### MARY ANN HODOROWICZ CONSULTING, LLC

Nutrition, Diabetes Education, Health Promotion and Insurance Reimbursement for Professionals in the Healthcare and Food Industry

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**Presentation or Webinar Session Title:** 

# Medicare's Intensive Behavioral Counseling for Obesity Benefit: Get Reimbursed Now!

## **Presentation/Webinar Description:**

Yes, there really IS good news for RDs and RNs with regard to Medicare's new Intensive Behavioral Therapy (IBT) for Obesity benefit! Although RDs and RNs cannot directly bill Medicare, they can FURNISH the benefit in primary care practice settings and be paid under Medicare's 'incident to physician's services" guidelines! In this presentation, all aspects of the benefit are reviewed, including coding and coverage requirements, the different types of business models for contracting with physicians and physician extenders, marketing tips, keys for successful negotiation with providers, clinical aspects of furnishing the benefit in order to maximize both behavioral and clinical outcomes, and available practice resources for RDs and RNs on these topics.

This presentation is new, cutting edge information as it will provide RD and RN practitioners with the information and tools they need to successfully align with primary care providers to provide the new Intensive Behavioral Therapy for Obesity benefit under Medicare. This is a resource that can also be used by RDs and RNs beyond the Medicare population as more private payers are expanding obesity counseling benefits under the Affordable Care Act provisions.

**Length of Time for Session:** 1.5 hours, but 2 hours preferred to allow for more attendee interaction.

#### **Education Level of Presentation:**

- Level 1-Assumes little knowledge of the subject with the goal of increasing knowledge
- Level 2-Assumes general knowledge of subject with goal to increase knowledge and application
- Level 3-Assumes thorough knowledge of the literature and practice with the goal of synthesis of recent advances and future directions

**Target Audience:** Healthcare professionals who work in obesity management and education.

**Recent or Relevant Speaking Experience:** I have given multiple CEU programs on this topic to healthcare professionals of all types on behalf of Pesi Healthcare (national medical CEU company), for state affiliates of the Academy of Nutrition and Dietetics, American Association of Diabetes Educators, the National Community Pharmacy Association and other healthcare organizations and associations. Please refer to my curriculum vitae sent under separate cover.

#### **Objectives:**

- 1. Name the 3 basic services of the intensive behavior therapy (IBT) Medicare benefit.
- 2. State the frequency of beneficiary visits in the: first month, months 2-6, months 7-12.
- 3. State 3 of the requirements the RD and RN must meet for the IBT benefit to be billed as 'incident to physician's services".

#### **Outline:**

- I. The Three Basic Services of the IBT Benefit (Effective November 29, 2011)
- II. Allowed and Excluded Practice Settings and Unique Requirements within Each
- III. Primary Care Providers Who Can Order Benefit and Practitioners Who Can Furnish Benefit
- III. Barriers to Addressing Obesity by PCPs and How Barriers Can Be Overcome (2) (3)
- IV. PCP Referral Requirements
- V. Summary of Key Evidence-Based Weight Intervention Studies and Proven
- VI. Beneficiary Entitlement and Eligibility
- VII. Individual vs Group, Visit Frequency Limits, Overriding Limits and Telehealth IBT for Obesity
- VIII. Delivery Framework Recommended: "5-A Framework"
- IX. "Incident To Physician Billing" Requirements and Types of Claim Forms
- X. Claims Coding (Procedure Code and ICD9 Diagnosis Codes) and Current Medicare Reimbursement Rates (National and Geographically Adjusted)
- XI. Private Payer Reimbursement for IBT as Result of Medicare Benefit
- XII. Tips for RD and RN to Promote Self to Furnish Benefit in PCP Office A. The 7 P's of Service Marketing
- XIII. Business Models for RDs and RNs to Furnish Benefit in Primary Care Settings
- XIV. Documentation Requirements and Outcomes Monitoring
- XV. Clinical Recommendations to Ensure Positive Behavioral and Clinical Outcomes for Obesity IBT
- XVI. Common Obesity-Related Disorders to Assess For, and Evidence-Based Indicators
- XVII. Practice Resources for RDs and RNs for Effective Obesity Counseling
- XVIII. References
  - A. Decision Memo for Intensive Behavioral Therapy for Obesity
    http://www.cms.gov/medicare-coverage-database/details/nca-decision
    memo.aspx?&NcaName=Intensive%20Behavioral%20Therapy%20for%20Obesity&bc=ACAAAAAAIAAA&NCAId=253&
  - B. Ma J, Xiao L, Stafford RS. Adult obesity and office-based quality of care in the United States. Obesity (Silver Spring). 2009;17(5):1077-1085.
  - C. Abbo ED, Zhang Q, Zelder M, Huang ES. The increasing number of clinical items addressed during the time of adult primary care visits. J Gen Intern Med. 2008;23(12):2058-2065

#### **Condensed Bio:**

Mary Ann Hodorowicz is a RD and CDE and earned her MBA with a focus on marketing. She is also a Certified Endocrinology Coder and owns a private practice specializing in business clients in Palos Heights, Illinois. She is a consultant, professional speaker, trainer and author for the health, food and pharmaceutical industries in nutrition, wellness, diabetes and Medicare and private insurance reimbursement. Her clients include healthcare entities, professional membership associations, pharmacies, medical CEU education/training firms, government agencies, food and pharmaceutical companies, academia and employer groups. She is on the faculty of several train-the-trainer programs, including the Johnson and Johnson Diabetes Institute, Pesi Healthcare, and a pharmacy program for training on DSMT accreditation by AADE, Present Diabetes e-Learning Systems, Balancing Life's Issues, and is on the speaker's bureau of Novartis/Nestle Nutrition, Inc. Mary Ann has given over 300 professional presentations and webinars for several healthcare organizations and business entities. She has authored several resources, articles and tool kits for the Academy of Nutrition and Dietetics and AADE, has served on the editorial advisory board for AADE in Practice, and has continually served on president-elect committees of the Academy. Mary Ann is on the Board of Directors for AADE. In her career, she has provided outpatient MNT and DSME, designed a hospital Outpatient Diabetes Center and recognized DSME program and worked as a Clinical Nutrition Manager, Assistant Director of a hospital Food and Nutrition Services Department and an ADA Dietetic Traineeship Director.

