Medical Nutrition Therapy (MNT) provided by a Registered Dietitian (RD) is a covered benefit for all lines of business for Alliance members that meet qualifying conditions or are deemed at nutritional risk. Prior authorization is required for all MNT services. Prior authorizations can be requested through the Provider Portal by utilizing the following:

<table>
<thead>
<tr>
<th>Authorization Class</th>
<th>Out Patient</th>
</tr>
</thead>
<tbody>
<tr>
<td>Authorization Subclass</td>
<td>Rehab Therapies</td>
</tr>
</tbody>
</table>

**Timeframes for Authorization Submission:**
All healthcare services requiring prior authorization are to be submitted to the Alliance prior to rendering services requested unless it is not possible for the provider to obtain authorization before providing a medically necessary service. If an authorization request is submitted after a service has been provided or initiated, it must be received by the Alliance within 30 calendar days of initiation of the service or the request will be denied for non-timely submission.

Providers offering MNT to Alliance members should use the following codes for authorizations and claims payments:

<table>
<thead>
<tr>
<th>CPT-4 Code 97802</th>
<th>MNT, initial assessment and intervention, individual, face-to-face with patient, each 15 minutes</th>
</tr>
</thead>
<tbody>
<tr>
<td>CPT-4 Code 97803</td>
<td>MNT, re-assessment and intervention, individual, face-to-face with patient, each 15 minutes</td>
</tr>
<tr>
<td>CPT-4 Code 97804</td>
<td>MNT, group (2 or more individual[s]), each 30 minutes</td>
</tr>
<tr>
<td>CPT -4 Code G0270</td>
<td>MNT, 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</td>
</tr>
<tr>
<td>CPT-4 Code G0271</td>
<td>MNT, 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),</td>
</tr>
</tbody>
</table>
group (2 or more individuals), each 30 minutes

HCPCS Code S9470  Nutritional Counseling, dietitian visit, each 15 minutes

Annual MNT coverage is a maximum of 3 hours for the first calendar year and 2 hours per calendar year in subsequent years.

Adults (>21 years) with a medical diagnosis deeming them to be “At Nutrition Risk” requiring a special or restrictive diet, including but not limited to:

- Acute Renal Failure
- Allergic Gastroenteritis
- Cancer with Significant Weight Loss or Head, Neck, or Gastrointestinal in origin
- Celiac Disease
- Congestive Heart Failure
- Chronic Kidney Disease
- Chronic Non-Alcoholic Liver Disease
- Dysphagia
- Eating Disorders
- Gastrointestinal disease with malabsorption
- Hepatic Disease
- Short Bowel Syndrome
- HIV/AIDS
- Significant Hyperlipidemia – Intolerance to statins OR LDL >190 and TG >500
- Inborn Errors of Metabolism (i.e., PKU or galactosemia)
- Nutrition Support, i.e., Total Parenteral Nutrition, Enteral Nutrition
- Nutritional Anemia
- Pancreatitis
- Pre-Post Bariatric Surgery
- Poor Healing Wounds

Children (0-20 years) with a medical diagnosis deeming them to be “At Nutrition Risk” requiring a special or restrictive diet, including but not limited to:

- Failure to thrive (BMI or weight for height < 10th percentile or a weight deceleration that crosses two major percentile lines on growth charts)
- Celiac Disease
- Chronic constipation
- Dysphagia
- Eating Disorders/Disordered Eating
- Food Allergies
- Hyperlipidemia
- Obesity BMI > 95th percentile

- The Alliance does not approve MNT for diagnoses of diabetes or prediabetes without a qualifying comorbidity. All eligible members with a diagnosis of diabetes or prediabetes are eligible to access comprehensive individual and group education through an Alliance-approved education provider. The Alliance offers Diabetes Self-Management Education (DSME) and the Diabetes Prevention Program (DPP). Some Alliance-approved education providers may have age restrictions and members with other health coverage must utilize all benefits provided through their primary insurer before utilizing Alliance benefits.
- The Alliance does not cover MNT for adult weight management with a diagnosis of obesity
without a qualifying comorbidity. Members ages 18 and older that have a diagnosis of obesity and have a BMI of 30 or above are eligible for the Alliance Wellness that Works Support Program (WWSP). The WWSP is a one-time benefit and only available for members who have the Alliance as a primary insurance.

- The Alliance also offers a Healthier Living program (HLP), a six-week series of self-management workshops that focus on health, wellness and problems that are common to individuals suffering from any chronic conditions.

For further information regarding these programs please call the Alliance Health Education line at 800-700-3874, ext. 5580.