

Nutrition Medicare Benefits

Help prevent nutrition-related health conditions

The majority of older adults have chronic health conditions that are affected by the foods they eat. In fact, nearly 80% have one or more chronic conditions like diabetes, chronic kidney disease, hypertension, and obesity.¹ Senior nutrition programs, like all aging and disability service providers, can help identify useful resources and refer participants to help them stay independent, healthy, and safe.

Medicare covers eight preventive services for nutrition-related health conditions. <u>Find out if</u> <u>someone is eligible</u> for these services.

Referrals may be as close as your own agency

Some Medicare benefits may be available within your agency or offered by partner organizations you work with regularly. Agencies can bill Medicare for these services.

- 1. <u>Diabetes self-management training</u>: tips to help manage diabetes, including eating healthy and being active, monitoring blood glucose, taking prescription drugs, and reducing risks.
- 2. <u>Medical nutrition therapy</u>: nutrition and lifestyle assessment performed by a dietitian through individual or group nutritional therapy, which helps manage diet, exercise, and nutrition-related conditions. Includes follow-up visits to help manage diet.
- 3. <u>Diabetes prevention program</u>: specially trained coaches teach long-term behavior changes for diet and exercise and weight control strategies.

Referrals to health care and other partners

These Medicare preventive benefits are usually offered by health care organizations like physicians, clinics, or hospitals, but some aging and disability service providers may offer and bill Medicare for these services also.

- 1. Annual wellness visit: health risk assessment and personalized prevention plan.
- 2. <u>Cardiovascular disease screening</u>: blood tests for total cholesterol, lipid, and triglyceride levels to help detect conditions that may lead to a heart attack or stroke
- 3. <u>Diabetes screening</u>: blood tests for those at risk for developing diabetes.
- 4. <u>Intensive behavioral therapy (IBT) for cardiovascular disease</u>: blood pressure check, tips on eating well, and aspirin use to lower risk for cardiovascular disease.

¹ Health Policy Data Requests - Percent of U.S. Adults 55 and Over with Chronic Conditions (cdc.gov)

5. <u>IBT for obesity</u>: initial screening for body mass index and behavioral therapy sessions, including dietary assessment and counseling to help people lose weight by focusing on diet and exercise.

Making effective Medicare benefits referrals

Start your learning journey

If you are not already knowledgeable about Medicare and Medicaid, start by reviewing:

✓ National Resource Center on Nutrition and Aging's <u>Medicare and Medicaid Basics</u> webpage. Here you'll learn about how Medicare provides health care coverage for older adults and Medicaid assists those with low incomes — which makes them a great resource for nutrition programs.

Set up a referral system

Senior nutrition programs can improve participant access to services by enhancing staff training and developing consistent referral approaches. Review service referral training resources on the National Resource Center on Nutrition and Aging's <u>Staffing and Training</u> webpage including:

- ✓ <u>Creating Connections & Inspiring Trust</u> helps you plan how to get started by making participants feel comfortable and connected in your service setting.
- Identifying Participant Needs helps you to get started with a referral system by identifying participant needs.
- ✓ <u>Taking a Systems Approach to Referrals</u> helps you to set up a consistent way to provide service referrals.

Begin making referrals

- ✓ Establish a start date. You may want to start small, with just one type of referral, or one area of your organization making referrals.
- ✓ Encourage staff to share experiences with making referrals.
- Consider using <u>warm handoffs</u>, which is when a referral is done in person, on the telephone, or in a virtual meeting between and, in front of the participant (and family if present).

Evaluate progress and revise

- ✓ Review referral tracking to see if referrals are happening.
- ✓ Ask staff for input on how the referrals are working, whether any changes are needed, and if participants have shared positive or negative feedback.
- ✓ Update referral lists and review policies regularly.
- Adjust procedures, participant education materials, and other referral approaches as needed.

Resources

- Find a registered dietitian.
- <u>Medicare Preventive & Screening Services webpage</u>: Get additional information for your participants.