

REFERRAL CHEAT SHEET

for the REAL HEALTHY HABITS Dietitians

Need referral forms? Go to www.realhealthyhabits.com/referral-form

You've got a busy job with lots of moving parts and pieces. That's why we want to make it easy for you to send referrals our way.

All you have to do is FAX us the patient's referral.

Then, we'll take it from there. We'll call the patient to schedule their appointment and check their insurance for them. Once the patient's appointment is scheduled, we will FAX you to let you know when their appointment is. *Easy-peasy!*

If you have any questions, call Rebecca at 256-530-6040 or email her at hello@realhealthyhabits.com. She's super friendly and willing to help.

You probably dislike phone tag as much as we do. So, here are a couple of tips to make the referral process as smooth as possible--no more back-and-forth.

All patients need a referral.

Alabama law requires ALL patients have a referral to see a dietitian. Even if the patient's insurance doesn't require referrals, we still need one.

- **REFERRAL FORM**--The referral can be generated from your EMR system, or you can use the Real Healthy Habits referral form. We have an editable PDF version on our website. Go to www.realhealthyhabits.com/referral-form.
- **ANY PROVIDER**--The referral can be from the physician, nurse practitioner, or physician's assistant--except if the patient has MEDICARE. (MEDICARE needs a physician's signature. See the next page for more info about MEDICARE.)
- **OFFICE NOTES**--You don't need to send us office notes, but they are very much appreciated. They're helpful for us to get a clear picture of what is going on with a patient.

Each insurance company has its own nit-picky preferences. So here are the "secret" codes to ensure each referral goes as smoothly as possible.

Overweight and obesity codes (like E66.3 and E66.01) should always be included

(along with all the other diagnosis codes the patient has)--no matter which insurance they have. These codes make the patient more likely to qualify for preventative coverage.

Blue Cross Blue Shield

Almost all BCBS policies (ALABAMA, ANTHEM, FEDERAL, AND OTHER STATES) cover dietitian visits under preventative coverage. **Most diagnosis codes are covered.** Most patients are covered for 9 visits per year or have unlimited visits.

- **BEG**--BCBS AL Marketplace policies that begin with **BEG** require a referral submitted to BCBS by their designated PCP.

Medicare

MEDICARE, Medicare Advantage, and Medicare supplements only cover dietitian visits if the patient has diabetes or chronic kidney disease (stage 3a, 3b, 4, or 5).

- **PROVIDER**--**The referral must be signed by a doctor.** Medicare will not accept referrals from nurse practitioners or physician's assistants.
- **DIAGNOSIS CODE**--The referral **must have a diagnosis code for diabetes or chronic kidney disease (stage 3a, 3b., 4, or 5).**
- **NEW REFERRAL EACH YEAR**--The referral expires each year. We will reach out to you in December for a new referral for the upcoming year.
- **ADDITIONAL VISITS**-- If patients are still working towards their goals after 2 or 3 visits, we'll request a doctor's authorization to allow additional visits.
- **BCBS FEDERAL**--Patients who have BCBS Federal as a secondary to Medicare can be seen with any diagnosis for unlimited visits.

United Healthcare

UHC is more particular with its diagnosis codes. The patient needs to have a diagnosis code of **overweight or obesity AND, if possible, high blood pressure or hyperlipidemia**. If the patient has these codes, please include them on the referrals. Additional diagnoses may be covered under medical coverage. Usually visits are unlimited.

CIGNA

CIGNA has coverage to see a dietitian under preventative coverage. **Most diagnosis codes** will work for healthy diet counseling.

AETNA

AETNA covers 10-26 visits/yr to see a dietitian under preventative coverage if the patient is **overweight or obese**. Also, most medical diagnosis codes will be covered under medical coverage.

Pediatrics

Many insurance companies have coverage for children under 18. **Coverage varies**. Please contact us if you have questions about coverage for a minor.

NO COVERAGE FOR THESE INSURANCES:

Tricare

We are **not in network** with Tricare (as they don't credential dietitians in stand-alone offices.) We do offer a cash prompt pay rate for Tricare patients.

Medicaid

Medicaid **does not cover visits** with a dietitian for any preventative or medical diagnosis. If patients want to meet with a dietitian, they will have to pay out of pocket.