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.
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)

Referring patients to an RDN for MNT can help ensure that they receive appropriate nutrition therapy and improve their overall health outcomes.

MNT is covered by Medicare for patients with diabetes or renal disease and may be covered by other insurance plans.

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
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!

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RDNs in Health Care Quality Improvement (QI): Supporting Public and Population Health Efforts in Chronic Disease Prevention & Management

“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.
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.
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!
AHS Chronic Disease Management Resources

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

Chronic Disease Self-Management - NQIIC (allianthealth.org)
Questions?