



571780

DIABETES LIFECARE PLAN OF CARE

Service order form for Diabetes Self Management Training (DSMT),
Diabetic Management and Medical Nutrition Therapy (MNT)

85 Seymour Street, (Suite 725) Hartford, CT 06106 • Office: 860-972-3526; Fax: 860-545-3184

Patient's Name: _____

Address: _____

Phone: Home: _____ Work: _____ Other: _____

Birth Date: ___/___/___ Gender: Male Female Height: _____ Weight: _____

*Insurance Plan: _____ *Insurance ID#: _____

Language: English Spanish Other: _____

Please send a copy of most recent note, labs, and medication list.

Type 2 Diabetes is Dx as A1C > 6.5% or 2 Fasting BG'S > 126 or Random BG > 200 with S&S

ICD-10	Description	ICD-10	Description	ICD-10	Description
Diabetes		Cardiovascular		Nutrition/weight	
<input type="checkbox"/> O24.419, O99.810	Gestational Diabetes	<input type="checkbox"/> I10	Hypertension	<input type="checkbox"/>	Anorexia Nervosa
<input type="checkbox"/> O24.911, O24.912, O24.913	Pregnancy complicated by preexisting DM	<input type="checkbox"/> E78.0	Hypercholesterolemia	<input type="checkbox"/>	Eating Disorder, unspecified
<input type="checkbox"/> E11.9	DM, Type 2, controlled	<input type="checkbox"/> E78.2	Hypertriglyceridemia	<input type="checkbox"/> E66.01	Morbid Obesity
<input type="checkbox"/> E10.9	DM, Type 1, controlled	Endocrine		<input type="checkbox"/> E66.9	Obesity
<input type="checkbox"/> E11.65	DM, Type 2, uncontrolled	<input type="checkbox"/> R73.09	Other Abnormal Glucose	<input type="checkbox"/> N28.9	Non-dialysis kidney disease
<input type="checkbox"/> E10.65	DM, Type 1, uncontrolled	<input type="checkbox"/> E88.81	Metabolic Syndrome	<input type="checkbox"/>	Other:

***CHECK THE TYPE OF REFERRAL DESIRED BELOW:**

- 1. I have chosen the Plan of Care for DSMT, and/or MNT for my patient. (Please check the box(es) for the type of referral desired and complete the signature section below.)
- 2. I recommend that the Diabetes Life Care evaluates and chooses the Plan of Care for my patient.

* Print Provider Name: _____ Phone number: _____

* Provider Signature: _____ Date/Time _____ Fax number: _____

Medicare allows:

Diabetes Self Management Training (DSMT)	Medical Nutrition Therapy (MNT)
1. 10 hours of DSMT completed in a 12 month period as a one time benefit	1. 3 hours of MNT for the first calendar year as a one time benefit
2. Plus 2 hours follow up annually thereafter (DSMT requires a Dx of DM and must be ordered by the provider who is managing the patient's diabetes)	2. Plus 2 hours follow up annually thereafter. (MNT must be ordered by a physician and requires a Dx of DM or CKD)

- Group Class (2 or more people) DSMT Topics Individual Class (patient with special or specific needs)
- Diabetes Self Management Training/Followed By Medical Nutrition Therapy Medical Nutrition Therapy

(DSMT) Classes 10 hours

	# hours requested
Diabetes Overview	2 hours
Nutritional Mgmt	3 hours
Exercise/Activity	1 hour
Medications	1 hour
Self Glucose Monitoring	½ hour
Acute Complications	½ hour
Chronic Complications	½ hour
Foot, Skin, Dental Care	½ hour
Psychosocial/Lifestyle Changes	½ hour
Health Community Resources	½ hour

hours requested

Diabetes Overview	<input type="checkbox"/>
Nutritional Mgmt.	<input type="checkbox"/>
Exercise/Activity	<input type="checkbox"/>
Medications	<input type="checkbox"/>
Self Glucose Monitoring	<input type="checkbox"/>
Acute Complications	<input type="checkbox"/>
Chronic Complications	<input type="checkbox"/>
Foot, Skin, Dental Care	<input type="checkbox"/>
Psychosocial/LS Change	<input type="checkbox"/>
Health Community Resources	<input type="checkbox"/>

hours requested

Initial MNT (up to 3 hrs)	<input type="checkbox"/>
Annual Follow-up MNT (up to 2 hrs)	<input type="checkbox"/>
Additional MNT for change in medical condition: (specify)	<input type="checkbox"/>

Oral Agent Initiation with Education

Insulin/Injectable initiation: Diabetes LifeCare to teach injection technique only

Diabetes LifeCare to initiate and titrate doses over 4 month period with education

Other Information: _____

(Research indicates MNT combines with DSMT improves outcomes. Both DSMT and MNT can be ordered in the same year.)