

# OHP HRSN medically tailored meals clinical eligibility guide

Information to ensure that Oregon Health Plan health-related social needs (HRSN) medically tailored meals are medically necessary and appropriate for members who may qualify.

## Oregon Health Plan (OHP) health-related social needs benefits

OHP offers members health-related social needs benefits. Health-related social needs are basic needs that affect a person's health. Medically tailored meals (MTMs) are an HRSN benefit.

To learn about general eligibility requirements for HRSN benefits, read the [HRSN Nutrition Eligibility Guide](#).

## Only a narrow set of medical conditions qualify for HRSN MTMs

Qualifying for HRSN medically tailored meals differs from other HRSN nutrition benefits. The set of qualifying medical conditions for HRSN MTMs is narrower than what is listed in [OAR 410-120-2005](#) Table 2 (HRSN Clinical Risk Factors).

MTMs must be medically necessary and appropriate. Before being authorized to receive MTMs, OHP members must be assessed by a registered dietitian nutritionist (RDN). The dietitian will need to determine if MTMs are medically necessary and appropriate for the member's disease, condition or disorder.

Additionally, the RDN must create a medically appropriate nutrition care plan for the member before MTMs can be authorized.

## **MTMs and Early and Periodic Screening, Diagnostic, and Treatment benefits**

Under the Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) benefit, children must receive all medically necessary and appropriate nutrition related services regardless of their health condition. NOTE: MTM programs are not appropriate for children when the available meal patterns do not meet developmental, nutritional, and medical needs for children.

## **Covered medical conditions for medical nutrition therapy and RDN assessments**

The following information lists the medical conditions that can be billed to Medicaid for medical nutrition therapy (MNT) and referral for RDN assessment.

In addition, we've provided a list of conditions that are medically necessary and appropriate for OHP MTMs.

### **Medicaid covered medical conditions for MNT and referral for RDN assessment**

These conditions are included on the [OHP Prioritized List](#).

- Pregnancy
- Type 1 diabetes mellitus
- Galactosemia
- Phenylketonuria (PKU)
- Low birth weight; premature newborn
- Type 2 diabetes mellitus
- Regional enteritis, idiopathic proctocolitis, ulceration of intestine
- Epilepsy and febrile convulsions
- End stage renal disease
- Metabolic disorders
- Acute and subacute ischemic heart disease, myocardial infarction

- Neurological dysfunction in breathing, eating, swallowing, bowel, or bladder control caused by chronic conditions; attention to ostomies
- Hypertension and hypertensive disease
- Myocarditis, pericarditis, and endocarditis
- Heart failure
- Cardiomyopathy
- Nutritional deficiencies
- Glycogenosis
- Feeding and eating disorders of infancy or childhood
- Disorders of mineral metabolism, other than calcium
- Disorders of amino-acid transport and metabolism (non PKU); hereditary fructose intolerance
- Chronic ischemic heart disease
- Cancer of stomach
- Dyslipidemias
- Disorders of parathyroid gland; benign neoplasm of parathyroid gland, disorders of calcium metabolism
- Intestinal malabsorption
- Conditions requiring liver transplant
- Anorexia nervosa
- Cancer of oral cavity, pharynx, nose and larynx
- Cleft palate and/or cleft lip
- Cancer of esophagus; Barrett's esophagus with dysplasia
- Obesity in adults and children; overweight status in adults with cardiovascular risk factors
- Alcoholic fatty liver or alcoholic hepatitis, cirrhosis of liver
- Chronic kidney disease

- Bulimia nervosa and unspecified eating disorders
- Intestinal disaccharidase and other deficiencies

### **Specific medical conditions that are responsive to Medically Tailored Meals** (this is not an exhaustive list)

MTMs are an intensive nutrition intervention appropriate for a limited group of OHP members. People who have the conditions on the list below who also have some functional limitations may qualify for OHP MTMs.

NOTE: MTM programs aren't appropriate for children when the available meal patterns do not meet developmental, nutritional, and medical needs for children.

- E10.2 Type 1 diabetes mellitus with kidney complications
- E10.5 Type 1 diabetes mellitus with circulatory complications
- E11.2 Type 2 diabetes mellitus with kidney complications
- E11.5 Type 2 diabetes mellitus with circulatory complications
- Cancer or cancer treatment-related nutrition needs
  - E46 Unspecified protein-calorie malnutrition
  - C76.0 Malignant Neoplasm of head, face, and neck
- Nutrition needs due to difficulty chewing and swallowing:
  - R63.3 Feeding difficulties
  - R13.10 Dysphagia
- N17.0 Acute renal failure with tubular necrosis
- N17.1 Acute renal failure with acute cortical necrosis
- N17.2 Acute renal failure with medullary necrosis
- N17.8 Other acute renal failure
- N17.9 Acute renal failure, unspecified
- N18.3 Chronic kidney disease, stage 3 (GFR 30-59 mL/min)
- N18.4 Chronic kidney disease, stage 4 (GFR 15-29 mL/min)

- N18.5 Chronic kidney disease, stage 5 (GFR <15mL/min)
- N18.6 End stage kidney disease
- I50.40 Unspecified combined systolic (congestive) and diastolic (congestive) heart failure
- I50.41 Acute combined systolic (congestive) and diastolic (congestive) heart failure
- I50.42 Chronic combined systolic (congestive) and diastolic (congestive) heart failure
- I50.43 Acute on chronic combined systolic (congestive) and diastolic (congestive) heart failure
- I50.810 Right heart failure, unspecified
- I50.811 Acute right heart failure
- I50.812 Chronic right heart failure
- I50.813 Acute on chronic right heart failure
- I50.814 Right heart failure due to left heart failure
- I50.82 Biventricular heart failure
- I50.83 High output heart failure
- I50.84 End stage heart failure
- I50.89 Other heart failure
- I11.0 Hypertensive heart disease with heart failure
- I12.0 Hypertensive chronic kidney disease with stage 5 chronic kidney disease or end stage renal disease
- I12.9 Hypertensive chronic kidney disease with stage 3 or 4 chronic kidney disease
- I13.0 Hypertensive heart and chronic kidney disease with heart failure and stage 3 or 4 chronic kidney disease
- I13.2 Hypertensive heart and chronic kidney disease with heart failure and stage 5 chronic kidney disease or end stage renal disease

- J44 Chronic obstructive pulmonary disease, stage 2, 3, or 4

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