

Referral for Medical Nutrition Therapy



PATIENT & PHYSICIAN INFORMATION:

Patient Name: _____

Patient's DOB: _____

Patient's Phone Number: _____

Primary Insurance: _____

Secondary Insurance: _____

Referring Physician: _____

Physician's NPI: _____

Referring Diagnosis Codes: _____

ADDITIONAL DIAGNOSIS CODES:

Please circle the diagnosis codes the patient has in their medical record. Many insurance companies require a diagnosis of obesity and overweight to come from the physician. Please include all codes in their chart.

- | | | |
|---------------------------------|--|------------|
| Obesity E66.9 | Chronic Kidney Disease, stage 5 N18.5 | PCOS E28.2 |
| Overweight E66.3 | Chronic Kidney Disease, stage 4 N18.4 | Other: |
| Type 2 diabetes E11.9 | Chronic Kidney Disease, stage 3 b N18.32 | Other: |
| Type 1 diabetes E10.9 | Chronic Kidney Disease, stage 3a N18.31 | Other: |
| Hypertension I10.0 | Prediabetes R73.03 | Other: |
| Impaired fasting glucose R73.01 | Hyperlipidemia E78.5 | Other: |

INSURANCE COVERAGE

- We are in Network with:**
- Aetna
 - Anthem BCBS
 - Caresource
 - Cigna
 - Medicaid
 - Medical Mutual
 - Medicare
 - Tricare Certified
 - UMR
 - United Healthcare

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|--|---|--|---|
| YELLOW SPRINGS 4359 East Enon Road Yellow Springs, OH 45387 | WESTERVILLE 109 Commerce Park Dr Westerville, OH 43082 | WORTHINGTON 891 High Street Worthington, OH 43085 | CINCINNATI 9380 Main Street Montgomery, OH 45242 |
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