

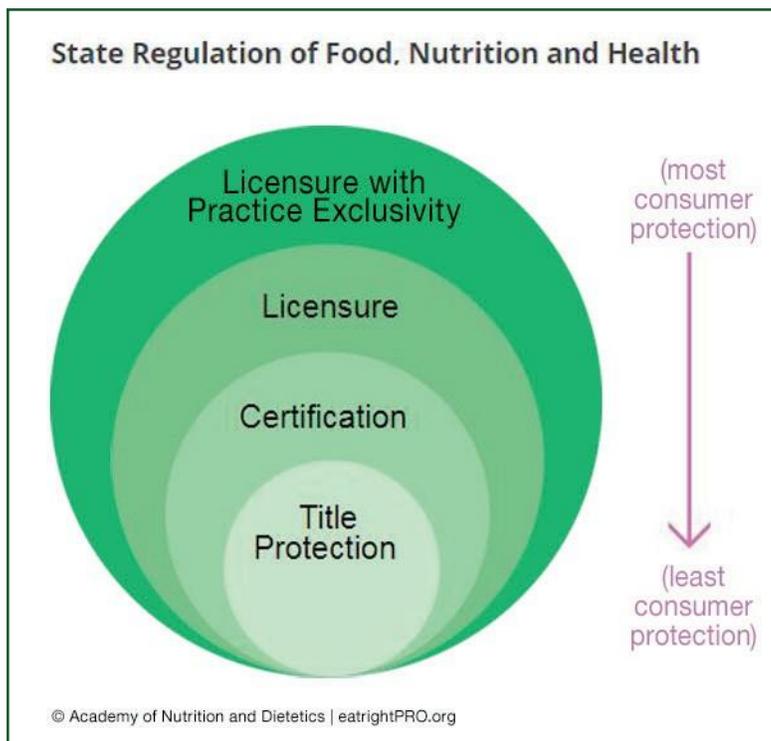
Unfortunately, patients and communities receiving conflicting, confusing and often inaccurate nutrition advice bear the physical and financial costs, often resulting in significant harm and even death.

Nature of Nutrition and Dietetics Regulation

Regulation of the nutrition and dietetics profession increases public safety by reducing the prevalence of unethical and unsafe practices. At present, 47 states, Puerto Rico and the District of Columbia have statutory provisions regulating the practice of nutrition and dietetics and/or associated titles used by such practitioners, such as “dietitian” and “nutritionist.” The Academy’s dedication to protecting consumers is reflected in our advocacy to enact, maintain or strengthen states’ dietetics licensure laws that hold these health care practitioners to high standards. This commitment is a central part of the Code of Ethics for the Nutrition and Dietetics Profession for the Academy.

State regulation of dietetics and nutrition takes three forms, although there is some overlap and some difference in what is regulated between and among each form:

- **Licensure**
- **Certification**
- **Title Protection only**



The most effective nutrition and dietetics regulations include two parts:

- Establishment of a scope of practice for nutrition professionals who meet the specified minimum credentials to perform certain tasks, such as medical nutrition therapy or other complex nutrition care services.

Licensure

States’ professional licensing laws determine and help consumers identify who is qualified to provide a particular set of specified services, known as the profession’s *scope of practice*. Individuals qualify for licensure by attaining accredited education, experience and examination requirements that demonstrate competency in their field. Most states have adopted strong licensure laws that specify the minimum credentials required to (1) use various titles, such as “dietitian,” “nutritionist,” “licensed dietitian nutritionist” or “registered dietitian nutritionist” and (2) provide medical nutrition therapy and other dietetics and nutrition services.

Certification

Certification is state recognition of practitioners who have met the standards of qualification as a RDN. Certification ensures that nutrition professionals are held to established standards of practice, limits the use of certain titles to certified practitioners and typically establishes a mechanism for sanctioning them if they practice inappropriately. However, certification does not prevent unqualified people from practicing in the state.

Title Protection

Similar to certification, this least protective form of state regulation permits anyone to practice the profession, but only people with specified qualifications or credentials (such as the RDN credential) may hold themselves out as dietitians or nutritionists, or use other titles specified in the title protection statute. Unlike certification, however, states with a mere title protection statute have no state-established standards of practice or ethics that protect the public.

- A legislatively protected scope of practice, meaning only those individuals with sufficient qualifications to become properly licensed may legally provide services within the regulated scope of practice.

How Licensure Protects the Public

Licensure is common and virtually mandatory for health care professions and other occupations in which potential harm may result from incompetent or unqualified practice. Licensure helps consumers identify dietitians and nutritionists who meet states' minimum qualifications for education and training. In most states, registered dietitian nutritionists, like nurses, physicians, pharmacists, psychologists, paramedics, lawyers, teachers and certified public accountants, must apply for and maintain a license to practice.

High Standards for Medical Nutrition Therapy

The Academy believes that licensure is especially important when it comes to the standards set for medical nutrition therapy and other complex dietetics and nutrition services. Such services should only be provided by individuals who have at minimum the specialized training and competencies of RDNs. Therefore, the Academy works with other professions in the nutrition space — such as physicians, chiropractors, pharmacists, certified nutrition specialists, naturopaths, health coaches — on various legislative and licensure initiatives.

When states set licensure qualifications, they almost uniformly choose to mirror those of the RDN, reflecting the National Academies of Sciences, Engineering and Medicine's (formerly the Institute of Medicine's) recognition of RDNs as "the single identifiable group of health-care professionals with standardized education, clinical training, continuing education and national credentialing requirements necessary to be directly reimbursed as a provider of nutrition therapy."¹

When the federal government determined the qualifications necessary to provide medical nutrition therapy within Medicare, it set education and experience standards essentially mirroring those uniquely possessed by RDNs.²

The Nutrition Environment in Massachusetts

Cancer and heart disease are the leading causes of death in Massachusetts. Over 9.5% of Massachusetts residents have diabetes, while another 33% have prediabetes and may be unaware. The adult obesity rate is 25.9%, up from 15% in 2000. Evidence-based counseling provided by qualified nutrition professionals helps improve quality of life, lower health care costs, reduce medication usage and increase productivity of our work force. Ensuring that Massachusetts residents have access to competent, qualified nutrition advice to address these and other chronic conditions would be best achieved by passing enhanced professional regulation for dietitian nutritionists. One example is authorizing RDNs to provide telehealth services, which enhances delivery of cost-effective care to residents from the most-qualified providers.

Conclusion

Licensure laws decrease the potential for discriminatory, arbitrary or conflicting rules, while protecting the public by ensuring that health and nutrition providers are held to high standards. Standardized criteria facilitate portability of services across state lines and ensure that the public receives consistent and high-quality nutrition advice. The Academy urges states across the country to protect the public by strengthening professional regulation.

For more information, visit www.eatrightpro.org/advocacy/licensure/professional-regulation-of-dietitians.

Licensure Protects the Public

- Licensure helps consumers identify dietitians that meet minimum qualifications.
- Regulation increases safety by mitigating unethical and unsafe practices.
- Standardized criteria facilitate services across states via telehealth.

¹ Committee on Nutrition Services for Medicare Beneficiaries. "The Role of Nutrition in Maintaining Health in the Nation's Elderly: Evaluating Coverage of Nutrition Services for the Medicare Population." Washington, DC: Food and Nutrition Board, Institute of Medicine; January 1, 2000 (published).

² 42 U.S.C. 1395x(w)(2) (Defining "registered dietitian or nutrition professional").