Nutritional Counseling Policy

POLICY
Medical nutrition therapy for dietary counseling provided in an outpatient setting by a state licensed or certified dietitian or nutrition professional or physician is considered medically necessary if the medical appropriateness criteria are met. (See Medical Appropriateness below.)

MEDICAL APPROPRIATENESS
Medical nutrition therapy for dietary counseling is considered medically appropriate for any of the following conditions:

- Diabetes with a lack of previous diabetes outpatient self-management training services; or
- Chronic renal insufficiency (glomerular filtration rate less than 20mL/min) without maintenance dialysis; or
- Elevated serum fasting cholesterol, particularly with evidence of coronary heart disease or other cardiovascular disease; or
- Chronic diseases/conditions in which dietary adjustment has a therapeutic role such as celiac disease, phenylketonuria or seizures; or
- Morbid obesity with a BMI ≥ 40.
- Members with a BMI over 26 – allow one (1) consult and one (1) follow up visit per year. This is an administrative decision by the Plan for preventive care.

In all cases, members may be referred to Ventura County Wellness Program as well. This program is available to all County employees and their spouses. It provides a well-rounded program that educates the member about diet, stress reduction, nutrition, and exercise.

VCHCP considers nutritional counseling experimental and investigational for conditions that have not been shown to be nutritionally related, including but not limited to, chronic fatigue syndrome, idiopathic environmental intolerances, multiple food and chemical sensitivities, and attention-deficit hyperactivity disorder.

Background
A registered dietitian provides nutritional counseling or medical nutrition therapy as prescribed by the primary care physician. Medical nutrition therapy has been integrated into the treatment guidelines for a number of chronic diseases, including (1) cardiovascular disease, (2) diabetes mellitus, (3) kidney disease, (4) gastrointestinal disorders, (5) seizures (i.e., ketogenic diet), and other conditions based on the efficacy of diet and lifestyle on the treatment of these diseased states. The dietitian evaluates the patient’s food intake, physical activity, course of any medical therapy, including medications, and any individual preferences. An initial nutritional evaluation and short-
term nutritional counseling may be appropriate as part of the overall medical management of a documented disease such as diabetes. Typically, this can be accomplished in 2-3 visits. Short-term evaluation and counseling should include doing an initial dietary work-up, counseling the patient about sample menu planning and teaching him or her about the impact of diet on the disease or condition. The goals of medical nutrition therapy are to promote health, reduce the incidence of preventable disease and improve quality of life. Adherence to a medical nutrition plan of care and adaptation of other appropriate components of lifestyle changes may prevent or delay the need for pharmacotherapy or allow discontinuation of pharmacotherapy after a period of time.

A. Attachments: None

B. History:

Reviewers: Richard O. Ashby, QA Committee; Date: 2000 & 2001
David Chernof, MD & Sheldon Haas, MD; Date: 11/04/04
Committee Review: QAC: November 04, 2004
Reviewed & Revised: Cynthia Wilhelmy, MD; Date: 10/17/06
Committee Reviews: UM: November 06, 2006; QAC: November 14, 2006
Reviewed & Revised: Albert Reeves, MD; Date: 02/08/11
Reviewed/No Changes: Albert Reeves, MD; Date: 5/7/12
Reviewed/No Changes: Albert Reeves, MD; Date: 1/28/13
Reviewed/No Changes: Catherine Sanders, MD
Reviewed/No Updates: Catherine Sanders, MD
Reviewed/No Updates: Faustine Dela Cruz, RN & Catherine Sanders, MD
Reviewed/No Updates: Catherine Sanders, MD & Robert Sterling, MD
Reviewed/No Updates: Catherine Sanders, MD & Robert Sterling, MD
Committee Review: UM: February 8, 2018; QAC: February 27, 2018
Reviewed/No Updates: Catherine Sanders, MD & Robert Sterling, MD
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Reviewed/No Updates: Howard Taekman, MD & Robert Sterling, MD
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Committee Review: UM: February 17, 2022; QAC: February 22, 2022
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Committee Review: UM: February 2, 2023; QAC: February 7, 2023

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C. References: