



# NUTRITION-FOCUSED HEALTH

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## Verifying Insurance Benefits

Before your scheduled appointment, it is best to call your insurance and verify your benefits. It is your responsibility to check if visits are covered and this guide will provide you with the questions to ask.

I am credentialed with **Allegiance, Cigna, Aetna, Blue Cross Blue Shield (MT or other states), Missoula County Employee Benefits Plan, Mountain Health Co-Op, First Choice Health, PacificSource, MT Medicaid\*, and Medicare\*** (see specific info at the bottom).

Remember, just because I am credentialed with these insurance companies does not guarantee that your specific plan has coverage for nutrition counseling. For MT Medicaid & Medicare, please see information below.



1. **Call the phone number on the back of your insurance card for members or customer service. Tell them you want to verify benefits for *nutrition counseling*.**



2. **Ask if I am in-network or out-of-network with your specific insurance plan.** Make sure to provide them with my information below. Make sure to clarify on the difference between the two.
  - Provider name: Erica Rubino, Registered Dietitian
  - NPI: 1043863319
  - Tax ID: 92-3517385
  - Address: 3031 S Russell St, Missoula, MT 59801



3. **Say you want to check specific CPT and diagnosis codes for nutrition counseling visits.**
  - **CPT codes:** 97802 & 97803 (these are for initial and follow-up visits for Medical Nutrition Therapy).
  - **Diagnosis codes:** Z71.3 (dietary counseling and surveillance)- this usually falls under a preventative benefit. If you are being seen for **diabetes**, make sure to tell them this as you might have coverage for diabetes education visits. Diabetes is not a preventative benefit and will fall under your medical benefits.

- You can also ask if your plan covers nutrition counseling for any specific conditions or diseases. Some insurances to keep in mind...
  - **Medicare & MT Medicaid:** See information in boxes below.
  - **PacifiSource:** Most plans only cover obesity, inborn errors of metabolism, or eating disorders (I do not see eating disorders.) Inborn errors of metabolism includes high cholesterol. For a full list of covered diagnoses, visit [https://pacificsource.com/sites/default/files/2024-09/WEB154\\_091024\\_Medical%20Nutrition%20Therapy.pdf](https://pacificsource.com/sites/default/files/2024-09/WEB154_091024_Medical%20Nutrition%20Therapy.pdf)
  - **Blue Cross Blue Shield:** For Montana plans, make sure to check if I am in-network with your specific plan type (PPO, POS, HMK, FEP, etc). I am in network with most, but not all.



#### 4. Ask if you must meet your deductible first before insurance will cover visits, if there is co-pay, or if nutrition counseling is covered at 100%.

- Clarify whether your deductible must be met first. If so, this means you will have to pay the full cost of the visit that is billed to insurance to me, which will go towards your deductible amount. This means you will have to pay out-of-pocket for the visit. Reps sometimes say you have benefits for nutrition counseling but then clarify that you must meet your deductible first which can be misleading.
- If it is covered at 100%, your plan should cover the visit in full without your deductible being affected.
- If there is a co-pay, you will have to pay this out-pocket and the insurance should cover the rest (or some portion) of the visit.



#### 5. Ask if there is a limit to the number of visits or hours covered per calendar year.

Some plans only allow a certain number of visits per year while others have unlimited.



#### 6. Ask if your plan requires a referral.

If a referral is required (both Medicare and MT Medicaid do), have your provider fax it to my information below:

- Erica Rubino, RD, CDCES @ Nutrition-Focused Health
- 3031 S Russell St, Missoula MT
- Fax: 406-510-8777



#### 7. Ask if telehealth (virtual visits) are covered.

Since COVID, many plans cover virtual visits but this is starting to change. Make sure to check this if you want to be seen virtually.

### **MEDICARE**

Nutrition counseling is only covered for those with diabetes OR chronic kidney disease (stages 3 and up). It does not cover weight loss, pre-diabetes, or any other medical condition. This is under Medicare Part B. You get 3 hours of nutrition counseling in your first year of using this benefit followed by 2 hours of nutrition counseling every year after that, resetting in January. They do require a referral from your primary care provider.

### **MEDICARE ADVANTAGE & SUPPLEMENT PLANS**

Medicare supplement plans often will not cover additional nutrition counseling. Medicare Advantage plans are a mixed bag and you will have to call and verify your benefits. In my experience, many still only cover nutrition counseling for diabetes or chronic kidney disease.

### **MONTANA MEDICAID (Healthy MT Kids)**

Montana Medicaid offers nutrition counseling coverage for those 20 y.o. and under only, for most medical conditions. They do require a referral from your primary care provider. There is also coverage if you have diabetes or chronic kidney disease at any age but only through specific diabetes programs. Call to learn more.

Please don't hesitate to reach out to me if you have any questions about checking your benefits. I cannot guarantee that your insurance will cover visits but I will do my best to help you navigate this system. If you have questions about any issues with claims or billing, please call your insurance directly to troubleshoot.

-Érica Rubino, RD, CDCES