

**NEW MEXICO DEPARTMENT OF HEALTH  
DEVELOPMENTAL DISABILITIES SUPPORTS DIVISION  
MEDICALLY FRAGILE WAIVER (MFW)**

**NUTRITIONAL COUNSELING**

**Effective July 1, 2019**

Nutritional counseling is provided by a Licensed Registered Dietitian (LRD) or Licensed Nutritionist (LN) licensed by the New Mexico Nutrition and Dietetic Practice Board. Nutritional counseling is designed to meet unique nutritional needs presented by persons with medical fragility and developmental disabilities. This does not include oral-motor skill development such as that provided by a speech language pathologist. Participants who may require nutritional counseling include, but are not limited to, children and/or adults with specific illnesses such as failure to thrive, gastro esophageal reflux, dysmotility of the esophagus and stomach, etc., or who require specialized formulas, or who receive tube feedings, or parenteral nutrition. Nutritional counseling services for Medically Fragile Waiver (MFW) participants under the age of 21 years may be funded through the Medicaid Early Periodic Screening, Diagnostic & Treatment (EPSDT) program. Nutritional counseling services are indicated for the person's nutritional needs if one or more of the following conditions exist:

1. Weight Loss (greater or equal to 5% usual body weight)
2. Eating disorders
3. Malnutrition
4. Enteral/Parental feedings
5. Diabetes Mellitus
6. Ostomy Management
7. Renal Disease/Failure
8. Nutritional Support (deficit related to diet/nutritional requirements)
9. Difficulty Swallowing
10. Education/training family members regarding diet and administration/feeding methods

**I. SCOPE OF SERVICES**

**A. Initiation of Nutritional Counseling Services:**

When nutritional counseling is identified as a recommended service, the Case Manager (CM) will provide the participant/participant's representative with a Secondary Freedom of Choice (SFOC). The participant/participant's representative selects a nutritional counseling agency from the SFOC. The identified LRD/LN requests a nutritional counseling prescription from the treating Physician/Healthcare Provider for evaluation and ongoing treatment. A copy of the written referral will be maintained in the participant's file with the provider. This referral must be obtained before initiation of treatment. The CM is responsible for including recommended units of nutritional counseling services on

the MAD 046 form. It is the responsibility of the participant/participant's representative, the LRD/LN, and the CM to assure units of nutritional counseling do not exceed the capped dollar amount determined for the participant's Level of Care (LOC) and Individual Service Plan (ISP) cycle. Strategies, support plans, goals, and outcomes will be developed based on the identified strengths, concerns and priorities in the ISP.

B. Nutritional Counseling Services Include:

1. Providing assessments and evaluations; development of treatment plans and interventions; monitoring of the participant; and identifying treatment plans as needed for therapeutic purposes within the professional scope of practice of the LRD/LN;
2. Designing, building or preparing, implementing, modifying and monitoring the use of specialized or adaptive equipment within the scope of practice of a LRD/LN;
3. Designing, modifying and monitoring of nutritional plans and services for the participant that is supportive of ISP desired outcomes;
4. Training families, direct support professionals (DSP) in relevant settings as needed for successful implementation of nutritional plans, strategies, treatments, use of equipment and technologies or other aspects of nutritional counseling services;
5. Consulting with Interdisciplinary Team (IDT) member(s), guardians, family, Physician(s)/Healthcare Provider or support staff as needed;
6. Consulting and collaborating with the participant's Physician(s)/Healthcare Provider, family and direct support professionals for the purposes of evaluation of the participant or developing, modifying or monitoring nutritional services for the medically fragile person;
7. Observing the participant in all relevant settings to monitor the participant's status as it relates to therapeutic goals or implementation of nutritional counseling services and professional recommendations;
8. Providing other skilled LRD/LN treatments, interventions or assistive technologies deemed appropriate by the provider and within the scope of practice of the LRD/LN as licensed by the New Mexico Nutrition and Dietetic Practice Board overseen by the American Dietetic Association (ADA).

C. The nutritional plan must be updated at least every six (6) months:

1. Prepare evaluations and progress summaries as required.
2. Submit copies of evaluations/progress summaries to the CM every six (6) months.

D. Inform the CM of required changes to the individual dietary regimen as necessary.

E. Attendance at the IDT Meeting:

1. The LRD/LN is responsible for attending and participating in IDT meetings convened for service planning, either in person or by conference call.
2. If unable to attend IDT meeting, the LRD/LN is expected to submit to the family or CM in advance of the meeting any recommended updates to the nutritional plan. The LRD/LN and CM will follow up after the IDT meeting to update the dietician.
3. The LRD/LN is responsible for signing the IDT sign-in sheet.

4. The LRD/LN must document in the participant's clinical file the date, time, and any of changes to nutritional plan.

F. Discharge Planning Guidelines Must Include:

1. Reason for discontinuing services such as but not limited to: failure to participate; request from participant/participant's representative; goal completion; or failure to progress;
2. Written discharge plan in place with person/person's representative;
3. Strategies are developed with participant/participant's representative who can support the maintenance of nutritional supports;
4. Family and DSP's training is to be completed in accordance with written discharge plan;
5. Discharge summary is to be maintained in the provider's participant's file and a copy placed in the CM file and distributed to the participant/participant's representative.

## II. AGENCY/INDIVIDUAL PROVIDER REQUIREMENTS

A. Nutritional Counseling Requirements:

1. Nutritional counseling is provided by a LRD/LN licensed by the New Mexico Nutrition and Dietetic Practice Board.
2. The LRD/LN will be culturally sensitive to the needs and preferences of participants and their families. Communicating in a language other than English may be required.

B. Agency/Individual Administrative Requirements:

The provider agency will:

1. Maintain current report data/documentation for each person and make it available upon request of the Department of Health (DOH)/Developmental Disabilities Supports Division (DDSD) or its designee.
2. Develop, implement and document services as identified on the ISP as coordinated with the CM in a manner fulfilling participant and/or family specific needs.
3. Provide copies of LRD/LN contact notes, assessment, and other documentation as requested by the MFW Program Manager, Division of Health Improvement (DHI) or Human Services Department (HSD) for quality assurance purposes.
4. Comply with all applicable MFW General Standards.

## III. REIMBURSEMENT

Each provider of a service is responsible for providing clinical documentation that identifies DSP's roles in all components of the provision of home care, including assessment information, care planning, intervention, communications, care coordination and evaluation. There must be justification in each participant's clinical record supporting medical necessity for the care and for the approved LOC that will also include frequency

and duration of the care. All services must be reflected in the ISP that is coordinated with the person/person's representative, and other caregivers as applicable. All services provided, claimed and billed for must have documented justification supporting medical necessity and be covered by the MFW and authorized by the approved budget.

- A. Payment for nutritional counseling services through the MFW is considered payment in full.
- B. Nutritional counselors must abide by all Federal, State, HSD and DOH policies and procedures regarding billable and non-billable items.
- C. All billed services must not exceed the capped dollar amount for LOC.
- D. Reimbursement for nutritional counseling services will be based on the current rate allowed for the services.
- E. Nutritional counseling services are provided with the understanding that the Waiver is the payer of last resort.
- F. The agency must follow all current billing requirements by the HSD and DOH for nutritional counseling services.
- G. Claims for services must be received within 90 calendar days of the date of service in accordance with 8.302.2.11 NMAC.
- H. Providers of service have the responsibility to review and assure that the information on the MAD 046 form for their services is current. If the providers identify an error, they will contact the CM or a supervisor at the case management agency immediately to have the error corrected.
- I. The MFW Program does not consider the following to be professional nutritional counseling duties and will not authorize payment for:
  - 1. Performing errands for the participant/participant's representative or family that is not program specific;
  - 2. "Friendly visiting," meaning visiting with the person outside of LRD/LN work scheduled;
  - 3. Financial brokerage services, handling of participant finances or preparation of legal documents;
  - 4. Time spent on paperwork or travel that is administrative for the provider;
  - 5. Transportation of the medically fragile participant;
  - 6. Pick up and/or delivery of commodities; and
  - 7. Other non-Medicaid reimbursable activities.