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The Honorable Linda E. McMahon
U.S. Secretary of Education
U.S. Department of Education
Office of Postsecondary Education
400 Maryland Ave. SW, 5th Floor
Washington, DC 20202

Re: Docket ID ED-2025-OPE-0944; RIN 1840-AD98

Dear Secretary McMahon:

On behalf of more than 112,000 registered dietitian nutritionists (RDNs), nutrition and dietetics technicians, registered (NDTRs), and advanced-degree nutrition professionals, the Academy of Nutrition and Dietetics ("the Academy") appreciates the opportunity to comment on the Department's proposed regulations implementing statutory changes to Title IV of the Higher Education Act programs. As drafted, the proposed rule's approach to defining "professional programs" for purposes of the new federal graduate loan limits risks unintentionally restricting access to essential healthcare training pathways. We respectfully urge the Department to **explicitly recognize Nutrition and Dietetics as a professional degree program in the final regulations** to ensure equitable access to federal student aid for future RDNs and to align with the nation's healthcare workforce needs.

The Notice of Proposed Rulemaking (NPRM) implements provisions of the One Big Beautiful Bill Act (OBBB), including establishing new loan limits for graduate and professional programs and phasing out Graduate PLUS. Under the NPRM, only programs the Department recognizes as "professional" would qualify for the higher aggregate limits required by OBBB. Consistent with the Department's responsibility under Title IV to ensure equitable access to graduate education, Nutrition and Dietetics should be recognized among professional programs requiring advanced clinical training.

Nutrition and Dietetics meets the Department's "professional" program definition.
RDN preparation mirrors other clinically oriented professions already contemplated for professional-program treatment:

- **Graduate-level entry to practice.** Effective January 1, 2024, eligibility to sit for the RDN registration examination requires a **graduate degree**, in addition to completing accredited coursework and supervised practice.

- **Clinical and supervised training.** Accreditation Council for Education in Nutrition and Dietetics (ACEND)-accredited programs integrate **at least 1,000 hours** of supervised practice as part of their training.
  Licensure/regulation. Almost all states – forty-six states, Washington, D.C., and Puerto Rico – **require licensure** for dietitians and nutritionists, further reflecting the field's regulated, patient-care scope.

These elements align with the way the Department has historically described a "professional degree" – e.g., advanced education, licensure, and practice-entry preparation.

America's healthcare system increasingly relies on clinically trained nutrition professionals to prevent and manage chronic disease and to reduce avoidable costs:

- **Growing workforce demand.** The Bureau of Labor Statistics projects employment for dietitians and nutritionists to grow **6% from 2024–2034**—faster than average—across hospitals, long-term care, clinics, and public-health settings.
- **Recognized, reimbursable care.** The cost savings associated with RDN-provided **Medical Nutrition Therapy (MNT)** in Medicare or Medicaid are significant and multifaceted. Medicare covers MNT provided by RDNs for beneficiaries with diabetes and kidney disease, with defined units of service and medical-necessity criteria—underscoring RDNs' role as part of the clinical care team.
- **Outcomes and value.** The Academy's 2026 position paper synthesizing 25 systematic reviews concludes that RDN-delivered MNT improves outcomes across multiple chronic conditions and is associated with healthcare cost savings—precisely the kind of high-value care the federal government seeks to promote.

These findings underscore the importance of nutrition and dietetics professionals in improving health outcomes and reducing healthcare costs.

Clinical shortages already strain every corner of the healthcare system, and the nation cannot afford actions that make healthcare education less accessible or more expensive. Student loan policy is healthcare workforce policy. Changes under OBBB risk reducing access to federal financial aid for future RDNs at a time when communities urgently need more nutrition experts – not fewer.

Because OBBB **phases out Graduate PLUS** and establishes **new aggregate limits** for graduate and professional students, the Department's final definition will effectively determine whether RDN students remain eligible for the higher "professional" limits needed to complete required graduate education and supervised practice. Recognizing Nutrition and Dietetics as a professional program is therefore essential to avoid adverse, unintended consequences for the healthcare workforce.

We have heard from students echoing this messaging, *"Access to federal financial aid and student loans is not a luxury in dietetics; it is a necessity. Without it, the added financial and logistical burden on my family could ultimately prevent me from completing my education. If dietetics were removed from the "professional degree" category, limiting loan eligibility for graduate study and supervised*

practice, students like me would be forced to abandon the profession, not because of lack of ability or commitment, but because of financial reality."

Dietetics already faces significant workforce shortages, estimated at roughly 10% – or 10,000 RDNs annually, affecting hospitals, long-term care, community health, and rural areas. The proposed rule will deepen shortages across the sector, limiting the country's ability to meet the needs of communities and is not aligned with the Administration's stated goal of "Making America Healthy Again."

Without recognition as a professional program, RDN students may face borrowing caps that do not reflect the real costs of graduate education and required supervised practice. This would force students toward higher-interest private loans, delay or prevent degree completion, and worsen workforce shortages. These barriers fall hardest on students from low- and middle-income backgrounds and risk reducing diversity in the profession.

RDNs play a vital role in:

- Managing chronic and acute disease
- Addressing food insecurity and malnutrition
- Delivering preventive care and reducing healthcare costs

A robust health care workforce pipeline is essential to the health of our communities, state, and country. Access to health care across the country will be adversely affected by the current proposal. If fewer students can afford to enter the field, patients and communities lose access to essential nutrition care.

We urge the Department to finalize regulations that safeguard access to required graduate education for clinically trained health professionals like RDNs. For these reasons, the Academy of Nutrition and Dietetics respectfully urges the Department to:

1. **Recognize Nutrition and Dietetics as a professional program** for purposes of the OBBB loan-limit framework, given the field's graduate-degree entry, required clinical/supervised training, accreditation, and state licensure landscape.
2. **Make explicit that programs requiring supervised clinical practice to enter patient care** (e.g., ACEND-accredited programs) fall within the professional-program definition
3. **Affirm alignment with Department's mission** by ensuring that federal student-aid policy does not impose disproportionate financial barriers on students in required graduate-level healthcare training pathways, including RDNs.

Thank you for your consideration and for supporting access to essential healthcare careers.

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