



# User Guide

Provided By The Lifestyle Medicine Group

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## Introduction

Congratulations for taking this opportunity to use the technology at your fingertips to efficiently manage your office responsibilities while maximizing your profit potential. The MNT Assistant™ uses resources available both on your computer and over the Internet to help you serve your clients and make your practice more effective.

It is important that you understand how the MNT Assistant™ works. The MNT Assistant™ program resides on your computer, while it's data resides on a secure internet server in the cloud.

We are committed to providing you quality service and outstanding resources. We strive to promote MNT as a key element of quality healthcare. If you have any comments or suggestions, please contact us. We are dedicated to your success.

### **Why the MNT Assistant™?**

There are many other applications that do scheduling, billing and help document notes. Some are even free. The MNT Assistant™ was made for RDNs by RDNs. Medical Nutrition Therapy documentation requirements can be very confusing; some are unique to RDNs (such as use of the nutrition care process) and many are required for reimbursement. The Academy of Nutrition and Dietetics (AND) created the Nutrition Care Process to enhance communication; we developed MNT Assistant™ to enhance profitability and practice.

# System Requirements

Operating System - Windows 7 or greater

CPU - 1 Ghz or greater

Memory - 2 Gb or greater

Display - 1024 × 768 or greater

## Installation

To install the MNT Assistant™ you can download it from this link:

<http://lynngobbledesigns.com/mntassistant/MNTAssistant4.exe>

Note: The installation will install Microsoft Access 2013 32 bit runtime unless you have Access 2013 32 bit or greater already installed. It will also install an SQL server component to connect to SQL Azure where your database is stored.

### **Known Installation Issues:**

**Access 2010/2013/2016 64 bit:** If you have Access 2010/2013/2016 64 bit then you will need to uninstall it and install the runtime that came with the installation or the 32 bit version. The MNT Assistant™ is not compatible with these versions.

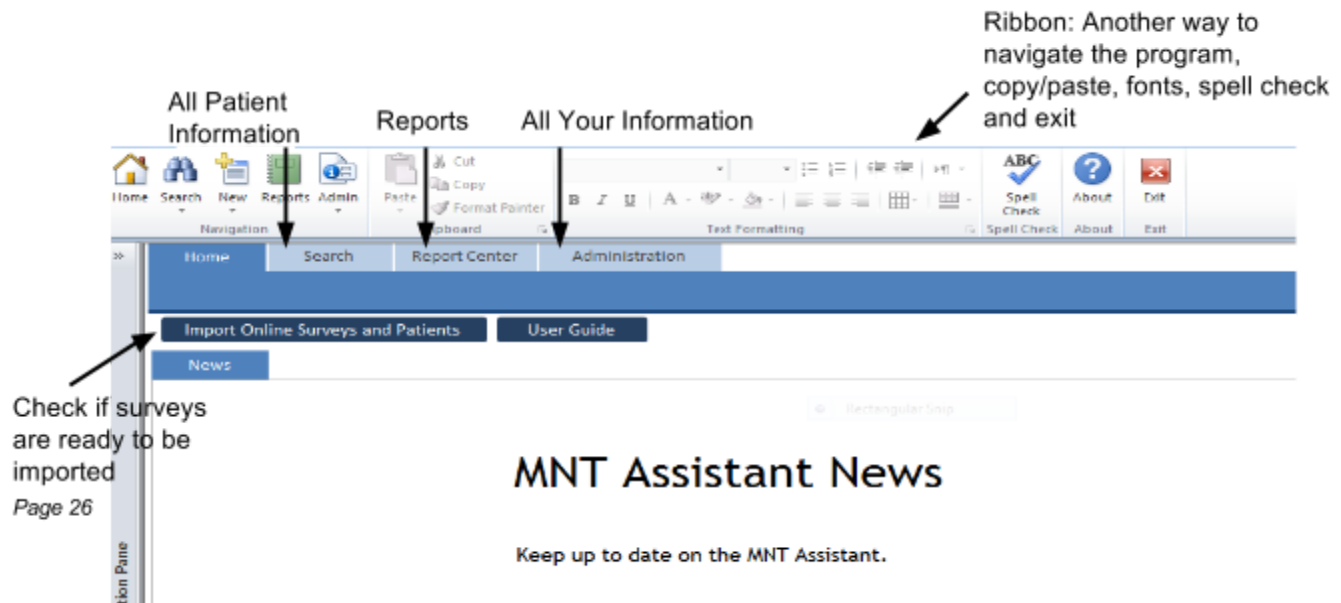
**Antivirus:** Some antivirus programs will prevent or warn you when downloading or updating the MNT Assistant™. If you have trouble downloading or updating the MNT Assistant™. Disable your antivirus for a few minutes and try again.

## Updates

When an update is available it will tell you to update before you login. The update usually takes a few minutes with broadband internet. Some antivirus software have issues with the update process. If you have trouble updating disable the antivirus for a few minutes while it updates.

# Getting Started

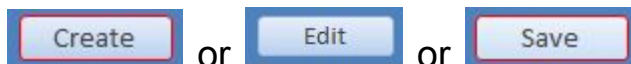
After you login with your username and password the screen below will come up.



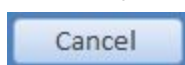
## Basic's on How to Use the Program.

- **Before you can start seeing patients**, you need to first enter in your information. Click the administration tab. The practice tab comes up. Follow the guide below and fill in the practice, facility and provider forms.
- At the top right of almost every form are two buttons.

- "Edit/Create/Save" button

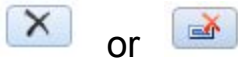


- "Create" - This will create a new record based on the data you inserted. Note: \* next to a field means it is required.
  - "Edit" - Allows you to edit the forms fields.
  - "Save" - Saves your data, your data will not be saved until you click this button.
- "Cancel" button: Discards your current data and puts back what was there before you edited the form.



- More Common Buttons Throughout the MNT Assistant™

- “Delete” button: Deletes the current record. **BEWARE** This can not be undone.



or

- “Show All” text button: Shows all records in the search results

Show All

- Record Navigation Selectors: If you don’t see all your records listed use these buttons to navigate to the next list of records.



- You can’t create a claim in the MNT Assistant™ unless you have all the required fields. If a field name is **bolded** it is required to create a claim.

# Administration Tab

Before you start you will need to setup your practice specific information. Information on each tab under the administration tab is listed below.

## Practice

The Practice tab provides a place to record the contact information of your main office or where you want clients, payers or insurance companies to send their payments.

Navigate to other practice information and settings

Edit / Save Button

Practice Name: Sample Practice \*

Address\*: 111 S Test Rd. \*

City: Sample \*

State: CA \*

Zip/Postal Code: 94323-2321 \*

Country: United States \*

Group NPI: 123454

Federal Tax ID Number: 1234454

Federal Tax ID Type: EIN

Office Phone 1: (111) 111-2222 \*

Office Phone 2:

Office Phone 3:

Fax:

Alternative Line 33:

File Storage: W:\Dropbox\ClientDatabases

EOB's

Logo: MNT ASSISTANT

Survey Links

\* This address is used as your billing address.

Double Click to put your logo in

Open up links to your practices surveys

Set File Storage Location

### Fields:

**Practice Name** - Name of your practice, will appear at the top of all reports. Claim line 33.

**Address** - Practice Address, will be put in the biller address fields in a claim. Claim line 33.

**Lookup 9-Digit Zip** - Link to zip code lookup website. Claims now require 9 digit zip codes for billers. Claim line 33.

**Group NPI** - Your practice's Group NPI number. Claim line 33A.

**Federal Tax ID Number** - Your practice's Federal Tax ID Number. Claim line 25.

**Federal Tax ID Type** - Select SSN (Social Security Number) or EIN (Entity Identification Number). Claim line 25

**Office Phone 1** - Main Phone Number. Claim line 33.

**Office Phone 2** - Additional Phone Number.

**Office Phone 3** - Additional Phone Number.

**Fax** - Fax Number.

**Alternative Line 33** - Enter a different practice name here if you want a different one to appear in your claims line 33.

**File Storage** - Sets the location on your computer where you store patient files. You have to secure this location to keep your practice HIPAA compliant.

**Logo** - Double click the logo to add or edit your logo that will appear in your reports.

**Survey Links** - Shows your unique web links for your patient's to take online surveys.

## Facility

The Facilities tab provides a place to record the contact information for each location of your practice. This may or may not be the same as your practice location information. This is where you provide services. If you have multiple locations, please record the information for each location. Give each one a unique name.

Home Search Report Center Administration

Practice Physicians Insurance Facilities Providers Users Templates Values

Save Cancel

Active ☒

Facility Name Office \*

Address 111 S Sample Rd

City Sample

State CA

Zip/Postal Code 94321-2323 [Lookup 9-digit zip](#)

Country United States

Office Phone 1

Office Phone 2

Office Phone 3

Location Type 11

Fax

NPI

Custom ID

Facility Code for Claims

### Fields:

**Active** - Defaulted to "Yes". Uncheck when you are no longer using this location.

**Facility Name** - Name of facility. Like office, home, hospital, etc.. Claim line 32.

**Address** - Facility Address, will be put in the facility address fields in a claim line. Claim line 32.

**Lookup 9-Digit Zip** - Link to zip code lookup website. Claims now require 9 digit zip codes for billers.

**Office Phone 1** - Main Phone Number. Claim line 32.

**Office Phone 2** - Additional Phone Number.

**Office Phone 3** - Additional Phone Number.

**Location Type** - Type of location according to claim line 24b.

**Fax** - Fax Number.

**NPI** - Facility NPI (optional)

**Custom ID** - A field you can label and store whatever you like. See the Custom Fields tab under the Values tab to edit the name of this field.



# Providers

The Providers tab allows you to record the identity and contact information for all providers seeing patients in your practice.



## Fields:

**Active** - Defaulted to “Yes”. Uncheck when provider is no longer at your practice.

**First Name** - Provider’s First Name

**Middle Initial** - Provider’s Middle Initial

**Last Name** - Provider’s Last Name

**Provider’s Suffix** - Provider’s Suffix (like RD, MCHES, etc..)

**Address** - Provider’s Address

**NPI** - Provider’s NPI Number

**Medicare PIN** - Provider’s Medicare PIN

**Accepts Assignment** - Check this if provider accepts assignment of insurance company payments for claims. Claim line 27.

**Home Phone** - Provider’s Home Phone

**Mobile Phone** - Provider’s Mobile Phone

**Office Phone** - Provider’s Office Phone

**Office Ext.** - Provider’s Office Extension

**Fax** - Provider’s Fax Phone

**Custom ID 1** - This field name can be edited in the the custom fields tab. This field is defaulted as “PTAN”.

**Custom ID 2** - This field name can be edited in the the custom fields tab.

**Note** - Any notes you want to add for this provider

# Users

The Users tab provides a place to record more information about the people using the MNT Assistant™ and to assign permissions or privileges. This tab is found under the Administration tab. Select the user you want to edit from the record selection window. You will find the users pre-assigned to use the MNT Assistant™ (to add or remove users, please contact our support staff). User program rights are assigned to each user when the program is initially setup by our support staff. The primary user of the MNT Assistant™ will be assumed the practice administrator and given administrative rights. They will be the only user given administrative rights (the administrator may give other users administration rights as needed). This means that the administrator will be able to see all users, change user types, assign providers and change user privileges. Please record all providers on the **Providers** tab before working on the **Users** definitions.

Home Search Report Center Administration

Practice Physicians Insurance Facilities Providers Users Templates Values

Save Cancel

Username: Idemo  
Edit Password

First Name: Jim \*

Last Name: Demo \*

Position: Provider \*

Provider: Joe Demo

User Privileges

Administration Tab ☒

Report Center Tab ☒

Practice Billing ☒

## Fields:

**Username** - Name this user logs in as.

**Edit Password** - Click here to change your password.

**First Name** - User's First Name.

**Last Name** - User's Last Name.

**Position** - User's position in your practice.

**Provider** - If the user's position is "Provider" then this field appears. Select the associated provider from provider tab for this user.

## User Privileges:

**Administration Tab:** When this is unchecked, the user will not be able to access the Administration tab. They will not have access to your list of physicians, payers, providers, practice, facilities, templates, values and user information.

**Report Center Tab:** When this is unchecked, the user will not be able to access the Report Center tab. They will not have access to the overall practice and accounting reports.

**Practice Billing:** When this is unchecked, the user will not be able to access the practice wide billing features. They will still be able to access individual information at the session level and record individual payments in the patient record.

# Physicians

The Physicians information tab allows you to record and access the physician or other health care provider's (FNP or PA) contact information. This information is for your reference and used in preparing claim records and communications.

Link to lookup a physician's NPI

Select Physician Specialty: Default is Primary Care

Physician Reports

Home Search Report Center Administration

Practice Physicians Insurance Facilities Providers Users Templates Values

Reports Edit Cancel

Active ☒

Basic

Title  Specialty  \*

First Name  \* NPI  \*

Middle Initial  [Lookup NPI Online](#)

Last Name  \* UPIN

Suffix

Contact

Email

Fax

Office Ext.

Home Phone

Mobile Phone

Office Phone

Address

Address

City

State

Zip

Country

Notes [Add Note](#)

Custom ID

## Fields:

**Title** - Select physician's title like (Dr., Mr., etc..)

**First Name** - Physician's first name.

**Middle Initial** - Physician's middle initial.

**Last Name** - Physician's last Name.

**Suffix** - Physician's suffix like (MD, LN, etc..).

**Specialty** - Select the physician's specialty from the drop down list. You can edit the drop down list in the values tab under administration. This field is required.

**NPI** - Physician's NPI number. Click the button below it to go to a website that looks up physician NPI numbers. Insert into claim line 17b.

**UPIN** - Physician's UPIN number.

**Address** - Physician's Address

**Email** - Physician's Email

**Home Phone** - Physician's Home Phone

**Mobile Phone** - Physician's Mobile Phone

**Office Phone** - Physician's Office Phone

**Office Ext.** - Physician's Office Extension

**Fax** - Physician's Fax Phone

**Note** - Any notes you want to add for this physician

**Custom ID** - A field you can label and store whatever you like. See the Custom Fields tab under the Values tab to edit the name of this field.

## Reports Drop Down Menu

- **Physician's Patients** - List of this physician's patients.
- **All Physician's Patients** - List of all physician's patients.
- **Physician Labels** - List of all physician's addresses.
- **Physician Information** - Report of all information in this tab.
- **Physician Letter** - Create a Microsoft Word document in a letter template with the physician's information filled in as well as a custom template. (see image above)

The screenshot shows a web application interface with a top navigation bar containing 'Home', 'Search', 'Report Center', and 'Administration'. Below this is a secondary navigation bar with 'Practice', 'Physicians', 'Insurance', 'Facilities', 'Providers', 'Users', 'Templates', and 'Values'. The 'Physician Letter' form is displayed, featuring a 'To:' field with 'Carl Inker MD' and a 'Date:' field with '10/16/2014'. A 'Print' button is located to the right of the 'To:' field. Below the 'To:' field is a 'Dear: Carl Inker' field and an 'Insert Template:' dropdown menu. A large text area for the letter content is at the bottom.

Home Search Report Center Administration

Practice Physicians Insurance Facilities Providers Users Templates Values

**Physician Letter**

To: Carl Inker MD

Date: 10/16/2014

Print

Dear: Carl Inker

Insert Template:

# Insurance Companies

The Insurance tab provides a place to record the identity and contact information for each health plan/payer organization. When you copy a patient's insurance information card, check that you don't already have that payer in your database. You may have it by a slightly different name. But, be aware that it's not unusual for different payers to have the same electronic 'Payer ID.'

Opens Insurance Companies List

The screenshot shows a web form titled "Insurance Companies". At the top, there is a "Reports" dropdown menu, "Edit", and "Cancel" buttons. A blue arrow points from the text "Opens Insurance Companies List" to a binoculars icon next to the "Insurance Company Name" field. The form is divided into two columns. The left column contains fields for "Insurance Company Name" (filled with "Healthnet - Oregon"), "Address", "City", "State" (dropdown), "Zip/Postal Code", "Country" (filled with "United States"), "Insurance Representative", "Insurance Type" (filled with "GROUP HEALTH PLAN"), "No Electronic Claim Integration" (checkbox), "Email", "Online Username", "Online Password", and "Insurance Website". The right column contains an "Active" checkbox (checked), "Office Phone" (filled with "(342) 343-2343"), "Fax", "Payer ID" (filled with "95567"), "Notes" (with an "Add Note" button), "Custom ID", "Special Group NPI", "Special Tax ID", and "Special Tax ID Type" (with radio buttons for "EIN" and "SSN"). A blue arrow points from the text "Opens Website" to the "Open Link" button at the bottom right of the form.

Insurance Companies

Reports

Active ☒

Insurance Company Name: Healthnet - Oregon

Office Phone: (342) 343-2343

Fax:

Payer ID: 95567

Notes:

City:

State:

Zip/Postal Code:

Country: United States

Insurance Representative:

Insurance Type: GROUP HEALTH PLAN

No Electronic Claim Integration: ☐

Custom ID:

Special Group NPI:

Special Tax ID:

Special Tax ID Type: ☒ EIN ☐ SSN

Email:

Online Username:

Online Password:

Insurance Website:  ← Opens Website

## Fields:

**Insurance Company Name** - Click the binoculars button to search for the payer you want to add. (see image below)

Search by name and state. TIP: Select your state and click search

Search for Insurance

Search for and Select an Insurance Company

Search

State  Name  Search

PayerName	PayerID	State
1199 National Benefit Fund	13162	
21st Century Health and Benefits	59069	
21st Century Insurance and Financial Services	51028	MN
3P Admin	20413	
8th District Elec	74234	UT
A & I Benefit Plan Administrators	93044	
AAG - American Administrative Group	75240	
AAG Benefit Plan Administrators, Inc.	75240	
AARP Hospital Indemnity Plans insured by UnitedHeal	36273	
AARP Medicare Supplement Plans insured by UnitedH	36273	
AARP MedicareComplete insured through UnitedHeal	87726	

Select

If you can't find insurance above. Type name below.

Insurance Name\*  \* Won't work with office ally

If not in list, put name here. But, note all electronic claim submissions require a payer ID.

**Address** - Insurance company's address.

**Office Phone** - Insurance company's phone number.

**Fax** - Insurance company's fax number.

**Payer ID** - Insurance company's unique ID number used to identify the payer.

**Insurance Representative** - Your insurance company representative.

**Insurance Type** - This is the type of insurance designated on a claim form line 1. Most payers are "Group Health Plan" which is the default. If you the payer is medicare or medicaid make sure it is selected in this field.

**No Electronic Claim Integration** - Check this if the insurance company doesn't process electronic claims. If checked it won't send them electronically.

**Email** - Insurance company's email.

**Note** - Any notes you want to add for this insurance company.

**Custom ID** - A field you can label and store whatever you like. See the Custom Fields tab under the Values tab to edit the name of this field.

**Special Group NPI** - If your Practices Group NPI number is different for this insurance company.

**Special Tax ID and Type** - If your Practices Tax ID number is different for this insurance company.

**Online Username** - Store your online username for the online portal to this insurance company.

**Online Password** - Store your online password **HINT** for the online portal to this insurance company. Note: if you store the password here you may not be HIPAA compliant.

**Insurance Website** - website address to your insurance company's online portal.

#### Reports Drop Down Menu:

- **Insurance Patients** - List of this insurance company's patients.
- **All Insurance Patients** - List of all insurance company's and associated patients.
- **Insurance Labels** - List of all insurance company's address'. (compatible with Avery 5960 labels)
- **Insurance Information** - Report of all information in this tab.

# Templates

The Templates tab provides the template content you will use throughout the program. Templates are available to help write chart notes, tailor your recommendations, create and describe group sessions and to set up specific templates for goals.

Home Search Report Center Administration

Practice Physicians Insurance Facilities Providers Users Templates Values

Templates Template Categories Recommendations Class Templates Goal Templates

Edit Cancel

Name Initial Visit Edit New

Note Category Diabetes, Type 2

**Initial Visit**

This patient wanted Medical Nutrition Therapy for their type 2 diabetes as identified by their medical provider. I performed a lifestyle assessment covering physical, emotional, eating, activity and substance use habits.

Important values from this assessment include:

Insert Value

\* Put conditional text before {{ and after }}. Example: "[[[Height: {{Height}} inches]]]"

Template Category List

Values from data you have collected

## Fields:

**Name** - Template Name

**Category** - Select a Template Category from the drop down list. You can also edit or create a new template category using the buttons right above it.

**Note** - Type your template here. You can make your template dynamic by inserting placeholders from your database that will display your patient's data when it gets inserted. For example to insert the Height value. Use this "[[[{{Height}}]]]". When you use this template code in the MNT Assistant™ it will insert the sessions height value. If there isn't a value it will insert nothing. You can also put text before and after {{}}, like "[[[Height: {{Height}} inches]]]". For a session with a height value of 72 this will insert "Height: 72 inches". If there was no height entered this would insert nothing.

# Template Categories

Here is where you can create or edit template categories. Template categories help you organize your session templates so they may be easy to find and select when you are preparing your session notes.

HomeSearchReport CenterAdministration

PracticePhysiciansInsuranceFacilitiesProvidersUsersTemplatesValues

TemplatesTemplate CategoriesRecommendationsClass TemplatesGoal Templates

EditNew

Chronic Kidney Disease  
Diabetes, Type 2  
Dyslipidemia  
Gestational Diabetes Mellitus  
GI Distress  
Intensive Obesity Counseling  
Pediatric Obesity  
Seminars  
Session Values

## Fields:

**Name** - Template Category Name


# Recommendations

After counseling a patient you have the opportunity to prepare a tailored handout of recommendations based on your assessment and intervention conservation. The recommendations templates contain the text used to create these recommendations. Here you may add, remove or edit recommendations, as you wish. A set of recommendations is already prepared for you but you can tailor them here to meet you and your patient's needs.

HomeSearchReport CenterAdministration

PracticePhysiciansInsuranceFacilitiesProvidersUsersTemplatesValues

TemplatesTemplate CategoriesRecommendationsClass TemplatesGoal Templates




EditCancel

RecommendationCarbohydrate intake

ChangeLess

TemplateCarbohydrates are the main source of energy for our muscles and brain. However, refined carbohydrates, such as high sugary (i.e. candy, soda pop, ice cream) and processed foods (i.e. hamburger buns, cake, muffins, doughnuts) contribute many calories with few nutrients. Your main source of carbohydrate should come from whole grain breads and cereals, fruit and vegetables. These are good sources of fiber too. Limit the amount of refined carbohydrate foods.





## Fields:

**Recommendation** - Recommendation Name

**Change** - Recommendation Change - usually More or Less.

**Template** - Insert your Recommendation Here

## Class Templates

Here you may identify and describe the templates for groups sessions or courses you will be conducting within your practice. For example if you do two types of Diabetes Self-Management Training (DSMT) courses (initial course and follow-up course), you name and describe them each here.

The screenshot shows a web application interface. At the top is a navigation bar with buttons: Home, Search, Report Center, and Administration. Below this is a secondary navigation bar with buttons: Practice, Physicians, Insurance, Facilities, Providers, Users, Templates (highlighted), and Values. Under the 'Templates' button, there is a sub-menu with buttons: Templates, Template Categories, Recommendations, Class Templates (highlighted), and Goal Templates. Below the navigation bars is a form titled 'Class Templates'. The form has a 'Title' field containing 'Healthy Eating Seminars' and a 'Description' text area containing 'This is a series of seminars designed to empower listeners to make better food choices.' At the bottom right of the form is a blue button with a white 'X' icon.

## Fields:

**Title** - Name of course

**Description** - Description of course

## Goal Templates

Here you have the opportunity to create and edit different sets of goals. You are able to create sets of initial goals for Lab values, Clinical test values and Dietary assessment values. For example, if there are dietary prescription you often use, then create a Dietary goal set for those dietary guidelines. Provide a unique description for each one so you may easily recognize the set you want when you are preparing your patient records.

Lab

Edit

New

CKD

Wellness

Clinical

Edit

New

wellness

Dietary

Edit

New

1500 Calories

wellness

## Lab Goal Templates

Home

Search

Report Center

Administration

Practice

Physicians

Insurance

Facilities

Providers

Users

Templates

Values

Templates

Template Categories

Recommendations

Class Templates

Goal Templates

Edit

Cancel

Template

Wellness

X

Lab	Goal	Units	Delete
C-Reactive Protein		mg/L	<a href="#">Delete</a>
GFR			<a href="#">Delete</a>
Glucose		mg/dL	<a href="#">Delete</a>
HDL Cholesterol		mg/dL	<a href="#">Delete</a>
Hemoglobin		g/dL	<a href="#">Delete</a>
Hemoglobin A1c		%	<a href="#">Delete</a>
Homocysteine		μmol/L	<a href="#">Delete</a>
Intact PTH		pg/ml	<a href="#">Delete</a>
LDL Cholesterol		mg/dL	<a href="#">Delete</a>
Micro Albumin		mcg/24hrs	<a href="#">Delete</a>
Serum Albumin		g/dL	<a href="#">Delete</a>
Serum Calcium		mg/dL	<a href="#">Delete</a>
Serum CO2		mm Hg	<a href="#">Delete</a>
Serum Creatinine		mg/dL	<a href="#">Delete</a>
Serum Phosphorus		mg/dL	<a href="#">Delete</a>
Serum Potassium		mEq/L	<a href="#">Delete</a>

## Clinical Goal Templates

Home

Search

Report Center

Administration

Practice

Physicians

Insurance

Facilities

Providers

Users

Templates

Values

Templates

Template Categories

Recommendations

Class Templates

Goal Templates

Edit

Cancel

Template

wellness

X

Resting Heart Rate	
Percent Body Fat	
Systolic Blood Pressure	
Diastolic Blood Pressure	
Weight	
Waist Girth	
BMI	
Bedtime SMBG	
Preprandial SMBG	
Glucose 2 Hours After Meal	
Waist To Hip Ratio	
Activity Intensity	
Activity Frequency	
Activity Duration	

## Dietary Goal Templates

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Templates
Template Categories
Recommendations
Class Templates
Goal Templates

Edit
Cancel

Tempate wellness

Energy Intake 1500
Fat Intake
Fat %
Mono-Saturated Fat %
Saturated Fat %
Cholesterol
Protein
Protein %
Carbohydrate
Carbohydrate %
Fiber
Folate
B6
Vitamin F

Exchange Groups
Starch 5
Fruit 3
Vegetable 4
Milk Non-Fat or 1%
Milk Reduced Fat
Milk Whole
Other 2
Meat Very Lean
Meat Lean 10
Meat Medium Fat
Meat High Fat
Fat 4

## Values

Under the Values tab you will be able to find and edit important lists used throughout the program.

Home
Search
Report Center
Administration

Practice
Physicians
Insurance
Facilities
Providers
Users
Templates
Values

CPT Codes
Products
Labs
Glucose Meters
Custom Fields
Physician Specialties

Statement Template
Report

Edit
New

CPT Code	Description	Charge	Minutes per Unit	Not Time Based
97802	MNT Initial One-on-one	\$37.50	15	False
97803	MNT Follow-up One-on-one	\$37.50	15	False
97804	MNT Group	\$25.00	30	False
G0108	DSMT One-on one	\$150.00	60	False
G0109	DSMT Group	\$25.00	30	False
96150	Dietetic Counseling Initial One-on-one	\$37.50	15	False
96152	Dietetic Counseling Follow-up One-on-one	\$37.50	15	False
96153	Dietetic Counseling Group	\$12.50	15	False
S9470	Nutritional Counseling Dietitian Visit	\$150.00		True
A3020	Quality control test (1)	\$0.00		True

## CPT Codes

Here you will be able to store the HCPCS and CPT service codes required for billing. These may or may not be time-based codes. For a time-based code, indicate the unit of time. For example 97802 is a 15 minute unit whereas 97804 is a 30 minute unit. If there is no time factor, leave the time blank and check the “Not time based” box. The codes accompanying the MNT Assistant™ are examples of codes you may record in this section. Click on the “Report” button to view or print a listing of all your codes, descriptions and amounts.

For your information, according to CMS:

*Level I of the HCPCS is comprised of CPT (Current Procedural Terminology), a numeric coding system maintained by the American Medical Association (AMA). The CPT is a uniform coding system consisting of descriptive terms and identifying codes that are used primarily to identify medical services and procedures furnished by physicians and other healthcare professionals. These healthcare professionals use the CPT to identify services and procedures for which they bill public or private health insurance programs. Decisions regarding the addition, deletion, or revision of CPT codes are made by the AMA. The CPT codes are republished and updated annually by the AMA. Level I of the HCPCS, the CPT codes, does not include codes needed to separately report medical items or services that are regularly billed by suppliers other than physicians.*

### Fields:

**CPT Code** - HCPCS or CPT service code.

**Charge** - Charge per unit

**Minutes per Unit** - Minutes it take for 1 unit.

**Not Time Based** - Check this if the CPT code is not time based.

## Products

The Products tab provides a place to store a list of all the products you will be offering in your practice. These include other therapeutic services, assessment procedures, books, supplements, courses, coaching and other billable items not found under CPT codes. You will refer to these when recording patient billing.

Home	Search	Report Center	Administration				
Practice	Physicians	Insurance	Facilities	Providers	Users	Templates	Values
CPT Codes	Products	Labs	Glucose Meters	Custom Fields	Physician Specialties		
						Create	Cancel
Product	<input type="text"/>						
Description	<input type="text"/>						
Price	<input type="text"/>						

### Fields:

**Product** - Name of the product.

**Description** - Description of the product.

**Price** - Price for 1 product.

# Glucose Meters

Here you may add or edit meter names and descriptions. The glucose meter names are used when recording self-management glucose and insulin values in the “Blood Glucose” patient survey.

HomeSearchReport CenterAdministration

PracticePhysiciansInsuranceFacilitiesProvidersUsersTemplatesValues

CPT CodesProductsLabsGlucose MetersCustom FieldsPhysician Specialties

SaveCancel

Glucose Meter  
Generic Brand

# Custom fields

There are fields on various forms that you may label anything that works for you. For example in the Physician’s information window, there is a field label “Physician Custom ID”. Here in the Custom Fields window you can change that label to something else, such as “Private Line” or “Office Password” or whatever you need. In addition to the Physicians custom field, there are two custom fields in the Patients demographics window, one for Insurance, one for Facilities and two for the Providers.

HomeSearchReport CenterAdministration

PracticePhysiciansInsuranceFacilitiesProvidersUsersTemplatesValues

CPT CodesProductsLabsGlucose MetersCustom FieldsPhysician Specialties

EditCancel

Custom ID Labels

Patient Custom ID 1

Patient Custom ID 2

Physician Custom ID

Insurance Company Custom ID

Facility Custom ID

Provider Custom ID 1

PTAN

Provider Custom ID 2

# Physician Specialties

Here you will be able to add or edit the list of specialty names that appear in the Physicians information window.

Home	Search	Report Center	Administration				
Practice	Physicians	Insurance	Facilities	Providers	Users	Templates	Values
CPT Codes	Products	Labs	Glucose Meters	Custom Fields	Physician Specialties		

EditNew

Primary Care  
Internal Medicine  
Endocrinologist  
Cardiologist  
Physician's Assistant  
Nurse Practitioner  
Nephrologist



# Search Tab

The search tab allows you to find the record you want. Each tab will display up to 30 results at a time, to see more results use the record selectors on the bottom. To open a record select it and click the edit button or double click on it. If you want to see all the records in your database click the “Show All” button.

The screenshot shows the 'Search' tab selected in a navigation menu. The menu includes 'Home', 'Search', 'Report Center', and 'Administration'. Below the menu is a sub-menu with 'Patients', 'Sessions', 'Classes', 'Billing', 'Claims', 'Payments', and 'Notes'. The 'Patients' sub-tab is active. The search area contains fields for 'Last Name' and 'First Name', a 'Search' button, and an 'Active' checkbox which is checked. Below the search area are buttons for 'Edit', 'New', 'Show All', and a close button (X). The main display area is a table with columns 'Patient', 'Date of Birth', and 'Active'. The table is currently empty. At the bottom right of the table are four small navigation icons: a left arrow, a right arrow, a double left arrow, and a double right arrow.

## Patients

Search for and create a patient. Opens a patient's record.

## Sessions

Search for a specific patient's session. Opens a patient's session record.

## Classes

Search for and create a class. Opens a class or group session.

## Billing

Search for and create a billed item. Opens a billed CPT code or product.

## Claims

Search for a claim or electronically export your claims to Office Ally. Open a patient's CMS 1500 form claim.

## Payments

Search for and create a payment. Open an individual payment or reconcile an explanation of benefits (EOB) payment from an insurance company.

## Notes

View all your notes recorded in all the different parts of the program except for session notes. These notes come from: patients, patient physicians, patient insurance companies, billed items, payments and more.



# Patients

In a patient's record, along the left margin of your screen is a list of other information about that patient. These include Demographics, Insurance or payer information, Physician (a record of all the medical providers referring or treating this patient), Diagnosis (a list of diagnosis and the provider that provided the diagnosis), Medications, Surveys (responses and results from surveys, profiles and records provided by patient), Labs, Goals and Billing. Under "Session(s)" in the left margin you will create new or view previous MNT session notes.

## Patient Demographics

The Demographics window provides all of the demographic and contact information for your patient. To save time, invite patients to complete this form on their computer or digital device with access to the Internet. Send your client an email with a link to the online enrollment form. After you have imported their data (see Importing Surveys page 39) you may view and edit this information. The imported notes section on this page will contain the patient's insurance and physician information.

Tips: Much of this information will be used in processing claims including name, address, gender, date of birth, marital status, and employer.

Store patient files here

Patient Reports

Home Search Report Center Administration

Demographic History Insurance Physician Diagnosis Medications Surveys Labs Goals Billing

Joe Murph Age: 60 DOB: 01/01/1954 Edit Cancel

Patient Folder Active ☒ Reports

Basic

First Name Joe \* Date of Birth 1/1/1954 \*

Middle Initial Gender Male \*

Last Name Murph \* Marital Status Married

Race Employment Status

Other

PIN

Employer

Custom Label 1

Custom Label 2

Contact

Home Phone (111) 222-3333 Email

Mobile Phone Fax

Office Phone Office Ext.

Address

Address 825 S 55th St.

City Molalla

State OR

Zip 97038-

Country United States

Notes Add Note

Notes for patient, not session notes.

### Fields:

**First Name** - Patient's first name. Required field

**Middle Initial**- Patient's middle initial.

**Last Name** - Patient's last name. Required field

**Date of Birth** - Patient's Date of Birth. Required field

**Gender** - Patient's gender. Required field

**Marital Status** - Patient's marital status. Required for claims.

**Employment Status** - Patient's employment status.

**Home Phone** - Patient's home phone or main phone. Required for claims.

**Mobile Phone** - Patient's mobile phone, if it is not their main home phone.

**Office Phone** - Patient's office phone and extension.

**Email** - Patient's email.

**Fax** - Patient's fax.

**Address** - Patient's address. Required for claims.

**PIN** - Patient's identification number. (Any PIN you want to store)

**Employer** - Patient's employer.

**Custom Label 1** - Custom field. label can be changed in the administration tab.

**Custom Label 2** - Custom field. label can be changed in the administration tab.

**Note** - Add notes about the patient. **NOT FOR SESSION NOTES.**

**Active** - Uncheck to make the patient inactive.

**Patient Folder** - Opens the patient's folder on your computer to store patient files. Note: Must have a storage location set in the administration tab before you can use this.

#### Reports Drop Down Menu:

- **Statement** - Patient statement showing all billed items, payments and balance. See patient statement on page 45 for more information.
- **Snapshot** - Report of the current state of the patient. Last dietary, labs, clinical, physician, insurance and physician information
- **Insurance** - Report of all information in this tab.

## Patient History

The screenshot shows a web application interface for patient history. At the top, there are tabs: Home, Search, Report Center, and Administration. Below the tabs, the patient's name 'Joe Murph' is displayed, along with 'Age: 60' and 'DOB: 01/01/1954'. There are 'Edit' and 'Cancel' buttons. A left sidebar contains a list of tabs: Demographic, History (selected), Insurance, Physician, Diagnosis, Medications, Surveys, Labs, Goals, and Billing. Below the sidebar is a 'New' button and a 'Session(s)' list with dates '11/4/2013' and '8/16/2013'. The main content area is titled 'MNT/DSMT History'. It contains a form with the following fields: 'Had MNT/DSMT In Past?' with a checkbox, 'Date of Service' with a calendar icon, and 'Reasons for MNT/DSMT' with a large text area. An arrow points from the text 'Nutrition Counseling History' to the 'Had MNT/DSMT In Past?' checkbox. Below the main form is a section titled 'Learning Issues' with a grid of checkboxes for 'Vision', 'Language', 'Learning Skills', 'Physical', 'Hearing', and 'Other'.

MNT/DSMT History			
Had MNT/DSMT In Past?	<input type="checkbox"/>		
Date of Service	<input type="text"/>		
Reasons for MNT/DSMT	<div></div>		

Learning Issues			
Vision	<input type="checkbox"/>	Language	<input type="checkbox"/>
Learning Skills	<input type="checkbox"/>	Physical	<input type="checkbox"/>
Hearing	<input type="checkbox"/>	Other	<input type="checkbox"/>

#### Fields:

**Had MNT/DSMT in Past?** - Check if they have seen a different RD in the past.

**Date of Service** - Date they saw previous RD.

**Reasons for MNT/DSMT** - Note on why they saw previous RD.

**Learning Issues** - Available to track learning issues for DSMT.

## Patient Insurance

The Insurance window stores information regarding the insurance and payer organizations, their ID numbers and beneficiary status for each. This information is used when submitting claims.

The screenshot displays the 'Patient Insurance' window for a patient named Joe Murph. The window is divided into a left sidebar with navigation tabs (Demographic, History, Insurance, Physician, Diagnosis, Medications, Surveys, Labs, Goals, Billing) and a main content area. The 'Insurance' tab is selected. The main content area shows the patient's insurance details. At the top, there's a header with the patient's name, age (60), and date of birth (01/01/1954), along with 'Edit' and 'Cancel' buttons. Below this, the 'Primary' insurance is listed with a checkbox for 'Active'. The fields include: 'Insurance Company' (Healthnet - Oregon), 'Health Insurance Number' (AE23434323), 'Eligibility Status' (To be Determined), 'Insurance Plan Name or Program Name', 'Group or FECA Number', 'Authorization Number', 'Co-pay' (\$15.00), 'Subscriber\*' (with a button to 'Enter Insurance Subscriber if Patient is a Dependant'), and 'Relationship To Insured\*'. There are buttons for 'Check Eligibility' and 'Add Note'. A note box at the bottom contains the text 'Note about this Patient's Insurance Plan'. The sidebar also has a 'New' button and a list of sessions (11/4/2013, 8/16/2013).

### Fields:

**Insurance Company** - Select the patient's insurance company. If it is not there click the \*\*\*Not in List\*\*\* to create the insurance company. Click the "?" button next to it to see more information on that insurance company.

**Health Insurance Number** - Patient's health insurance number. Found on their insurance card. Required for claims. It is recommended that you save a copy of their insurance card.

**Eligibility Status** - Drop down for you to keep track of patient eligibility. Click the "Check Eligibility" button to pull up all the information you will need when calling the insurance company to check eligibility.

Check Eligibility

X

Insurance: Healthnet - Oregon

(342) 343-2343

Insurance Number	Patient Name
AE23434323	Joe Murph
Diagnosis Code(s)	Date of Birth
2724    HYPERLIPIDEMIA NEC/NOS	1/1/1954
	EIN
	1234454
	Group NPI
	123454

View CPT Codes

View Provider NPIs

Close

**Insurance Plan Name or Program Name** - Name of the patient's insurance plan

**Group or FECA Number** - Group or FECA Number

**Authorization Number** - Authorization number from insurance company. For claims not usually covered.

**Co-Pay** - Patient's co-pay amount.

**Subscriber** - If patient is a dependant and someone else is the insured on their insurance plan. Put the insured here. Click the binoculars button to find the patient in your database or create them. The X button removes the patient.

**Relationship to Insured** - Relationship to subscriber above.

**Notes** - Add notes about this patient's insurance plan.

**Active** - Uncheck to make the patient's insurance plan inactive.

# Patient Physician(s)

This window will identify the patient's physician(s), referral date and any notes.

The screenshot shows a software interface for patient management. At the top, there are tabs: Home, Search, Report Center, and Administration. Below these, a patient's name 'Joe Murph' is displayed along with 'Age: 62' and 'DOB: 01/01/1954'. There are 'Edit' and 'Cancel' buttons. A left sidebar contains a menu with options: Demographic, History, Insurance, Physician (highlighted), Diagnosis, Medications, Surveys, Labs, Goals, and Billing. Below the menu is a 'New' button and a list of 'Session(s)' with dates: 7/25/2014, 11/4/2013, 10/24/2013, and 8/16/2013. The main area has fields for 'Physician' (containing 'Carl Inker MD'), 'Referral Date' (containing '7/23/2013'), and 'Notes' (with an 'Add Note' button). There are also buttons for 'Select a Physician' (with a magnifying glass icon) and 'Opens Physician Information' (with a question mark icon). A 'Referral' button is located below the 'Notes' field. Annotations with arrows point to these buttons: 'Select a Physician' points to the magnifying glass button, 'Opens Physician Information' points to the question mark button, and 'Create referral form with patient and physician information pre-filled' points to the 'Referral' button.

## Fields:

**Physician** - Select a physician from the “...” button. You can search for the physician or create a new one. Click the “?” button to see information about the physician.

The screenshot shows a window titled 'Search for Patient'. Inside, there is a section titled 'Search for Physician in Database'. It contains two input fields: 'First Name' and 'Last Name', followed by a 'Search' button. To the right of the input fields is a 'Show All' button. Below this is a large empty box labeled 'Physician'. At the bottom of the window, there are navigation buttons (back, forward, etc.) and two buttons labeled 'Select' and 'New' separated by the word 'or'.

**Referral Date** - Date of referral from physician.

**Notes** - Add notes about this patient's physician.

# Patient Diagnosis

This window will identify the diagnosis(s) for this patient and the health care provider who is responsible for it.

Home Search Report Center Administration

Demographic Joe Murph Age: 60 DOB: 01/01/1954 Edit Cancel

History

Insurance

Physician

Diagnosis

Medications

Surveys

Labs

Goals

Billing

New

Session(s)

11/4/2013

8/16/2013

Physician Carl Inker Self Referral ☐

ICD 9 Code 2724 - HYPERLIPIDEMIA NEC/NOS ...

Allowed per Year: Used so far: 0

Select the Referring Physician

Or Select "Self Referral" if no Physician

Select an ICD 9/10 Code (image below)

Keep track of how many times this diagnosis has been billed for this year.

## Fields:

**Physician** - Select the physician from the drop down list.

**Self Referral** - Select this if no physician referred this diagnosis.

**ICD 9/10 Code** - Click the "..." button to select an ICD 9/10 code. It defaults to ICD 9 but will default to ICD 10 when it is required. Search for your code by name or number.

Search ICD9 Codes

Select an ICD 9/10 Code to Create

Quick Search Search Show All Records Type ICD9 ICD10

Select	ICD9 Code	Description	Short Description
Select	0010	Cholera due to vibrio cholerae	Cholera d/t vib cholerae
Select	0011	Cholera due to vibrio cholerae el tor	Cholera d/t vib el tor
Select	0019	Cholera, unspecified	Cholera NOS
Select	0020	Typhoid fever	Typhoid fever
Select	0021	Paratyphoid fever A	Paratyphoid fever a
Select	0022	Paratyphoid fever B	Paratyphoid fever b
Select	0023	Paratyphoid fever C	Paratyphoid fever c
Select	0029	Paratyphoid fever, unspecified	Paratyphoid fever NOS
Select	0030	Salmonella gastroenteritis	Salmonella enteritis
Select	0031	Salmonella septicemia	Salmonella septicemia

Close

**Allowed per year** - put a number in here to help you keep track of how many claims you submitted this calendar year with this diagnosis code. Some insurance companies only pay for a certain number of sessions per diagnosis code.

## Patient Medications

This window allows you to record your patient's current medications and related information.

Home Search Report Center Administration

Demographic Joe Murph Age: 60 DOB: 01/01/1954 Edit Cancel

History

Insurance

Physician

Diagnosis

Medications

Surveys

Labs

Goals


Billing

New

Session(s)

11/4/2013


8/16/2013


Drug: CYMBALTA  ← Lookup drug or just type it in

Active Ingredient: DULOXETINE HYDROCHLORIDE

Dosage: 60mg

Regularity: 1 x per Day (PM)

Start Date: 

End Date: 

Note:


## Fields:

**Drug** - Type in the drug or look up the drug to see the active ingredient using the binoculars button.

**Active Ingredient** - If you look up a drug it will insert the active ingredient.

Search Assessments

Search Medications

Quick Search  Search  Show All Records

Select	Medication	Active Ingredient
<a href="#">Select</a>	8-HOUR BAYER	ASPIRIN
<a href="#">Select</a>	8-MOP	METHOXSALIN
<a href="#">Select</a>	A.P.L.	GONADOTROPIN, CHORIONIC
<a href="#">Select</a>	A/T/S	ERYTHROMYCIN
<a href="#">Select</a>	ABACAVIR	ABACAVIR
<a href="#">Select</a>	ABACAVIR	ABACAVIR SULFATE
<a href="#">Select</a>	ABACAVIR SULFATE	ABACAVIR SULFATE
<a href="#">Select</a>	ABACAVIR SULFATE, LAMIVUDINE AND ZIDOVUDINE	ABACAVIR SULFATE; LAMIVUDINE; ZIDOVUDINE
<a href="#">Select</a>	ABACAVIR SULFATE; LAMIVUDINE	ABACAVIR SULFATE; LAMIVUDINE
<a href="#">Select</a>	ABELCET	AMPHOTERICIN B

Close

**Dosage** - Dosage patient takes of drug.

**Regularity** - Enter the number of times and the time frame.

**Start Date** - Start date of taking the drug.

**End Date** - If patient no longer takes the drug put an end date.

**Note** - Note about medication.



# Patient Surveys

This window allows you to create and view patient surveys. You may also store lab results and glucose self-monitoring records.

If your patient has completed surveys online then you may import their data from the Home tab by clicking "Import Online Surveys and Patients." (See below for more information)

## Fields:

**New** - Select a survey from the drop down list to create a new one and enter the survey information manually.

**Survey List** - Select a survey from this list and click the edit button to open it or double click on it.

**Print Paper Version** - Opens the selected survey in Microsoft Word to view and print a complete copy of the survey questions. (keep a hard copy of these surveys for your reference)

Date Taken	Type
8/1/2013	Profile 200 - Nutrition and Eating Assessment
8/1/2013	Profile 100 - Personal and Family History
7/30/2013	Food Frequency Assessment

**Tips:** We recommend sending your clients an email with links to the online surveys when you send a reminder for their next appointment. In promotional mailings you may want to include a link to only the enrollment form. This gives you all the contact information you need to follow-up. After your client has made their appointment you may send them links to the forms you want completed before their visit. Most people will complete these forms at home or at their workplace. They may use any computer that has Internet access or a digital device such as a smartphone or tablet. Some offices may elect to have laptops available for clients to complete forms while they wait in the office.



# Profile 100 - Personal and Family History Survey

This survey is to gather patient health history.

 <b>Joe Murph</b>	Age: 60    DOB: 01/01/1954
<div>Print    Edit    Cancel</div>	

## Profile 100 - Personal and Family History



Date  

Education (yrs)	<input type="text" value="12"/> (3-24)	Highest Wt	<input type="text" value="249"/> lbs (last 5yrs)
Occupation	<input type="text" value="Comcast Cable"/>	Lowest Wt	<input type="text" value="226"/> lbs
Work Time	<input type="text" value=""/>	Desired Wt	<input type="text" value="215"/> lbs
Shift Work	<input type="checkbox"/>	Reported Wt	<input type="text" value="239.6"/> lbs
		Height	<input type="text" value="65"/> inches

### Family History

Colorectal Cancer	<input type="checkbox"/>	High Cholesterol	<input type="checkbox"/>
Breast Cancer	<input type="checkbox"/>	Osteoporosis	<input type="checkbox"/>
Ovarian Cancer	<input type="checkbox"/>	Diabetes	<input type="checkbox"/>
Prostate Cancer	<input type="checkbox"/>	Stroke	<input type="checkbox"/>
High Blood Pressure	<input type="checkbox"/>	Coronary Heart Disease	<input type="checkbox"/>

Living Alone	<input type="checkbox"/>	Daughter(s)-child	<input type="text" value=""/>
Spouse	<input type="text" value="Good"/>	Son(s)-child	<input type="text" value=""/>
Partner	<input type="text" value=""/>	Daughter(s)-teen	<input type="text" value=""/>
Infant	<input type="text" value=""/>	Son(s)-teen	<input type="text" value=""/>
		Daughter(s)-Adult	<input type="text" value="Good"/>
		Son(s)-Adult	<input type="text" value="Fair"/>
		Other(s)	<input type="text" value=""/>

### Personal History

Allergies	<input type="checkbox"/>	Asthma	<input type="checkbox"/>
Anxiety	<input checked="" type="checkbox"/>	Diabetes	<input type="checkbox"/>
Sleep Disorder	<input type="checkbox"/>	High Cholesterol	<input type="checkbox"/>
Emphysema	<input type="checkbox"/>	Back Pain	<input type="checkbox"/>
Coronary Heart Disease	<input type="checkbox"/>	Skin Cancer	<input type="checkbox"/>
Migraine	<input type="checkbox"/>	Other Cancer	<input type="checkbox"/>
Depression	<input type="checkbox"/>	Describe	<input type="text" value=""/>
Osteoporosis	<input type="checkbox"/>	Gout	<input type="checkbox"/>
Pregnant	<input type="checkbox"/>	Kidney	<input type="checkbox"/>
Arthritis	<input checked="" type="checkbox"/>	Other	<input type="checkbox"/>
High Blood Pressure	<input type="checkbox"/>	Describe	<input type="text" value=""/>

Medications


# Profile 200 - Nutrition and Eating Assessment Survey

This survey is to gather patient nutrition and eating habits history.

Joe Murph		Age: 60 DOB: 01/01/1954		Print	Edit	Cancel
Date	10/23/2014	Binging?	<input type="checkbox"/>	X		
		Number of Binges/week	<input type="text"/>			
Dietary Restrictions	<input type="checkbox"/>	Cups of Water/day	<input type="text"/>			
Vegan Vegetarian	<input type="checkbox"/>	Cups of Caffeine/day	<input type="text"/>			
Lacto-Ovo Vegetarian	<input type="checkbox"/>	Alcohol: Last 6 months	<input type="checkbox"/>			
Other Vegetarian	<input type="checkbox"/>	Alcoholic Drinks/week	<input type="text"/>			
Medical Restriction	<input type="checkbox"/>	Milk Preference	<input type="text"/>	▼		
Medical Restriction Text	<input type="text"/>	Fat Preference	<input type="text"/>	▼		
Milk Intolerance	<input type="checkbox"/>	Adds Salt to Food	<input type="text"/>	▼		
Meals/day	<input type="text"/>	Salty Food	<input type="text"/>	▼		
Snacks/day	<input type="text"/>	Fiber Preferences	<input type="text"/>	▼		
Prepared Meals/day	<input type="text"/>	Supplements?	<input type="checkbox"/>			
Eats Out/week	<input type="text"/>	Supplements Text	<input type="text"/>			
Eats Breakfast	<input type="text"/>	Activity Level	<input type="text"/>	▼		
Skips Meals	<input type="text"/>	Exercise	<input type="text"/>	▼		
Eats Night Meals	<input type="text"/>	Exercise Restrictions	<input type="checkbox"/>			
Appetite	<input type="text"/>	Smokes	<input type="checkbox"/>			
Satisfied	<input type="text"/>	Cigarettes per day	<input type="text"/>			
		Other Tobacco	<input type="checkbox"/>			
		Readiness to Change	<input type="text"/>	▼		

# Profile 300 - Functional Assessment Survey

This survey identifies the physical and emotional functional status.

 Joe Murph

Age: 60    DOB: 01/01/1954


Print

Edit

Cancel

Date

10/23/2014



✕

Serious Health Problem(s)

☐

General Health

▼

Body Pain

▼

Physical Health

▼

Emotional Health

▼

Social Functioning

▼

Stress Calmness

▼

Energy Level

▼

Feeling Blue

▼

Happiness

▼

Groceries Limiting

▼

Stairs Limiting

▼

Walking Limiting

▼

Calculate Scores

PCS Results

MCS Results

# Food Frequency Assessment Survey

This survey is a food frequency assessment of the patient's diet. After you fill out this survey you can calculate the patient's dietary analysis. See the patient's session dietary analysis section on page 50. You can have your patient fill this survey out online using the complete survey questionnaire link.

Joe Murph

Age: 60 DOB: 01/01/1954

PrintEditCancel

Food Frequency Surveys


Date7/30/2013

Average Servings Per Day

Refined Grain	0	Fish High Fat	0
Whole Grain	0	Fish Other Fat	0
Fruit	2	Meat Analogue	0
Vegetables	0	Eggs	0
Starchy Vegetables	0	Egg Substitute	0
Milk Whole	0	Beans or Lentils	3
Milk Low Fat	0	Soy	0
Milk Non-Fat	0	Nuts	3
Cheese Regular	0	Mono-Oil	0
Cheese Part Skim	3	Other Oil	0
Meat High Fat	3	Butter or Lard	0
Meat Medium Fat	0	Margarine Regular	0
Meat Lean Fat	0	Margarine Soft	0
Meat Very Lean Fat	0	Sweets or Regular Soda	1
Meat Organ	0	Alcohol	0
		Caffeinated Beverages	0
		Water	9

# Nutrition Quality of Life Survey

This survey is not online.


**Joe Murph**
Age: 60    DOB: 01/01/1954

## Nutrition Quality of Life

Date  

1 = All of the time   2 = Most of the time   3 = Some of the time   4 = A little of the time   5 = None of the time


1. I ate enough food to be satisfied.	<input type="text"/>	26. My family/friends have nagged me about food I ate	<input type="text"/>
2. I had plenty of choice in the food I ate.	<input type="text"/>	27. My food needs have created stress with my family/friends.	<input type="text"/>
3. I was hungry between meals.	<input type="text"/>	28. I had problems going out to eat with my family/friends.	<input type="text"/>
4. Food was on my mind.	<input type="text"/>	29. I have cut down the amount of time I spend on work	<input type="text"/>
5. I sneaked food.	<input type="text"/>	30. I had someone I could talk to who understood the struggles I have had with food.	<input type="text"/>
6. I tasted and enjoyed food without guilt.	<input type="text"/>	31. My family/friends made it difficult to stick to the food I thought I should eat.	<input type="text"/>
7. I could afford to buy the food that was best for me.	<input type="text"/>	32. My food-related condition has caused problems with sexual relations.	<input type="text"/>
8. I took time to eat the food that was best for me.	<input type="text"/>		
9. I, or someone else, took time to shop and prepare the food that was best for me.	<input type="text"/>		
Score 1	<input type="text"/>		
10. Liked the way I look.	<input type="text"/>		
11. Liked the way my clothes fit.	<input type="text"/>	Score 4	<input type="text"/>
12. Beat myself up when I ate the food I felt I shouldn't have.	<input type="text"/>	33. Walking at a moderate pace for 30 minutes.	<input type="text"/>
13. Took time for myself.	<input type="text"/>	34. Walking slowly for 10 minutes.	<input type="text"/>
14. Was pleased with the way I managed what I ate.	<input type="text"/>	35. Walking up a flight of stairs.	<input type="text"/>
15. Was confused about the food I should eat.	<input type="text"/>	36. Bending or kneeling to pick things up.	<input type="text"/>
Score 2	<input type="text"/>	37. Getting up off the floor.	<input type="text"/>
16. Rewarded myself with food.	<input type="text"/>	38. Needing to use the bathroom so often I couldn't go out of the house.	<input type="text"/>
17. Was happy with the food I ate.	<input type="text"/>	39. Getting a good night's sleep.	<input type="text"/>
18. Felt guilty about the food I ate.	<input type="text"/>	40. Breathing comfortably.	<input type="text"/>
19. Felt that food was controlling me.	<input type="text"/>	41. Having enough energy to do what I wanted to do.	<input type="text"/>
20. Felt depressed about the way I look.	<input type="text"/>	Score 5	<input type="text"/>
21. Felt depressed about the food I ate.	<input type="text"/>	42. Knew what type of food I should have been eating for my healthy lifestyle.	<input type="text"/>
22. Felt that changing the food I ate would make life	<input type="text"/>	43. Knew the amount of food I could eat.	<input type="text"/>
23. Was frustrated about limiting the food I ate.	<input type="text"/>	44. Knew when to eat.	<input type="text"/>
24. Was frustrated about how long it took to improve	<input type="text"/>	45. Made healthy food choices.	<input type="text"/>
25. Was angry that I had to change what and how	<input type="text"/>	46. Ate the recommended amount of food.	<input type="text"/>
Score 3	<input type="text"/>	47. Was eating when I should be eating.	<input type="text"/>
		48. Planned ahead to have healthy food when I needed it	<input type="text"/>
		49. I felt confident that I could trust myself when faced with difficult food choices.	<input type="text"/>
		50. I felt confident that I would be able to live the rest of my life with these changes in my food.	<input type="text"/>

**Calculate Scores**

Score 6   
Score Total

# Daily Blood Glucose Survey

Track your patient's blood glucose levels. This survey is not online.

 Joe Murph

Age: 60 DOB: 01/01/1954

Print

Edit


Cancel

Daily Blood Glucose Survey

×

Date

10/23/2014



Early AM Glucose

Number of High or Low Episodes in Last 24 hours

Breakfast

Insulin Type

Before (Fasting) Glucose

Meter Used

Insulin

Carbohydrate

Note

After Glucose

Lunch

Before Glucose

Insulin

Carbohydrate

After Glucose

Dinner

Before Glucose

Insulin

Carbohydrate

After Glucose

Bed Time

Glucose

Insulin

Carbohydrate

## Import Online Surveys

This feature found on the “Home” tab allows you to know if patients have completed online forms and then allows you to import the information.

To check and then import patient data from your online forms go to the “Home” tab, click the button labeled “Import Online Surveys and Patients.” The program will check the secure online server for available patient records, a message box will tell you the number of surveys available to import.

## Import Patient(s) from Enrollment Survey

### Fields:

**Patient to Import** - Shows patient name to be imported.

**Merge with Patient** - If the patient is already in the database this new data should be merged with existing data in your database so you don't create duplicates. If this field is blank it will create a new patient.



**Physician** - Shows physician name to be imported.

**Link to Physician** - Physician to link to in your database. Make sure you check to see if the physician is already in the database. If this is left blank then it will create a new physician and ask for an NPI number.

**Physician NPI** - Enter the NPI number if this is a new physician. Use the “Lookup NPI” button to look it up.

**Insurance Company** - Shows insurance company to be imported.

**Link to Insurance** - Choose insurance already in database. Make sure you check to see if the insurance company is already in the database. If this is left blank then it will create a new insurance company record. Click the “...” button to select the insurance company that is already in your database.

**Import Patient** - Imports the patient information. (this is a lot better than typing it all in yourself)

**Delete** - Doesn't import the patient and you can't import them again. Be careful this can not be undone.

Merge with a patient, physician or insurance already in your database. (checks for duplicates automatically but will not catch it if spelling is different)

The screenshot shows the 'Import Patient' dialog box with the following fields and controls:

- Patient to Import:** Jack HEB (6/5/1998)
- Merge with Patient:** (empty field) with a 'Clear' button and a merge icon.
- Physician:** John Richards
- Phone:** (503) 234-3423
- Link to Physician:** (dropdown menu)
- Physician NPI:** (empty field) with a 'Lookup NPI' button.
- Insurance Company:** Aetna
- Phone:** (503) 333-3433
- Link to Insurance:** Aetna with a '....' button and the text 'Possible Match' in red.
- Buttons:** 'Import Patient' and 'Delete'.
- Status:** 1 of 1 Patients to Import

Annotations with arrows point to the following elements:

- The 'Patient to Import' field.
- The 'Merge with Patient' field.
- The 'Physician' field.
- The 'Link to Physician' dropdown.
- The 'Physician NPI' field.
- The 'Lookup NPI' button.
- The 'Link to Insurance' field.
- The 'Delete' button.

## Import Surveys(s)

Import Online Surveys

Surveys To Import

Do not import survey

**Make Sure Patient Names Match**

Survey	Date Taken	Patient	Name on Survey	Delete
Food Frequency Assessment	5/20/2014	<a href="#">Sally Green (09/25/1962)</a>	Sally Green (9/25/1965)	<input type="checkbox"/>
Profile 200	5/16/2014	<a href="#">Sally Green (09/25/1962)</a>	Sally Green (1/1/1989)	<input type="checkbox"/>
Food Frequency Assessment	7/9/2014	<a href="#">Search Patient</a>	peggy ramon (7/9/2014)	<input type="checkbox"/>
Food Frequency Assessment	9/2/2014	<a href="#">Search Patient</a>	A W (1/1/1960)	<input type="checkbox"/>
Food Frequency Assessment	9/3/2014	<a href="#">Jack HEB (06/05/1998)</a>	Jack HEB (6/5/1998)	<input type="checkbox"/>
Food Frequency Assessment	9/18/2014	<a href="#">Search Patient</a>	Gg Dd (1/11/1931)	<input type="checkbox"/>

Make sure every survey is attached to a patient before you can import all of them.

Import Surveys

### Fields:

**Patient** - Click on this field to search for the patient if it says "Search Patient" or is the wrong one.

**Import Surveys Button** - After all surveys are matched correctly click this button to import them.



## Patient Labs

Here you will be able to record your patient's lab results and consequently track them over time.

<a href="#">Home</a>	<a href="#">Search</a>	<a href="#">Report Center</a>	<a href="#">Administration</a>
----------------------	------------------------	-------------------------------	--------------------------------

Demographic	Joe Murph	Age: 60 DOB: 01/01/1954	<button>Print</button> <button>Edit</button> <button>Cancel</button>
-------------	-----------	-------------------------	--

Lab Date:

Lab	Value	Units	Delete
HDL Cholesterol	44	mg/dL	<a href="#">Delete</a>
Hemoglobin A1c	6.2	%	<a href="#">Delete</a>
LDL Cholesterol	117	mg/dL	<a href="#">Delete</a>
Total Cholesterol	189	mg/dL	<a href="#">Delete</a>
Triglycerides	143	mg/dL	<a href="#">Delete</a>

New

Session(s)

- 11/4/2013
- 8/16/2013

### Fields:

**Lab Date** - Date of the lab results. All labs for this date will be displayed below.

**Lab** - Name of Lab. \*You can add more labs in the administration -> values -> labs tab.

**Value** - Lab result.

**Units** - Units of lab result.

**Delete** - Deletes this lab result.

**Print Button** - Prints a report of these lab results.

# Patient Goals

The goals section allows you to record your patient's target values for labs, clinical tests and nutrient goals. Here is also where you will prepare your client's nutrition prescription.

## Patient Clinical Goals

Insert Template

Print

Edit

Cancel

Clinical

Weight

200.3

Body Mass Index

28

Calculate

Waist Girth

Waist to Hip Ratio

Systolic Blood Pressure

Diastolic Blood Pressure

(Range)

Resting Heart Rate

Percent Body Fat

Exercise

Activity Intensity

Activity Frequency / Week

Activity Duration (min.)

Calculate

Activity Energy Expenditure

Glucose Goals

(Range)

Bed Time SMBG

Preprandial SMBG

Glucose 2 Hours After Meal

The Clinical goals may be entered during the interview or after a comprehensive assessment. You may want to select a template of goals for those values commonly assessed. These goals may be from a National health organization such as the lipid standards from the National Cholesterol Education Program. You can create and edit these templates in the administration -> templates tab.

### Fields:

**Insert Templates Drop Down** - Insert goals from a template.

**Clinical Section** - Basic clinical values. Has a BMI calculator.

**Exercise Section** - Prescribe the exercise you want the patient to do. Calculate the activity energy expenditure.

**Glucose Section** - Diabetic glucose goals.

**Print Button** - Report of the current clinical goals.

# Patient Dietary Goals

Here you may enter the goal or prescription values you want for your patient. Enter the total calories (Kcals Intake) and then the nutrient values and percentages you require. By entering the percent it will automatically calculate the grams and visa versa for fat, protein and carbohydrate. You may record the DRIs values for other nutrients by selecting the appropriate age and gender categories in the DRI selector tool.

When you have finished recording goal values you may calculate Diabetic Exchanges and Food groups. Click the calculate button and suggested food group values will be provided. You may want to set-up a template of goals for those strategies you plan to use regularly and then individualize as needed. This may speed up the preparation of your goals.

You can change the exchange values and you will see the impact of those changes in the major macronutrients (protein, carbohydrate, fat and total calories). Click on the recalculate button to convert the exchange values to FGP food groups.

If % is input then grams are calculated

Fat %	25	Folate	400
Fat (g)	44.4	B6	1.7
Mono Saturated Fat %	12	Vitamin E	15
Saturated Fat %	7	Calcium	1200
Cholesterol	100	Iron	8
Protein %	20	Phosphorous	4000
Protein (g)	80	Potassium	4700
<input type="button" value="Calculator"/>		Sodium	2300
Carbohydrate %	55	Alcohol (drinks/day)	2
Carbohydrate	220	Caffeine (cups/day)	2
		Water (cups/day)	8

All these values calculated based on DRI Selector

DRI Selector

Male

51 - 70 years

Basic Food Groups

Bread	8
Fruit	3
Vegetable	6
Milk	2
Meat	4
Fats	6
Fat and Sugar	0
<input type="button" value="Re-Calculate"/>	

Re-Calculate Food Groups after changing Exchanges

Exchanges

Starch	8
Fruit	3
Vegetable	6
Milk Non-Fat or 1%	2
Milk Reduced Fat	0
Milk Whole	0
Other Carbohydrate	0
Meat Very Lean	4
Meat Lean	0
Meat Medium Fat	0
Meat High Fat	0
Fat	6
Total Fat (g)	41
Total Protein (g)	80
Total Carbohydrate (g)	219
Total Calories	1560
<input type="button" value="Calculate Exchanges and Food Groups"/>	

Calculate Exchanges after inputting dietary intake

## Fields:

**Insert Templates Drop Down** - Insert goals from a template.

**Dietary Intake Section** - Basic dietary values. Has a protein calculator.

**DRI Section** - Use the DRI selector to calculate your DRIs.

**Exchanges Section** - After the dietary intake section is filled out you can click the button at the calculate exchanges and food groups button at the bottom to calculate them.

**Basic Food Groups Section** - Click the button below them to re-calculate them.

# Patient Lab Goals

Here you may enter the lab goals for the patient.

Clinical

Dietary

Labs

Insert Template 

Edit

Cancel

Lab	Goal	Units	Delete
C-Reactive Protein		mg/L	Delete
GFR			Delete
Glucose		mg/dL	Delete
HDL Cholesterol		mg/dL	Delete
Hemoglobin		g/dL	Delete
Hemoglobin A1c		%	Delete
Homocysteine		μmol/L	Delete
Intact PTH		pg/ml	Delete
LDL Cholesterol		mg/dL	Delete
Micro Albumin		mcg/24hrs	Delete
Serum Albumin		g/dL	Delete
Serum Calcium		mg/dL	Delete
Serum CO2		mm Hg	Delete
Serum Creatinine		mg/dL	Delete

## Fields:

**Insert Templates Drop Down** - Insert goals from a template.

**Lab** - Name of lab goal.

**Goal** - Lab goal value.

**Units** - Units of lab goal.

**Delete** - Delete the lab goal.

## Patient Behavioral Goals

Here you may enter the behavioral goals for the patient.

[illegible]

**Fields:**

**Behavior Goal** - Insert goals from a behavior template.

**Goal %** - Percent adherence to the goal

**Category-** Category template of goal

**Delete** - Delete the behavior goal.

# Patient Session

Here you record your start and stop times; identify the diagnosis, facility, and MNT provider responsible for this visit. All this information is required for submitting claims creating your chart documentation; vital in the case of a future audit. Be sure to click “Create” after updating these fields to create a new record. Then start building your session notes.

Here in the session window you may record, view and edit data collected from your counseling session. During the assessment portion of your visit, you populate the clinical and dietary data screens. At the end of your visit you may prepare your recommendations (create a tailored list to handout) write your notes and finally share your note with your referring physician or post your notes to the medical record.

Write your session notes here.

Digitally Sign Notes      Go to class (only available if in class)

**Home** | **Search** | **Report Center** | **Administration**

**Demographic**  
 Joe Murph      Age: 62    DOB: 01/01/1954    Print    Edit    Cancel  
 Date: 7/25/2014    Start Time: 06:30 AM    End Time: 07:45 AM    Total Time: 75 min.  
 Diagnosis: 2724 - HYPERLIPIDEMIA    Facility: Office    Provider: Joe Demo RD

**Session Notes**    Sign    View Class

**Initial Visit**  
 This patient wanted Medical Nutrition Therapy for their hyperlipidemia as identified by

**Clinical**  
 Height: 71 in    Weight: 213.0 lb    BMI: 29.8    Blood Pressure: / mmHg

**Dietary**  
 Expenditure: 2036 cal    Intake: 2,237 cal    Fat: 137 g    55 %

**Billing**  
 Edit    New    Billing Options:    X

Item	Charge	Units	Adjustment	Payments	Balance	Status
96152	\$187.50	5			\$187.50	Claim Sent

**Payments**    Edit    New    **Claims**    Edit    New

Date	Payer	Amount

Insurance	Status
Healthnet - Oregon	Submitted

Session Billing    Create/Edit Payments    Create/Edit Claim    Delete Session

## Fields:

**Date** - Date of service.

**Start Time** - Time session started.

**End Time** - Time session end. Total time is automatically calculated.

**Diagnosis** - Select a session diagnosis. List is from the diagnosis' you created in the patient diagnosis tab.

**Facility** - Select the facility you are using for this visit.

**Provider** - Select the provider who is seeing the patient.

**Sign Button** - Added text at the bottom of your notes that this note was digitally signed. Only this user can edit the notes after signing them.

**View Class Button** - If this is a class this will take you back to the class form.

**Notes Button** - Takes you to the session notes form where you write your notes.

**Behavioral Button** - Takes you to the session behavioral values form.

**Clinical Button** - Takes you to the session clinical values form.

**Dietary Button** - Takes you to the session dietary assessment form.

**Billing Button** - Takes you to the session billing form. Where you will select a CPT Code for this session.

**Claims Edit/New Buttons** - Allows you to create or edit a claim for this session.

**Payments Edit/New Buttons** - Allows you to create or edit a payment for a CPT Code or product for this session.

**Delete Session Button** - Allows you to delete this session.

# Patient Session Notes

This is the form where you create your session notes. Here you have access to many tools helping you create your notes. You can insert templates that you may have customized for your practice. Insert nutrition care process standardized nutrition terminology by inserting a variety of assessment data, a PES statement, intervention notes and monitoring and evaluation values.

The screenshot shows the 'Patient Session Notes' form for Joe Murph. Annotations include:

- Insert Custom Templates into your Notes:** Points to the 'Template' dropdown menu.
- Insert your Nutrition Diagnosis, Interventions and the data you are Monitoring and Evaluating:** Points to the 'Diagnosis', 'Intervention', and 'Monitoring and Evaluation' tabs.
- Insert Data you have collected on this patient into your Notes:** Points to the 'Assessments' section.

The form includes a sidebar with navigation links (Home, Search, Report Center, Administration) and a patient information header (Joe Murph, Age: 60, DOB: 01/01/1954, Date: 8/16/2013, Time: 09:15 AM - 10:15 AM). The main content area is divided into sections: Initial Visit, Nutrition Diagnosis, Intervention, and Monitoring and Evaluation.

## Fields:

**Templates List** - Lists all your template categories. Select a category and it will take you to an individual template to insert.

**Diagnosis Button** - Pops up PES statement creator. Helps you select a nutrition diagnosis and create the PES statement.

The 'Insert Diagnosis' dialog box is shown with the following fields:

- Search Diagnosis:** A text input field.
- Diagnosis:** A text input field containing 'excessive energy intake'.
- Etiology:** A text input field containing 'poor food choices'.
- Signs and Symptoms:** A text input field containing 'high BMI (>30) and high fat %'.

Buttons for 'Save' and 'Cancel' are located at the top right. An 'Example' section is visible at the bottom left.



**Intervention Button** - Pops up Interventions form where you select interventions for this patient. Note: You can also create a template with interventions and paste them into your notes.

Insert a group of interventions you have saved      Insert saved interventions

**Insert Interventions**

A-Z Category  Search

adaptive eating device  
bioactive substance management  
biotin supplement therapy  
boron supplement therapy  
calcium supplement therapy  
carbohydrate modified diet  
chloride supplement therapy  
chromium supplement therapy  
cobalt supplement therapy  
collaboration by nutrition professional with other nutrition professionals  
collaboration by nutrition professional with other providers  
commercial beverage, medical food supplement therapy  
commercial food, medical food supplement therapy

Insert Template

Saved Interventions

Copyright 2013 American Dietetic Association

List of standardized intervention terms      List of interventions you have saved

**Monitoring and Evaluation Button** - Pops up the monitoring and evaluation form. You can select assessments or data you have collected on this patient and track it over time to see the change.

Insert saved Assessments to notes.  
Will show progress over time.

**Monitoring and Evaluation**

Assessments

Calories  
Water  
Fat  
Fat %  
Saturated Fat %  
Mono-Saturated Fat %  
Cholesterol  
Protein  
Protein %  
Carbohydrate  
Carbohydrate %  
Fiber

Assessments to Monitor and Evaluate

Fat %  
Fiber  
Total Cholesterol  
LDL Cholesterol  
HDL Cholesterol  
Weight  
BMI

List of Assessments and Data you have collected on this patient that you can track      List of saved Assessments to Monitor and Evaluate

**Sign Button** - Added text at the bottom of your notes that this note was digitally signed. Only this user can edit the notes after signing them.

**All Session Notes Button** - Pops up a form with all previous session notes for this patient for your reference.

**Assessments List** - Select an item here to insert data you have collected on this patient into your notes.



## Patient Session Behavioral Values

In this form you can record a patient's behavioral values. Select a template from the drop down and put in the adherence to that template.

[illegible]

### Fields:

### Behavior- List of behavioral templates

**Adherence-** Percent adherence to template

**Delete-** Delete session behavior

## Patient Session Clinical Values

In this form you can record a patient's clinical values. It will automatically calculate BMI for you if you put in height and weight. It calculates TEE & RMR after entering the weight and clicking the calculate button.

Home	Search	Report Center	Administration
Demographic	<b>Joe Murph</b> Age: 60    DOB: 01/01/1954 <input type="button" value="Print"/> <input type="button" value="Edit"/> <input type="button" value="Cancel"/>		
History	Date: 8/16/2013    Time: 09:15 AM - 10:15 AM		
Insurance	Height (inches)	<input type="text" value="71"/>	Base Line Activity Level <input type="text" value="1.1"/>
Physician	Weight (lbs)	<input type="text" value="247"/>	<b>Intentional Activity</b>
Diagnosis	Body Mass Index (BMI)	<input type="text" value="34.5"/>	Intensity <input type="text" value="3.1"/>
Medications	Blood Pressure - Systolic	<input type="text" value="122"/>	Frequency/Week <input type="text" value="1"/>
Surveys	Blood Pressure - Diastolic	<input type="text" value="72"/>	Duration (minutes) <input type="text" value="20"/>
Labs	Resting Heart Rate	<input type="text"/>	
Goals	Percent Body Fat	<input type="text"/>	Resting Metabolic Rate (RMR) <input type="text" value="1960"/>
Billing	Waist Girth	<input type="text"/>	Activity Energy Expenditure (AEE) <input type="text" value="17"/>
	Hip Girth	<input type="text"/>	Total Energy Expenditure (TEE) <input type="text" value="2173"/>
	Waist to Hip Ratio	<input type="text"/>	<input type="button" value="Calculate RMR, AEE, and TEE"/>
	Random Glucose	<input type="text"/>	
<input type="button" value="New"/>			
Session(s) 11/4/2013 <b>8/16/2013</b>			

## Fields:

**Height** - Height in inches

**Weight** - Weight in lbs

**Height** - BMI - auto calculated if height and weight are filled in.

**Base Line Activity Level** - Enter or select a value for calculating Total Energy Expenditure (TEE)

**Resting Metabolic Rate (RMR)** - Calculated by clicking the calculate button below.

**Activity Energy Expenditure (AEE)** - Calculated based on Intentional Activity values in section above.

**Total Energy Expenditure (TEE)** - Total calories expended in a day, calculated from calculate button below.

## Patient Session Dietary Values

In this section you can enter your dietary analysis values. This can be calculated for you if you had the patient fill out a food frequency survey.

## Calculate Dietary Analysis based on Food Frequency Survey

Home
Search
Report Center
Administration

Joe Murph

Age: 60 DOB: 01/01/1954

Print Edit Cancel

Insert FFA

Demographic

History

Insurance

Physician

Diagnosis

Medications

Surveys

Labs

Goals

Billing

**Content Estimates**

Total Energy Expenditure (TEE)	2173
Energy Intake	2237
Fat (g)	137
Fat %	55
Mono Saturated Fat %	24
Saturated Fat %	16
Cholesterol	277
Protein	119
Protein %	21
Carbohydrate	139
Carbohydrate %	25
Fiber	26
Folate	436
B6	2.0
Vitamin E	9.0
Iron	15
Calcium	700

**Food Groups**

Bread	0
Fruit	2
Vegetable	0
Milk	3
Meat	9
Fats	0
High Fat Sugar	0.5

**Exchanges**

Starch	3.5
Fruit	2
Vegetables	0
Other	1.1
Milk Non-Fat or 1%	0
Milk Reduced Fat	0
Milk Whole	0
Meat Very Lean	3

### Fields:

**Insert FFA** - Calculate dietary analysis based on the food frequency survey you select.

**Content Estimates** - Basic Dietary values

**Food Groups** - The calculated number of servings from each of the basic food groups

**Exchanges** - The calculated number of servings from each exchange group his eating pattern represents.

## Patient Session Billing

In this form you can create a billed item(s) for this session. This includes CPT Codes and products. Only one time based CPT Code can be created here. You can add payments and notes to the billed item.

51

Home
Search
Report Center
Administration

Joe Murph
Edit
Cancel

Demographic
History
Insurance
Physician
Diagnosis
Medications
Surveys
Labs
Goals
Billing

Type
CPT Code
Billed Date
Charge
Units
Adjustment
Status
Notes
Add Note

CPT Code
97802
8/16/2013
\$150.00
4
(\$20.00)
Claim Sent

Payments
Edit
New

Payment Date
Amount
Payer
8/16/2013
\$15.00
Patient
8/19/2013
\$50.00
CIGNA
9/9/2014
\$25.00
Healthnet - Oregon

Balance
\$40.00

Patient Responsible for remainder
Edit

By: Jim Demo
Date: 08/20/2013 02:26 PM

New

Session(s)
11/4/2013
8/16/2013

## Fields:

**Type** - Select "CPT Code" or "Product"

**CPT Code** - Select a CPT Code

**Product** - Select a Product

**Billed Date** - This should be your session date, you can edit it if this billed item isn't attached to a session.

**Charge** - Total charged for this billed item

**Units** - CPT Code units or quantity for products

**Adjustment** - Claim adjustments

**Status** - Status of billed item

**Notes** - Create notes on this billed item for your reference.

**Payments** - Add or edit patient and insurance payments for this billed item.

# Patient Payments

Payments can be accessed in the patient session, patient billing section and the search payments tab.

Select Patient or Insurance →

Will be automatically applied to session. →

Patient	Date	Applied	Item
---------	------	---------	------

## Billing

Here you view and record the billing elements of this visit including CPT codes, claims, payments and adjustments. Most of the patient's billing is done in the session tab.

## Billed Items

Here you can view all the patient's billed items. Create a super bill/receipt for a billed item or create a statement/invoice for all the patient's billed items. The super bill will invoice only one session at a time.

Home

Search

Report Center

Administration

Demographic

History

Insurance

Physician

Diagnosis

Medications

Surveys

Labs

Goals

Billing

Joe Murph

Age: 60 DOB: 01/01/1954

Statement

Billed Items

Claims

Payments

Edit

New Product

X

Date	Item	Charge	Units	Adjustment	Payments	Balance	Status
11/4/2013	97803	\$225.00	6	(\$55.00)	(\$55.00)	\$115.00	Claim Sent
8/16/2013	97802	\$150.00	4	(\$20.00)	(\$90.00)	\$40.00	Claim Sent

Super Bill

New

Session(s)

11/4/2013

8/16/2013

\* CPT Codes have to be created from a session

## Patient Claims

Here you can view all the patient's claims and their status. You can create a claim in this window (it is easier to create the claim in the patient sessions tab). You can create the electronic export file for Office Ally here (it is easier to create the export file in the search claims tab). \*If you have a CPT code that is not time based you can create a claim for it here.

Home	Search	Report Center	Administration															
Demographic	Joe Murph Age: 60 DOB: 01/01/1954 <a href="#">Statement</a>																	
History	Billed Items Claims Payments																	
Insurance																		
Physician	<a href="#">Edit</a> <a href="#">New</a> <a href="#">X</a>																	
Diagnosis	<table border="1"> <thead> <tr> <th>Date of Service</th> <th>Insurance</th> <th>CPT Code</th> <th>Charges</th> <th>Submitted Date</th> </tr> </thead> <tbody> <tr> <td>11/4/2013</td> <td>Healthnet - Oregon</td> <td>97803</td> <td>\$225.00</td> <td>11/15/2013</td> </tr> <tr> <td>8/16/2013</td> <td>Healthnet - Oregon</td> <td>97802</td> <td>\$150.00</td> <td>10/23/2013</td> </tr> </tbody> </table>			Date of Service	Insurance	CPT Code	Charges	Submitted Date	11/4/2013	Healthnet - Oregon	97803	\$225.00	11/15/2013	8/16/2013	Healthnet - Oregon	97802	\$150.00	10/23/2013
Date of Service	Insurance	CPT Code	Charges	Submitted Date														
11/4/2013	Healthnet - Oregon	97803	\$225.00	11/15/2013														
8/16/2013	Healthnet - Oregon	97802	\$150.00	10/23/2013														
Medications																		
Surveys																		
Labs																		
Goals																		
Billing	<a href="#">Submit Claims - Electronically</a>																	
New																		
Session(s)																		
7/25/2014																		
11/4/2013																		
8/16/2013																		

## Patient Payments

Here you can view all of a patient's payments.

Home	Search	Report Center	Administration																				
Demographic	Joe Murph Age: 60 DOB: 01/01/1954 <a href="#">Statement</a>																						
History	Billed Items Claims Payments																						
Insurance																							
Physician	<a href="#">Edit</a> <a href="#">New</a> <a href="#">X</a>																						
Diagnosis	<table border="1"> <thead> <tr> <th>Date</th> <th>Payer</th> <th>Amount</th> <th>Applied</th> </tr> </thead> <tbody> <tr> <td>9/9/2014</td> <td>Healthnet - Oregon</td> <td>\$25.00</td> <td>\$25.00</td> </tr> <tr> <td>9/9/2014</td> <td>Aetna</td> <td>\$55.00</td> <td>\$55.00</td> </tr> <tr> <td>8/19/2013</td> <td>CIGNA</td> <td>\$50.00</td> <td>\$50.00</td> </tr> <tr> <td>8/16/2013</td> <td>Patient</td> <td>\$15.00</td> <td>\$15.00</td> </tr> </tbody> </table>			Date	Payer	Amount	Applied	9/9/2014	Healthnet - Oregon	\$25.00	\$25.00	9/9/2014	Aetna	\$55.00	\$55.00	8/19/2013	CIGNA	\$50.00	\$50.00	8/16/2013	Patient	\$15.00	\$15.00
Date	Payer	Amount	Applied																				
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New																							
Session(s)																							
7/25/2014																							
11/4/2013																							
8/16/2013																							

Enter Payments from an Explanation of Benefits (EOB) document from insurance. (EOB Payments)

Easily enter payments and adjustments from explanation of benefit documents that you receive from your insurance company. To open this form click on the “EOB Payment” button in the “Search Payments” tab, or on the “EOB Payment” button in the payments form.

The screenshot shows a software interface with a top navigation bar containing 'Home', 'Search', 'Report Center', and 'Administration'. Below this is a form for entering payment information. On the left, a text label 'List of patients with balances from this insurance company' has an arrow pointing to the 'Patient' column of a table. The form includes fields for 'Insurance' (set to 'CIGNA'), 'Payment Date' (10/2/2014), 'Payment Method' (Check), 'Check Number', 'Amount' (\$55.00), and 'Un-Applied' (\$55.00). Buttons for 'Edit', 'New EOB', and 'Enter New Payment' are present. The main table lists two patients: 'Joe JTAtest' and 'Joe Monk'. Each patient has a list of charges with columns for CPT Code, Date, Charge, Units, Adjustment, Payments, and Balance. For Joe JTAtest, charges are 97802 (\$150.00), 97803 (\$75.00), and 97803 (\$150.00). For Joe Monk, charges are 97802 (\$75.00), 97804 (\$50.00), G0109 (\$50.00), and 97804 (\$50.00). Patient totals are shown at the bottom of each section. On the right side of the table, there are icons for 'Apply Payments/Adjustments' and 'Add/View Notes', with arrows pointing to them from labels below the table.

Patient	CPT Code	Date	Charge	Units	Adjustment	Payments	Balance
Joe JTAtest	97802	9/17/2014	\$150.00	4		(\$20.00)	\$130.00
	97803	9/19/2014	\$75.00	2		(\$20.00)	\$55.00
	97803	9/20/2014	\$150.00	4		(\$15.00)	\$135.00
Patient Total:			\$375.00			(\$55.00)	\$320.00
Joe Monk	97802	10/23/2013	\$75.00	2			\$75.00
	97804	10/23/2013	\$50.00	2			\$50.00
	G0109	10/24/2013	\$50.00	2			\$50.00
	97804	7/25/2014	\$50.00	2			\$50.00
Patient Total:			\$225.00				\$225.00

## Apply EOB Payment

The screenshot shows a window titled 'EOB Billed Item' for patient 'Joe Monk'. It contains fields for 'CPT Code: 97802', 'Date of Service: 10/23/2013', 'Line Charge: \$75.00', and 'Status: Claim Sent'. There is a 'Create' button. Below these are fields for 'Adjustment', 'Change Status' (a dropdown menu), and 'Applied Amount'. An 'Adjust' button is next to the 'Applied Amount' field. A text label 'Adjust remaining balance and set status to "Closed"' has an arrow pointing to the 'Adjust' button. At the bottom right, it says 'Un-Applied: \$55.00'.

## Claims

Below is our CMS 1500 claim form window. You can edit any field in the claim form before you print it out. You can add up to 6 CPT codes per claim form. When you create a claim all the required fields should be filled in. You can print the form out on paper with or without the form background. The claim can also be sent electronically via office ally (see search claims form).



# CMS 1500 Form

Submitted: 11/15/2013

Insurance Healthnet - Oregon

1. MEDICARE MEDICAID TRICARE <input type="radio"/> (Medicare #) <input type="radio"/> (Medicaid #) <input type="radio"/> (ID#/DoD#)		CHAMPVA GROUP HEALTH PLAN FECA BLK LUNG OTHER <input type="radio"/> (Member ID#) <input type="radio"/> (ID#) <input type="radio"/> (ID#) <input type="radio"/> (ID#)		1a. Insured's ID Number AE23434323	
2. Patient's Name Last Murph First Joe MI		3. Patient's Birthdate 1/1/1954		4. Insured's Name Copy from Patient Last SAME First MI	
5. Patient's Address (No. Street) 825 S 55th St.		6. Patient Relationship to Insured Self <input checked="" type="radio"/> Spouse <input type="radio"/> Child <input type="radio"/> Other <input type="radio"/>		7. Insured's Address (No. Street)	
City Medalla		8. Reserved for NUCC Use		City State	
Zip Code 97038		Telephone (111) 222-3333		Zip Code Telephone	
9. Other Insured's Name Last First MI		10. Is Patient's Condition Related To a. Employment? (Current or Previous) <input type="radio"/> Yes <input checked="" type="radio"/> No b. Auto Accident? Place (State) <input type="radio"/> Yes <input checked="" type="radio"/> No c. Other Accidents? <input type="radio"/> Yes <input checked="" type="radio"/> No		11. Insured's Policy Group or FECA Number a. Insured's Birthdate Sex M <input type="radio"/> F <input type="radio"/> b. Other Claim ID c. Insurance Plan Name or Program Name d. Is There Another Health Benefit Plan? <input type="radio"/> Yes <input checked="" type="radio"/> No If yes, return to and complete item 9 a-d	
12. Patient's or Authorized Person's Signature Signed <input checked="" type="radio"/> Yes <input type="radio"/> No		13. Insured's or Authorized Person's Signature Signed <input checked="" type="radio"/> Yes <input type="radio"/> No		14. Date of Current Illness, Injury, or Pregnancy 15. Other Date	
17. Name of Referring Physician DN Carl Inker		17a. NPI 1233343232		16. Dates Patient Unable to Work in Current Occupation From To	
19. Additional Claim Information		20. Outside Lab? <input type="radio"/> Yes <input checked="" type="radio"/> No		18. Hospitalization Dates Related To Current Services From To	
21. Diagnosis or Nature of Illness or Injury. (24E) A. 2724 B. C. D. E. F. G. H. I. J. K. L.		22. Resubmission Code Original Ref. No.		23. Prior Authorization Number	
24. A. B. C. D. Procedures, Services, or Supplies E. F. G. H. I. J.					
Date of Service Place of Service EMG CPT Code Modifier A B C D Diagnosis (A - L) Charges Units EPSDT Family Plan ID Quality Rendering Provider NPI					
1 11/4/2013 11 97803 A \$225.00 6 123456					
25. Federal Tax ID Number <input checked="" type="radio"/> SSN <input type="radio"/> EIN 1234454 26. Patient's Account No. 7 27. Accepts Assignment? <input type="radio"/> Yes <input checked="" type="radio"/> No 28. Total Charge \$225.00 29. Amount Paid \$0.00 Balance \$225.00					
31. eSignature (Electronic Claims Only) First Name Joe MI Last Name Demo Type Full Name Joe Demo Date 11/15/2013 Add CPT Code		32. Service Facility Location and Information Facility Name Office Address 111 S Sample Rd City Sample State CA Zip 94321-2323 Rendering Provider Joe Demo		33. Billing Provider Billing Provider Sample Practice Address 111 S Test Rd. City Sample State CA Zip 94323-2321 Phone (111) 111-2222 Taxonomy Code	
a. NPI		a. Billing/Group NPI		123454	



Create Secondary

# PQRS Codes

The MNT Assistant will allow you to add a limited number of PQRS CPT Codes to your claims. To get started using PQRS open up an insurance company (such as Medicare) and mark the PQRS checkbox. This will allow you to add PQRS codes to claims for that health plan. The MNT Assistant will automatically add the relevant PQRS codes to the drop down list selection depending on the patient's "BMI" and include codes for "Current Medications in the Medical Record" and "Elder Maltreatment Screen and Follow-up Plan." For details on PQRS reporting refer to the CMS PQRS website

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/index.html>.

21. Diagnosis or Nature of Illness or Injury, (24E) ICD Ind. <b>9</b>										23. Prior Authorization Number													
A. <b>A0100</b>		B.		C.		D.		Add CPT Code		Add PQRS Code		CPT Code		Description									
E.		F.		G.		H.						<b>G8427</b>		Documentation of Current Medications in the Medical Record									
I.		J.		K.		L.						<b>G8734</b>		Elder Maltreatment Screen and Follow up Plan									
24. A.		B.		C.		D. Procedures, Services, or Supplies		E.		F.		G.		H.		I.							
Date of Service		Place of Service		EMG		CPT Code		Modifier A B C D		Diagnosis (A-L)		Charges		Units		EPSDT Family Plan ID Quantity							
1 10/1/2015		11				97804				A		\$100.00		2		123456789							
2 10/1/2015		11				G8427				A		\$0.01		1		123456789							
25. Federal Tax ID Number				26. Patient's Account No.				27. Accepts Assignment?				28. Total Charge				29. Amount Paid				Balance			
123456789				13				<input type="radio"/> Yes <input checked="" type="radio"/> No				\$100.00				\$0.00				\$100.00			
31. eSignature (Electronic Claims Only)								32. Service Facility Location and Information								33. Billing Provider							
First Name <b>Andrea</b>								Facility Name <b>Office</b>								Billing Provider <b>Cascade Lifestyle Medicine</b>							

Articles and more information can be found here: [www.mntassistant.com/pqrs](http://www.mntassistant.com/pqrs)

# Classes

This is where you keep track group sessions, or courses you teach. Create a course, create the classes for the course, add students and manage reimbursement for the class.

Tabs for tracking class

Insert a Class Template

Home

Search

Report Center

Administration

Class

Billing Plan

Payments

Referral

Goals

Deposit

Title: Heart Healthy Lifestyle

Template

Print

Edit

Cancel

Description

This is the description of a course offered to a group of patients at our clinic. General description goes here.

Provider

Joe Demo

Facility

RCP

Individual Classes

Edit

New

Class Date	Start Time	End Time	Attended
7/25/2014	06:30 AM	07:45 AM	6
10/24/2013	3:45 PM	4:45 PM	6
10/23/2013	12:00 PM	1:00 PM	2

Roster

New

Switch

X

Patient

Joe Monk

Joe Murph

Kevin Scott

Joe Smow

Class Folder

Reports

Open Class Folder to Store Files

Class Reports

# Class Sessions

Here you can track group sessions. This form will allow you to write a note and have it attached to each patient attending the class. You can also easily bill and create claims for each patient attending the class.

## Insert Templates

HomeSearchReport CenterAdministration

ClassBilling PlanReferralGoalsDeposit

Heart Healthy Lifestyle

PrintEditCancel

Date7/25/2014Start Time06:30 AMEnd Time07:45 AMTotal Time: 75 min.

FacilityOfficeProviderJoe Demo

TemplatesEdit

Diabetes, Type 2  
GI Distress  
Dyslipidemia  
Gestational Diabetes Me  
Chronic Kidney Disease  
Intensive Obesity Course  
Session Values  
Pediatric Obesity

Class Notes

Patients

Name	Attendance
Monk, Joe	True
Monk, Joe	True
Monk, Joe	True
Murph, Joe	True
Scott, Kevin	True
Smow, Joe	True

Bulk EntrySign

Open a Patient's Information

Enter Attendance and Clinical Data

# Report Center

The report center is a list of practice wide reports you can use to get information about your practice. First you select a report, then select the filters you want. Print it out or view it in excel. \*Requires MS Excel 2003 or greater.

Home	Search	Report Center	Administration																
<div><div><h3>Select Report</h3><p>Reports <span>Patient Billing Report ▼</span></p><p><a href="#">Group Reports</a></p></div><div><h3>Select Filters</h3><table><tr><td>Insurance</td><td><input type="text"/></td></tr><tr><td>Patient</td><td><input type="text"/></td></tr><tr><td></td><td><a href="#">Search Patients</a></td></tr><tr><td>Claim</td><td><input type="text"/></td></tr><tr><td>Balance</td><td><input type="text"/></td></tr><tr><td>Date Range</td><td><span>Specify ▼</span></td></tr><tr><td>Date Start</td><td><input type="text"/></td></tr><tr><td>Date End</td><td><input type="text"/></td></tr></table></div><div><h3>View Report</h3><p><a href="#">Report</a></p><p><a href="#">Excel</a></p><p>Export File Location <a href="#">Edit</a></p><p><input type="text" value="C:\Apps"/></p></div></div>				Insurance	<input type="text"/>	Patient	<input type="text"/>		<a href="#">Search Patients</a>	Claim	<input type="text"/>	Balance	<input type="text"/>	Date Range	<span>Specify ▼</span>	Date Start	<input type="text"/>	Date End	<input type="text"/>
Insurance	<input type="text"/>																		
Patient	<input type="text"/>																		
	<a href="#">Search Patients</a>																		
Claim	<input type="text"/>																		
Balance	<input type="text"/>																		
Date Range	<span>Specify ▼</span>																		
Date Start	<input type="text"/>																		
Date End	<input type="text"/>																		

## Reports:

**Patient Aging Report** - View which patients have an outstanding balance. Select either dates of service 0 - 30 days old, 30 - 90 or 90+.

**Classes Report** - View classes

**Patient Label** - Print patient labels

**Patient Emails** - See all your patients emails, export to excel to use in an email program.


**Activity Report** - See your practice session activity.

**Patient Overview** - Overview of each patient.

**Payments** - View each payment and the patient is is attached to.

## Group Analysis Reports

This form will allow you to see change over time reports for each clinical, dietary or lab value. These reports will allow you to see patient, provider or practice performance.

Home	Search	Report Center	Administration
			
<h3>Select a Value</h3> <p>Session <input type="text" value="Weight"/></p> <p>OR</p> <p>Lab <input type="text"/></p>	<h3>Select Filters</h3> <p>Min. Days <input type="text"/></p> <p>Provider <input type="text"/></p> <p>Facility <input type="text"/></p> <p>Physician <input type="text"/></p> <p>Insurance <input type="text"/></p> <p>Patient <input type="text"/></p> <p><input type="button" value="Search Patients"/></p> <p>Date Range <input type="text"/></p>	<h3>View Report</h3> <p><input type="button" value="Report"/></p> <p><input type="button" value="Excel"/></p> <p>Export File Location <input type="button" value="Edit"/></p> <p><input type="text" value="C:\Apps"/></p>	

## Referral Form

This will allow you to generate a patient referral form with all the patients information filled out.

Setup the Referral form in the Administration tab > Referral tab

Home Search Report Center Administration

Practice Physicians Insurance Facilities Providers Users Templates Values Referral

Save Cancel

### ICD 10 Codes

Edit New

I10	Essential (primary) hypertension	CIRCULATORY SYSTEM
I129	Hypertensive renal disease, unspecified	CIRCULATORY SYSTEM
I2510	Coronary atherosclerosis	CIRCULATORY SYSTEM
I509	Heart failure, unspecified	CIRCULATORY SYSTEM
E1065	Diabetes type 1 uncontrolled	ENDOCRINE, NUTRITIONAL AND METABOLIC
E109	Diabetes type 1	ENDOCRINE, NUTRITIONAL AND METABOLIC
E1165	Diabetes type 2 unspecified, uncontrolled	ENDOCRINE, NUTRITIONAL AND METABOLIC
E1169	Diabetes with ketoacidosis	ENDOCRINE, NUTRITIONAL AND METABOLIC
E119	Diabetes type 2 unspecified	ENDOCRINE, NUTRITIONAL AND METABOLIC

Order Text: Provide Medical Nutrition Therapy (may include CHIP) by a Registered Dietitian Nutritionist (97802, 97803, 97804)

Email: office@lifestylemedicineinc.com

Website: www.lifestylemedicineinc.com

List of ICD 10 codes the patient might have that you can bill for

What the referring physician is ordering

## Fields:

**ICD 10 Codes** - Create ICD 10 codes that the patients you are seeing may have that you can bill for. See image below.

Home Search Report Center Administration

Practice Physicians Insurance Facilities Providers Users Templates Values Referral

Save Cancel

ICD 10 Code: I10 - Essential (primary) hypertension ...

Alternate Description:

Category: CIRCULATORY SYSTEM

Select ICD 10 Code

Category to group ICD 10 codes on referral form

**Order Text** - Description of what the physician is ordering by referring to you.

**Email** - Your business email address

**Website** - Your business website address

**Example Referral Form (open in the patient physician form):**

**Cascade Lifestyle Medicine  
Referral**

Please complete and FAX to (866) 971-1354

**Patient Information**

Patient	Jim TestR
Date of Birth	2/2/1990
Health Ins. #	123456
Phone	

**Order:**

- ☒ Provide Medical Nutrition Therapy (may include CHIP) by a Registered Dietitian Nutritionist (97802, 97803, 97804)

**1**

**Diagnosis - Mark the Primary Diagnosis(s):**

<b>Test 2</b>	
A0103	Typhoid pneumonia
<b>Test 1</b>	
E11.21	Type 2 diabetes mellitus with diabetic nephropathy
<b>Other</b>	

**2**

Physical Activity restrictions? [ ] NO; [ ] Yes; If yes, limit to: \_\_\_\_\_  
Please attach supporting lab data. (i.e., fasting glucose, LDL, e-GFR)

**Physician Information**

Physician	Paul Healer
NPI	1234567890
Phone	
Fax	

**3**

Signature

Date: \_\_\_\_\_

Offices: 13568 SE 97th Ave., Clackamas OR 970156670  
Phone: (503) 652-5070 Fax: (866) 971-1354 Email: [office@lifestylemedicineinc.com](mailto:office@lifestylemedicineinc.com)  
Website: [www.lifestylemedicineinc.com](http://www.lifestylemedicineinc.com)



# How To Learn More

When you have questions, please don't hesitate to contact us by email or give us a call. We are on Pacific Standard time, so for those on the East coast we are available late at night. For those in Alaska or Hawaii, we are up early. Regardless of the time you need help we will try our best to get back to you as soon as possible. Please check out the support page on our website at [www.mntassistant.com](http://www.mntassistant.com). Here you will find videos that are designed to help you through various tasks and procedures. We look forward to supporting you as you make Medical Nutrition Therapy an integral part of 21st century healthcare.

Lifestyle Medicine Group

Phone: 866-850-5070

[info@mntassistant.com](mailto:info@mntassistant.com)