

Nutrition Counseling and the Aging Network

A Guide for Registered Dietitian Nutritionists (RDN)



Nutrition and Aging Resource Center

Background and Purpose

What is the Older Americans Act (OAA)?

The Older Americans Act of 1965 established the Administration for Community Living (ACL) to administer grant programs and services supporting older adults. Title IIIC of the OAA establishes the Nutrition Services Program to provide congregate and home delivered nutrition for older adults aged 60 or older, their spouses, volunteers, and people with disabilities who reside with eligible older adults. The OAA also authorizes states to provide nutrition counseling and nutrition education to older adults. The purpose of the nutrition program is threefold:

- Reduce hunger, food insecurity and malnutrition of older adults
- Promote socialization of older individuals
- Promote the health and enhanced well-being of older people by assisting them in gaining access to nutrition and other disease prevention and health promotion services to delay the onset of adverse health conditions resulting from poor nutritional health or sedentary behavior

The Aging Network

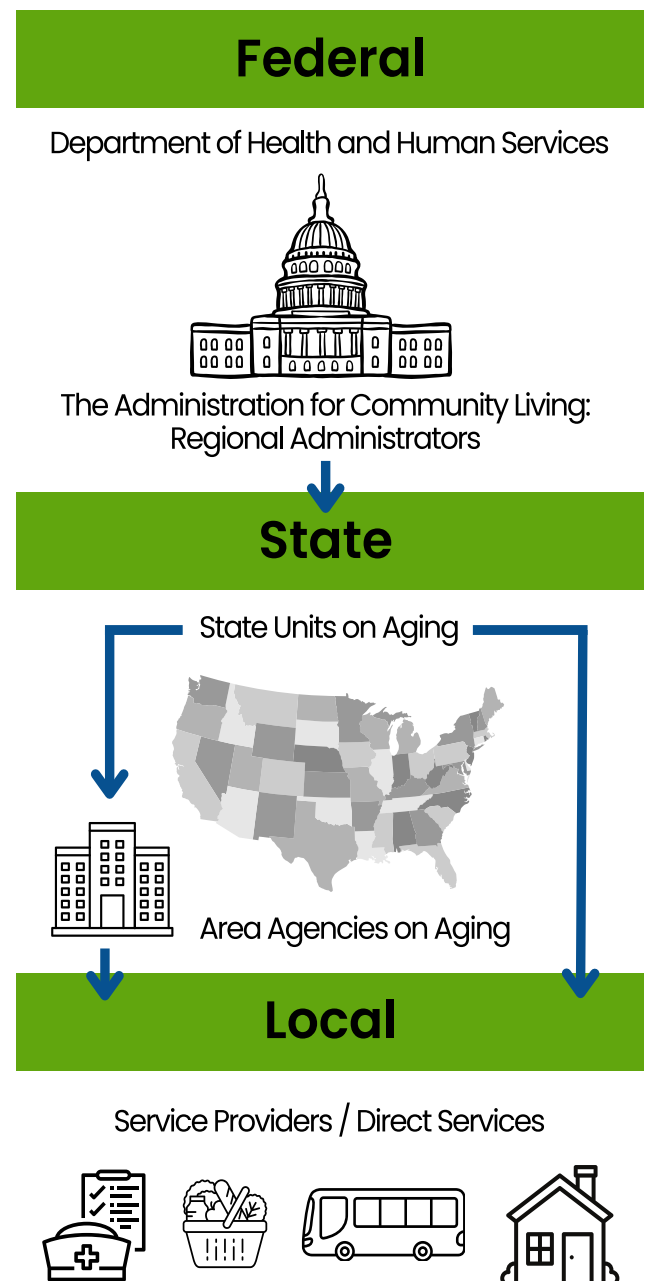
The interconnected structure of agencies created by the OAA is known as the “aging network.” The national aging network is led by the Administration for Community Living (ACL) at the federal level. The aging network includes 56 State Units on Aging for states and territories. State Units on Aging create planning and service areas called Area Agencies on Aging (AAAs) to carry out the OAA. AAAs may directly provide or contract with local service providers to provide services.

[Eldercare Locator](#) is a resource powered by ACL that can be used to connect to the agencies and providers in the aging network.

Why should nutrition counseling be considered an essential part of OAA services?

As part of the Older Americans Act, congregate and home delivered meals are required to comply with the most recent Dietary Guidelines for Americans and provide a minimum of 33 1/3 percent of the dietary reference intakes (DRIs) per meal. Per the Administration for Community Living’s State Performance Report, the definition for nutrition counseling is: “A standardized service as defined by the Academy of Nutrition and Dietetics that provides individualized guidance to individuals who are at nutritional risk because of their health or nutrition history, dietary intake, chronic illness, or medication use, or to caregivers. Counseling is provided one-on-one by a Registered Dietitian Nutritionist and addresses the options and methods for improving nutrition status with a measurable goal”.

For reporting purposes, service units are reports in hours. A partial hour may be reported to two decimal places. For example, a nutrition counseling session lasting approximately fifteen (15) minutes would be reported as 0.25 hours.



Nutrition counseling provides an opportunity to educate older adults on how to plan meals to reach 100 percent of nutrition recommendations for the day in order to optimize nutrition and reduce the risk of chronic disease. [Medical Nutrition Therapy \(MNT\)](#) is a specific type of nutrition counseling that involves a personalized, nutrition-based treatment plan created by RDNs, with a goal to help manage chronic conditions, and enhance well-being through nutrition. All MNT is nutrition counseling; not all nutrition counseling is MNT.

Additional Resources

RDNs can use both the Scope of Practice and Standards of Professional Practice as reference guides for work performed within the aging network. These can be accessed with an Academy of Nutrition and Dietetics Membership and/or Commission on Dietetic Registration login

- [Registered Dietitian Nutritionist Scope of Practice \(Academy of Nutrition and Dietetics\)](#): Provides a range of roles, activities, and regulations within which nutrition and dietetics practitioners perform.
- [Registered Dietitian Nutritionist Scope and Standards of Practice \(Commission on Dietetic Registration\)](#): comprehensive framework describing the competent level of practice as well as the depth and breadth of practice in nutrition and dietetics.

Role of the Registered Dietitian Nutritionist

What is the role of the Registered Dietitian Nutritionist in the Aging Network?

The role of the RDN varies at every agency and organization. The RDN may support many purposes within the RDN's scope of practice at each organization. Area Agencies on Aging (AAAs) throughout the nation have had great success by staffing a licensed RDN. The OAA requires states to "utilize the expertise of a dietitian." In fact, some states require each of their AAAs to have a licensed RDN on staff for a minimum of hours per week to meet this requirement.

Sample Job Duties of a Registered Dietitian Nutritionist

- Develop and provide nutrition education.
- Conduct nutrition counseling, including but not limited to conducting nutrition assessments, screenings, Medical Nutrition Therapy (MNT), and follow-up care.
- Assist in planning and approving menus to meet nutritional requirements.
- Supervise meal sites.
- Create nutrition newsletter content.
- Conduct health promotion classes.
- Assist with grant applications.
- Participate in the promotion of nutrition services.
- Maintain and update professional knowledge by participating in educational opportunities, read professional publications, maintain personal networks, and participate in professional organizations.
- Other nutrition-related tasks, as needed.



Registered Dietitian

The role of the Registered Dietitian will vary at every agency and organization. The Registered Dietitian may support many purposes within the scope of practice at each organization.

Steps to Complete Nutrition Counseling

As part of the Older Americans Act, congregate and home delivered meals are required to provide at least one-third of the Dietary Reference Intakes (DRIs) and Dietary Guidelines for Americans (DGAs) for an older adult. Nutrition counseling provides an opportunity to educate older adults on how to plan meals to reach 100 percent of nutrition recommendations for the day to optimize nutrition and reduce the risk of chronic disease.

Initial Consultation

1. Schedule the consultation

- Contact the client to schedule an appointment and arrange to obtain any necessary paperwork prior to the consultation. Online platforms may have automatic scheduling options, and the AAA can post on its website a direct link for clients to make an appointment.
- When scheduling a consultation, educate the client on what to expect next. For example, explain that prior to the first appointment necessary documents may need to be completed via mail or online.

Examples of these may include:

- ◇ Cancellation policy
- ◇ Consent form
- ◇ Client goals
- ◇ Insurance/billing information
- ◇ Medical/diet history
- ◇ Seven-day food journal
- ◇ Labs/exam results
- ◇ Primary care provider or referring specialist contact information

2. Determine the location for consultation

- The preferred location for a consultation is usually the AAA office, congregate meal site, or client's home.
- Telehealth and telephone consultations can be offered.
- Ensure there is privacy for the participant before, during, and after counseling.

3. During the consultation

- Practice counseling skills and active listening. Be sure to go through goals with client and establish a plan for subsequent, follow up appointments. This may be a good time to book the next follow-up appointment.
- Complete documentation during and after the consultation (more information below)
- At the end of the consultation, consider providing the client any resources discussed, recap of discussion, goals and details about next appointment.

4. After the consultation

- Complete charting and documentation.
- Send any necessary materials to the referring provider.
- Complete billing and submit as appropriate.



Follow-Up Appointment

Example structure of a follow-up:

- Total: 45 minutes
- Engage in small talk to reestablish a connection with client (5 minutes)
- Discussion on challenges (10 minutes)
- Discussion on successes (10 minutes)
- Nutrition plan (10-15 minutes)
- Goals review (5 minutes)
- Next appointment (5 minutes)

Documentation

Documentation should be completed before, during, and after the consultation. An online platform can be used to chart; ensure that it is secure and HIPAA compliant.

If planning to bill Medicare or other insurance, the RDN will likely need a referral from the client's healthcare provider. A referral will indicate the client has the appropriate diagnoses for reimbursement and any other important diagnoses for nutritional evaluation. This referral documentation may also be an opportunity to obtain any medical information directly from the provider.

The Nutrition Care Process is a systematic method that RDNs use to provide nutrition care and includes the following steps:

- Nutrition Assessment: Collection of food intake and nutrition-related history, biochemical data, medical tests and procedures, anthropometric measurements,
- nutrition-focused physical findings, and client history. This information may be collected through data from client or provider.

- Nutrition Diagnosis: Data collected during assessment may guide the appropriate nutrition diagnosis terms.
- Nutrition Intervention: RDN should select nutrition intervention that will address the root cause of the problem and the symptoms of each diagnosis.
- Nutrition Monitoring/Evaluation: Monitoring if the client has achieved goals or is making progress toward planned goals.

Additional Resources

- [Example Medical Nutrition Therapy Referral Form](#): The form can be adapted to use diagnosis codes and it includes a list of common ICD codes.
- [Electronic Nutrition Care Process Terminology \(AND\)](#): Standardized terminology for the Nutrition Care Process.
- [Nutrition Focused Physical Exam Hands-on Training Workshop \(AND\)](#): Research has shown that early intervention for a client with malnutrition may decrease overall health care costs and improve the quality of life for the client. RDNs can perform a Nutrition Focused Physical Exam to more accurately provide a client with a malnutrition diagnosis.
- [Example New Client Nutrition History Form](#): An example nutrition assessment form provided to clients before consultation.
- [Medical Nutrition Therapy Works for Seniors](#): A resource guide for RDNs and senior nutrition programs (can be accessed with Academy of Nutrition and Dietetics membership).

Telehealth

According to Health Resources and Service Administration, telehealth is health care provided primarily online with internet access on a computer, tablet, or smartphone. It allows the healthcare professional to provide care for the client without an in-person visit.

Options for telehealth care include:

- Talking to the provider over the phone or video chat
- Sending and receiving messages from the provider using messaging or email
- Sending and receiving messages from the provider using messaging or email
- Using remote monitoring so the provider can check on the client at home

Considerations for using telehealth:

- Be sure your liability insurance includes coverage for telehealth services before utilizing. If you plan to bill insurance, check specific requirements related to telehealth services.
- Telehealth Guide from the Academy of Nutrition and Dietetics (can be accessed with Academy of Nutrition and Dietetics membership)
- HHS Telehealth Information

Tips for hosting successful telehealth appointments:

Before the first appointment

- Educate client on equipment needed, determine any obstacles the client may face including accessing and utilizing the necessary technology
- Explain to the client how the session will work
- Be sure to have a contingency plan for technology, double check the clients understands the plan

For the appointment

- Dress professionally
- Ensure clear sound and microphone quality
- Check for enough lighting that you can be seen clearly on the screen
- A neutral wall color or background will help limit
- Visual distractions
- Limit additional distractions by ensuring alerts and notifications are silenced, background noise is limited and other interruptions are minimal.
- Adjust your camera to be at eye level



Telehealth Platforms

Some telehealth platforms have journal and communication options where the client may journal food intake and communicate with the RDN.

Examples of HIPAA-compliant platforms:

- [Doxy.me](#) (high reviews)
- [Simple Practice](#)
- [Coreplus](#)
- [Practice Better](#)
- [Get Healthie](#)
- [VSee](#)
- [Zoom for Healthcare](#)



* FaceTime, Skype, text messages are not HIPAA-compliant

Telephonic Consultation

Participants may feel more comfortable with telephonic consultations vs. video or even in-person consultations. Telephonic consultation could be an option for participants who do not have the appropriate technology for a video conference. Keep in mind, however, that rapport may be more difficult to build via telephone than video or face-to-face.

Billing and Reimbursements

How will the nutrition counseling be paid?

If other insurance providers cover nutrition counseling for an individual, it must charge those first. Example funding sources listed in order of priority usage:

1. Medicare or Medicaid
2. Private Insurance
3. Older Americans Act Funding/ Voluntary Contributions
4. Private Pay

Medicare

Medicare nutrition counseling benefits are often under utilized and represent a revenue opportunity for community-based organizations. As of 2020, Medicare Part B may cover Medical Nutrition Therapy (MNT) services for older adults with diabetes or kidney disease or those who had a recent kidney transplant. Medicare covers three hours of MNT in the initial year of referral, and up to two hours of MNT for subsequent years. According to Medicare, telehealth services include office visits, psychotherapy, consultations, and certain other medical or health services that are provided by a doctor or other health care provider who is located elsewhere using audio and video communication technology, such as a phone or a computer. In order for the RDN to be reimbursed for nutrition counseling services, the RDN must be a Medicare approved provider. Here are steps to become a provider:

1. Obtain a National Provider Identification (NPI)

- An NPI is a unique 10-digit number issued by CMS to all health care providers in the U.S. If you are unsure if you have previously applied for and received an NPS, you can search the NPI registry. An NPI is valid for life, and the RDN may have received one while at another place of employment.
- If you need to apply for a NPI, you can either:
 - ◊ Fill out an NPI application online via the NPPES (National Plan & Provider Enumeration System) website. NPPES website will ask you to set up a username and password, which will also be used for Medicare application on PECOS (Provider Enrollment, Chain, and Ownership System), **OR**
 - ◊ Download a NPI application to send by mail.

NOTE: CMS encourages applying for an NPI online. Applications submitted online take about 45 days to process; mail-in applications may take 60 days.

2. Enroll to become a Medicare provider

- [Enroll online](#)
- Enroll by mail
- [Enrollment Example](#)

Once you become a Medicare-approved provider, additional considerations may be made.

3. Assessment/Referrals

- A referral must be completed and on file for the Medicare claim. See [example MNT referral form](#).

4. Advanced Beneficiary Notice of Non-Coverage

- The Advanced Beneficiary Notice of Non-Coverage (ABN), Form CMS-R-131, allows Fee-For-Service beneficiaries to make an informed decision about whether to approve the item or service that may not be covered and accept financial responsibility if Medicare does not pay. If the beneficiary does not receive written notice when it is required, the beneficiary may not be held financially liable if Medicare denies payment, and the provider or supplier may be financially liable if Medicare does not pay.

5. MNT Services

- As of 2020, Medicare Part B may cover Medical Nutrition Therapy (MNT) services for diabetes, kidney disease, or a recent kidney transplant. Medicare covers three hours of MNT the initial year of referral, and up to two hours of MNT for subsequent years. Some Medicaid providers cover Enhanced Nutrition Therapy and post-discharge meal program.

If Medicare denies a claim and the participant is on Medicaid as well, it can possibly be submitted to Medicaid for payment consideration.

- [ICD 10 Billing Codes for Medicare](#)

Procedure codes for Medicare:

- Initial Nutrition Counseling: 97802
- Follow-Up Nutrition Counseling: 97803
- For interactive audio and video sessions (Telehealth), check the Medicare requirements when filing the claim.

Medicare Fee Schedule for RDNs:

Each year, the Centers for Medicare and Medicaid Services release the calendar year Physician Fee schedule (PFS). The PFS lists payment rates for physicians. By law, RDNs are paid 85 percent of the physician's rate.

- [Physician Fee Schedule Look Up Tool](#)

Medicaid

Medicaid may cover nutrition counseling through an Elderly or Health & Disability Waiver if the consumer is on Medicaid. Some Medicaid providers cover Enhanced Nutrition Therapy and post discharge meal programs (example: [Humana Well Dine Meal Program](#)). Look into [State Medicaid Profiles](#) to see which Medicaid programs may cover nutrition counseling.

Procedure codes for Medicaid:

- Initial Nutrition Counseling: 97802
- Follow Up Nutrition Counseling: 97803
- For telehealth, check with your local or state Medicaid requirements to complete the billing process.

Private Insurance

Coverage will be specific to the insurance company and health care plan of the participant. Determine whether the AAA or RDN will organize the billing process.

Older Americans Act Funding

Older Americans Act Title IIIC funding can be used to pay for nutrition counseling. Nutrition Counseling must align with the Academy of Nutrition and Dietetics and shall be provided as appropriate, based on the needs of meal participants, the availability of resources and the expertise of a RDN.

Voluntary Contributions

The OAA directs service providers to use contributions to expand a service funded by the Title III grant award for which they were given. For example, a contribution for home-delivered meals must be report as income to the home-delivered nutrition program and used to expand home-delivered nutrition services, such as home-delivered meals, or nutrition counseling for home-delivered meals clients.

Marketing

"The toughest challenge is to sing your own praises. A dietitian must understand why his/her work is important and make a case for it."
–Kathy Gillen, *Journal of Academy of Nutrition and Dietetics*

How to Assist AAAs in Marketing Efforts

- Assist AAAs with health fairs and grand openings; provide a booth for information about services the RDN offers.
- Host "free" ten-minute discovery calls with virtual introductions.
- Coordinate with local universities' dietetics programs to assist with counseling sessions.
- Provide meal-site manager awareness and training about nutrition counseling



Social Media:

- Create videos with recipes, nutrition tips, nutrition counseling testimonials, and grocery store tours.
- Create or post content like blog posts on your professional pages for the AAA to share on their pages.

Website:

- Create a brief bio with headshot for the AAA to share on their website. If your online platform allows for it, consider providing an online scheduling option directly on the AAA website for clients to schedule a nutrition counseling consultation. Include RDN contact information.
- Best Practice: An Area Aging on Aging in New York added the DETERMINE nutrition risk checklist on its website to give clients the ability to assess nutritional status. If the client is at moderate or high risk, the client is encouraged to contact the AAA or to see the client's health care provider.

Videos:

- Videos may increase engagement on social media channels, educate consumers, and reach audiences in a different way. Scan other websites with nutrition or cooking videos you enjoy, take notes, and ask the following questions:
 - ◊ How long was the segment?
 - ◊ What do you like about the video?
 - ◊ Did the video lead you to take further action?
 - ◊ Did anything detract from the video, such as jerky movement or poor sound quality?

Marketing Video Tips:

- Invest in good equipment like a webcam and microphone. Sound is important. People take 70% of their information from the sound, not the picture, so it has to be clear.
- Make sure the space is well-lit with no odd shadows.
- One- or two-minute segments are typically best in terms of clip length.
- Interviews should be close up.
- Don't wear red because it can look fuzzy on camera.

Examples Marketing Videos:

- Cooking demonstrations
- Event videos
- Expert interviews
- Participant interviews
- Educational or how-to videos

Additional Resources

- [Marketing NRCNA Issue Brief](#): More information about general marketing and examples.

"When people see your face and hear your tone of voice, they develop a trust in you, and they'll justify their decision to work with you based on that feeling."
–Sara Aase, *Journal of the Academy of Nutrition and Dietetics*

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