

# TeleDIETS

## PCP Insurance Billing Code Summary for Medical Nutrition Therapy

### **MNT (Medical Nutrition Therapy) Definition**

Treatment based on nutrition. It includes checking a person's nutrition status and giving the right foods or nutrients to treat conditions such as those caused by diabetes, heart disease, and cancer. It may involve simple changes in a person's diet, or intravenous or tube feeding.

MNT CPT Codes are listed below for **face-to-face services**:

1. 97802: Medical nutrition therapy; initial assessment and intervention, individual, face-to-face with the patient, each 15 minutes.
2. 97803: Re-assessment and intervention, individual, face-to-face with the patient, each 15 minutes.
3. 97804: Group (2 or more individual(s)), each 30 minutes.

### **MNT Audio-only or video telehealth services:**

Category	Telehealth CPT codes and HCPCS codes
Medical nutrition therapy	97802, 97803, 97804, G0270

### **ICD10 Diagnostic Code - General**

ICD-10 code **Z71. 3** for Dietary counseling and **surveillance** is a medical classification as listed by WHO under the range - Factors influencing health status and contact with health services

### **Units, Billing & Definitions**

What is the difference between 97803 and 97802?

CPT code 97802 is reported for the initial assessment and intervention face-to-face with an individual patient for each 15 minutes of medical nutrition therapy. CPT code 97803 is reported for re-assessment and intervention with an individual patient for each 15 minutes of Medical Nutrition Therapy (MNT).

CPT codes 97802 and 97803 should be unit priced; four units = 60 minutes, and six units = 90 minutes. For many private insurance payers, up to 6 units may be billed with 97802.

Does 97802 need a modifier?

If you're using a registered dietitian for services then 97802 and 97803 are appropriate, you will need to append a -25 modifier to the medical services. ***If the dietary counseling is not a registered dietitian***, you will want to use the E/M codes 99401-99404 and still use the -25 for the medicine part of the visit.

How often can CPT 97802 be billed?

Each code can be billed with a maximum of eight units for the same patient on the same day. For example, if a provider spends 22 minutes with a patient, you can only bill 97802 or 97803 once, because you haven't reached the midpoint of the subsequent 15 minutes.

Can a 97803 be billed as telehealth?

Billing for telehealth nutrition services may vary based on the insurance provider. When creating your insurance claim, most providers will accept your typical CPT codes submitted (ie. 97802, 97803, 97804) but require you to change the Place of Service Code to 02 for telehealth.

Ref: <https://telehealth.hhs.gov/providers/best-practice-guides/telehealth-for-chronic-conditions/billing-and-payment-policies-for-telehealth-services-to-treat-chronic-conditions>