The Academy of Nutrition and Dietetics advocates for expanded nutritional coverage under Medicare
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The Academy of Nutrition and Dietetics has prepared a request to submit to the Centers for Medicare and Medicaid Services (CMS) to expand coverage of medical nutrition therapy (MNT) for specific diseases, including hypertension, obesity, and cancer, as part of the CMS National Coverage Determination (NCD) Process. Most chronic health conditions can be controlled or treated with medical nutrition therapy, yet Medicare will only reimburse nutrition therapy services provided by a registered dietitian for individuals with diabetes and renal disease. "That's just not enough if we want to improve the health of the nation and rein in escalating healthcare costs," says Marsha Schofield, MS, RD, LD, the Academy's Director of Nutrition Services Coverage.

Under the NCD Process, the Secretary of the Department of Health and Human Services can expand Medicare coverage for services that are reasonable and necessary for the prevention of an illness. Ms. Schofield explains, "There are an escalating number of baby boomers turning 65 and entering the Medicare system. The majority of Medicare spending is on individuals with chronic conditions, and almost 70% of Medicare beneficiaries suffer from cardiovascular disease. Chronic conditions can be controlled or treated with medical nutrition therapy, so it just makes sense to try to expand the Medicare beneficiary's access to these important services."

The Academy's NCD request is published in the January 2012 issue of the Journal of the Academy of Nutrition and Dietetics and it presents evidence from over 20 scientific studies that demonstrate the health benefits and cost effectiveness of medical nutrition therapy, provided by registered dietitians, in older adults with several diseases and conditions. The evidence is grouped into three sections: cardiovascular disease, including the treatment of high cholesterol, hypertension, and heart failure; disease progression, including obesity and metabolic syndrome, and pre-diabetes; and diseases related to reduced nutrient intake or unintentional weight loss, for example related to cancer, celiac disease, chronic obstructive pulmonary disease, and HIV/AIDS.

In a podcast about the Academy's NCD request, Ms. Schofield notes, "What was very significant about the document is that whether you’re talking about cardiovascular disease, pre-diabetes, hypertension, cancer, or unintended weight loss, the evidence shows that medical nutrition therapy services result in positive dietary change, improved clinical status, and an improved quality of life. Also, they are cost effective and have been proven to save money." For example, four previously published studies demonstrate that MNT provided by registered dietitians (RDs) promotes changes in dietary intake of fat and saturated fat, and leads to improvements in serum lipid levels in adults with high LDL cholesterol. Four studies demonstrate that MNT provided by an RD significantly reduces dietary sodium and lowers blood pressure in older adults with hypertension. Seven studies demonstrate that MNT provided by an RD results in significantly improved outcomes in adults with cancer.

Medical nutrition therapy is provided by RDs, trained professionals who offer food and nutrition services while assisting patients in making healthy lifestyle changes. The evidence compiled by the Academy in its NCD request shows that involvement by RDs in beneficiary care has a substantial effect on both the health of the beneficiary, and is almost always more cost effective than other treatments. "The research demonstrates the value of the RD and our unique contributions on the healthcare team are critical."
We're the trusted source of credible and useful nutritional information," says Jeanne Blankenship, MS, RD, CLE, Vice President, Policy Initiatives and Advocacy for the Academy.

According to the authors, MNT in each of the conditions discussed clearly meets the requirements of an NCD. Moreover, RDs are the most qualified professionals to deliver the necessary nutrition education and MNT services for prevention, wellness, and disease management. By expanding services under MNT, CMS has the opportunity to play a major role in improving the quality of care provided to elderly and disabled persons who fall into the Medicare population.


In an accompanying podcast Ms. Schofield, Ms. Blankenship, and Ms. Gradwell discuss the NCD process undertaken by the Academy and share insights about its potential impact on healthcare and the role of the registered dietitian. The podcast is available at http://andjrnl.org/content/podcast.

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