

## Medicaid MNT Coverage Information by State:

# WISCONSIN

\*Disclaimer: Information contained in this document was originally gathered in Spring 2023 and made available to provide basic information to assist RDNs in identifying Medicaid coverage in a given state. A review and update were conducted in February 2025. The information contained in this document is not a guarantee by the Academy of Nutrition and Dietetics as to the current accuracy of the information contained herein. For example, coverage information, reimbursement rates, and links may not be accurate given ongoing updates to state programs.

## Traditional Fee for Service Medicaid

Medicaid is a crucial government program in the United States, providing essential healthcare coverage for low-income individuals and families. Traditional Medicaid offers a comprehensive array of medical services, including doctor visits, hospital stays, prescription drugs, and more, to eligible individuals, such as children, pregnant women, the elderly, and people with disabilities. While all state Medicaid programs must cover mandatory benefits, states have the autonomy to determine additional medical services, tailoring healthcare to their specific populations. This flexibility enables states to address unique healthcare needs. Eligibility rules differ by state.

### *Medicaid Expansion*

The Affordable Care Act (ACA) called for states to expand Medicaid coverage to additional low-income adults (up to 138% of the Federal Poverty Level) who previously were ineligible. States that have expanded Medicaid receive additional funding from the government to support their Medicaid programs. By allowing more lower incomes individuals into the Medicaid program, states are able to further support enhanced healthcare access, promote preventive care, and alleviate the burden of uncompensated care on hospitals and taxpayers.

## Medicaid Managed Care

The majority of Medicaid beneficiaries nationwide receive Medicaid program health care services through Medicaid Managed Care Programs. A state will contract with various types of Managed Care Organizations (MCOs) to deliver services to their beneficiaries. By utilizing an MCO, the state is able to provide additional flexibility in the delivery of services that is not allowable under the traditional Fee for Service Medicaid model. These models often provide a more integrated and person-centered approach to service delivery as well as cost savings. The State Medicaid program will either directly contract with an MCO or will utilize an administrator service to manage MCO contracts.

MCOs providing benefits under the state Medicaid Plan, at a minimum, must provide the same level of service offered via the state's traditional fee-for-service Medicaid plan. MNT may be a covered service and RDNs may be recognized providers. However, each RDN must contact each plan individually to apply to become a provider and must negotiate their individual provider contract terms to include desired MNT coverage details. Because covered benefits periodically change, coverage needs to be verified before providing services.

## Medicaid Waivers

Medicaid State Waivers, including Section 1115 demonstrations (which encompass In Lieu of Services (ILOS)) and Section 1915 waivers (covering Home and Community-Based Services or HCBS), allow states to innovate in healthcare delivery and financing within Medicaid and CHIP. Section 1115 waivers test new care models to improve outcomes, while Section 1915 waivers offer cost-effective alternatives to standard services, expanding care options for beneficiaries. These waivers have the potential to significantly impact nutrition care by integrating services like Medical Nutrition Therapy (MNT) and food assistance programs, thereby improving access for vulnerable populations and enhancing health outcomes through more comprehensive, patient-centered care.

## TABLE

### Instructions for Understanding the Table:

- **Purpose:** The table below presents findings from the Academy’s Medicaid Mapping Project, summarizing the status of nutrition services provision in state Medicaid programs.
  - **Data Collection:** The information reflects a review of state-level policies and regulations as of June 2023. A review and update were conducted in February 2025.
  - **Interpreting the Cells:**
    - **Filled Cells:** These contain specific information or language related to the provision of nutrition services in Medicaid programs as found in state documents.
    - **Blank Cells:** If a cell is blank, it means that the reviewed documents did not include relevant language. Interpret these blank cells with caution, as they may indicate either an absence of related policies or insufficient documentation.
  - **Note:** This table serves as a snapshot of the available data at the time of review and may not capture subsequent changes or updates.
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## Traditional Fee-For-Service Medicaid

State: WI	Dietitian Provider Enrollment	Dietitian provides independent services or incident to	Medical Nutrition Therapy (MNT)	Nutrition Counseling, Dietitian visit (S9470)	Prior Authorization required to determine Medical Necessity	Referral, prescription, order (by physician, NP, or other) required
Traditional FFS	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Independent <input checked="" type="checkbox"/> Incident to <input type="checkbox"/> None	<input type="checkbox"/> 97802 <input type="checkbox"/> 97803 <input type="checkbox"/> 97804	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Adults						
Children		Incident to				
Other		Sole way to bill for nutrition is incident to via E/M visits				

### NOTES:

Preventive visits under EPSDT other than preventive medicine procedure codes 99381–99385 or 99391–99395 should be billed using the appropriate office visit code. For example, Dietitians can provide preventive care services incident to lifestyle medicine (CPT® codes 99213). Providers should also indicate modifier "UA" (used to designate a service for a child or adolescent under the age of 18) with the appropriate procedure code if a comprehensive screen results in a referral for further evaluation and treatment.

Dietitian counselors and nutritionists are considered “ancillary providers” and not Medicaid-eligible providers. Claims for their services must be submitted under the supervising physician’s NPI using the lowest appropriate level office or outpatient visit procedure code.

Nutrition counseling is a covered prenatal care coordination service if provided either individually or in a group setting by an individual who is a qualified professional under [S. DHS 105.52 \(2\) \(a\)](#) with expertise in nutrition counseling based on education or at least one year of work experience. A qualified professional includes a dietitian certified or eligible for registration by the commission on dietetic registration of the Academy of Nutrition and Dietetics with at least 2 years of community health experience. Nutrition counseling is a covered prenatal care coordination service if the medical need for it is identified in the risk assessment and the strategies and goals for it are part of the care plan

to ameliorate a pregnant woman's identified risk factors. Nutrition counseling for high risk pregnant and postpartum women is medically necessary nutrition instruction and guidance to ameliorate a pregnant woman's identified risk factors as determined by the Department-sanctioned risk assessment, and may include, but is not limited to, the following areas: weight and weight gain; biochemical and dietary factors; previous and current nutrition-related obstetrical complications; psychological problems affecting nutrition; and reproductive history affecting nutritional status.

## Managed Care Medicaid

<p>State: WI</p> <p>Managed Care</p>	<p>Dietitian Provider Enrollment</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Dietitian provides independent services or incident to</p> <p><input type="checkbox"/> Independent <input checked="" type="checkbox"/> Incident to <input type="checkbox"/> None</p>	<p>Medical Nutrition Therapy</p> <p><input checked="" type="checkbox"/> 97802 <input checked="" type="checkbox"/> 97803 <input checked="" type="checkbox"/> 97804</p>	<p>Nutrition Counseling, Dietitian visit (S9470)</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Prior Authorization required to determine Medical Necessity</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Referral, prescription, order (by physician, NP, or other) required</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Adults</p>		<p>Limited to enrollees in BadgerCare Plus and Medicaid SSI HMOs participating in MTMs</p> <p>Includes high risk pregnant and postpartum enrollees (use Modifier U1), enrollees with diabetes after a hospital discharge (use Modifier U2), and/or enrollees with a cardiovascular diseases after a hospital discharge (use Modifier U3)</p>	<p>Only for Medically Tailored Meals (MTMs)</p>	<p>Only for Medically Tailored Meals (MTMs)</p>		<p>Only for Medically Tailored Meals (MTMs)</p> <p>Enrollee must meet with a RD who is employed by or contracted with the meal provider</p>
<p>Children</p>		<p>Limited to enrollees in BadgerCare Plus and Medicaid SSI HMOs participating in MTMs</p>	<p>Only for Medically Tailored Meals (MTMs)</p>	<p>Only for Medically Tailored Meals (MTMs)</p>		<p>Enrollee must meet with a RD who is employed by or contracted with the meal provider</p>

State: WI	Dietitian Provider Enrollment	Dietitian provides independent services or incident to	Medical Nutrition Therapy	Nutrition Counseling, Dietitian visit (S9470)	Prior Authorization required to determine Medical Necessity	Referral, prescription, order (by physician, NP, or other) required
Managed Care	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Independent <input checked="" type="checkbox"/> Incident to <input type="checkbox"/> None	<input checked="" type="checkbox"/> 97802 <input checked="" type="checkbox"/> 97803 <input checked="" type="checkbox"/> 97804	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Other						

NOTES:

The contract for BadgerCare Plus and/or Medicaid SSI HMO Services requires participating HMOs to ensure that members receive early and continuous care throughout the pregnancy and post-partum period. The HMO must ensure that appropriate referrals and timely follow-up are made for all identified needs (e.g., nutrition counseling, smoking cessation, or behavioral health).

Per the Wisconsin Medicaid SSI HMO Care Management Benefit Billing and Reimbursement Guide, HMOs providing care management services to Medicaid SSI members are required to establish a Wisconsin Interdisciplinary Care Team (WICT) to provide care management services for members with the highest care management needs. The WICT has a Core Team, which must include a minimum of two licensed health care professionals with adequate expertise across medical, mental and behavioral health, and social determinants of health. The WICT Core Team must have ready access to dedicated resources, such as pharmacists, physicians, psychiatrists, **dietitians**, rehabilitation therapists, and substance abuse specialists. These resources should be engaged as part of the WICT Core Team depending on member needs.



## ***More Medicaid Information for Providers***

### *General*

[Handbook: Ancillary Providers](#)

### *Telehealth*

<https://www.eatrightpro.org/practice/telehealth-for-dietetics-practitioners>

### *Medicaid Managed Care Program Name(s) and Website*

BadgerCare Plus

Website: <https://www.dhs.wisconsin.gov/badgercareplus/index.htm>

### *Current Medicaid Waivers*

**Search State Waivers List at:** [Medicaid.gov](https://www.dhs.wisconsin.gov/medicaid/waivers/)

## ***State Licensure of Dietitians***

[WI Statutes](#)