



October 11, 2024

Tina M. Kelley
Rules Coordinator
Board of Licensed Dietitians
c/o Office of Professional Licensure & Certification
7 Eagle Square
Concord, NH 03301

RE: Notice Number 2024-163, Rule Number Diet 300, License Requirements

Dear Ms. Kelley:

The New Hampshire Academy of Nutrition and Dietetics (the “NHAND”) is pleased to provide comments on proposed changes to *Diet 300, Notice Number 2024-163*. NHAND, representing 640 New Hampshire dietitians, is an affiliate of the Academy of Nutrition and Dietetics (the “Academy”), the largest association of nutrition and dietetics practitioners committed to accelerating improvements in global health and well-being through food and nutrition.

In general, we are supportive of the proposed changes recognizing that many of these changes are technical in nature due to many of the licensing duties falling under the purview of the Office of Professional Licensure and Certification (the “OPLC”).

Repeal Diet 301.01 Commission on Dietetic Registration

We are not opposed repealing this definition recognizing the Commission on Dietetic Registration (the “CDR”) is already defined in Diet 102.01 and under the licensing statute.

Readoption of 301.02 with Changes and Renumbering as 301.01

Noting that most of the standard licensing information requested under 301.02 is also required under the requirements of the *Universal Application for Licensure* (as laid out in PLC 304.01 and Plc 304.03), we do not take issue with this change. We appreciate the OPLC’s recognition of the application elements specific to a qualified dietitian with the requirement of submission of the *Dietitian Addendum to the Universal Application for Initial Licensure* and maintaining the requirement of submission of supporting materials specified by Diet 302.03.

Amendments to Diet 302.02 Application Forms

Again, we have no objections to this change, as most of the standard licensing information requested under 301.02 is also required by the *Universal Application for Licensure*, as outlined in PLC 304.01 and PLC 304.03. Regarding the information required by the *Dietitian Addendum to the Universal Application for Initial Licensure* in section (b), we appreciate the OPLC’s maintaining the requirement that an applicant must submit “the applicant’s registration number issued by the CDR.”

The education and training of the registered dietitian (RD) sets the standard for evidence-based dietetics care.¹ While alternative training programs may produce nutrition practitioners capable of delivering nutrition care to varying degrees, it's crucial to acknowledge that their education, scopes of experience, and levels of accountability are distinct from those of registered dietitians. The registered dietitian credential is the only nutrition credential requiring both an education program and supervised practice accredited by a USDE-recognized accreditor.

The [USDE](#) currently recognizes the quality and effectiveness of the Accreditation Council for Education in Nutrition and Dietetics (ACEND) as the accrediting agency for nutrition and dietetics education programs. This recognition is based on review and recommendations to the U.S. Secretary of Education which affirms that ACEND is the reliable authority on the quality of dietetics education programs. As such, ACEND serves as the accrediting agency for education programs preparing students for careers as registered dietitians. Attaining the RD credential mandates the completion of both an [ACEND-accredited academic program and an ACEND-accredited supervised practice program](#). When a program is accredited by a USDE recognized programmatic accreditor, such as ACEND, quality is assured and the safety of students and the public are protected, as there are checks and balances in place.

ACEND is the only dietetic accrediting body that [mandates](#) vital training in acute clinical care, including treating patients with endocrine disorders, cancer, malnutrition, cardiovascular, gastrointestinal, and renal diseases; enteral/parenteral nutrition (tube feeding); and recommending or initiating pharmacotherapy plans. Therefore, we strongly recommend and support requiring, as part of the application process, proof of holding registration with CDR as we believe this implies that an applicant must hold the RD credential and as such, has achieved the requirements of the credential. However, recognizing that the CDR issues multiple credentials² we do recommend that OPLC take this opportunity to clarify what is intended by this requirement. Additionally, in terms of technical changes, in part (b) there appears to be an extra “and” after line (1) that should be removed. In part (4) there is a

¹ The National Academy of Medicine maintains that “the registered dietitian is currently the single identifiable group of health-care practitioners with standardized education, clinical training, continuing education and national credentialing requirements necessary to be directly reimbursed as a provider of nutrition therapy.” 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).

Registered Dietitians provide high quality, evidence-based care to patients and deliver substantial cost savings to the health care system. See Senkus, K, Dudzik, J, Lennon, S, Moloney, L, Handu, D, Rozga, M., *Medical nutrition therapy provided by a dietitian improves outcomes in adults with prehypertension or hypertension: a systematic review and meta-analysis*, The American Journal of Clinical Nutrition (2024) doi: <https://doi.org/10.1016/j.ajcnut.2024.04.012>; Sikand, G, Handu, D, Rozga, M et al. *Medical Nutrition Therapy Provided by Dietitians is Effective and Saves Healthcare Costs in the Management of Adults with Dyslipidemia*, Curr Atheroscler Rep (2023), doi: <https://doi.org/10.1007/s11883-023-01096-0>; Mohr AE, Hatem C, Sikand G, Rozga M, Moloney L, Sullivan J, De Waal D, Handu D, *Effectiveness of medical nutrition therapy in the management of adult dyslipidemia: A systematic review and meta-analysis*, Journal of Clinical Lipidology (2022), doi: <https://doi.org/10.1016/j.jacl.2022.06.008>; Morgan-Bathke M, Baxter SD, Halliday TM, Lynch A, Malik N, Raynor H, Garay J, Rozga M, *Weight Management Interventions Provided by a Dietitian for Adults with Overweight or Obesity: An Evidence Analysis Center Systematic Review and Meta-Analysis*, Journal of the Academy of Nutrition and Dietetics (2022), doi: <https://doi.org/10.1016/j.jand.2022.03.014>; Franz MJ, MacLeod J, Evert A, Brown C, Gradwell E, Handu D, Reppert A, Robinson M, *Academy of Nutrition and Dietetics Nutrition Practice Guideline for Type 1 and Type 2 Diabetes in Adults: A Systematic Review of Evidence for Medical Nutrition Therapy Effectiveness and Recommendations for Integration into the Nutrition Care Process*, Journal of the Academy of Nutrition and Dietetics (2017), doi: <https://doi.org/10.1016/j.jand.2017.03.022>; Bradley DW, Murphy G, Snetselaar LG, Myers EF, Qualls LG. *The incremental value of medical nutrition therapy in weight management*. Managed Care. 2013;22(1):40-5.

² The Commission on Dietetic Registration issues the following credentials: [Registered Dietitian](#), [Dietetic Technician](#), [Registered, Board Certified Specialist in Gerontological Nutrition](#), [Board Certified Specialist in Obesity and Weight Management](#), [Board Certified Specialist in Oncology Nutrition](#), [Board Certified Specialist in Pediatric Nutrition](#), [Board Certified Specialist in Pediatric Critical Care Nutrition](#), [Board Certified Specialist in Renal Nutrition](#), [Board Certified Specialist in Sports Dietetics](#).

reference to “(4) above.” It appears what was intended was “(3) above.” And, finally, it seems there should be a comma inserted after “affirmative” in part (4). With these considerations we recommend rewriting section (b) as follows. Changes are highlighted.

RECOMMENDATION

(b) In addition to the information required by (a) above the applicant for licensure shall provide the following information on the “Dietitian Addendum to the Universal Application for Initial Licensure”:

- (1) Any other name by which the applicant has ever been known;**
- (2) The applicant's registered dietitian number issued by the CDR, and whether the applicant was registered on or before December 31, 2000;**
- (3) Whether the applicant has practiced in New Hampshire since their application lapsed for non-renewal or without an initial license being issued; and**
- (4) If the answer to (3) above is in the affirmative, a detailed explanation of where the applicant practiced, dates of practice, and a list of duties performed.**

Readopt with Amendment Diet 302.03 Supporting Materials

Again, we appreciate OPLC’s recognition of the importance of verifying an applicant has met the requirements of a qualified dietitian. However, consistent with the capabilities of current technology, we would encourage the OPLC to make use of [CDR’s Online Credential Verification System](#), rather than requiring the sending of a verification letter. Using this online verification system, the OPLC could utilize the registration number provided by the applicant under Diet 302.02(b) to accurately and efficiently verify an applicant’s registration. Employing this method, rather than requiring a verification letter sent directly from CDR to the OPLC would reduce burden on all stakeholders. With this consideration, we suggest rewriting this section to provide as stated below. Changes are highlighted.

RECOMMENDATION

Diet 302.03 Required Supporting Materials. In addition to the completed application forms, **if the OPLC is unable to verify the applicant’s active dietitian registration utilizing CDR’s Online Credential Verification System, upon request,** the applicant shall submit or cause to be submitted to the [board] OPLC [~~:(a) A passport type photo of the applicant taken within 90 days of the application;~~ (b) A] a letter verifying the applicant’s registration with the CDR, sent by CDR directly to the [board] OPLC [~~;~~ and (c) A copy of the applicant’s current CDR card].

Readopt Diet 303.01 Educational and Examination Qualifications

We support the readoption of Diet 303.01 Educational and Examination Qualifications as this rule is consistent with the requirements of the licensing statute.

Repeal 303.02 Additional Qualifications

We do not oppose this repeal, as many of the provisions are inconsistent with modern approaches to rehabilitation and current practices for assessing whether an applicant poses a present public safety risk. However, considering PLC 326-H:12, which states that “an applicant shall be a person of good character,” we seek clarification on what specific actions may lead to a denial of licensure based on a determination that an applicant does not meet the “good

character" standard. Will the OPLC rely on the provisions outlined in 326-H:16, which address suspension and revocation of a license, when considering a denial, or will another section of New Hampshire law apply? Your clarification on this matter would be appreciated.

Readopt with Amendment and Renumber Diet 303.03 as Diet 303.02

We support this change noting, as stated above, that the Accreditation Council for Education in Nutrition and Dietetics serves as the accrediting agency for education programs preparing students for careers as registered dietitians. CDR serves as the credentialing agency for the Academy of Nutrition and Dietetics, setting standards for the profession. This change is appropriate and supports clarity.

The New Hampshire Academy of Nutrition and Dietetics appreciates the opportunity to provide these comments and is happy to work with the Department to provide further explanation as to any of our comments. Please feel free to reach out to Jennifer Messer or Charla Burill with any questions or requests for additional information.

Sincerely,



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