record.

All specialty nutrition consultants must be prior-authorized. If follow-up visits are needed, these visits must be prior-authorized by KHS for reimbursement purposes.

2.0 AUTHORIZATIONS FOR MEDICAL NUTRITION THERAPY

Medical Nutrition Therapy (MNT) is authorized only if KHS nutrition consultation services do not meet the medical need of the member. Approval for MNT depends upon risk and is on a case by case basis.

3.0 BENEFITS OF MEDICAL NUTRITION THERAPY

Benefits of MNT include the following:

- A. Improved Treatment Outcome - completes interdisciplinary care team, improves patient satisfaction.
- B. Efficiency and Accuracy in Education - MNT is provided by a Registered Dietician.
- C. Quality Improvement - compliance with managed care regulations.

4.0 FEATURES OF MEDICAL NUTRITION THERAPY

MNT is a professional assessment for conditions such as failure to thrive, COPD, Hyperlipidemia, Type 1 and Type 2 Diabetes, Heart Disease, Hypertension, Gestational Diabetes, etc.

5.0 DESCRIPTION OF SERVICES

MNT by a Registered Dietician may be provided at the following levels, upon referral from any KHS contracted provider or by a KHS Utilization Management Nurse:

- A. Initial Assessment
- B. Follow-up Assessment
- C. Group Education

5.1 Appointment Scheduling

The KHS Health Education Department is responsible for contacting the member to schedule a MNT appointment and informing the prescribing Provider of the scheduled appointment. MNT is provided in a plan designated area.

5.2 Documentation

The Registered Dietician is responsible for providing documentation of therapy to the KHS Health Education Department. The KHS Health Education Department is responsible for providing MNT documentation to the prescribing Provider.

5.3 Language Assistance

A Spanish speaking dietician or interpreter will be made available if needed.

**KERN HEALTH SYSTEMS
POLICIES AND PROCEDURES**

SUBJECT: Specialty Nutrition Consultation	INDEX NUMBER 3.37-P	PAGE 3 of 3
--	------------------------	----------------

¹**Revision 2008-10:** Revised by Member Health Educator. Policy has not been reviewed by AIS. Revision 2005-11: Revised by Quality Improvement Manager. Policy has not been reviewed by AIS.