

P.O. Box 3378 HONOLULU, HAWAII 96801-3378 in reply, please refer to:

House Committee on Health

January 31, 2012

Testimony of Loretta J. Fuddy, A.C.S.W., M.P.H. Director of Health HB 2570

- 1 Department's Position: The department strongly supports this bill as part of the governor's New Day
- 2 initiatives to improve and streamline government.
- 3 **Fiscal Implications:** There are no measureable fiscal implications with this bill.
- 4 Purpose and Justification: The department of health and the department of commerce and consumer
- 5 affairs are open to consolidating the licensing of registered dietitians under the DCCA Professional and
- 6 Vocational Licensing Division. Since DCCA regularly licenses healthcare professionals, this will
- 7 provide for a uniform and more effective and efficient administrative process while fulfilling the
- 8 Legislature's intention to safeguard the public.
- 9 The DOH did not implement this licensure program since it did not receive initial or ongoing
- 10 funding to duplicate DCCA's functional operations to license healthcare professionals. Funding would
- 11 have been required to hire professional expertise and staff or other resources to initiate the program and
- 12 DOH resources were insufficient to absorb the additional workload.
- The department respectfully asks that this bill be passed in an effort to improve and streamline
- 14 state government.



NEIL ABERCROMBIE GOVERNOR

BRIAN SCHATZ

STATE OF HAWAII OFFICE OF THE DIRECTOR DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS

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PRESENTATION OF THE PROFESSIONAL AND VOCATIONAL LICENSING DIVISION

TO THE HOUSE COMMITTEE ON HEALTH

TWENTY-SIXTH LEGISLATURE Regular Session of 2012

Tuesday, January 31, 2012 9:00 a.m.

TESTIMONY ON HOUSE BILL NO. 2570, RELATING TO LICENSING OF DIETITIANS.

TO THE HONORABLE RYAN I. YAMANE, CHAIR, AND MEMBERS OF THE COMMITTEE:

My name is Celia Suzuki, Licensing Administrator for the Professional and Vocational Licensing Division, Department of Commerce and Consumer Affairs ("Department"). The Department appreciates the opportunity to testify in support of House Bill No. 2570, Relating to Licensing of Dietitians.

The purpose of House Bill No. 2570 is to consolidate the licensing of registered dietitians as healthcare professionals within the Department of Commerce and Consumer Affairs, by amending Chapter 448B, Hawaii Revised Statutes. While the Department is not the only Department capable of licensing professions, we have agreed to assume the regulation of dietitians for the Department of Health.

The Department has begun its discussions with the Hawaii Dietetic Association ("Association") and it is hoped that we can reach consensus soon on the contents of the bill. It has been expressed to the Association that perhaps the requirements for the application for licensure can be simplified. We are currently researching that aspect of the bill.

Should this bill pass, we would like to request for your support to hire personnel (one Executive Officer and one Secretary II) to administer the program. It is our understanding that there are, according to the Academy of Nutrition and Dietetics (the national association), 294 active Hawaii members and 281 non-active Hawaii members.

Thank you for the opportunity to testify in support of House Bill No. 2570, with possible amendments.



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enhanticei.co

ANH-USA is a regional office of ANH-Inti

Statement from the Alliance for Natural Health USA (ANH-USA)

On behalf of the Alliance for Natural Health USA's (ANH-USA) 1,282 members in Hawaii, we strongly oppose HB 2570.

ANH-USA represents natural health consumers, practitioners, and industry by protecting access to natural health options. Of great concern to our members is that this bill effectively creates a monopoly on **nutrition** services for Registered Dietitians®(RD), denying consumers access to expert advice from nutritionists, some of the most highly educated and well-respected professionals in the field of nutrition.

Under this bill, only a licensed dietitian shall "practice dietetics" or medical nutrition therapy. "Dietetics practice" as defined in this bill encompasses a wide range of nutrition services including the integration and application of scientific principles of nutrition, biochemistry and food in achieving and maintaining human health. These are services performed routinely by many qualified and practicing nutritionists.

Consequently, under this bill, nutritionists are forced to become licensed as dietitians in order to practice. Requiring one profession, i.e. nutritionists, to complete a program from a different profession, i.e. a dietitian, in order to practice nutritional therapy is absurd. This ignores the vast philosophical difference between nutritionists and dietitians, which are two entirely different fields of study and practice.

The negative implications of HB 2570 are far reaching.

- <u>It is bad for Hawaii's economy.</u> This bill would effectively eliminate an entire profession and removes all competition in the field of nutrition services. Instead of providing "protection" for consumers, passage of this bill would protect dietitians from competition.
- It prohibits freedom of choice in healthcare: Nutritionists and dietitians have entirely different philosophical approaches. Nutritionists practice an integrative approach to medicine focused on prevention. Each individual has unique nutritional needs. This demands various different approaches to nutritional care and consequently individuals require access to choice not just a one-size-fits-all approach.
- It penalizes a higher standard of education and training: Standards and requirements for the practice of nutritionists are most often much higher than the standards for dietitians described in this bill. For example, Certified Nutrition Specialists certified by the Certification Board for Nutrition Specialists (CBNS) have a Master's degree at a minimum, usually a Ph.D., yet they cannot "practice dietetics" unless they meet the lower credentialing requirements required of dietitians.

This bill is not a simple regulatory fix, but rather, would put many practicing nutrition professionals in Hawaii out of business.

Therefore we respectfully request that you oppose HB 2570.

We believe that to <u>adequately protect the profession</u> of nutritional therapy, professionals that specialize in *nutrition* (and not simply dietetics) must be recognized. And we believe the <u>citizens of Hawaii have the right to choose</u> their form of nutritional therapy from as large a pool of professionals as possible.

"Promoting sustainable health and freedom of choice in healthcare through good science and good law"



Professional Advisory Board

January 29, 2012

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Memo of Opposition

The American Nutrition Association vigorously opposes HB 2570, regarding Licensing of Dietitians.

It is bad for an already struggling Hawaii economy and obesity problem. This bill would effectively eliminate an entire profession and removes all competition in the field of nutrition services.

We vigorously oppose this bill because it:

- Needlessly eliminates the jobs of countless nutrition and related healthcare professionals for the sole benefit of Registered Dieticians® and their trade group, the American Dietetic Assn.:
- Increases healthcare costs by removing competition and patient options in the field of nutritional healthcare services:
- Restricts patient access to services and information on nutrition and nutrition services and jeopardizes nutrition-based businesses; and
- Results in the criminalization of nutrition counseling beyond nutritionists for many highly trained professionals, including potentially chiropractors, naturopaths, pharmacists, nurse practitioners and physician assistants.

I sincerely hope all legislators involved will closely examine HB 2570, to discover how hugely detrimental it would be for Hawaii's health and economy. Please oppose this Bill. Thank you for your consideration.

Respectfully,

/s/ Nancy Shon

Director of Membership American Nutrition Association NancyS@AmericanNutritionAssociation.org



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MEMORANDUM OF OPPOSITION

HB 2570 (Say) - A BILL relating to licensure of dietitians. January 29, 2012

On behalf of the Certified Nutrition Specialists[™] in Hawaii, the Certification Board for Nutrition Specialists[™] (CBNS), the premier national certifying body for advance-degreed nutrition professionals*, strongly opposes HB 2570.

HB 2570 would hand a monopoly on nutrition healthcare to a private trade group: the American Dietetic Association (ADA). It would benefit their Registered Dietitians® by driving hundreds of Hawaii nutrition practitioners out of practice, and would damage the health and economy of Hawaii. It would replace Hawaii's longstanding approach to dietitians and nutritionists with a costly regulatory framework.

Moreover, a Small Business Impact Statement has not been done, which is required by law. This bill does have a substantial impact, and thus triggers this requirement, because it changes the current law to one that criminalizes those who practice without a license. It will thus with certainty put people out of business. This Impact Statement must by therefore be produced. (Haw. Rev. Stat. § 201M-2: Hawaii Statutes - Section 201M-2: Determination of small business impact; small business impact statement.)

Dietetics and Nutrition are two different disciplines. Registered Dietitians® primarily work in institutional settings, like schools, hospitals and nursing homes, and are largely trained in dietetics, including acute care and bulk food service management.

Certified Nutrition Specialists (CNS™) and many other nutrition practitioners work primarily in clinics and private practice, and focus on science-based nutrition therapy to manage and prevent disease. Many CNSs are Medicare-approved Medical Nutrition Therapy providers. While a bachelor's degree is sufficient to become a Registered Dietician®, Certified Nutrition Specialists have a minimum of a Master's, and more commonly hold PhDs or MDs.

HB 2570 would arbitrarily require all nutrition practitioners to become Registered Dietitians®. The bill is detrimental to Hawaii's citizens for many reasons:

- 1. It criminalizes nutrition counseling by all non-RD nutrition practitioners, many of whom have equal or higher qualifications than Registered Dietitians®. It needlessly eliminates the jobs of nutrition professionals for the sole benefit of Registered Dieticians® and their trade group.
- 2. Key parties in current law were not involved in drafting this bill. Our Organization, which is an integral component of many state laws was never even told of this bill. If optimal public policy is the goal, the key parties in the field should be consulted on an issue this critical to Hawaii.
- 3. This is not simply a regulatory fix it has massive ramifications for the health and economy of Hawaii. Note: Registered Dietitians from Hawaii, even without "licensure", are already eligible as Medicare providers of "Medical Nutrition Therapists". (Medicare Regulations CFR Section 410.134).
- 4. It does not protect public health. As just one example, it licenses Bulk Food Service Manager RDs (e.g. for prisons and schools) to provide Medical Nutrition Therapy to the public.
- 5. It increases healthcare costs by removing competition and patient options for nutrition healthcare services;
- It restricts patient access to services and information on nutrition and jeopardizes nutrition-based businesses; and
- 7. This attempt at monopolization has been tried and defeated in the past. It has been defeated due to an overwhelming opposition to an ADA monopoly by the public, organizations and institutions.

The detailed provisions of HB 2570 are also deeply flawed. Only a few examples:

- 1. Designating the ADA's Registered Dietitian® Exam as the only licensure exam is poor public policy. Especially so, if the purpose of HB 2570 is to protect the health of Hawaii citizens. The RD Exam, which is designed for undergraduate dietetics, has 48% of its questions on matters unrelated to clinical nutrition science, such as food service systems, institutional management, and communication, does not screen for competence in scientific nutrition therapy to the public like the rigorous CBNS Exam. Respective exam questions in the Attachment reveal the far more relevant and rigorous nature of the CBNS Exam.
- 2. Requiring the Registered Dietitian® educational training is wholly inappropriate. This would disqualify many nutrition practitioners whose training differs from and in many cases far exceeds that of RDs. For example, a PhD in Clinical Nutrition from the University of Hawaii, who has passed our rigorous exam, and completed supervised experience, would be committing a crime by

providing nutrition counseling in Hawaii.

3. There is no grandfathering of nutritionists, only of Registered Dietitians®.

HB 2570 runs counter to Hawaii's efforts to protect and create jobs, reduce healthcare costs, and ensure greater access to preventative care. The CBNS respectfully requests your rejection of this legislation.

To discuss, please contact me at MStroka@CBNS.org / (202) 903-0267, or Legislative Chair Corinne Bush, MS, CNS at CBush@CBNS.org / (908) 246-7518.

Sincerely,

Michael Stroka

Michael Stroka, JD, MBA, MS, CNS Acting Executive Director, Certification Board for Nutrition Specialists

*The Certification Board for Nutrition Specialists™ was founded in 1993 by the American College of Nutrition, a leading professional nutrition science society, to provide certification of advanced-degreed, experienced nutrition professionals. The Certified Nutrition Specialist™ (CNS™) credential requires an advanced degree (e.g. Master's, PhD, MD) from a regionally accredited university, substantial practice experience, and successful completion of our stringent CBNS Certifying Examination on clinical nutrition science. To assure that the CNS is current with new advancements in nutrition care, the certificant must be recertified every five years and must accumulate75 continuing education credits.

The CNS designation and exam is incorporated into the nutrition and dietetics regulatory regimes of over ten states. Certified Nutrition Specialists work in most areas of nutrition care – private practice, institutions, public and community healthcare, research, universities and industry.

ATTACHMENT

I. REGISTRATION EXAMINATION FOR REGISTERED DIETITIANS®:
MOST QUESTIONS REGARD BULK FOOD SERVICE AND DIETETICS,
NOT ADVANCED NUTRITION THERAPY

Source: Registration Examination for Dietitians Handbook for Candidates - 2011

According to the Handbook: "The following sample questions are illustrative of those found in the examination."

found in the examination."	
1. The first step in assuring a quality program for	5. Consider the following meal: 3 oz baked skinless chicken breast
clinical dietetics practice is to:	
A. compare the productivity of the clinical staff to	1/2 cup green beans
national means.	1/2 cup baked potato
B. monitor the quality of the documentation in the	1 slice bread
medical record.	1/2 cup strawberries
C. review current standards of practice.	2 tsp margarine
D. develop a tool to measure the amount of work	1 cup 2% milk
done by the clinical dietitians.	1/2 cup ice cream (vanilla)
2. Which of the following special supplemental	How many grams of fat are in this meal?
nutrition programs requires that participants be at	A. 20
nutritional risk?	B. 30
A. Head Start Program	C. 40
B. Food Stamp Program	D. 50
C. Commodity Supplemental Food Program (CSFP)	
D. Special Supplemental Foods Program for	6. Which of the following responses illustr

3. Which of the following microorganisms are the primary cause of foodborne illness?

Women, Infants, and Children (WIC)

- A. Viruses
- B. Bacteria
- C. Protozoa
- D. Parasites
- 4. A diet containing 3000 mg sodium has how many mEq of sodium?
- A. 69
- B. 77
- C. 117
- D. 130

- 6. Which of the following responses illustrates the interviewing strategy of reflection?
- A. "Yes, go on."
- B. "You said you'd like to reduce . . . "
- C. "I experienced a similar situation."
- D. "How do you perceive your body image?"
- 7. Which of the following dishmachine cleaning schedules is most appropriate?
- A. Drain tanks and rinse machine daily.
- B. Drain tanks and rinse machine after each meal.
- C. Drain tanks after each meal and rinse machine daily.
- D. Drain tanks after each meal and rinse machine weekly.

- 8. All of the following factors are considered when planning employee schedules. Which is the most important factor?
- A. Amount of working space available per person
- B. Skill of available personnel
- C. Number of available personnel
- D. Production requirements of the operation
- 9. End products of bacterial fermentation of malabsorbed carbohydrate are:
- A. lactic acid, alpha ketoglutaric acid and carbon dioxide
- B. lactic acid, hydrogen and methane
- C. short chain fatty acids, hydrogen and carbon dioxide
- D. carbon dioxide, hydrogen and pyruvate
- 10. Which of the glucose tolerance curves shown below is most likely to represent lactase deficiency in a patient who has just ingested 50 g of lactose?
- A. I
- B. II
- C. III
- D. IV
- 11. What are the most important data to consider when forecasting the amount of food to be prepared?
- A. Holiday and weekend volume
- B. Skill levels of employees
- C. Food-item selection statistics
- D. Weather conditions and temperatures
- 12. A dietitian lobbying for specific legislative action should:
- A. prioritize issues and be prepared to compromiseon less important issues.
- B. work alone rather than risk having a difference of opinion with members of a coalition.
- C. know the exact goals for the bill and work diligently

to ensure that all issues are included.

- D. speak with the legislator to learn more about the issues before expressing an opinion.
- 13. Which of the following changes in design would

improve the efficiency of resource flow in this foodservice

facility?

- A. Reverse storage and dishroom areas
- B. Reverse production and storage areas
- C. Reverse storage and service areas
- D. Reverse dishroom and production areas
- 14. Before recommending nutrition management of a patient with end stage renal disease who is on hemodialysis, the dietitian needs information about the:
- A. serum potassium level.
- B. specific gravity of the urine.
- C. patient's usual intake of carbohydrates.
- D. patient's intake of iron before hospital admission.
- 15. Costs in which area are most likely to be evaluated first following an announcement of a budget reduction?
- A. Food
- B. Labor
- C. Equipment and maintenance
- D. General nonfood supplies
- 16. Five hundred people become ill with acute gastro -enteritis 4–6 hours after eating custard pie. Which bacteria is the most likely cause?
- A. Campylobacter jejuni
- B. Vibrio parahaemolyticus
- C. Staphylococcus aureus
- D. Listeria monocytogenes

CBNS EXAM FOR CERTIFIED NUTRITION SPECIALISTS™: QUESTIONS CONCERN ADVANCED SCIENCE AND BIOCHEMISTRY OF NUTRITION THERAPY

Source: Study Guide for the Certifying Exam for Nutrition Specialists, 3rd ed.

Compared to the requirements of a nonpregnant adult woman, the dietary requirements for several vitamins are increased during gestation; among these are the requirements for:

- a. Vitamin A
- b. Pyridoxine and pantothenic acid
- c. Thiamin, riboflavin and niacin
- d. Vitamin D

Altered metabolism of pyridoxine in chronic alcoholism results from:

- a. increased aldehyde oxidase activity.
- b. decreased aldehyde oxidase activity.
- c. unchanged aldehy de oxidase activity.
- d. decreased excretion of pyridoxine

Insulin sensitivity may be enhanced by supplementation The biological value of food proteins can be enhanced with:

- a. chromium picolinate.
- b. iron acetate.
- c. zinc chloride.
- d. selenium hexanoate.

To decrease the Respiratory Quotient (RQ), one should replace dietary:

- a. fat with protein.
- b. carbohydrate with fat.
- c. protein with carbohydrate.
- d. fat with carbohydrate.

Initial advice for a lactose-intolerant postmenopausal woman with a history of

kidney stones and subnormal spinal BMD should be:

- a. restriction of dietary calcium intake.
- b, restriction of fluid intake.
- c. increased consumption of dairy products.
- d. dietary supplementation with magnesium.

The purpose of encouraging individuals with diabetes to increase the dietary fiber

- contents of their meals is to:
- a. reduce plasma albumin concentration.
- b. stimulate insulin secretion.
- c. minimize postprandial hyperglycemia.
- d. stimulate intestinal glucose transport.

The most accurate and reliable way to assess the macronutrient intake of an individual is through the use of a: a. 24-hour food intake recall questionnaire.

- b. 7-day food intake diary.
- c. "food frequency questionnaire."
- d. stool and urine analysis.

- a. supplementation with branched-chain amino acids.
- b. slow cooking.
- c. the addition of MSG.
- d. combining them with complementary food proteins.

If a bolus containing 600 mOsm/L enters the jejunum, the net direction of fluid

- movement in the intestinal tract will be:
- a. from the intestinal lumen to the circulation.
- b. from the circulation to the intestinal lumen.
- c. longitudinally along the mucosal basement membrane.
- d. from the circulation to the lymphoid system.

Excessive production of gas within the intestines may be caused by excessive

- colonic bacterial fermentation of unabsorbed:
- a. gluten.
- b. small peptides.
- c. lignin.
- d. carbohydrates.

January 30, 2012

To the Members of the Hawaii State Committee on Health:

I am writing to you today on behalf of the New Jersey Nutrition Association ("NJNA") **to urge you to oppose** HB2570. Although we are a state organization in New Jersey, we are representing all clinical nutritionists whose careers would be destroyed should this bill be enacted.

HB2570 eliminates the profession of clinical nutritionists by arbitrarily requiring these professionals to meet the criteria necessary to be a Registered Dietician (RD). This injustice is being advanced in numerous states by the American Dietetic Association (ADA), just one trade group in the field. It would eliminate the profession of nutritionists in Hawaii for the sole benefit and profit of ADA members.

While both nutritionists and RDs are trained to improve health through the science of nutrition, there are some key differences –

- RDs primarily work in institutional settings on acute care and food service management,
 whereas nutritionists work primarily in private practice settings conducting one-on-one nutrition counseling for prevention and treatment of chronic health issues.
- A bachelor's degree is sufficient to be eligible to become a RD, whereas national certifications require nutritionists to possess a minimum of a master's degree in a clinical nutrition program.

Among other things, HB2570:

- Needlessly eliminates the profession of certified nutritionists for the sole benefit of RDs;
- Increases healthcare costs by removing competition and patient options in the field of nutritional healthcare services; and
- Restricts patient access to services and information on nutrition and nutrition services and jeopardizes Hawaii's nutrition-based businesses.

Eliminating the profession of nutritionists is contrary to Hawaii's efforts to protect and create jobs while reducing healthcare costs and ensuring greater access to preventative care. As such, the New Jersey Nutrition Association respectfully requests your rejection of this legislation.

Thank you for your consideration of this very important matter.

Sincerely,

Corinne Bush, MS, CNS New Jersey Nutrition Association



A Leader in Online Holistic Nutrition Education www.hawthornuniversity.org



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RE: HR2570

Dear Rep. Yamane, Rep. Morikawa, and the rest of the Health Committee

At first view, HR 2570 for Registered Dietitian licensure looks innocuous, but it will hurt many nutritionists in the state and restrict freedom of health care choice to the people in Hawaii.

I am writing as a person with many hats and concerns.

First of all, there are two graduates, and one current student from Hawthorn University who live in Hawaii.

My children were raised on Kauai. I would love to be able to move back to Hawaii some day and continue to work. If this bill passes, I will be unable to do clinical work at all in Hawaii, even though I hold a PhD from a regionally accredited university, am board certified in Clinical Nutrition, and also board certified in Holistic Nutrition. Why? Because the scope of practice of dietetics, it's the same as my own scope of practice as a Certified Clinical Nutritionist, and as a Holistic Nutritionist. This is also true for other practicing nutritionists who are not dietitians. So if I worked in Hawaii, according to this bill, I would be liable for \$1000 a day in fines.

Currently there are at least five national boards that certify nutritionists. Many of these have higher educational requirements than for dietitians:

- The Accred. Council for Educ in Nutr and Dietitics (ACEND) which certifies Dietitians (RD's) When I lived in Hawaii, there were 80 RD's.
- The Clinical Nutrition Certification Board (CNCB) which certifies Clinical Nutritionists (CCN's) There are currently 4 CCN's in Hawaii. www.cncb.org
- The American College of Nutrition (CAN) which certifies Certified Nutrition Specialists (CNS's). There are currently 4 CNS in Hawaii
- The American Clinical Board of Nutrition (ACBN) which certifies Diplomates of the American Clinical Board or Nutrition (DACBN's). There is currently 1 DACBN in Hawii. www.abcn.org
- The Holistic Nutrition Credentialing Board (HNBC) through the National Association of Nutrition Professionals (NANP) which certifies Holistic Nutritionists (CHN's). Not sure how many in Hawaii.

Passage of this law will affect ALL of these small business owners in Hawaii. There are other health professionals who also may do some nutritional assessments in their work: Chiropractors, drug and alcohol counselors, exercise physiologists, school psychologists. These people will also be affected.

While a Hawaii resident I fought against dietetic licensure three times. It was defeated each time. At the last health committee session I attended, one of the representatives asked Noe Noe Tom, Licensing Administrator, Hawaii Dept. of Commerce and Consumer affairs this question: "My wife is always bugging me to eat more fiber. Did she make an assessment and recommendation? Would she be in violation of this bill?" And Ms. Tom, replied: "Yes, she would."

The reason for licensure is because there is evidence of harm. There is no evidence of harm. I understand that RD's want to receive insurance reimbursement for their services. As their status is now, they can do this. So I see no need for additional legislation.

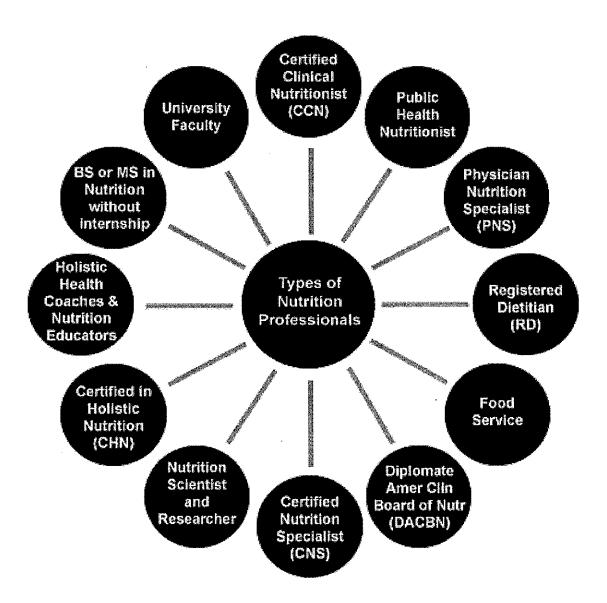
As more proof that this type of law can do harm...I was living in North Carolina until last August. In Feb. 2011 I received a cease and desist notice for practicing nutrition without a license. I applied for licensure and was denied because I did not meet the "minimum educational requirements" which are a BS in dietetics. A doctorate and 30+ years of experience didn't matter at all. When I met with the board's Executive Director, my attorney, and their attorney, it became apparent that although the law stated that I could practice, that the rules and regulations had been written so restrictively that I wouldn't be able to. Fortunately my husband was offered a job in Georgia and we moved.

Sincere regards,

E. Sepsei. PLD CW

Elizabeth A. Lipski, PhD, CCN

Diagram of Nutrition Professionals



Not shown here are the many health care practitioners who have additional training and include nutrition in their patient / client care such as: Medical Doctors, Chiropractors, Nurses, Pharmacists, Dentists, Mental Health Professionals and Naturopathic Physicians, and others.

The field of nutrition extends beyond any one group, making it inappropriate for any single group or organization to attempt to regulate the field in their own self-interest.

Include this paragraph if your state is moving forward with implementation of the Affordable Care Act. As {Your State} moves toward implementing it's strategic plan for the Patient Protection and Affordable Care Act, we will need many more nutrition care providers to deliver preventive services that will reduce the need for, and cost of chronic disease care. It would be reckless and antithetical to {Your State} health and economic goals to implement a law that would cut these valuable and necessary resources.



January 29, 2012

To: Representative

Re: HB 2570 Dietetics Licensure

Dear Representative,

As Executive Director of the Michigan Nutrition Association I would like to share comments on HB 2570 that you are currently considering. My comments are based on our experience with, and research examining a similar law brought to the legislature by the Michigan Dietetic Association. It is my hope you will take time to read and give due consideration to my comments before voting on your proposed law.

Due to overwhelming public opposition our law was tied up in rule-making for 5 years, and is currently in regulatory review because of it's disproportionate economic impact on small businesses, it's projected impact on preventive health services and costs, and it's unmistakable protectionist intent. The law you are considering is *far more* restrictive than the MIchigan law, will have a negative economic impact on HI, and exceeds federal guidelines regarding dietitians and nutritionists. Was a Small Business Impact Study and Statement done prior to introduction of this bill, as required?

Nutrition and Dietetics are separate but overlapping fields, however lobbying by dietetic trade associations has deliberately fostered the mistaken impression that dietitians are the only qualified nutrition professionals. This is simply factually incorrect. It would be unjust and costly to give this trade group legislation as a tool to enact a monopoly over a profession.

Contrary to the position of the ADA, and the HDA, nutritionists and dietitians are both science-based, and both are trained to competently provide nutrition therapy. In fact many nutrition practitioners exceed the level of training and expertise attained by RD's. Yet under HB 2570 only RD's will licensed and allowed to provide nutrition services. There is simply no evidenced-based justification for a regulatory scheme to put potentially hundreds out of small business people out of work as HB 2570 would do.

The fields of dietetics and nutrition have some significant differences. Dietitians work primarily within institutional settings (92% based on ADA data)--hospitals, nursing homes, government programs--and non-RD nutritionists are primarily entrepreneurs or work within private clinics. Nutritionists focus on wellness, prevention and chronic care in the community, many with the integration of complementary and alternative medicine, as it applies to nutrition. Only 2% of RD's are in private practice (ADA data).

In MI we have yet to find evidence of harm from unlicensed practitioners advising consumers on healthy food, lifestyle modification and use of over-the-counter supplements, although this is one alleged reason for these trade association-sponsored licensure laws. In MI, there were roughly 40 complaints filed in the past 10 years. In states already enacting licensure laws, if you examine licensing board data, you will find that the overwhelming majority of complaints are for individuals not meeting the licensure requirements, not for allegations of harm; these are almost non-existent, and cases warranting sanctions are even less. For the rare instances where harm is alleged, consumer protections laws and tort law provide sufficient remedies.

In MI, the Office of Regulatory Reinvention is currently, scrutinizing our Dietetics/ Nutrition Licensure Law, and we expect it will not stand because of it's failure to meet defined, reasonable criterion for regulation, it's many unintended, health and economic consequences, and it's protectionist agenda.

- 1) **Job Loss**—Can Hawaii afford to put people put of business while making the state less hospitable to the new small businesses, agriculture, and commerce that is directly stimulated by the increased interest in health and healthy food?
- 2) Increased Health Care Costs for Chronic Disease—Nutritionists, health coaches, and other professionals utilizing nutrition skills, are sought after professionals who help people avoid and reverse chronic disease, and reduce the need for costly medications and surgeries. Does it make fiscal sense to cut Hawaii's supply of these well-trained professionals? There are less than 300 RD's in HI for your population of almost 1.3 million! And, are you aware that nationally, for the last ten years, Dietetics programs have only been able to provide the required internship for 50% of their students, which means those unlucky 50% are not eligible for licensure under HB 2570, further depleting supply? (ADA Times Winter 2010, p 13).
- 3) Creating a monopoly--The field of nutrition is broad and encompasses many types of nutrition professionals working in many different capacities. No one professional organization should have the right to eliminate competition via legislation, or be allowed disproportionate power in setting standards by which all professionals in the field are judged.

No one can deny this is a time we need more nutrition help in every state and community, not less! I urge you to carefully examine the impact of the legislation you are considering and reject such a drastic law.

Sincerely,

Judy Stone, CN, MSW
Michigan Nutrition Association
www.MichiganNutritionAssociation.org
(734) 531-9340



Hawai'i Dietetic Association

January 29, 2012

Via Email: <u>HLTtestimony@Capitol.hawaii.gov</u>

Representative Ryan I. Yamane Chair, Committee on Health Hawaii State Capitol, Room 420 Honolulu, Hawaii 969813

Re: H.B. 2570 – Relating to Licensing of Dietitians

Hearing: Tuesday, January 31, 2012 at 9:00 a.m, Room 329

Dear Chair Yamane and Members of the Committee on Health:

I am Amy Tousman, President of the Hawaii Dietetic Association (HDA), which represents approximately 300 members throughout the state of Hawai'i, Guam and Saipan. HDA supports the intent of H.B. 2570, which consolidates the licensing of registered dietitians as healthcare professionals under the Department of Commerce and Consumer Affairs.

In 2000, the Legislature passed the law which licensed dietitians under the Department of Health, and set minimum requirements for education, practice experience, and examination to become a licensed dietitian in Hawaii. The law was passed near the end of Governor Cayetano's time as Governor and had the strong support of then Director of Health Bruce Anderson who saw this program as part of an effort to improve nutrition knowledge in the community. The Lingle administration did not support the program. Eight years later, in 2008, administrative rules were finally adopted. Notwithstanding these efforts, the licensing program never launched.

Now, twelve years later, this measure seeks to transfer the program to the Department of Commerce and Consumer Affairs, under the Professional and Vocational Licensing Division. HDA is very appreciative that the Abercrombie administration has expressed support for the licensing program and undertaken this initiative.

However, HDA also has some concerns regarding the proposed language in the bill. H.B. 2570 transfers the regulation of dietitians to the DCCA, but also makes changes to the existing licensing law. HDA is still reviewing these changes.

HDA has engaged in discussions with the DCCA, and hopes to continue these discussions to fine-tune and agree upon final language.

For these reasons, we ask for your favorable consideration and passage of this measure.

Respectfully Yours, Amy Tousman, MPH, RD, CDE President, Hawaii Dietetic Association



Hawai'i Dietetic Association

January 30, 2012

Via Email: HLTtestimony@Capitol.hawaii.gov

Representative Ryan I. Yamane Chair, Committee on Health Hawaii State Capitol, Room 420 Honolulu, Hawaii 969813

Re: H.B. 2570 - Relating to Licensing of Dietitians

Hearing: Tuesday, January 31, 2012 at 9:00 a.m., Room 329

Dear Chair Yamane and Members of the Committee on Health:

I am Sally Belles, Registered Dietitian (RD) and Public Policy Coordinator of the Hawaii Dietetic Association (HDA), which represents approximately 300 members throughout the state of Hawai'i, Guam and Saipan. I support the intent of H.B. 2570, which consolidates the licensing of registered dietitians as healthcare professionals under the Department of Commerce and Consumer Affairs. In 2000, the Legislature passed the law which licensed dietitians under the Department of Health, and set minimum requirements for education, practice experience, and examination to become a licensed dietician in Hawaii. HDA and its members have patiently waited since the passage of Dietitian licensure in 2000 for implementation. I am pleased that DCCA has stepped up to the plate. I hope this legislation represents a full commitment from DCCA to implement dietitian licensure in Hawaii which will further ensure protection of the public from receiving nutrition information and counseling from unqualified individuals.

Registered dietitians are uniquely qualified to provide Medical Nutrition Therapy (MNT) counseling which has been shown to improve clinical outcomes for persons living with or at risk for chronic disease such as diabetes, kidney disease and high blood pressure. The proposed mandates under the Affordable Healthcare Act will increase the demand for preventive and disease management services. Access to such services and qualified health providers such as RD's could potentially be negatively affected without professional licensing of Hawai'i dietitians. The RD plays a key role in promoting good health and longevity through proper, science based nutritional principles.

I support this measure which seeks to transfer the program to the Department of Commerce and Consumer Affairs, under the Professional and Vocational Licensing Division. For these reasons, I ask for your favorable consideration and passage of this measure.

Respectfully Yours,

Sally M. Belles, RD, CDE Public Policy Chair and Member, Hawaii Dietetic Association

morikawa2 - Grant

From: Sent: mailinglist@capitol.hawaii.gov Monday, January 30, 2012 9:10 AM

To:

HLTtestimony

Cc:

c pomponio@yahoo.com

Subject:

Testimony for HB2570 on 1/31/2012 9:00:00 AM

Testimony for HLT 1/31/2012 9:00:00 AM HB2570

Conference room: 329

Testifier position: Comments Only Testifier will be present: No Submitted by: Cathleen Pomponio

Organization: Individual E-mail: <u>c pomponio@yahoo.com</u>
Submitted on: 1/30/2012

Comments:

I am a Nutritionist, with a Master of Science in the field of Nutrition; graduating from ISU in 1985. Afterward, I worked in dietary in a nursing home; my RD was going to work with me on a 'qualifying experience' a pathway into the profession. After one month, she quit her job and I was left in the lurch. I feel that licensing RD's may be good for the State, unless, we eventually offer resiproscity to other states, which would make the whole thing moot. In order to become an RD; a person must take a four year degree in an accredited university or college whose program is approved by the American Dietetic Association. Afterward, they should participate in an internship of some kind, and then pass a test for Registration by the Professional group. Before the State goes into this why not check with the American Dietetic Association and find out from them how they feel about this?

morikawa2 - Grant

From: Sent: mailinglist@capitol.hawaii.gov Monday, January 30, 2012 8:18 AM

To:

HLTtestimony

Cc:

dana@reednutrition.com

Subject: Testimony for HB2570 on 1/31/2012 9:00:00 AM

Testimony for HLT 1/31/2012 9:00:00 AM HB2570

Conference room: 329

Testifier position: Oppose Testifier will be present: No Submitted by: Dana Reed

Organization:

E-mail: dana@reednutrition.com

Submitted on: 1/30/2012

Comments:

January 30, 2012

To the Members of the Hawaii State Committee on Health:

I am writing to you today on behalf of the New York Nutrition Association ("NYNA") to urge you to oppose HB2570. Although we are a state organization in New York, we are representing all clinical nutritionists whose careers would be destroyed should this bill be enacted.

HB2570 eliminates the profession of clinical nutritionists by arbitrarily requiring these professionals to meet the criteria necessary to be a Registered Dietician (RD). This injustice is being advanced in numerous states by the American Dietetic Association (ADA), just one trade group in the field. It would eliminate the profession of nutritionists in Hawaii for the sole benefit and profit of ADA members.

While both nutritionists and RDs are trained to improve health through the science of nutrition, there are some key differences -

- RDs primarily work in institutional settings on acute care and food service management, whereas nutritionists work primarily in private practice settings conducting one-on-one nutrition counseling for prevention and treatment of chronic health issues.
- A bachelor's degree is sufficient to be eligible to become a RD, whereas national certifications require nutritionists to possess a minimum of a master's degree in a clinical nutrition program.

Among other things, HB2570:

- Needlessly eliminates the profession of certified nutritionists for the sole benefit of RDs:
- Increases healthcare costs by removing competition and patient options in the field of nutritional healthcare services; and
- Restricts patient access to services and information on nutrition and nutrition services and jeopardizes Hawaii's nutrition-based businesses.

Eliminating the profession of nutritionists is contrary to Hawaii's efforts to protect and create jobs while reducing healthcare costs and ensuring greater access to preventative care. As such, the New York Nutrition Association respectfully requests your rejection of this legislation.

Thank you for your consideration of this very important matter. Sincerely,

Dana Reed, MS, CNS, CDN New York Nutrition Association

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Jessica Stamm, MS CCN



January 30, 2012

To the Members of the Hawaii State Committee on Health:

I am writing in regards to HB2570 to inform you of how it will impact my small business and my career as a whole here in Hawaii.

I am a Certified Clinical Nutritionist, board certified by the Clinical Nutrition Certification Board. Prior to becoming board certified, I completed a 900-hour internship with one of the leading dietitians in the country who is also a CCN. I have a bachelor's degree in Biochemistry from Hood College and a Master's degree in Human Nutrition from the University of Bridgeport. I have over 10 years of clinical experience as the owner of a small business on the mainland working in concert with medical doctors, psychiatrists, and chiropractors to provide nutrition services to the general public. According to the current language of HB2570, despite my qualifications I would not legally be allowed to practice here in Hawaii because I am not a registered dietitian.

My husband is of Native Hawaiian descent and when I became pregnant with our first child two years ago, we made the decision to move back to Hawaii to raise our family here. Now that my son is older and I have been able to return to work, I have a small business providing professional nutrition care services, hoping to contribute to improving the health of my community. This law would immediately shut down my start-up company. Pushing people out of business can't be what legislators have in mind for their state. If I am legally unable to work in Hawaii, our family will be forced to consider relocating.

I urge you to consider my fate and the fate of others like me who are qualified in the field of nutrition yet would be excluded from practice by this bill. I am willing to help in any way possible to stop this bill from moving forward as it is, including re-writing this bill to be more inclusive. My contact information is below.

Sincerely,

Jessica Stamm, MS CCN

Certified Clinical Nutritionist Honolulu, Hawaii jessica@stammnutrition.com Cell: (808) 294-7432 Danielle Ryan, M.S. Holistic Nutrition PO Box 791173 Paia, Hawaii 96779 (808) 280-0201 body.mind.spirit.health@gmail.com

Representative Ryan I. Yamane Hawaii State Capitol, Room 420 Honolulu, Hawaii 96813 repyamane@Capitol.hawaii.gov

January 29, 2012

Dear Representative Ryan I. Yamane:

I am writing to oppose HB2570 for a variety of reasons. I am passionate about health and wellness and am just launching my nutrition practice on the island of Maui after completing my Master of Science in Holistic Nutrition degree this past November. Already, I have received referrals from medical doctors and physician's assistants for patients needing support with nutrition to address their health concerns. In choosing a graduated program, I struggled in an internal debate between becoming a registered dietician, and studying holistic nutrition. Ultimately, I chose the later, because it better suited my values, which are centered around promotion of local, unsprayed, whole foods, made by nature, rather than those produced in laboratories. I do see great value in both professions, and plan to work side by side with Maui dieticians and medical doctors to offer free community presentations offering cost-effective solutions for healthier eating. With Hawaii's rates of diet related conditions such as diabetes, heart disease, obesity, and asthma some of the highest in the nation, our state needs all the help we can get to improve the health of our island population.

I know that laws are designed to protect public interest, however I think HB2570 would do the opposite and hinder public health. In my understanding, HB2570 would prevent me from practicing as a nutritionist and health educator in the state of Hawaii. Not only does this eliminate my opportunity to operate my small business, it robs Maui of the valuable community service offerings I am so eager to share. I ask for your understanding in this matter, and for your support of our community's health by voting against this bill.

Please feel free to contact me for clarification or more information about my testimony.

In service,

Danielle Ryan

morikawa2 - Grant

From:

mailinglist@capitol.hawaii.gov

Sent:

Monday, January 30, 2012 12:07 PM

To:

HLTtestimony

Cc:

Msiessicashae@gmail.com

Subject:

Testimony for HB2570 on 1/31/2012 9:00:00 AM

Testimony for HLT 1/31/2012 9:00:00 AM HB2570

Conference room: 329

Testifier position: Oppose Testifier will be present: No Submitted by: Jessica Preheim

Organization: Individual

E-mail: Msjessicashae@gmail.com

Submitted on: 1/30/2012

Comments:

To Whom it May Concern,

There are many reasons to keep practicing nutritionists in our communities. I have had a nutritionist help to change my health for the better. It is important to have an alternative option for those seeking different nutrition health than what can be provided by the dietician community. I have been so inspired by the help I have received from nutritionists that I have decided to pursue an education as a nutritionist as well. Thank you for you understanding and for making the right choice, Jessica Preheim