



# Nevada Office of HIV

## Nevada Ryan White Part B Program

### Medical Nutritional Therapy Services

#### I. HRSA Service Definition

The Health Resources Services Administration (HRSA), defines Medical Nutrition Therapy (MNT) to include:

- Nutrition assessment and screening
- Dietary/nutritional evaluation
- Food and/or nutritional supplements per medical care provider's recommendation
- Nutrition education and/or counseling

These activities can be provided in individual and/or group settings and outside of HIV Outpatient/Ambulatory Health Services.

Program Guidance: All activities performed under this service category must be pursuant to a medical care provider's referral and based on a nutritional plan developed by the Registered Dietitian or other licensed nutrition professional. Activities not provided by a registered/licensed dietician should be considered Psychosocial Support Services under the HRSA RWHAP.

The State of Nevada recommends that all agencies utilize validated best practices for the execution of their service category. If an agency needs resources or recommendations to locate or implement best practice tools please contact the Recipient Office and we will provide necessary guidance. It is an expectation that all agencies implement a program that can have measurable positive effects on our clients.

#### II. Service Goals and Objectives

The goal of this service category is to optimize immunity, reduce weight loss, identify nutritional deficiencies, and improve the overall wellbeing for People Living with HIV (PLWH), through the provision of Medical Nutrition Therapy which includes nutritional counseling and the prescription of dietary regimens prescribed by a physician, licensed nutritionist or registered dietician.

#### III. Currently Funded Medical Nutrition Therapy Services

- A.) Nutrition Education/Counseling
- B.) Nutritional Supplements
- C.) Nutrition Assessment and Screening
- D.) Medical Nutrition Monitoring
- E.) Medical Nutrition Plan



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### IV. Medical Nutrition Therapy (MNT)

#### Nutritional Education/Counseling (Service A)

Individualized and/or group dietary instructions that incorporate diet therapy counseling for a nutrition-related problem. This level of specialized instruction is above basic nutritional counselling and includes and individualized dietary assessment performed by a Registered Dietician (RD). Client nutritional health education will be offered to each client in a group or individual setting, topics may include, but are not limited to:

- Basic nutrition needs;
- Special dietary needs of people with HIV/AIDS;
- Coping with complications;
- Food and water safety;
- Drug Food Interactions;
- Developing a nutritional plan; and
- One-on-one nutritional counseling.

Dietician may also provide clients with referrals to specialized health care providers/services as needed to augment clients' needs that includes, but are not limited to:

- Other medical professionals such as social workers, mental health providers, or case managers;
- Community resources such as food pantries; SNAP/food stamps; Women, Infants and Children Supplemental Food Program (WIC), etc.;
- Exercise facilities;
- Other education and economic resource groups.

#### Nutritional Supplements (Service B)

Services include providing nutritional supplement provisions deemed medically necessary and based on a medical care provider's recommendation. Upon receipt of the written referral by the medical care provider to the RD, clients may receive up to a 90-day supply of nutritional supplements at one time in accordance with their MNT developed nutritional plan. Nutritional supplements must be outlined in the written nutrition plan by the RD. Nutritional supplements which may directly affect HIV/co-morbidities includes:

- Caloric Supplements
- Fiber Supplements
- Multivitamin Supplements

#### Nutrition Assessment and Screening (Service C)

An initial MNT assessment will be conducted by a RD pursuant to a medical provider's referral.



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Clients will have a comprehensive initial intake and assessment by a registered dietician. The assessment shall include:

- Medical considerations;
- Food/dietary restrictions, including religions based, allergies, intolerances, interactions between medications, food and complimentary therapies;
- Diet history and current nutritional status, including current intake;
- Macro- and micro-nutritional supplements;
- Height and weight, weight trends, goal weight, ideal body weight and % ideal body weight;
- Lean body mass and fat %;
- Waist and hip circumferences;
- Food preparation capacity; and
- Food preferences and cultural components of food.

The dietician will contact the patient for the initial nutritional assessment within five (5) business days of the referral. The initial assessment must be completed within ten (10) business days of the initial appointment.

### **Medical Nutrition Monitoring (Service D)**

Medical Nutrition Monitoring and evaluation shall be conducted by the dietitian to determine the degree to which progress is made toward achieving the goals of the medical nutritional plan.

### **Medical Nutritional Plan (Service E)**

Following the assessment, dietitians will take the information they've gathered in the assessment and provide patient-centered goals and individualized nutrition recommendations in the nutritional plan. A care plan based on the initial assessment and includes:

- Developing and implementing a nutrition care plan;
- Providing nutrition counseling and nutrition therapy;
- Distributing nutritional supplements, when appropriate;
- Providing nutrition and HIV trainings to consumers; and
- Distributing nutrition related education materials to consumers.

A nutritional plan will be developed appropriate for the client's health status, financial status, and individual preference. A Nutritional Plan is completed within ten (10) business days of Nutrition Assessment. Required content of the Medical Nutritional Plan, includes:

- Nutritional diagnosis;
- Measurable goals;
- Recommended services and course of medical nutrition therapy to be provided, including the types and amounts of nutritional supplements and food provided, quantity, and dates;



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- Date service is to be initiated;
- Planned number of and frequency of sessions;
- Date of reassessment;
- Any recommendations for follow-up; and
- Termination date of Medical Nutrition Therapy.

The plan will be signed by the Registered Dietician developing the plan. The Nutrition Plan will be updated as necessary, but no less than at least twice per year, and will be shared with the client, the client's primary medical care provider, and other authorized personnel involved in the client's care.

### **V. Process**

The Service Standards provide a step-by-step process for conducting Medical Nutritional activities. The process steps below provide additional information in implementing these roles.

- A. Before services are provided under this Service Category, subrecipient staff must ensure current Ryan White Part B enrollment through CAREWare's Eligibility and Enrollment Fields tab.
- B. All recommendations for Medical Nutritional Therapy Services must come from a:
  - Medical Physician(s), or
  - Nurse Practitioner(s), or
  - Physician Assistant(s), or
  - Advanced Practice Registered Nurse(s) (APRN), or
  - Registered Nurse(s).
- C. Timelines: All completed nutritional plans and follow-up documents must be documented in a client's file by the subrecipient for review by the Recipient.
- D. Medical Nutrition Plan: All clients receiving Medical Nutritional Therapy will be provided services pursuant to a medical care provider's recommendation, and a Medical Nutrition Plan developed by a licensed registered dietitian who will conduct an initial assessment of each client.
  - Subrecipients shall ensure that the licensed registered dietitian consults with each client's medical care provider prior to designing a dietary plan specific to the clients' needs.
  - Subrecipients shall ensure that clients receive individual nutritional assessments, nutritional follow-up counseling as needed, therapeutic diets and nutritional information.
  - Subrecipients shall ensure that an individualized nutritional plan is developed for each individual seen, including an assessment of over-the-counter and prescribed



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medications regimen of each client as it relates to his/her nutritional needs. This plan shall further reflect the needs, circumstances, and food preferences of each client.

- E. **Client Records:** Subrecipients shall ensure that the staff person providing nutritional services be responsible for maintaining clients records in relation to this program.

Records will include, but not be limited to a minimum of:

- The individual client nutritional/dietary plan;
- Nutritional progress notes for each client counseling session conducted under this contract;
- Progress notes connected with the follow-up sessions shall indicate client progress in following the recommendations of their dietary plan.
- obtains and documents HIV primary medical care provider contact information for each patient.
- MNT services must be provided in consultation with the medical care provider for medical coordination.
- MNT provider collects and documents assessment history information with updates as medically appropriate prior to providing care.

- F. **Medical Nutrition Monitoring:** Registered Dieticians shall ensure that they assess changes in nutritional intake for participating clients. Registered Dietician follow ups may include review of client information, such as:

- relevant laboratory data;
- nutrition prescription or desired outcome;
- diagnosis and medical history;
- medications;
- need for additional nutrition education and counseling;
- alternative and complementary therapies;
- living situation; and
- any other relevant information that may impact a consumer's ability to care for him or herself.

- G. **Discharge/Termination of Services:** Subrecipients shall ensure documentation of the termination of services. An individual is deemed no longer to need Medical Nutritional Therapy if one or more of these criteria is met:

- Client's medical condition improves, and MNT services are no longer necessary
- Client deceased
- Client moves out of the service area

Date of discharge, reason, and any recommendations for follow up shall be documented in the client's record and the medical care provider is notified.



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## VI. Licensing, Knowledge, Skills, and Experience

The Medical Nutritional Therapy program must be administered by a Registered Dietician Licensed in the State of Nevada.

## VII. Summary

These service specific standards shall be followed by all funded subrecipient that provide Part B funded Medical Nutritional Services. It is expected that all subrecipients follow these standards as well as the universal programmatic and administrative National Monitoring Standards. Subrecipient organizations and staff may exceed any of these standards as part of the program delivery.

## VIII. Recommendations

All Part B funded subrecipients are to adhere to these service category specific standards, program standards, the primary program standards and ensure that they are familiar with their individual Part B subgrant to meet the expectations of their deliverables.

## IX. Revision Schedule

Published	April 11, 2019	Located at <a href="http://endhiv.org">endhiv.org</a>
Revised	August 9, 2019	Located at <a href="http://endhiv.org">endhiv.org</a>
Revised	August 12, 2022	Located at <a href="http://endhiv.org">endhiv.org</a>

## X. Contact

For further information or clarification please contact the Nevada Office of HIV at [NVRWPB@health.nv.gov](mailto:NVRWPB@health.nv.gov)