BLAIR COMPASS
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REVIEWED AUGUST 21, 2026

MEDICARE PART B MEDICAL NUTRITION THERAPY

Order It Right the First Time

Five every time. Four when applicable. Check the national Medicare minimum, then complete reasonable facility workflow items.

5 CHECK EVERY TIME

- [ ] **Covered condition**
  Diabetes or qualifying renal disease: GFR 15-59; ESRD without maintenance dialysis; or within 36 months after a successful kidney transplant.
  > Stop: separate Part B MNT is excluded during maintenance dialysis.

- [ ] **MD/DO referral**
  The referral comes from a doctor of medicine or osteopathy.
  > APP alert: an NP, PA, CNS, or other APP cannot be the MNT referrer under the current national rule.

- [ ] **Diagnosis stated**
  The referral clearly identifies diabetes or qualifying renal disease. Add the most accurate ICD-10-CM code as a clean-workflow safeguard.

- [ ] **Referral in the medical record**
  Document the physician referral/order in the medical record. No special national Medicare MNT form is prescribed.

- [ ] **Authenticated and dated**
  Use an identifiable, compliant signature and date. The referring physician NPI is required on the Medicare claim; a site may also request it on the referral.

4 ASK WHEN APPLICABLE

NEW CALENDAR YEAR?

Get a new MD/DO referral. Standard subsequent-year coverage: 2 hours.

MORE HOURS THIS YEAR?

Get a second physician referral documenting the changed diagnosis, medical condition, or treatment regimen and the needed MNT change. G0270/G0271.

MAINTENANCE DIALYSIS?

Do not use the separate MNT benefit; nutrition is included under the ESRD benefit.

FACILITY EXTRAS?

Send reasonable intake items, but identify face sheets, notes, labs, a GFR field, NPI on the form, or a site template as facility workflow unless another rule applies.

NOT UNIVERSAL NATIONAL REFERRAL FIELDS
Face sheet · full office note · recent labs · written GFR field · special MNT form · physician NPI printed on the referral.

Important: these may still be required by a facility, payer contract, local policy, or other applicable rule.

QUICK ORDER LANGUAGE

Refer to a registered dietitian nutritionist for Medicare Part B Medical Nutrition Therapy for [diabetes / qualifying renal disease]. Diagnosis: [diagnosis and ICD-10-CM code].

LOCAL WORKFLOW NOTES - DO NOT RECORD PHI

Receiving site / fax / portal: _____

Facility-specific intake items: _____

Clinic routing or follow-up: _____

5 + 4
Condition · Physician · Diagnosis · Record · Authentication
New year · Extra hours · Dialysis · Facility extras

3 to 2 to additional
3 hours initial year · 2 subsequent · more after a qualifying change and second physician referral

Scope: National Original Medicare education-not legal, billing, or patient-specific advice. Verify current plan, MAC, facility, state, and organizational requirements. Do not place PHI on this checklist.

Interactive module
blaircompass.com/public-resources/medicare/medical-nutrition-therapy/

Sources: 42 CFR §§ 410.130-410.132; CMS NCD 180.1; Medicare Claims Processing Manual, Ch. 4, § 300; CMS signature guidance. Reviewed Aug. 21, 2026.