

Dietetic Treatment of Eating Disorders

Policy Number:

MM.12.025

Line(s) of Business:

HMO; PPO

Lines of Business Excluded

QUEST – Integration; Fed 87; FEP;

Akamai Advantage

Section:

Other/Miscellaneous

Place(s) of Service:

Office; Inpatient; Outpatient

Original Effective Date:

01/01/2017

Current Effective Date:

01/01/2017

I. Description

Treatment of eating disorders is complex, depends on the specifics of the disorder and must be tailored to each individual. Treatment may include psychotherapy, nutritional counseling/medical nutrition therapy, medically assisted treatment, family based therapies and other therapeutic methods – individually or in combination. (Reference) Involvement of an interdisciplinary team that may include a physician, psychologist, licensed clinical social worker, licensed dietitian, marriage and family therapist, licensed mental health counselor, or advanced practice registered nurse may serve the best interest of the patient.

The state of Hawaii defines “Dietetic Practice” as the integration of scientific principles of nutrition, biochemistry, physiology, food, behavioral and social sciences. A licensed dietitian is a person who uses the title of “licensed dietitian” or “dietitian” and has been licensed to practice dietetics under Hawaii Revised Statutes (HRS) Section 448B-5.

Dietitians licensed in the state of Hawaii have been added to the list of recognized provider types for the treatment of eating disorders under an amendment to HRS Section 431M-4.

Services are limited to nutritional interventions provided as part of an individualized treatment plan for an individual appropriately diagnosed with an eating disorder.

II. Criteria/Guidelines

A. Services provided by licensed dietitians treating eating disorders are covered (subject to Limitations and Administrative Guidelines) when all of the following criteria are met:

1. For the purpose of treating an eating disorder, ; as defined by the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5), diagnosed by a licensed provider working within their scope of practice to diagnose mental disorders; and
2. Dietetic services are the most appropriate delivery or level of service, considering potential benefits and harms to the patient; and

3. Dietetic services are known to be effective in improving health outcomes; provided that:
 - a. Effectiveness is determined first by scientific evidence;
 - b. If no scientific evidence exists, then by professional standards of care; and
 - c. If no professional standards of care exist or if they exist but are outdated or contradictory, then by expert opinion; and
4. Dietetic services provided are cost-effective for the medical condition being treated compared to alternative health interventions, including no intervention. For purposes of this paragraph, cost-effective shall not necessarily mean the lowest price.

Note: Definitions of terms and more information regarding this criteria are contained in the Patients' Bill of Rights and Responsibilities Act, Hawaii Revised Statutes HRS § 432E-1.4. The current language of this statutory provision can be found at [HRS § 432E-1.4](#).

III. Limitations

- A. Dieticians must be licensed to practice dietetics in the state in which they practice in order to provide dietetic services to individuals diagnosed with an eating disorder.
- B. Out-of-network services provided for an HMO member outside the state of Hawaii are not covered without a primary care physician referral, or an administrative approval for out-of-network services.
- C. Non-emergency services provided for a QUEST Integration member outside of the state of Hawaii are not covered.

IV. Administrative Guidelines

- A. Precertification is required for the initial six visits. To precertify, please complete HMSA's Precertification Request and mail or fax the form as indicated. Documentation submitted must include confirmation of an eating disorder diagnosis made by a qualified professional, an individualized diet and care plan and evidence of appropriate consultation/collaboration with other disciplines.
- B. Requests for continuation of care for an additional six months must include the following documentation:
 1. Progress notes of adherence to a prescribed diet plan
 2. Incremental improvement of eating habits
 3. Evidence of a food and exercise diary
 4. Documentation of any binge-eating or purging episodes
 5. Summary of eating disorder examination questionnaires used

CPT Codes	Description
97802	Medical nutrition therapy; initial assessment and intervention, individual, face-to-face with the patient, each 15 minutes.
97803	Re-assessment and intervention, individual, face-to-face with the patient, each 15 minutes
97804	Group: 2 or more individuals, each 30 minutes

HCPCS Codes	Description
S9452	Nutrition classes, non-physician provider, per session
S9470	Nutritional counseling, dietitian visit

Diagnoses Codes	Description
F50.00	Anorexia nervosa, unspecified
F50.01	Anorexia nervosa, restricting type
F50.02	Anorexia nervosa, binge eating/purging type
F50.2	Bulimia nervosa
F50.81	Binge eating disorder
F50.89	Other specified eating disorder
F50.9	Eating disorder, unspecified

V. Important Reminder

The purpose of this Medical Policy is to provide a guide to coverage. This Medical Policy is not intended to dictate to providers how to practice medicine. Nothing in this Medical Policy is intended to discourage or prohibit providing other medical advice or treatment deemed appropriate by the treating physician.

This Medical Policy has been developed through consideration of the medical necessity criteria under Hawaii's Patients' Bill of Rights and Responsibilities Act (Hawaii Revised Statutes §432E-1.4), generally accepted standards of medical practice and review of medical literature and government approval status. HMSA has determined that services not covered under this Medical Policy will not be medically necessary under Hawaii law in most cases. If a treating physician disagrees with HMSA's determination as to medical necessity in a given case, the physician may request that HMSA reconsider the application of the medical necessity criteria to the case at issue in light of any supporting documentation.

VI. References

1. The Senate S.B. No. 2854 Twenty-Eighth Legislature, 2016 S.D. 2. State Of Hawaii http://www.capitol.hawaii.gov/session2016/bills/SB2854_SD2_.HTM
2. Hawaii's Patients' Bill of Rights and Responsibilities Act (Hawaii Revised Statutes §432E-1.4)
3. UpToDate. Mehler, P. Anorexia nervosa in adults and adolescents: Medical complications and their management. August 2, 2016.