

Maximize Chronic Disease Management with Medical Nutrition Therapy (MNT) for Nutrition-Related Health Conditions



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Ingris Garcia is a bilingual registered dietitian nutritionist (RDN), New York State-certified dietitian nutritionist (CDN), certified professional in health care quality (CPHQ), and certified diabetes care and education specialist (CDCES) with a clinical background in medical nutrition therapy and community nutrition education.

Ms. Garcia's work as an RDN in a 615-bed specialty long-term care (LTC) and rehabilitation facility catering to individuals with chronic conditions and genetic disorders inspired her transition into the quality improvement (QI) sector to influence changes in patient care and support population health initiatives on a larger scale.

Ms. Garcia contributes to our chronic disease management efforts and monthly QIN-QIO Newsletter.



Introduction

- Registered Dietitian Nutritionists (RDNs) are trained professionals providing medical nutrition therapy (MNT) services to patients with **nutrition-related health conditions**.
- MNT involves the assessment of a patient's nutritional status and the development of an **individualized** nutrition care plan to address their specific health needs, goals and preferences.
- RDNs are uniquely qualified to provide MNT services, as they have completed extensive education and training in **nutrition science, biochemistry, medical nutrition therapy and counseling techniques**.
- RDNs can provide **personalized nutrition counseling** and education, **support for behavior change**, and **ongoing monitoring and evaluation** of patients' progress toward their nutrition and health goals.
- By **referring patients** to an RDN for MNT services, health care providers can help ensure that patients receive high-quality, evidence-based nutrition **care tailored to their needs** and preferences.
- **Case studies have shown** that referring patients to an RDN for MNT can improve health outcomes, including better blood glucose control, **blood pressure management and weight loss**.



Nutrition-Related Health Conditions

Diabetes: According to the Centers for Disease Control and Prevention (CDC), 34.2 million Americans, or 10.5% of the population, have diabetes. The estimated cost of diagnosed diabetes in the United States in 2017 was \$327 billion, including \$237 billion in direct medical costs and \$90 billion in reduced productivity.

Chronic kidney disease: The National Kidney Foundation estimates that 37 million people in the United States have chronic kidney disease. In 2017, Medicare spent \$114 billion on patients with chronic kidney disease, which accounts for nearly a quarter of its total spending.

Cardiovascular disease: According to the American Heart Association, cardiovascular disease (CVD) is the leading cause of death in the United States, accounting for 836,546 deaths in 2020. The estimated annual cost of CVD in the US is \$351.2 billion, including direct medical expenses and lost productivity.

Obesity: The CDC reports that more than 42% of U.S. adults had obesity in 2017-2018. Obesity-related conditions include heart disease, stroke, type 2 diabetes, and certain types of cancer, among the leading causes of preventable, premature death.

Medical nutrition therapy: Studies have shown that medical nutrition therapy provided by a registered dietitian nutritionist can improve health outcomes and reduce health care costs for patients with nutrition-related health conditions.

A study published in the Journal of the Academy of Nutrition and Dietetics found that **medical nutrition therapy for patients with diabetes led to a reduction in hemoglobin A1c levels**, which is an important marker of blood glucose control, as well as **a decrease in health care costs over three years.**

Medicare Covers Eight Preventive Services For Nutrition-Related Health Conditions

1. Annual wellness visit
2. Cardiovascular disease screening tests
3. Diabetes screening
4. Diabetes self-management training
5. Intensive behavioral therapy (IBT) for cardiovascular disease
6. IBT for obesity
7. Medical nutrition therapy
8. Medicare Diabetes Prevention Program



Medical Nutrition Therapy (MNT)

 Academy of Nutrition
and Dietetics

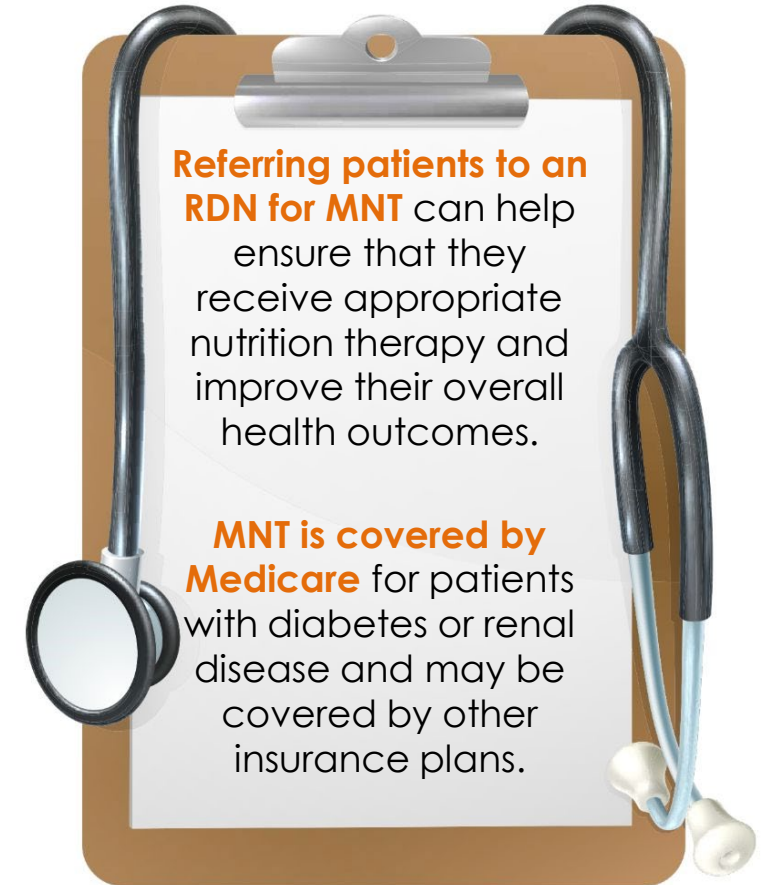
Medicare Part B

Medical Nutrition Therapy Benefit

Services covered:


- Diagnoses of diabetes, non-dialysis kidney disease, and 36 months post kidney transplant; *and*
- Referral by any MD or DO Medicare providers; and
- Provided by an RDN Medicare Provider
- 3 hours of MNT the initial year*
- 2 hours of MNT for subsequent years*

(*Hours based on calendar year)

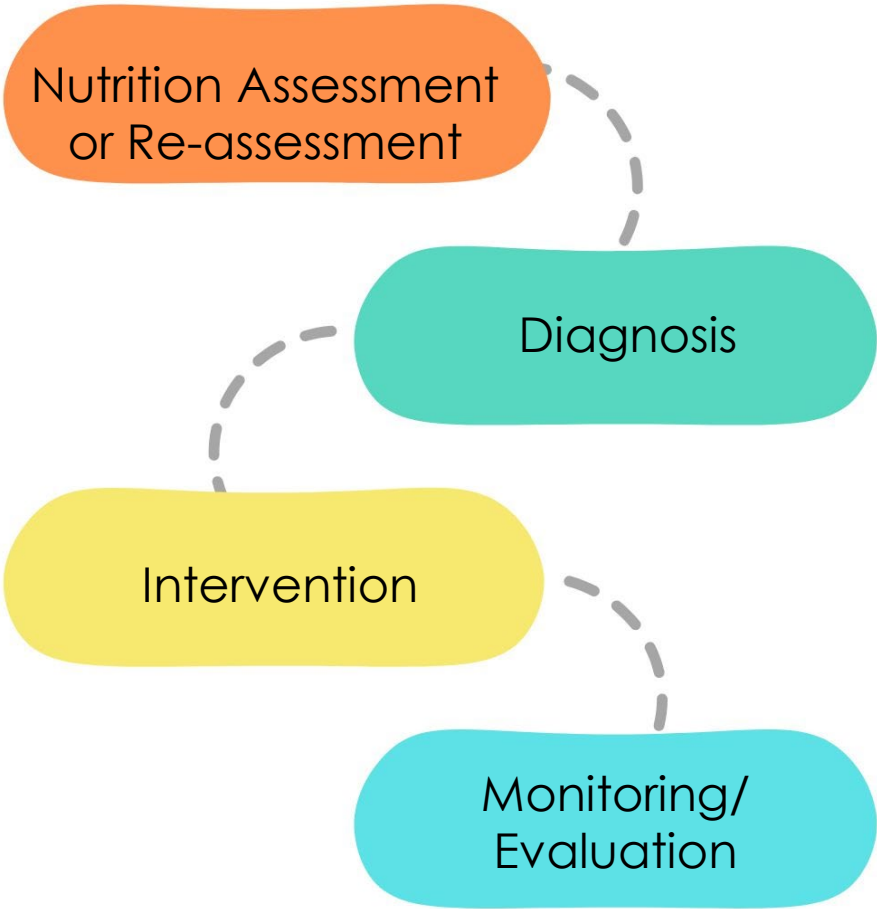


Source: <https://www.eatrightpro.org/career/payment/power-of-payment-videos>

Essentials of an MNT Initial and Follow-Up Visit



The Nutrition Care Process:
An analytical **framework** of distinct, interrelated steps followed by credentialed nutrition and dietetics professionals in providing a systematic approach to medical nutrition therapy and nutrition counseling.



How RDNs Engage Patients, Care Partners and PFAC

- **Collaborate with patients** on specific, measurable, actionable, realistic, and time-bound (S.M.A.R.T.) goals that fit into the lifestyle of their family/community unit.
- **Acknowledge self-management efforts** and provide positive reinforcement using strength-based language.
- **Build on** previous accomplishments. Phrase setbacks as learning experiences that inform future progress.
- **Serve on resident councils as liaisons** between food service operations, patients/residents and their families in congregate settings and health care institutions (nursing homes, hospitals, senior living communities/facilities).



MNT Across the Continuum of Care

MNT Influences Health Outcomes Across the Continuum

MNT in the form of:

- Nutrition support
- Education
- Counseling


are **vital** to health **outcomes across settings!**

Hospitals & Nursing Homes	Home Health	Communities
<p>Nutritional Support for Preventing Pressure Ulcers:</p> <ul style="list-style-type: none"> • Adequate Nutrient Intake • Fluid Balance • Micronutrients <p>Treating Pressure Ulcers:</p> <ul style="list-style-type: none"> • Individualized Nutritional Assessment & Collaborative Care • Protein and Calorie Supplementation • Specialized Nutritional Formulas 	<p>Role of In-Home Care and Recovery After Hospitalization:</p> <ul style="list-style-type: none"> • Wound Healing • Management of Chronic Conditions • Medication and Treatment Support • Preventing Malnutrition • Lifestyle Modification • Patient Empowerment • Monitoring and Follow-up 	<p>Role of Community-Based Initiatives for Older Adults:</p> <ul style="list-style-type: none"> • Nutrient Intake Optimization • Behavior Modification • Self-Management Skills • Coping Strategies • Health Promotion • Resource Dissemination • Community Engagement

2020-2025 CDR RDN Competencies: https://admin.cdnet.org/vault/2459/web/New_CDR_Competencies_2021.pdf

RDNs in Health Care Quality Improvement (QI):

Supporting Public and Population Health Efforts in Chronic Disease Prevention & Management




Quick Guide: Referring Your Patients to a Registered Dietitian Nutritionist for MEDICAL NUTRITION THERAPY

Purpose: Increase referrals to a registered dietitian nutritionist (RDN) to help your patients take advantage of the benefits of Medical Nutrition Therapy (MNT).

Benefits to patients:

- Proper hydration, adequate nutritional intake, and development of special diets, especially for patients at risk for malnutrition and/or require feeding assistance.
- Ongoing blood pressure, blood sugar, cholesterol and weight management support.
- Prevention of food and drug interactions.
- Monitored and managed digestive issues and food allergies, intolerances, or sensitivities.
- Customized healthy meal planning, food shopping tips and simple meal prep advice.
- After-care for gastric bypass surgery and consultation for weight loss medication.
- Action plans for mobility and physical activity to achieve fitness and strengthening goals.
- Food security through connections to community food and nutrition services.



Important clinical actions and patient expectations:

Clinical teams can prepare patients for their MNT appointment by providing the following information:	Patients and care partners can expect the following information during their MNT appointment:
Referral(s) for initial and ongoing MNT sessions.	Care plan details provided by the healthcare team, including the reason for referral to RDN for MNT.
Current medical diagnosis, health conditions, treatments and relevant personal and family medical history.	Current dietary, digestive and/or medical situations of concern.
Most recent height, weight, and body mass index measurements.	Usual and recent changes in appetite, nutritional intake, hydration and bowel movement patterns.
Most recent laboratory test results, including blood and urine values (A1C, GFR, ACR, lipid profile, basic metabolic panel).	Usual and recent changes in energy levels, stress, anxiety and sleep patterns.
An updated list of medications, supplements, herbal products and over-the-counter items they use or are considering, including assistive feeding devices.	Any concerns with obtaining adequate/frequent amounts of food, cooking/preparing meals and/or feeding themselves. Any dental, chewing or swallowing issues.
Health care objectives you are working with the patient on, such as specific daily, weekly, or monthly blood pressure, blood sugar, cholesterol and weight goal ranges to achieve.	Specific health and nutrition-related goals they hope to achieve with the guidance of their RDN.

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“**Food as Medicine** is a reaffirmation that food and nutrition play a role in sustaining health, preventing disease, and as a therapy for those with conditions or in situations responsive to changes in their diet.” – Academy of Nutrition and Dietetics Foundation.



Academy of Nutrition and Dietetics



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Establishing Referral Networks

1. **Set up a cross-referral network** with other providers involved in the care of your patient population to promote value-added MNT services. *Ex: therapists, licensed counselors, social workers, and other mental health professionals can collaborate with RDNs specialized in eating and weight disorders.*
2. **Establish a referral feedback loop.** Let the RDN know you referred a patient and would like to get a follow-up on the patient's attendance/progress.



Call to Action and Additional Resources

Help support your patients in achieving their health goals and promote a holistic approach to health care that emphasizes the importance of nutrition in overall health and wellness by referring patients to an RDN for MNT services!

Everything You Need to Know About Meeting with a REGISTERED DIETITIAN NUTRITIONIST (RDN)

A registered dietitian nutritionist (RDN) is trained to help you with healthy eating, meal planning, food preparation and understanding nutrition and your medications. They can also support you in achieving your nutritional goals.

An RDN is an important member of your health care team, especially if you have or are at risk of a chronic health condition. Your appointment with an RDN could be an in-person visit or you might have a remote visit with internet access on a computer, tablet or smartphone.

PREPARING FOR YOUR APPOINTMENT

- **Create a food journal** or list of everything you have eaten for at least three days. Make sure you list everything you eat and drink, including snacks. Try to include at least one day you are not at work.
- **Make a list of your medications.** Include all prescription medications, over-the-counter medications, vitamins, and supplements.
- **Read** about the potential side-effects of your medications and make a list of your questions.
- **Think about what your healthy eating goals are.** If you do not have goals yet, your RDN can help you think about what goals you want to work towards.
- **Request your lab results** from your doctor's office to share with your RDN, especially your Hemoglobin A1c and cholesterol levels.
- **Make a list of questions** you would like to ask the RDN.
- **Think about bringing a care partner or family member** with you to your appointment to help take notes.

QUESTIONS YOU MIGHT WANT TO ASK YOUR DIETITIAN (RDN)

- How does food affect my condition?
- What do I need to know about my medications and food?
- What is a Body Mass Index (BMI), and what is my BMI?
- What do I need to know about sugar and carbohydrates?
- How much of each type of food should I have in each meal?
- What is a good way of tracking my fat and sugar intake?
- Can you show me how to read a food label?
- How do I shop for fresh foods and vegetables on a budget?
- Are there food pantries or food banks in my area?
- How do I create a healthy meal or plate?
- Do you have any sample healthy recipes?

DURING YOUR APPOINTMENT

- Ask your list of questions.
- Share your food journal or list.
- Talk about any lifestyle changes you would like to make.
- Ask the RDN what small changes you could make now.
- Have a positive attitude and an open mind.
- Ask how you can communicate with your RDN as you start to make small changes. Will you use a patient portal, an email address or have regular touch base telephone calls?

SCAN ME for ADA Healthy Plate Method

For more information, contact Donna.Cohen@allianthealth.org

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Healthy Eating Tips TO FIGHT CHRONIC DISEASE

You can manage your blood sugar, blood pressure, cholesterol, and weight to improve your health.

- 1 Balance your physical activity with what you eat for a healthy weight.
- 2 Eat plenty of fruits and vegetables to reduce the risk of heart disease and meet blood pressure and blood sugar goals.
- 3 Choose whole grains for added fiber, vitamins, and minerals. They lower cholesterol, improve digestion and help meet blood sugar goals.
- 4 Limit red meat. Eat healthy proteins like fish, poultry, tofu, beans, and nuts. The right proteins make a big difference in your health.
- 5 Choose good fats. These include vegetable oils, nuts, seeds, and avocados, which lower disease risk.
- 6 Limit processed foods, which are chemically altered and bad for your health.
- 7 Choose foods without added sugars to keep blood sugar and weight stable.
- 8 Cut down on salt for blood pressure control.
- 9 Limit alcohol because too much can harm your health.

Follow these tips to stay on track with your healthy lifestyle!

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Nutrition Education Resources FOR CHRONIC DISEASE PREVENTION AND MANAGEMENT

PURPOSE: Provide nutrition education resources to support your patients' healthy eating goals.

General Healthy Eating Tips:

- [Healthy Eating for Older Adults](#)
- [Start Simple with MyPlate](#)
- [Be Salt Smart](#)
- [Cut back on Added Sugars](#)
- [Rethink Fats](#)
- [Make Better Beverage Choices](#)
- [Everything You Need to Know About Meeting with a Registered Dietitian Nutritionist \(RDN\)](#)
- [Healthy Eating Tips to Fight Chronic Disease](#)

Condition-Specific Healthy Eating Tips:

Diabetes:

- [The ADA Diabetes Plate Method](#)
- [What is the Diabetes Plate Method?](#)
- [Diabetes and Kidney Disease: What to Eat?](#)

Cardiovascular Disease:

- [AHA What is a Healthy Diet](#)
- [10 ways to Improve Your Heart Health](#)

Chronic Kidney Disease:

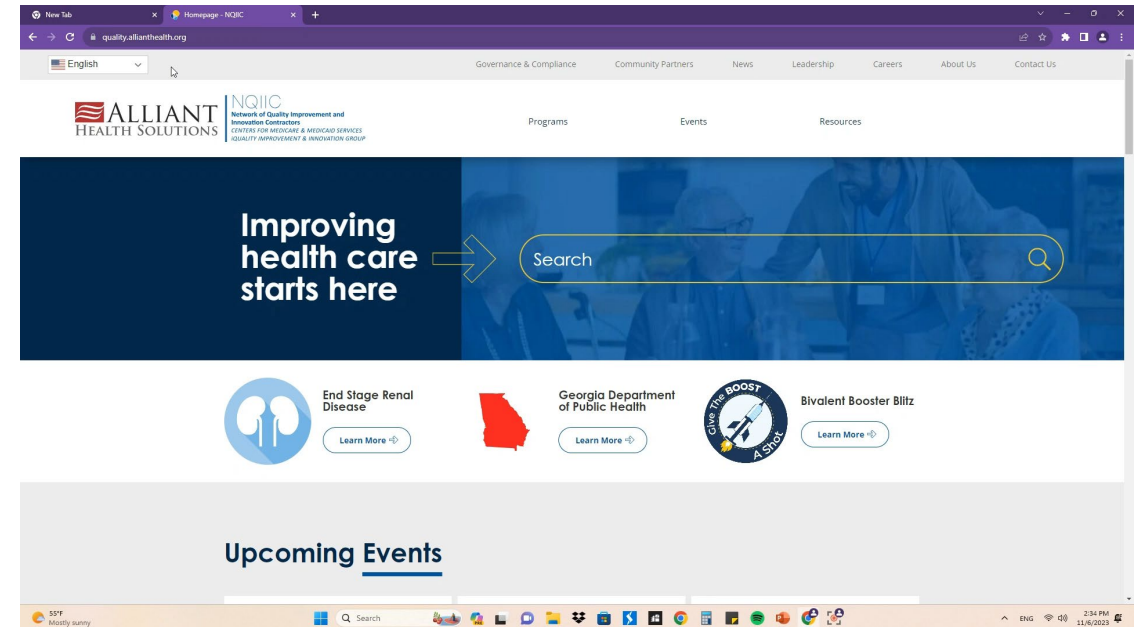
- [Eat Right for Kidney Health](#)

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AHS Chronic Disease Management Resources

Additional resources can be located on the Alliant Health Solutions website!

[Chronic Disease Self-Management - NQIIC \(allianthealth.org\)](https://allianthealth.org/Chronic-Disease-Self-Management-NQIIC)



Questions?



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