

Provider Type 15 Registered Dietitian Medical Nutrition Therapy Reimbursement Schedule

This schedule reflects rate data as of : 5/1/2018

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This provider type was last subject to a rate review* on : **04/2018**

*Rate review refers to a comprehensive review of all the rates associated with this provider type. In 2017 the NV Legislature passed Assembly Bill 108 which, starting in 2018, requires NV Medicaid to perform a comprehensive rate review for each provider type at least once every four years. These reviews may or may not result in changes to reimbursement amounts.

Note:

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Proc	Desc	Mod	Rate	Rate Begin Date
97802	Medical nutrition indiv in		22.79	1/1/2018
97803	Med nutrition indiv subseq		19.63	1/1/2018
97804	Medical nutrition group		10.15	1/1/2018
G0270	Mnt subs tx for change dx		19.63	1/1/2018
G0271	Group mnt 2 or more 30 min		10.15	1/1/2018
Q3014	Telehealth facility fee		24.24	1/1/2018