

Montana Medicaid - Fee Schedule
Nutrition
July 1, 2014

Definitions:

Modifier – When a modifier is present, this indicates system may have different reimbursement or code edits for that procedure code/modifier combination.
For example:
26 = professional component
TC = technical component

Description – Procedure code description. You must refer to the appropriate official CPT-4 or HCPCS coding manual for complete definitions in order to assure correct coding.

Effective – This is the first date of service for which the listed fee is applicable.

Method – Source of fee determination
Fee Sched: Medicaid fee for listed code
Medicare: Medicare-prevailing fee for listed code.

PA – Prior Authorization
Y: Prior authorization is required
Space: Prior authorization is not required

Pass - Passport Referral
Y: Passport referral is required

Passport- *Not all provider specialties require passport, please refer to your program manual for specifics.*

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Proc	Modifier	Description	Effective	Method	Fee	PA	Pass
G0108		DIAB MANAGE TRN PER INDIV	7/1/2014	FEE SCHED	\$21.54		Y
G0109		DIAB MANAGE TRN IND/GROUP	7/1/2014	FEE SCHED	\$12.66		Y
G0270		MNT SUBS TX FOR CHANGE DX	7/1/2014	FEE SCHED	\$14.61		
G0271		GROUP MNT 2 OR MORE 30 MINS	7/1/2014	FEE SCHED	\$5.74		
97802		MEDICAL NUTRITION INDIV IN	7/1/2014	FEE SCHED	\$14.70		Y
97803		MED NUTRITION INDIV SUBSEQ	7/1/2014	FEE SCHED	\$14.70		Y
97804		MEDICAL NUTRITION GROUP	7/1/2014	FEE SCHED	\$5.99		Y