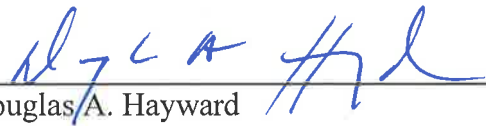





# KERN HEALTH SYSTEMS

<b>KERN HEALTH SYSTEMS</b>					
<b>POLICY AND PROCEDURES</b>					
SUBJECT: Specialty Nutrition Consultation				POLICY #: 3.37-P	
DEPARTMENT: Health Services					
Effective Date: 02/23/2006	Review/Revised Date: 1/19/2017	DMHC		PAC	
		DHCS		QI/UM COMMITTEE	
		BOD		FINANCE COMMITTEE	

  
 \_\_\_\_\_  
 Douglas A. Hayward  
 Chief Executive Officer

Date 1/19/17

\_\_\_\_\_  
 Chief Medical Officer  
  
 \_\_\_\_\_  
 Administrative Director of Health Services

Date \_\_\_\_\_

Date 1/19/17

### POLICY:

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

### PROCEDURES:

#### 1.0 AUTHORIZATION

Request for MNT does not require prior authorization.

#### 2.0 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.

### **3.0 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.

### **4.0 DESCRIPTION OF SERVICES**

MNT by a Registered Dietician may be provided at the following levels without prior authorization, upon referral from any KHS contracted provider or by a KHS Utilization Management Nurse:

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

#### **4.1 Language Assistance**

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

### **REFERENCE:**

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**Revision 2017-01:** Policy revised by Health Education and Disease Management Manager. MNT services do not require prior authorization. **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.