

OHIO ACADEMY
of Nutrition and Dietetics

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To: Chairman Stephen A. Huffman, Ohio Senate Health Committee

From: Kay Mavko, MS, RD, LD, State Regulatory Specialist

Ohio Academy of Nutrition and Dietetics

Chairman Huffman, Vice Chairman Antani, Ranking Member Antonio and members of the Senate Health Committee, on behalf of the Ohio Academy of Nutrition and Dietetics (OAND) I would like to thank you for the opportunity to testify today in support of House Bill 122.

The Ohio Academy of Nutrition and Dietetics represents over 3,400 Registered Dietitian Nutritionists and Nutrition and Dietetic Technicians Registered who work in a wide variety of employment settings, including hospitals, nursing homes, health clinics, business and industry, community and public health, schools, higher education, research, government agencies and health, wellness and fitness centers, and private practice. Most of our dietitian members are also licensed to practice in Ohio.

Licensed Dietitians in Ohio are pleased to be included in HB 122 as one of the professions who would be authorized to continue to provide telehealth services at the conclusion of the pandemic. It is our desire for dietitians to stay included as qualified providers in the bill.

Dietitian nutritionists provide medical nutrition therapy to Ohioans including on-going patient monitoring and nutrition education that maintains health, helps people feel better, and treats expensive, debilitating acute and chronic diseases like obesity, heart disease, kidney disease, eating disorders, etc. These are the types of diseases with nutritional components that can affect anyone – and that disproportionately affect dis-enfranchised individuals and communities.

Telehealth services provided during the pandemic pursuant to emergency orders have increased patients' access to nutrition providers – especially for people with mobility issues (including older adults), people with young children, persons lacking access to transportation, and folks with inflexible work schedules. This type of Increased access increases potential for compliance with nutrition care plans that result in improved health outcomes.

Although some components of dietetic practice are best when conducted in-person (like nutrition assessment and nutrition focused physical examination) most other nutrition services (including on-going patient monitoring and nutrition education) can be provided equally or even more effectively in

outpatient/home settings via telephone or video chat. Sometimes the relaxed outpatient / home setting is more conducive to comfortable conversation and information sharing. Additionally, a plethora of nutrition resources that supplement nutrition counseling and education are also easily accessible using various telehealth video or computer technologies, and can be incorporated into the education provided to our clients.

In 2020 a small study “Perspectives of Registered Dietitian Nutritionists on Adoption of Telehealth for Nutrition Care during the COVID-19 Pandemic”¹ was conducted by Abbott Nutrition Division of Abbott (Col Oh.) Avalere Health (Wash. DC.), and the Academy of Nutrition and Dietetics (Chi. IL) to see if the use of telehealth nutrition programs during the pandemic supported positive outcomes. The study reported positive perceptions by dietitians and indicated that telehealth patients were also more likely to keep appointments, and dietitians could “maintain their full patient case loads” and provide “timely patient services while their clients remained safe at home”, despite pandemic conditions. Telenutrition also unveiled unexpected opportunities for RDNs to “look into clients’ refrigerator / pantry” (when permitted by patients) and allowed the professional “to better understand the clients home environment and diet”.¹

Studies by Edinger, J.L.² and Warner, M.M. et al³ have also shown that when telenutrition services are provided people report satisfaction and that they are left with positive perceptions and attitudes. When telenutrition is used in combination with in-person visits some of the barriers that stop clients from attending following up appointments may be overcome.

We believe that the access afforded by HB 122 will help dietitians continue to improve nutrition related health outcomes, reduce health care costs, and improve the quality of life for Ohio citizens.

OAND looks forward to working with the legislature in support of HB 122 as currently proposed.

¹Perspectives of Registered Dietitian Nutritionists on Adoption of Telehealth for Nutrition Care during the COVID-19 Pandemic. Brunton C, Arensberg MB, Drawert S, Badaracco C, Everett W, McCauley SM. *Healthcare (Basel)*. 2021 Feb 23;9(2):235.

² Edinger, J.L. *PhD Thesis*. Kent State University; Kent, OH, USA:2016. Northeast Ohio Adults’ Perceptions and Attitudes towards the Use of Telenutrition. http://rave.ohiolink.edu/etdc/view?acc_num=kent1459778652

³ Warner M.M., Tong A., Campbell K.L., Kelly J.T. Patients’ Experiences and Perspectives of Telehealth Coaching with a Dietitian to Improve Diet Quality in Chronic Kidney Disease: A Qualitative Interview Study. *J. Acad. Nutr. Diet*. 2019;119:1362-1374.