** 1 ** New Benefit Limit Audit 6797**:

Maximum of 2 hours (8 units) per year for code 97803.

Proc codes = 97803
New Benefit Limit Category 1
CT M Only
Eff Date 01011900
Limit 8 units per (rolling) 365 days
Proc Code = Same
PA Override = PA indicator S for situational (over the allowable maximum units specified)
New EOB 6797** - Medical Nutritional Therapy code 97803 is limited to 8 units (2 hours) per rolling calendar year.
HIPAA Codes:
Claim Status Code - 259 FREQUENCY OF SERVICE.
Entity ID - N/A
ARC - 119 Benefit maximum for this time period or occurrence has been reached. 01011995-12312299
Remark - N/A

** 2 ** New Benefit Limit Audit 6798**:

Maximum of 1 hour (4 units) per year for code 97802.

Proc codes = 97802
New Benefit Limit Category 2
CT M Only
Eff Date 01011900
Limit 4 units per (rolling) 365 days
Proc Code = Same
PA Override = PA indicator S for situational (over the allowable maximum units specified)
New EOB 6798** - Medical Nutritional Therapy code 97802 is limited to 4 units (1 hour) per rolling calendar year.
HIPAA Codes:
Claim Status Code - 259 FREQUENCY OF SERVICE.
Entity ID - N/A
ARC - 119 Benefit maximum for this time period or occurrence has been reached. 01011995-12312299
Remark - N/A

** 3 ** New Benefit Limit Audit ????**:

Maximum of 2 hours (4 units) per year for code 97804.

Proc codes = 97804
New Benefit Limit Category 2
CT M Only
Eff Date 01011900
Limit 4 units per (rolling) 365 days
Proc Code = Same
PA Override = PA indicator S for situational (over the allowable maximum units specified)
New EOB 6798** - Medical Nutritional Therapy code 97804 is limited to 4 units (2 hours) per rolling calendar year.
HIPAA Codes:
Claim Status Code - 259 FREQUENCY OF SERVICE.
Entity ID - N/A
ARC - 119 Benefit maximum for this time period or occurrence has been reached. 01011995-12312299
Remark - N/A

** 4 ** New Benefit Limit Audit 6799**:

No more than 5 hours of 97802, 97803, and 97804 combined per year (CMS has indicated that 'an episode of care typically includes (four 15 minute units) 1 hour of initial assessment 97802, (eight 15 minute units) 2 hours of reassessment 97803, and (four 30 minute units) 2 hours follow-up group interventions 97804 during the first year).

Proc codes = 97802, 97803, and 97804
New Benefit Limit Category 3
CT M Only
Eff Date 01011900
Limit 12 units per (rolling) 365 days
Proc Code = Both
PA Override = PA indicator S for situational (over the allowable maximum units specified)
New EOB 6799** - MEDICAL NUTRITION THERAPY SERVICES IN COMBINATION (97802, 97803, AND 97804) ARE LIMITED TO SIXTEEN UNITS PER YEAR.
HIPAA Codes:
Claim Status Code - 259 FREQUENCY OF SERVICE.
Entity ID - N/A
ARC - 119 Benefit maximum for this time period or occurrence has been reached. 01011995-12312299
Remark - N/A

Additional Corrections::

**** A ** Change the PA Indicator for all codes 97802, 97803, and 97804**:**

Add/ change the PA Override indicator to "S" for situational (over the allowable maximum units specified) for all codes 97802, 97803, and 97804 for when a provider can prove medical necessity for more units that are allowable and set by limit audits 6797, 6798, ???? and 6799.

** B ** Change modifier restrictions to make the AE modifier required anytime codes 97802, 97803, and 97804 are billed**:

Please change the modifier restriction in the following Contracts and their Contract Billing Rules for each code 97802, 97803, and 97804 to always require the AE (Registered Dietician) modifier since these codes are only reimbursable to Registered Dieticians.

APN Contract: SA, SB, UC 1:1 and TH 0:1 and **AE 1:1**

Clinic Contract: AE 1:1 and TH 0:1 and UD 0:1 or SA, SB, UC 1:1 and TH 0:1 and **AE 1:1**

Physician Contract: AE 1:1 and TH 0:1 or SA, SB, UC 1:1 and TH 0:1 and **AE 1:1** or UD 1:1 and **AE 1:1**