

# LATE TESTIMONY

## Testimony for HB2570 on 2/13/2012 2:15:00 PM

mailinglist@capitol.hawaii.gov [mailinglist@capitol.hawaii.gov]

**Sent:** Monday, February 13, 2012 9:43 AM  
**To:** CPCtestimony  
**Cc:** equilibrium@comcast.net  
**Categories:** Red Category  
**Attachments:** Talk Points HB2570 Amended.pdf (68 KB)

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Testimony for CPC 2/13/2012 2:15:00 PM HB2570

Conference room: 325  
Testifier position: Oppose  
Testifier will be present: No  
Submitted by: Karen Siclare  
Organization: University of Bridgeport  
E-mail: equilibrium@comcast.net  
Submitted on: 2/13/2012

**Comments:**

I represent a university in Connecticut that teaches a masters program in human nutrition and has done so since 1977. Our graduates are highly qualified to counsel in nutrition utilizing food, supplement and lifestyle strategies to prevent or reduce disease. Our program is offered in all 50 states via a fully accredited online degree over the course of two years. The qualifications and education of these graduates far exceeds that of a registered dietician (which is an undergraduate degree) and many of our graduates pursue PhDs or doctorates in health science after completing our program.. all with the intent of providing high quality healthcare to patients. If this bill passes, programs such as ours, which exist in many states, will become extinct as you will have put up a barrier to practice that will exclude these highly qualified individuals. You will effectively reduce the availability and quality of nutrition services offered to the public. Please note that the ADA's website clearly shows that 80% of RD's work in institutional environments, (hospitals, nursing homes, schools) and not in private practice. They are trained for institutional work primarily. The MS or PhD in nutrition is highly trained in individual private counseling of patients and represents a large small business sector in the growing healthcare market. We should be complementary to each other, not exclusionary. I am a practicing nutritionist in CT with a MS degree and currently direct the graduate program in nutrition at this University. One of our graduates who lives in Hawaii has testified in person at your prior hearing. I hope the info provided will help you to make a fair and intelligent decision and defeat the bill proposed by the ADA.

## HB 2570 (amended) Talk Points

- Nutrition is not a field requiring regulation to protect the public. There is no documentation that the public has, or will be harmed from lack of regulation; there is substantial evidence that disease and cost of disease, decreases with good nutrition, health improvements that directly result from the professional advice of many trained providers who would not qualify to practice under this amendment, creating harm to public health.
- This law, amendment notwithstanding, would have a negative economic impact on the state of HI due to hundreds of jobs lost, tax revenue lost, decreased spending in local economies resulting from jobs lost.
- The public wants, and has a right to choose from among providers with differing training and philosophies. This law in impact, if not intent will significantly reduce diversity and the freedom to choose, and grant a monopoly to one trade group, Registered Dietitians®.
- State licensure of Registered Dietitians® exceeds federal requirements under Medicare and Medicaid reimbursement guidelines [Centers for Medicare & Medicaid Services, HHS § 410.140 42 CFR Ch. IV (10–1–09 Edition) ] which only stipulate a BS degree or higher in nutrition or dietetics, and 900 supervised practice hours under *any* dietitian or nutrition professional. However, once a state adopts licensure, a requirement is triggered for *all* nutrition practitioners in that state to be licensed, in order to qualify for reimbursement. Private insurers follow the lead of CMS in reimbursement guidelines. This law grants Registered Dietitians® a single trade group, a *de facto* monopoly by excluding a licensure path for any other nutrition professional, many of whom have training and qualifications exceeding that of the Registered Dietitian®.
- The amendment, in impact, if not intent, will exactly result in restricting the practice of all other unlicensed nutrition care providers. As licensure is not required for Registered Dietitians® or other professional nutrition care providers, this law is an aggressive attack on the economic security of most nutrition care providers who are not Registered Dietitians®. Giving one trade group the economic advantage of insurance coverage for their services will choke off other, unlicensed providers. It also creates a perceived, second class status that interferes with the marketing by unlicensed, but equally or more qualified nutrition professionals.
- This law was not vetted for economic impact with a required Small Business Impact Statement in compliance with Hawaii 201-M Hawaii Revised Statutes. Affected small business were not notified under RegALert and afforded the opportunity to give feedback as to impact, and to participate in the regulatory process.
- As adoption of licensure by a state affects the status, marketing and economic security of all nutrition care providers, all parties must be equally represented at the outset in creating legislation. Registered Dietitians® are a trade group and should not be allowed to create policy for an entire profession of which they are a subset.

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mailinglist@capitol.hawaii.gov [mailinglist@capitol.hawaii.gov]

**Sent:** Monday, February 13, 2012 9:52 AM  
**To:** CPCtestimony  
**Cc:** dbrady@bridgeport.edu  
**Categories:** Red Category  
**Attachments:** Talk Points HB2570 Amended.pdf (68 KB)

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Testimony for CPC 2/13/2012 2:15:00 PM HB2570

Conference room: 325  
Testifier position: Oppose  
Testifier will be present: No  
Submitted by: Dr David Brady  
Organization: University of Bridgeport  
E-mail: dbrady@bridgeport.edu  
Submitted on: 2/13/2012

**Comments:**

I am the Vice Provost of the Health Sciences division at the University of Bridgeport. One of the programs that I preside over is a Masters in Nutrition program which has trained highly qualified students in the science of nutrition counseling and therapies. The proposed ADA bill is an attempt by a private trade association to establish a monopoly on the field of nutrition counseling for their personal financial benefit and an attempt to hide that intent via a "benefit to public" statement regarding licensure. Many die of improper medical treatment or pharmaceutical use and those statistics are clear from the CDC whereas there are not statistics on harm being done to anyone from practitioners of nutrition who have appropriate education. Is it not illogical to believe that someone with a bachelors degree would have a deeper knowledge and skillset than someone with a masters or PhD yet that is what the ADA is attempting to convince you of. Please act inteligtently and do not exclude highly qualified professionals from doing very vital work in combatting our nation's healthcare crisis.

## HB 2570 (amended) Talk Points

- Nutrition is not a field requiring regulation to protect the public. There is no documentation that the public has, or will be harmed from lack of regulation; there is substantial evidence that disease and cost of disease, decreases with good nutrition, health improvements that directly result from the professional advice of many trained providers who would not qualify to practice under this amendment, creating harm to public health.
- This law, amendment notwithstanding, would have a negative economic impact on the state of HI due to hundreds of jobs lost, tax revenue lost, decreased spending in local economies resulting from jobs lost.
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# LATE TESTIMONY

**Representative Robert N. Herkes: CPC CHAIR**

**Measure: HB 2570 -- Relating to Licensing of Dietitians**

**Committee on Consumer Protection and Commerce**

**Date: Monday, February 13, 2012**

**Time: 2:15 p.m.**

**Place: Conference Room 325**

**From:** Susan Smith, MBA, RD, PR and New Member Chair Hawai'i Dietetic Association, Evidence-Based Practice Committee Member and Quality Management Committee Member of the Academy of Nutrition and Dietetics

**Re: In Support of HB 2570-Relating to Licensing of Dietitians**

Dear Representative Herkes,

Aloha! I am Susan Smith and I am a registered dietitian with a Master's degree in Business Administration. I support HB 2570, which transfers the licensing of dietitians from the Department of Health to the Department of Commerce and Consumer Affairs. I have patiently waited since the passage of the dietitian licensure law to apply for my license and appreciate this administration's effort to finally make this a reality. Most of the states in America have passed and enacted similar licensure laws.

I am proud to represent the profession that is dietetics. I have helped teach nutrition to people in 6 states throughout my 23-year career, and I am proud to have helped show them and my own family and friends how a healthy diet can reverse the disease trends in one's family. I am now 46 years old without any medications or diseases, unlike my family which all had high blood pressure and/or diabetes by my age. Whenever anyone thinks they cannot change an "inevitable" family disease, I am able to show them by my example how possible it is to improve one's health.

Many of us dietitians, including me, hold master's degrees and doctorate degrees. We complete a rigorous dietetic internship in the clinical and community setting which prepares us to use our critical thinking to make accurate nutrition assessments in designing the most appropriate and clinically sound nutrition care plan. Those of us working directly with physicians as part of the healthcare team play an important role in helping to manage patients living with chronic conditions which benefit from services registered dietitians provide.

Licensing dietitians can assure cost-effective, quality nutrition care for Hawaii's citizens.

Respectfully submitted.

# LATE TESTIMONY

Susan Smith, MBA, RD  
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# LATE TESTIMONY

## Testimony for HB2570 on 2/13/2012 2:15:00 PM

mailinglist@capitol.hawaii.gov [mailinglist@capitol.hawaii.gov]

**Sent:** Monday, February 13, 2012 11:30 AM

**To:** CPCtestimony

**Cc:** sunset7957@hawaiiantel.net

**Categories:** Red Category

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Testimony for CPC 2/13/2012 2:15:00 PM HB2570

Conference room: 325

Testifier position: Support

Testifier will be present: No

Submitted by: Iris Maeda

Organization: Individual

E-mail: sunset7957@hawaiiantel.net

Submitted on: 2/13/2012

Comments:

**Testimony for HB2570 on 2/13/2012 2:15:00 PM**

# LATE TESTIMONY

mailinglist@capitol.hawaii.gov [mailinglist@capitol.hawaii.gov]

**Sent:** Monday, February 13, 2012 11:57 AM

**To:** CPCtestimony

**Cc:** Peggyjoec@hotmail.com

**Categories:** Red Category

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Testimony for CPC 2/13/2012 2:15:00 PM HB2570

Conference room: 325

Testifier position: Oppose

Testifier will be present: No

Submitted by: PEggy Cunningham

Organization: Individual

E-mail: Peggyjoec@hotmail.com

Submitted on: 2/13/2012

**Comments:**

Please do not pass this bill. It is absurd to propose that healthcare providers who have been educated in giving dietary recommendations to patients as part of their overall treatment plans - not just orietal medical practitioners, but physicians, naturopaths, and other educated healthcare providers as well - should be denied this ability, particularly as nutrition is a fundamental root of health and wellness. This bill should be stopped immediately.



# LATE TESTIMONY

Representative Robert N. Herkes: CPC CHAIR

Measure: HB 2570 – Relating to Licensing of Dietitians  
Committee on Consumer Protection and Commerce  
Date: Monday, February 13, 2012  
Time: 2:15 p.m.  
Place: Conference Room 325

Dear Chairman Herkes and the Consumer Protection and Commerce Committee:

My name is Grant Itomitsu and I am Registered Dietitian (RD) teaching at Kapiolani Community College and practicing clinical dietitian at Kuakini Medical center. I am in support of HB 2570 and would hope you will strongly consider the passing of the measure.

As you may well know the struggles to successfully pass licensure had occurred over 10 years ago. However, due to many confounding factors, the RD's in Hawaii have still been awaiting for the actual licensure to be put in place. The people of Hawaii have benefited over the years from the services registered dietitians have provided. I personally hope to see more done in terms of "prevention" of nutritional related health concerns. In the past I have come across many who could not afford our services. My long term hope is that once we are able to rightly bill for our services, and receive reimbursement we may lessen the burden on patients who will be able to have a greater access to many of our valued services. Also our employers, in light of the extremely difficult healthcare business, would be reimbursed for our services helping their bottom line. I would hope that other insurers would look at Registered Dietitian services as a way to cut cost via prevention and perhaps consider providing our services added benefits to their members. With prevention comes a lower cost of healthcare.

We as RD's in Hawaii, would hope you will strongly consider supporting HB 2570 as we try improve the health of the people of Hawaii. Thank you very much for your time and consideration.

Grant S. Itomitsu, RD

# LATE TESTIMONY

**Representative Robert N. Herkes: CPC CHAIR**

**Measure: HB 2570 – Relating to Licensing of Dietitians**  
**Committee on Consumer Protection and Commerce**  
**Date: Monday, February 13, 2012**  
**Place of hearing: Conference Room 325**

**From:** Ramona L. Wong MD, Honolulu, HI 96822

**Re: HB 2570 - Licensing of Dietitians**

Dear Representative Robert Herkes:

I am writing you to show my support for improving access to registered dietitian (RD) counseling for our Medicaid population.

As a nephrologist I passionately care about improving the quality of care for patients with chronic kidney disease (CKD). RD counseling is an important component of a comprehensive CKD multidisciplinary treatment plan. There is evidence of improved clinical outcomes, decrease in hospitalization and healthcare costs with a multidisciplinary approach to CKD in closed healthcare systems like Kaiser Permanente Southern California, VA Denver, or in a socialized healthcare delivery system as in Vancouver, Canada.

Currently, RD licensure is required for Hawaii's State Medicaid program to reimburse for Medical Nutrition Therapy. Lacking a process for Hawaii RD licensure, our Medicaid population is denied access to RD services if unable or unwilling to pay for services out of pocket. To remedy this disconnect, the State of Hawaii could either provide a process for RD licensure as outlined in the bill HB2570 or should rescind the requirement for RD licensure for the Medicaid population. As I understand, there is no further credentialing requirements in the licensing process, so Dietitian registration remains the process to ensure clinical competence regardless of the solution to improving access.

The RD is the healthcare team member who provides integrated nutrition services. This differentiates the practice of RDs. I have a positive working relationship with RDs in the community and they play a vital role in healthcare. Enforcing the Dietitian Licensure Law or removing the Medicaid requirement for RD licensure would increase the availability and affordability of nutrition care available to many people in Hawaii.

I value and utilize the training, knowledge, experience required of RDs. I believe they provide an important contribution to optimizing the care of the CKD patient.

Respectfully submitted,

Ramona L. Wong MD

Solo practice nephrologist  
Medical Director - FMC CKD services of Pearlridge