

CASE STUDY – RDNs Delivering Telehealth Diabetes Care and Education-Related Services

Case: A registered dietitian nutritionist (RDN), certified diabetes care and education specialist (CDCES) is determining if performing activities such as diabetes education and medical nutrition therapy (MNT) via telehealth is within their individual scope of practice.

Statement: The Revised 2017 Scope of Practice for the Registered Dietitian Nutritionist (RDN) does not guarantee that a RDN will be able to perform expanded practice skills, but it can guide the RDN to the resources and options that can be used to evaluate whether the RDN can safely and effectively provide an expanded practice skill and advance individual practice.

Definitions:

Term	Definition
Telehealth	Telehealth is the use of electronic information and telecommunications technologies to support clinical health care, patient and professional health-related education, public health and health administration.

Definitions located in the Definition of Terms List: www.cdrnet.org/definitions

Explanation of Case: A registered dietitian nutritionist (RDN), certified diabetes care and education specialist (CDCES) working in a Diabetes Education Program in an expanding hospital system is interested in being able to see patients through telehealth as many are traveling long distances for appointments or classes. The hospital system is exploring using telehealth to provide services to distant system hospitals or outpatient clinics. Before presenting a proposal to the administrator and medical director of the Diabetes Education Program, the RDN, CDCES wants to determine if this type of service delivery is within their individual scope of practice.

In this example, the RDN, CDCES uses the Revised 2017 Scope of Practice for the RDN¹, and the Revised 2017 Standards of Practice and Standards of Professional Performance for RDNs (Competent, Proficient, and Expert) in Diabetes Care² to determine whether providing diabetes education and MNT via telehealth is within their individual scope of practice. Although the RDN, CDCES may seek advice and direction from colleagues, the initial review is the RDN, CDCES' responsibility.

Case Study Resources:

The resources listed below and throughout the case study are intended to provide additional knowledge, guidance, and tools related to telehealth. NOTE: Some of the resources require non-members to pay a fee to access.

- Available from the Academy of Nutrition and Dietetics (Academy) and Commission on Dietetic Registration (CDR)
 - Telehealth Webpages, includes: Telehealth Discussion Board, Medicare Telehealth Services and RDNs, Telehealth Policy and Regulation, Telehealth and Payment:

<https://www.eatrightpro.org/career/career-resources/telehealth-quick-guide/medicare-telehealth-services-and-registered-dietitians>

- Practice Tips: Delivery of Nutrition-Related Services Using Telehealth: www.cdrnet.org/tips
- Medicare Part B MNT Resources: A set of all handouts: <https://www.eatrightpro.org/career/payment/medicare/medicare-practice-settings>
- Code of Ethics for the Nutrition and Dietetics Profession: <https://www.cdrnet.org/codeofethics>
- Revised 2017 Scope of Practice for the RDN: <https://jandonline.org/content/core>
- Revised 2017 Standards of Practice and Standards of Professional Performance for RDNs: <https://jandonline.org/content/core>
- Focus Area Standards of Practice and Standards of Professional Performance: CDR Webpage > <https://www.cdrnet.org/scope> leads to the *Journal* Website. To access *Journal* Website Collections, Focus Area Standards for CDR Specialist Credential and Focus Area Standards for RDNs directly, access: <https://jandonline.org/content/credentialed> or <https://jandonline.org/content/focus>, respectively
- Nutrition Care Process Terminology (eNCPT online): <https://www.ncpro.org/>
- Essential Practice Competencies for Commission on Dietetic Registration's (CDR) Credentialed Nutrition and Dietetics Practitioners: <https://www.cdrnet.org/essential-practice-competencies-information>

➤ Institutional, regulatory, and other resources include:

- Academy Licensure and Telehealth webpage: <https://www.eatrightpro.org/advocacy/licensure/telehealth-and-licensure>
- Veteran Affairs Telehealth resources: <https://www.telehealth.va.gov/>
- Telehealth Resources Centers: <https://telehealthresourcecenter.org/>
- Center for Connected Health Policy: <https://www.cchpca.org>
- RDN job description examples: <https://www.eatrightstore.org/product-type/ebooks/job-descriptions--models-for-careers-in-dietetics-3rd-ed-ebook>
- Organization policies and procedures
- In hospital setting, organization and medical staff process and bylaws for RDNs to obtain clinical privileges for therapeutic diet order writing or expanded role/nutrition-related services
- Facility/program Accreditation Standards, if applicable
- State licensure laws and regulations: <https://www.cdrnet.org/licensure>
- Academy resources on CMS hospital and critical access hospital regulations for RDN order writing privileges: <https://www.eatrightpro.org/advocacy/licensure/therapeutic-diet-orders/hospitals-and-critical-access-hospitals>

Using the Scope of Practice Decision Algorithm:

<https://www.cdrnet.org/scope>

The Scope of Practice Decision Algorithm is a resource that permits a RDN to answer a series of questions to determine whether a particular activity is within their individual scope of practice. The tool is designed to allow a RDN to critically evaluate their knowledge, skills, experience, judgment and demonstrated competence using criteria resources. The tool is used by the RDN to evaluate each separate activity.

PRACTITIONER QUESTIONS:

Question 1: Is this activity consistent with the Academy of Nutrition and Dietetics/Commission on Dietetic Registration (CDR) Code of Ethics, standards of practice and standards of professional performance, evidence-based nutrition practice guidelines, other national organization standards of practice and/or practice guidelines, accreditation standards, federal and state laws and regulations, and good business practices?

The RDN, CDCES verifies consistency with the Scope of Practice for the RDN, which states:

- RDNs “provide nutrition counseling and nutrition education to optimize nutritional status, prevent disease, or maintain and/or improve health and well-being.”¹
- RDNs in clinical practice “Perform assessment of a patient’s/client’s nutrition status via in-person, or facility/practitioner assessment application, or HIPAA-compliant video conferencing telehealth platform.”¹
- “RDNs providing telehealth services where the practitioner and patient are located in different states, the practitioner providing the patient care service must be licensed and/or meet the other applicable standards that are required by state or local laws in both the state where the practitioner is located and the state where the patient is located.”¹

The Scope of Practice for the RDN also has a segment in the Practice Areas, Services, and Activities section of the article dedicated to telehealth.

The RDN compared this activity to the Academy/CDR Code of Ethics. While telehealth is not mentioned directly in the Code of Ethics, there are some principles and standards that apply to this topic (Note: may not be all inclusive, others may apply on a case-by-case basis):

- “Recognize and exercise professional judgment within the limits of individual qualifications and collaborate with others, seek counsel, and make referrals as appropriate.”³
- “Practice within the limits of their scope and collaborate with the inter-professional team.”³
- “Document, code and bill to most accurately reflect the character and extent of delivered services.”³

The RDN, CDCES reviewed the Revised 2017 Standards of Practice (SOP) in Nutrition Care and Standards of Professional Performance (SOPP) for RDNs. The Revised 2017 SOP in Nutrition Care and SOPP for RDNs contains a role example for a ‘Telehealth practitioner, nutrition and wellness’⁴ as well as indicators in both the SOP and SOPP that would be applicable to the delivery of MNT and nutrition-related care and services using telehealth technology.

In addition to the core resources, the RDN, CDCES reviewed the Revised 2017 SOP and SOPP in Diabetes Care, which states “Computer-based interactive tools, social media, and telehealth technologies can help improve self-care practices and patient engagement. It is important for nutrition and dietetics practitioners in any setting providing diabetes and nutrition education to be aware of and skilled at using the available diabetes technology resources for ensuring that evidenced-based care is being provided. Due to health disparities and barriers to Diabetes Self-Management Education and Support (DSMES), telehealth is being used increasingly as an alternative for providing education.”²

Question 2: Do you have the necessary knowledge, skills and demonstrated competence in practice to perform this activity?

In reviewing their education and training, the RDN, CDCES determined additional knowledge related to delivering telehealth, specifically regulations and payment, would be beneficial. The RDN, CDCES discussed with their supervisor and decided to access applicable Academy learning activities and investigate training opportunities available through the organization. The RDN, CDCES recorded completion of the webinars and competence verification in their Professional Development Portfolio and personnel records.

- The RDN, CDCES reviewed and completed the following Academy Webinars/Learning Modules:
 - Diabetes Mellitus Certificate of Training <https://www.eatrightstore.org/search-results?categories=Diabetes&keyword=diabetes>
 - Diabetes, Telehealth and Apps: Navigating Technology for People with Diabetes, <https://www.eatrightstore.org/product-type/online-learning/diabetes-telehealth-and-apps-navigating-technology-for-people-with-diabetes>

Question 3: Did you use the Standards of Practice and Standards of Professional Performance to determine your competence? Did you demonstrate your competence to an individual with the knowledge and skills to appropriately assess your ability to perform the activity? Is your competence documented in your employee personnel record?

The RDN, CDCES reflects on SOP and SOPP Diabetes Care indicators ([https://jandonline.org/article/S2212-2672\(18\)30303-4/pdf](https://jandonline.org/article/S2212-2672(18)30303-4/pdf)) to ensure meeting the minimum competent level of practice related to performing MNT and diabetes education via telehealth. The following are examples of indicators from the Revised 2017 SOP and SOPP for RDNs in Diabetes Care²; are not all encompassing of indicators related to other focus areas of practice.

Competent Level of Practice
<p>SOP Indicators:</p> <ul style="list-style-type: none"> Rationale of Standard 1: Nutrition Assessment states “...Nutrition assessment may be performed via in-person, or facility/practitioner assessment application, or Health Insurance Portability and Accountability Act-compliant video conferencing telehealth platform”.
<p>SOPP Indicators:</p> <ul style="list-style-type: none"> 1.1, 1.1A, 1.3 3.2, 3.4, 3.4C 5.2, 5.2B 6.3, 6.3A, 6.3B
Proficient/Expert Level of Practice
<p>SOPP Indicators:</p> <ul style="list-style-type: none"> 6.1D, 6.3C, 6.3D

To strengthen knowledge and skill in the delivery of telehealth, the RDN, CDCES evaluates their level of practice related to the Revised 2017 SOP SOPP in Diabetes Care. The indicators related to telehealth where the RDN, CDCES does not meet competent level of practice are opportunities to strengthen knowledge and skills for quality practice.

The RDN, CDCES plans to request training on how to use telehealth technology and on telehealth best practices from their supervisor who has delivered MNT through telehealth and interprofessional team colleagues using telehealth. The RDN, CDCES wants to ensure adequate training in using the HIPAA-compliant video conferencing telehealth platform prior to using with patients with their consent. Once the RDN completes training and competency verification, the RDN’s supervisor provides documentation for their employee personnel file following organizational procedure.

Question 4: If the state(s) where you work license RDNs, is there any language that prohibits this activity? Are there provisions within the scope of practice of any other professions that would limit performing this activity?

The RDN, CDCES discovered that they must be licensed and/or meet the other applicable standards that are required by state or local laws and regulations in both the state where the RDN, CDCES is located and the state where the patient/client is located. The RDN, CDCES studied their state laws and regulations and the state laws and regulations where patients/clients might be located at <https://www.eatrightpro.org/advocacy/licensure/professional-regulation-of-dietitians>. Since regulations and policies are regularly updated, the RDN routinely monitors applicable laws and regulations.

Question 5: Are there any additional credentials (i.e., RDN-AP, CSO, CSG, CSP, CNSC) or training (i.e., residency/fellowship, certificate of training in obesity interventions for adults or in pediatrics) described in published practice guidelines that would be expected of a health professional performing this activity?

Examples of appropriate webinars, certificates of training, certifications, and credentials that apply to performing activities such as DSMES and MNT via telehealth are:

- Diabetes Dietetic Practice Group (DDPG) Webinars- <https://www.dce.org/resources/ddpg-webinars>
- 2022 National Standards for Diabetes Self-Management Education and Support. *Diab Care*. 2022;45(2): 484-494. <https://doi.org/10.2337/dc21-2396>
- ADCES Resources- <https://www.diabeteseducator.org/education>:
 - ADCES7 Self-Care Behaviors Online Course
 - DSMES Program Management or Advanced Building your Diabetes Prevention Program Online Series
 - Prevention 101: Fundamentals of Prediabetes and Diabetes
 - Insulin Pump Therapy Online Course, 3rd Edition
 - The Art of Telehealth
- ADCES Certificates - <https://www.diabeteseducator.org/education/adces-certificates>
 - The Art of Telehealth Certificate
 - Lifestyle Coach Training – skills to facilitate a CDC-recognized lifestyle change program
- ADCES Practice Papers: <https://www.diabeteseducator.org/practice/practice-documents>
- ADCES Career Path Certificate Program – Resource for obtaining more training in diabetes self-management for professionals who are new to diabetes education and those not planning on becoming a CDCES who need additional training to meet needs of their patient population. <https://www.diabeteseducator.org/education/career-path-certificate>

Question 6: Does your employer/organization, in its policies and procedures or medical staff bylaws, rules and regulations recognize the RDN as qualified to perform the activity?

The RDN, CDCES reviews the organization’s governing body documents, such as medical staff bylaws, rules and regulations, and policies and procedures and concludes that telehealth is allowed with appropriate training and documented competence. After the RDN, CDCES demonstrates and provides documentation of competence for their personnel file, the RDN, CDCES works to ensure that their job description is amended to support performing activities such as DSMES and MNT via telehealth.

The RDN, CDCES also reviewed the CMS regulations for performing activities such as DSMES and MNT via telehealth and the reimbursement codes. The RDN, CDCES confirms that the hospital is a distant site, and can be reimbursed for telehealth, and that RDNs are listed as a distant site practitioner.

Reimbursement codes are listed for the following activities (<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/downloads/TelehealthSrvcsfctshd.pdf>):

- Individual or group medical nutrition therapy
- Individual and group diabetes self-management training services, with a minimum of 1 hour of in-person instruction to be furnished in the initial year of training period to ensure effective injection training.

The case example provides information on what things need to be considered before beginning to deliver services through telehealth. Before performing a new activity, the RDN, CDCES should also consider the following:

- Ensure that the activity is included in your job description, in granted privileges if working in a hospital-based facility where privileging is required, and in applicable policies and procedures.
- Ensure that your personnel file contains primary source verification of education, training, credentials, if applicable, and competence in performing the activity.
- Investigate your organization's liability coverage and need for personal professional liability insurance.
- For billable services, investigate whether this activity, as performed by a RDN, will be reimbursed by health plan insurers, including Medicare.

Disclaimer: The Case Studies are intended solely as models to assist practitioners in using the Scope of Practice, Standards of Practice in Nutrition Care, Standards of Professional Performance, and the Scope of Practice Decision Algorithm and in determining their individual scope of practice. They should not be viewed as determinative of any particular inquiry or outcome. The results of an actual inquiry may differ according to the specific factual circumstances, state laws applicable to the specific situation, and organization policies and procedures.

In this Case Study, CDR has chosen to use the term RDN to refer to both registered dietitians (RD) and registered dietitian nutritionists (RDN) and to use the term NDTR to refer to both dietetic technician, registered (DTR) and nutrition and dietetics technician, registered (NDTR).

REFERENCES

1. Academy of Nutrition and Dietetics Quality Management Committee. Academy of Nutrition and Dietetics: Revised 2017 Scope of Practice for the Registered Dietitian Nutritionist. *J Acad Nutr Diet.* 2018; 118(1): 141-165.
2. Davidson P, Ross T, Castor C. Academy of Nutrition and Dietetics: Revised 2017 Standards of Practice and Standards of Professional Performance for Registered Dietitian Nutritionists (Competent, Proficient, and Expert) in Diabetes Care. *J Acad Nutr Diet.* 2018; 118(5): 932-946e48.

3. 2018 Code of Ethics for the Nutrition and Dietetics Profession. Academy of Nutrition and Dietetics (Academy)/Commission on Dietetic Registration (CDR). Accessed August 12, 2022.
<https://www.cdrnet.org/codeofethics>
4. Academy of Nutrition and Dietetics Quality Management Committee. Academy of Nutrition and Dietetics: Revised 2017 Standards of Practice in Nutrition Care and Standards of Professional Performance for Registered Dietitian Nutritionists. *J Acad Nutr Diet*. 2018; 118(1): 132-140e15.