
**PRESIDENT'S REPORT
BOARD OF DIRECTORS MEETING
FEBRUARY 25, 2021**

Following are activity highlights since our October meeting.

Research and Technology Initiatives

The Nutrition Care Process and Research Outcomes Committee has finalized the publication of [eNCPT 2020 Edition](#), addressing research findings: clear communication of Specific, Measurable, Attainable, Realistic and Timely (S.M.A.R.T.) goals established in collaboration with the client; progress toward resolution of a nutrition diagnosis; and linkage between causes and contributing factors of nutrition problem and intervention actions.

Through ongoing work with [SNOMED International](#), validated assessment tools to identify malnutrition are now included for use in standardized health terminology. The collaboration with SNOMED International also includes work with the [Gravity Project](#). Within SNOMED clinical terminology, *Food Security* and *Food Insecurity* are now identified as nutrition problems in addition to health management problems. The Academy will be showcasing progress in nutrition terminology at the upcoming SNOMED meeting for terminology experts around the world.

The Research, International and Scientific Affairs Team (RISA), in collaboration with Academy member and RDN, Chris Taylor at Ohio State University, has designed and delivered a digital Nutrition Care Process (NCP) training/outcomes study in Mexico with grant support from the International Affiliate of the Academy of Nutrition and Dietetics. Collected data will be used to evaluate the efficacy of the program with potential for a broader international reach. Countries such as Nigeria and Israel have expressed a keen interest in participating in a larger NCP training study.

The Academy of Nutrition and Dietetics Health Informatics Infrastructure (ANDHII) houses the NCPT in a web-based platform; it is a unique tool that allows comprehensive electronic documentation of the NCPT. In recent months, nutrition care data in COVID-19 cases was analyzed. ANDHII is used in a growing number of studies that actively support the strategic plan of the Academy including a major study on validating the Malnutrition Clinical Characteristics (MCC) study and studies on chronic kidney disease, diabetes, gestational diabetes, cancer and breastfeeding care.

A related publication is under review by the *Journal of Parenteral and Enteral Nutrition*. The findings of this pilot study have been used to inform the larger RESTORE (NutRitional CarE PracticeS and SStatus Of SARS-CoV-2 PatiEnts) study that is underway.

The RISA team published an outcomes-focused study demonstrating the results of nutrition interventions in prediabetes.¹ A collaboration with IBM's computing team has allowed RISA to conduct a machine learning analysis of ANDHII data. The findings of this exciting project are forthcoming in a publication. Finally, the newly released Nutrition Informatics survey, conducted by RISA highlights the rise of informatics adoption by Academy members.²

1. Murphy WJ, Hand RK, Abram JK, Papoutsakis C. Impact of Diabetes Prevention Guideline Adoption on Health Outcomes: A Pragmatic Implementation Trial. *Journal of the Academy of Nutrition and Dietetics*. 2020.

2. Hamady CM, Pellechia K, Atkinson BE, et al. 2019 Nutrition Informatics Survey: Results and Future Directions. *Journal of the Academy of Nutrition and Dietetics*. 2021.

Advancing Careers of Underrepresented Groups in Academia

This past fall, I appointed RDNs Loneke Blackman Carr and Francoise Knox-Kazimierczuk to represent the Academy at virtual workshops which were held in October for the Nutrition Obesity Research Center Initiative to Advance the Careers of Researchers from Groups Underrepresented in Academia, supported by the National Institute of Diabetes and Digestive and Kidney Diseases. The purpose for attending this series of workshops was to explore barriers and challenges of underrepresented individuals in nutrition related research positions within the academia. Participants shared a collection of stories, experiences and ideas related to barriers, challenges, and potential actions to improve diversity and career advancement for URiA. Post workshop, the session proceedings will be published in the *American Journal of Clinical Nutrition*.

Diversity and Inclusion Committee Update

The Diversity and Inclusion Committee has drafted overarching goals for a forthcoming D&I Action Plan based on qualitatively analyzed member and external stakeholder feedback. The goals have been forwarded to the D&I Advisory Group, comprised of representatives from Academy groups and organizational units, for reactions and feedback. The Advisory Group had its first orientation meeting in early January to establish a shared vocabulary and understanding for this important work. After the Advisory Group has provided its input on the goals, the D&I Committee will finalize and send them to the Board of Directors for the April 9 Board meeting for approval and subsequent implementation. Once approved by the Board, the final plan, with strategies, tactics and metrics, is anticipated by May 31.

Definitions of Terms: Diversity and Health Equity

In September 2020, the Quality Management Committee and its Definition of Terms Task Force reviewed and approved the addition of the Diversity and Health Equity category, with new terms now located at <https://www.eatrightpro.org/practice/quality-management/definition-of-terms>. The Diversity and Health Equity category terms are:

- Access to Health Care and/or Services
- Culturally Appropriate Care
- Diversity and Inclusion
- Health Disparities
- Health Equity
- Implicit Bias
- Social Determinants of Health.

The Diversity and Inclusion Committee submitted suggested terms and draft definitions related to diversity, equity and inclusion, requested by the Board of Directors at the May 2020 meeting. The terms may now be cited in Academy Committee/Organizational Unit/Team resources, presentations and publications. The document has been shared widely across all Academy communications channels.

MQii Milestone: Global Malnutrition Composite Score Measure Update

At the February 17-18 National Quality Forum (NQF) Prevention and Population Health Standing Committee meeting, the Global Malnutrition Composite Score (GMCS) were reviewed and discussed for endorsement. I am pleased to report that the GMCS measure passed overwhelmingly

across all ‘must pass’ criteria categories for endorsement which included: evidence, quality construct, reliability, validity, feasibility, use and usability! The Standing Committee still has an open question regarding performance gap, which received a vote of ‘consensus not reached.’ Information to address the question will be provided as part of the NQF endorsement comment period (April 1-30). Next action steps include the Standing Committee meeting (June 3) to re-vote on the performance gap and decision for measure endorsement recommendation, followed by the NQF’s Consensus Standards Approval Committee meeting (June 29-30) to review the submitted standards (measures) for final endorsement.

Paralleling the process, another milestone was achieved when the Centers for Medicare and Medicaid Services (CMS) published (December 22) the final 2020 [Measures Under Consideration List with the inclusion of the MUC20-0032 Global Malnutrition Composite Score](#). The GMCS was then reviewed for Pre-Rulemaking during the CMS Measure Application Partnership (MAP) Workgroup meetings by the Rural Health Workgroup (January 6) and the Hospital Workgroup (January 11), then moved to the NQF’s MAP Coordinating Committee (January 25) for final adoption on the Measures Under Consideration List. The hope is that the GMCS will be included in the CMS Proposed Rule HIQR Program report this spring. The Final Rule is likely to be released in the summer of 2021 with reporting implementation in 2022. More MQii quality measure information is [available](#).

Quality Management Resources

Updated Article: Medical Records: More than the Health Insurance Portability and Accountability Act

RDNs are qualified and competent business owners, however, navigating through the challenges of proper medical record management can be difficult without a sound policy. Implementation of a comprehensive medical record retention policy promotes positive clinician-patient interaction and avoidance of potential legal ramifications. This article outlines the four major components: creation, utilization, maintenance, retention and destruction schedule.

[https://jandonline.org/article/S2212-2672\(20\)30651-1/fulltext](https://jandonline.org/article/S2212-2672(20)30651-1/fulltext)

Quality Strategies – Pivot Huddle Quickinars

The Quality Strategies Taskforce has transitioned the Quality Improvement Virtual Huddles into version 2.0 known as the *Pivot Huddle* – as many dietitians are now ‘pivoting’ in their roles and responsibilities due to the pandemic. The format remains the popular 30-minute Quickinar, with the focus shifted from quality improvement to change management concepts being presented by Quality Leader Alliance Members. Since September 2020, three Pivot Huddles have occurred: (1) Change Management during COVID-19, (2) Rapid Pivot to Telehealth During a Global Pandemic and (3) Occupational Pivoting During Challenging Times. More information is located at:

www.eatrightpro.org/QualityStrategies.

Quality-Focused Practice Tips

Quality Management is pleased to introduce two new Practice Tips; [RDNs Evaluate Performance Systems and Processes Using Quality Improvement](#) and [RDNs Pivot during the Pandemic for Change Management Success](#). Each Practice Tip features the Academy’s Quality Leader Alliance members presenting a quality improvement or change management project via a 30-minute recorded virtual huddle. Additionally, the Practice Tip: [Getting Started with Quality Improvement](#) has been revised.

Focus Area Standards of Practice (SOP) & Standards of Professional Performance (SOPP)

Current Focus Area Standards can be found at www.eatrightpro.org/sop or in the *Journal Collections* at: <https://jandonline.org/content/credentialed> or <https://jandonline.org/content/focus>.

New Emergency Preparedness Playbook

The newly launched [Emergency Preparedness Playbook](#) guides RDNs and NDTRs through emergency preparation by applying the Plan/Do/Check/Act process to the Standards of Excellence: Quality of Leadership, Quality of Organization, Quality of Practice and Quality of Outcomes. The Playbook covers four practice areas: Ambulatory, Clinical, Food Service Management and Post-Acute Long-Term Care and includes a comprehensive Emergency and COVID-19 Academy Resource list.

Congressional Support: Advancing Malnutrition Quality Measures

In December, Academy members were called on members to urge their members of Congress to add their support to a bipartisan letter from U.S. Reps. Danny Davis (Ill.) and Rodney Davis (Ill.), requesting the advancement of malnutrition quality measures. The letter, which 32 members signed onto, thanks in large part to Academy members, was sent December 10 to the Centers for Medicare and Medicaid Services.

Addressing Audits of Malnutrition Payments to Hospitals

Hospitals across the country continue to be audited by Centers for Medicare and Medicaid Service contractors; some being denied reimbursement for malnutrition as a major complicating condition. In several of these instances, contracted reviewers used outdated methods for assessing severe malnutrition (e.g., serum proteins). In addition, the Office of the Inspector General included in its active work plan for 2018, “a review of hospitals billing for severe malnutrition.” The OIG has stated “this review will assess the accuracy of Medicare payments for the treatment of severe malnutrition.” This raises significant concern for many U.S. hospitals that are focused on improving malnutrition diagnosis, documentation and intervention in their facilities.

In July 2020, the Office of the Inspector General under the Department of Health and Human Services released a [report](#) of its findings from audits to determine whether hospitals complied with Medicare billing requirements when assigning severe malnutrition diagnosis codes. In that report the OIG recommended the Centers for Medicare and Medicaid Services attempt to recover the overpayments. The Academy collaborated with the American Society for Parenteral and Enteral Nutrition, the American Society for Nutrition and the Association of Clinical Documentation Integrity Specialists on a [joint statement](#) in response to the OIG report.

This multiorganizational task force met with members of the CMS Provider Compliance Division in December 2020 to express concerns about the lack of transparency around criteria used by auditors in reviewing severe malnutrition claims. During this meeting, we learned CMS has not initiated its recovery process or “supplementary medical review” due to a pause in activities related to the COVID-19 pandemic. During our discussions, CMS members outlined a plan to review the CMS Quality and Policy manuals to identify what is being used as criteria for both malnutrition diagnosis and treatment. In early 2021, a meeting between the collaborators and CMS will take place to review these findings and provide input as the supplemental recovery review proceeds.

Resources to Support Members as Experts

In May 2020, the Nutrition Services Coverage team, in collaboration with the Marketing Team, launched the Power of Payment program. The program was aimed at increasing knowledge and awareness throughout the nutrition and dietetics profession of the importance of proving and showcasing value and return on investment of RDN services. It focused on all members (RDNs and NDTRs), not just those who bill for their services, leveraging the new Higher Logic email platform with messages tailored to specific target audiences within this total membership. The program was designed based on needs identified through the series of surveys conducted by the Nutrition Services Payment Committee of RDNs related to coding practices and coverage by public and private payers for MNT services. Over 8,500 members signed up for the program and a recently conducted evaluation of program participants indicated it was highly effective at meeting its goals. While enrollment in the program for new participants ended January 31, the Nutrition Services Coverage team is developing plans to revise and relaunch this highly valued program based on participant feedback.

The Nutrition Services Coverage team released a new set of tools for use by members to increase RDN recognition and coverage for RDN services. These new [flyers](#) offer customized messages for key audiences, including physician/medical groups, healthcare administrators, public and private payers, employers, benefits consultants, policymakers/legislators and community-based programs.

On September 24-25, 2020, 44 Affiliate and DPG Reimbursement Representatives gathered for the first virtual training event. This intensive training, previously conducted in-person pre-FNCE®, was designed to enhance knowledge and performance at the grassroots levels in assisting with efforts to expand coverage and reimbursement for nutrition services and pursue new opportunities in the changing health care marketplace and enhance the business acumen of RDNs providing MNT services. This year, telehealth was a primary focus of the training. Leaders left the event better equipped to support members in accessing payment for nutrition services (both via telehealth and in-person) and engaging in state and national efforts to expand access to MNT.

Advancing relationships with key stakeholders

The Academy values collaborations with fellow health care professional associations and their members. The Academy recognizes that the new and evolving health care environment is going to require stronger team-based care to achieve the shared goals of high quality, safe and cost-effective care. In 2015, the Academy launched the Primary Care Provider (PCP) Association Advisory Board to develop and implement strategies at the national level that promote successful collaboration between RDNs and PCPs at the local level. In December, the group released a new downloadable toolkit to help PCPs leverage the expertise of RDNs to help move the needle on quality outcomes for their patients with pre-diabetes, diabetes, obesity and other chronic conditions. The [toolkit](#) includes a variety of material ranging from the value of RDN services to PCPs, to the business models for an RDN and PCP partnership and can be used to help form a successful collaboration between RDNs and PCPs to achieve better health outcomes.

The Academy recognizes that the new and evolving health care environment requires stronger team-based care to achieve shared goals of high quality, safe and cost-effective care. We continue to collaborate with the National Kidney Foundation to increase utilization of MNT services for patients with non-dialysis-dependent chronic kidney disease (CKD).

Opportunities to leverage telehealth as a tool for delivering nutrition services continue to grow. As such, the Academy continues to identify and pursue opportunities to appropriately position

members as the nutrition experts in this rapidly evolving space. One strategy includes collaboration with the Center for Telehealth and e-Health Law (CTeL) to help overcome legal and regulatory barriers that impact the utilization of telehealth services as well as educate stakeholders on the qualified providers of nutrition services. This past fall, Academy representatives participated on a panel at a CTeL event, “Actions Speak Louder Than Words: Health Coaching and Dietitians,” marking the fourth year the Academy has been invited to speak at the event.

Ethics Committee Resources

In addition to reviewing and resolving six ethics complaints since the October Board meeting, the Ethics Committee has been contributing to the development of ethics educational resources. A session proposal for FNCE[®] 2021 was submitted and future topics for *Ethics in Practice* articles have been identified. The most recent article, “Managing HIPAA Compliance Includes Legal and Ethical Considerations” was published in the February *Journal*. A self-study activity, approved for 5.0 continuing professional education units, is also in development and will be available for purchase in the eatrightSTORE in the near future.

Advance Promotion: National Nutrition Month[®]

Through press releases, media interviews, social media messaging and other communications, the Academy has been promoting [National Nutrition Month[®]](#) and Registered Dietitian Nutritionist Day to members, the public and other health professionals. This year’s theme is “Personalize Your Plate.” It emphasizes that “There is no one-size-fits-all approach to nutrition and health. We are all unique with different bodies, goals, backgrounds and tastes! And an RDN can tailor a healthful eating plan that is as special as you are.”

Foundation Receives Highest Rating

The Foundation has again received a 4-Star rating, the highest possible, from [Charity Navigator](#), is the largest and most utilized charity evaluator in America. This achievement indicates our foundation exceeds industry standards, adheres to best practices and executes our mission in a financially efficient way. In a February 1 letter, Charity Navigator’s CEO Michael A. Thatcher outlined a number of reasons why we can all be proud of the job we are doing: “Attaining a 4-star rating verifies that Academy of Nutrition and Dietetics Foundation exceeds industry standards and outperforms most charities in your area of work. Only 26% of the charities we evaluate have received at least three consecutive 4-star evaluations, indicating that Academy of Nutrition and Dietetics Foundation outperforms most other charities in America. This exceptional designation from Charity Navigator sets Academy of Nutrition and Dietetics Foundation apart from its peers and demonstrates to the public its trustworthiness.”

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