

Diabetes Self-Management Training (DSMT) &  
Medical Nutrition Therapy (MNT)  
COVID RELATED BILLING GUIDELINES



**MEDICARE**

During the COVID-19 PHE, RHCs and FQHCs can furnish any telehealth service that is approved as a Medicare telehealth service under the PFS. (See <https://www.cms.gov/Medicare/Medicare-General-Information/Telehealth/Telehealth-Codes>. – resource: [MLN Matters SE20016](#))

The following are approved codes for Telehealth services for FQHCs and are included on the list of the above referenced link:

- Diabetes Self-Management Training (DSMT) - G0108, G0109
- Medical Nutrition Therapy (MNT) - 97802, 97803, G0270

In addition, if you look in column D, it states, “ Can Audio-only Interaction Meet the Requirements?” and all are indicated with “yes.”

**FAQs(pre-covid): Resource: [Frequently Asked Questions on the Medicare FQHC PPS](#)**

Q5. If a Diabetes Self-Management Training (DSMT) or /Medical Nutrition Therapy (MNT) visit occurs on the same day as a mental health visit, can two visits be billed?

A5. Yes, because DSMT/MNT is considered a medical visit and a FQHC can bill for 2 visits when a medical and mental health visit occur on the same day.

Q6. If a DSMT/MNT visit is furnished on the same day as another medical visit, can two visits be billed? A6. No. If DSMT/MNT is furnished on the same day as another medical visit, only one visit can be billed.

**Example of FQHC Claims for Telehealth Services January 27, 2020 through June 30, 2020**

Revenue Code	HCPCS Code	Modifiers
052X	G0467 (or other appropriate FQHC Specific Payment Code)	N/A
052X	99214 (or other FQHC PPS Qualifying Payment Code)	95
052X	G2025	95

**FQHC Claims for Telehealth Services starting July 1, 2020**

Revenue Code	HCPCS Code	Modifiers
052X	G2025	95 (optional)

# Diabetes Self-Management Training (DSMT) & Medical Nutrition Therapy (MNT) COVID RELATED BILLING GUIDELINES



## MEDICAID

FQHCs and RHCs may bill for telehealth, telepsychiatry and select virtual patient communication services if the service follows core service billing requirements as outlined in clinical coverage policy 1D-4, Core Services Provided in Federally Qualified Health Centers and Rural Health Clinics. Information concerning Virtual Communication Services provided by FQHCs and RHCs is located here: <https://www.cms.gov/Center/Provider-Type/Federally-Qualified-Health-Centers-FQHC-Center>.

**What this means for FQHCs:** if DSMT and MNT are considered core services in clinical coverage policy 1D-4, which DSMT is and MNT is NOT, see section 5.3 of CCP ID-4 and follows core service billing requirements.

As noted below FQHCs are included as a provider for DSME and bill code G0108.

TABLE 7. DIABETES SELF-MANAGEMENT EDUCATION (DSME)				
SERVICE	APPLICABLE PROVIDERS	RATE CODE OR PROCEDURE	MODIFIERS & POS	SOURCE BULLETIN
Diabetes Self-Management Education	Non-physician practitioners: <ul style="list-style-type: none"> <li>• Behaviorists who are Ed.D. prepared</li> <li>• Certified diabetes educators (CDE)</li> <li>• Registered dietitians who are employed by physicians or entities</li> <li>• Registered nurses</li> </ul> Physician practitioners/sites: <ul style="list-style-type: none"> <li>• Certified nurse midwives</li> <li>• Clinical pharmacist practitioners (CPP)</li> <li>• Federally qualified health centers/rural health clinics</li> <li>• Hospital outpatient departments</li> <li>• Local health departments</li> <li>• Nurse practitioners</li> <li>• Physicians</li> <li>• Physician assistants</li> </ul>	G0108	<ul style="list-style-type: none"> <li>• Reported with usual place of service (POS)</li> <li>• Modifiers GT &amp; CR</li> </ul>	<a href="#">1A-24.pdf</a> 1A-24, Diabetes Outpatient Self-Management Education  <a href="#">Special Bulletin COVID-19 #34: Telehealth Clinical Policy Modifications – Definitions, Eligible Providers, Services and Codes</a>

Resource: [NC Medicaid Telehealth Billing Code Summary](#)

However, the following telephonic evaluation and management and virtual patient communication codes may be billed by physicians, physician assistants, nurse practitioners and advance practice midwives and billed with G0071. This does not include CDE's.

**\*\*Note clinical coverage policy 1D-4 is in the process of being revised by DHB and in the public comment stage.**