# **POLICY AND PROCEDURE**

POLICY NAME: Nutritional Counseling Expanded Benefit	POLICY ID: FL.UM.21.00
BUSINESS UNIT: Sunshine State Health Plan	FUNCTIONAL AREA: Utilization Management
EFFECTIVE DATE: 11/18	PRODUCT(S): Managed Medical Assistance (MMA), Comprehensive (MMA/LTC), Serious Mental Illness (SMI), and Children's Medical Services Health Plan (CMS Health Plan)
<b>REVIEWED/REVISED DATE:</b> 05/19, 06/20, 04/22, 4/23	
REGULATOR MOST RECENT APPROVAL DATE(S): 07/18	

**POLICY STATEMENT:** It is the policy of Sunshine Health to cover Agency for Health Care Administration (AHCA) and/or Department of Health approved expanded benefits when medically necessary, appropriate, and consistent with good medical practice, and after review on an individual basis, for the specific indications outlined in this policy.

**PURPOSE:** To provide guidelines on processing requests for medical nutritional counseling and to establish clinical criteria on which to review requests for nutritional counseling as an expanded benefit for Sunshine Health's MMA, Comprehensive (MMA/LTC), and SMI members. The goal is to provide nutritional counseling when medically necessary, as an expanded benefit and to define criteria and limitations established for nutritional counseling.

Nutritional counseling is an expanded benefit for CMS Health Plan that does not require the review process detailed within this policy. CMS Health Plan members can access the benefit through network providers without an authorization.

**SCOPE:** Sunshine Health Utilization Department and Case Management for Managed Medical Assistance (MMA), Comprehensive (MMA/LTC), Serious Mental Illness (SMI), and Children's Medical Services Health Plan (CMS Health Plan). This policy applies to all directors, officers, and employees of Centene Corporation, its affiliates, health plans, and subsidiary companies (collectively, the "Company").

## **DEFINITIONS: Nutritional Counseling**

Nutritional counseling is the ongoing process during which a health professional, usually a registered dietitian, works with the primary care physician or treating provider, to assess the member's food intake, physical activity, course of any medical therapy, including medications, and other treatments and individual preferences.

Evidence based counseling is provided as a preventive service for adults who are obese or those who are overweight and have other cardiovascular disease risk factors to address behavioral and nutritional changes that are necessary to support healthy and balanced eating, weight loss and maintenance, and chronic disease management.

#### POLICY:

**Review Process:** To assist in determining the medical necessity of an expanded benefit, the clinical criteria established in this policy will be applied. A request for medical necessity review is consistent with Sunshine Health medical policies:

- FL.UM.02.01 Medical Necessity Review and Continuity of Care
- FL.UM.02.00 Use of Clinical Criteria
- Any decision to deny, reduce, suspend or terminate services must be made by a Sunshine Health Medical Director as outlined in the policy Clinical Decision Criteria and Application FL.UM.02.00
- Determinations and provider notifications will be made according to the expediency of the case as described in the Timeliness of UM Decisions and Notifications FL.UM.05.00

## Specific Clinical Information/Criteria

The requesting practitioner must provide information relative to the expanded benefit service that is being requested including a plan of care to address the disease specific goals and objectives and proper food selections and avoidance for the specific disease conditions that the counseling is being requested.

The following information and documentation should be submitted with any request for nutritional counseling:

- Services are prescribed by a physician
- Obesity, body mass index (BMI) of greater than 30 kg/m2
- Malnutrition (BMI) of less than 18.5kg/m2)
- Metabolic disorders or chronic conditions including:
  - Eating disorders
  - Cardiovascular disease
  - Diabetes mellitus
  - Hypertension

FL.UM.21 Page 1 of 3

- Kidney disease
- Gastrointestinal disorders
- Seizures (i.e., ketogenic diet), and other conditions (e.g., chronic obstructive pulmonary disease) based on the efficacy of diet and lifestyle on the treatment of these diseased states.
- Malnutrition (BMI <18.5kg/m2)</li>

The prior authorization nurse will review for medical necessity over a 60-day period. Additional visits may be authorized when there is documented adherence to the eating plan, compliance with attendance to counseling sessions, and further medical necessity is demonstrated (member education or change in nutritional needs).

## **Discharge Criteria**

- The Member reaches the target BMI
- The Member no longer meets criteria; or
- The Member withdraws from treatment against advice; or
- The Member is not an active participant: or
- Treatment goals are achieved at an improved level, such as demonstrated glycemic control, improved health indicators such as sustained blood pressure control and/or reduction in triglyceride levels.

## **Limitations / Exclusions**

The following limitations or exclusions apply to MMA, Comprehensive and SMI:

- Nutritional counseling of unproven value for conditions that have not been shown to be nutritionally related, including but not limited to asthma, attention-deficit hyperactivity disorder and chronic fatigue syndrome.
- Member must be 21 years old and older
- No limitations as long as prior authorized and medically necessary

## **REFERENCES:**

FL.UM.05.00 Timeliness of UM Decisions and Notifications

FL.UM.02.00 Use of Clinical Criteria

FL.UM.02.01 Medical Necessity Review and Continuity of Care

- Final Recommendation Statement: Healthful Diet and Physical Activity for Cardiovascular Disease Prevention in Adults With Cardiovascular Risk Factors: Behavioral Counseling - US Preventive Services Task Force. (n.d.). Retrieved from https://www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/healthy-diet-
- and-physical-activity-counseling-adults-with-high-risk-of-cvd

  2. Moyer VA; U.S. Preventive Services Task Force. Screening for and management of obesity in adults: U.S.
- Preventive Services Task Force recommendation Statement. Ann Internal Medical Statement of Services Task Force recommendation Statement. Ann Internal Medical Statement of Services Task Force recommendation Statement and Internal Medical Statement of Services Task Force recommendation Services Task
- 3. US Preventive Services Task Force, Barton M. Screening for obesity in children and adolescents; US Preventive Services Task Forces recommendation statement. Pediatrics. 2010;125(2):361-367

Pimentel, G. D., Arimura, S. T., Moura, B. M., Silva, M. E., & Sousa, M. V. (2010). Short-term nutritional counseling reduces body mass index, waist circumference, triceps skinfold and triglyverides in women with metabolic syndrome. Diabetology & Metabolic Syndrome. 2(1), 13. Doi:10.1186/1758-5996-2-13

ATTACHMENTS: N/A

**ROLES & RESPONSIBILITIES:** Utilization Management

#### **REGULATORY REPORTING REQUIREMENTS: N/A**

#### **REVISION LOG**

REVISION TYPE	REVISION SUMMARY	DATE APPROVED & PUBLISHED
New Policy Document	Policy Created	7/11/2018
Archer reload to fix system issue	No content reviewed or revised	05/16/19
Annual Review	Updated policy numbers and descriptions	06/20
Policy Update	Updated product lines of business	04/22
Annual Review	No changes needed	04/23

FL.UM.21 Page 2 of 3

# DO NOT FILL

## POLICY AND PROCEDURE APPROVAL

The electronic approval retained in RSA Archer, the Company's P&P management software, is considered equivalent to a signature.

SVP Compliance\_\_\_\_\_\_
Senior Dir. Compliance\_\_\_\_\_\_

FL.UM.21 Page 3 of 3