

HOD Fact Sheet

House of Delegates

Spring 2014

“Google’ is not a synonym for ‘research’.”
— Dan Brown, *The Lost Symbol*

During the House of Delegates dialogue session on *Nutrition Services Delivery and Payment: The Business of Every Academy Member* (October 18 and 19, 2013), the need for outcomes data to support increased reimbursement for nutrition services of the registered dietitian nutritionist (RDN) and dietetic technician, registered (DTR) emerged as a theme. We must use research to demonstrate how RDNs and DTRs improve the nation’s health through food and nutrition in order to advocate for increased reimbursement.

An example of the power of published outcomes research on the role of the RDN was the January 2013, publication in *Managed Care Magazine* that concluded “MNT [Medical Nutrition Therapy] is a valuable adjunct to health management programs that can be implemented for a relatively low cost. MNT warrants serious consideration as a standard inclusion in health benefit plans”¹. The study was a project of the Dietetics Practice Based Research Network and was “the first to evaluate a policy decision by an insurance company to provide coverage for MNT”¹. The Academy Nutrition Services Coverage Team has used the article in several ways to help members with reimbursement issues, such as: including the article in advocacy materials distributed to the Public Policy Panel members at the 2013 Public Policy Workshop, sharing it with numerous affiliates to support their advocacy work around the Essential Health Benefits package for their states and also with Reimbursement Representatives and other Academy members who are working on expanding coverage for MNT services with private insurance companies.



As instrumental as the *Managed Care* article has been, one article is not enough. Collecting and utilizing outcomes data in all practice areas is imperative to the advancement of the profession, as seen with the Centers for Medicare and Medicaid Services’ (CMS) decision on Intensive Behavioral Counseling for Obesity. Without sufficient outcomes data on the effectiveness of RDN specific interventions, reimbursement by CMS for services is difficult to achieve.

Research is frequently acknowledged as the basis of our profession. Members frequently apply and discuss research in practice but they are less likely to contribute to new nutrition and dietetics related research. The question is why all the interest but minimal contribution?

Mega Issue Question:

How do we mobilize members to commit their time, talent and resources to research?

Meeting Objectives:

Participants will be able to:

1. Increase members’ awareness of Academy research resources.
2. Recognize various ways members are utilizing and contributing to research.
3. Develop a plan to empower members (at all practice levels) to use, participate in and/or conduct research to benefit the profession and the public.
4. Identify ways that members can build a professional culture that encourages and embraces research.
5. Advocate for resources to conduct research.

The Academy has made a significant effort to encourage and educate members on the importance of research, standardized language, and evidence based practice.

Academy Resources	Description
Research Website	Provides quick access to Academy Research resources, philosophy and framework, and the Academy Knowledge Center. http://www.eatright.org/research/
Academy's Health Informatics Infrastructure	Online tool that promotes efficient and accurate use of the Nutrition Care Process and the corresponding International Dietetics and Nutrition Terminology, helps members track and report on patient outcomes, and collects RDN-impact data for use in public policy and quality improvement research.
Evidence Analysis Library	The Academy of Nutrition and Dietetics Evidence Analysis Library (EAL®) aggregates existing literature on relevant nutrition and dietetic topics housed within an accessible, online, user-friendly library. http://andevidencelibrary.com
Dietetics Practice- Based Research Network	The Dietetics Practice-Based Research Network (DPBRN) is a network of nutrition and dietetics professionals and students with varying specialties and areas of expertise who are interested in studying and improving patient care. DPBRN conducts, supports, promotes and advocates research in practice-based settings by bringing practitioners and researchers together to identify research that is needed in practice settings, design top-class research, obtain funding and carry that research out in real-life practice settings. DPBRN is a free benefit of membership in the Academy. http://www.eatright.org/members/DPBRN/
Nutrition Care Process	The Nutrition Care Process (NCP) is a holistic, systematic approach to providing high quality nutrition care. Use of a care process provides a framework for the RDN to individualize care, taking into account the patient/client's needs and values and using the best evidence available to make decisions. http://www.eatright.org/ncp/
International Dietetics and Nutrition Terminology	The International Dietetics and Nutrition Terminology Reference Manual is available in print and electronically. Using standard terminology allows RDNs in all settings to use the same words to describe things resulting in more precise and effective documentation and communication. Standardized terminology is essential for electronic health records and billing forms. Standardized language will also facilitate legislative efforts. Each term has a reference sheet that defines the term and important information regarding use of the term. http://www.eatright.org/shop

What HOD Needs from You

Talk with your delegate(s) about this issue in advance of the Spring 2014 HOD Meeting (May 3-4, 2014).

Questions for your members to consider:

- What are you already doing in regards to research?
- How do you see yourself/ yourselves contributing to research in the future?

Contact your Hawaii Delegate, Cyndy Kahalewale, MPH, RDN, LD, at cyndylk@gmail.com for questions or to share your input.

1. Bradley D, Murphy G, Snetslaar L, Myers E, Qualls L. The Incremental Value of Medical Nutrition Therapy in Weight Management. *Managed Care*. 2013; 40-45.

