

November 13, 2017

HRSA Information Collection Clearance Officer Room 14N39 5600 Fishers Lane Rockville, MD 20857 120 South Riverside Plaza Suite 2000 Chicago, Illinois 60606-6995 800.877.1600

1120 Connecticut Avenue NW Suite 460 Washington, D.C. 20036

Re: National Practitioner Data Bank for Adverse Information on Physicians and Other Health Care Practitioners-45 CFR Part 60 Regulations and Forms, OMB No. 0915-0126-Revision (OMB No. 0915-0126)

Dear Sir or Madam.

The Academy of Nutrition and Dietetics (the "Academy") appreciates the opportunity to submit these comments to the Health Resources and Services Administration (HRSA) related to its June 10, 2016 public comment request "National Practitioner Data Bank for Adverse Information on Physicians and Other Health Care Practitioners-45 CFR Part 60 Regulations and Forms, OMB No. 0915-0126-Revision" (OMB No. 0915-0126). Representing more than 100,000 registered dietitian nutritionists (RDNs),¹ nutrition and dietetic technicians, registered (NDTRs), and advanced-degree nutritionists, the Academy is the largest association of food and nutrition professionals in the United States and is committed to improving the nation's health through food and nutrition across the lifecycle. Every day we work with Americans in all stages of life — from prenatal care through end of life care — providing nutrition care services and conducting nutrition research.

The Academy is committed to the NPDB's purpose "to improve health care quality, protect the public, and combat health care fraud and abuse in the United States," and works closely with state licensure boards to ensure dietetics and nutrition practitioners meet high standards of competency, quality and professional practice. We support HRSA's proposed changes "to eliminate redundant and unnecessary forms, improve user error recovery, and improve overall data integrity."

The NPDB, by collecting significant data from various reporting entities, has the potential to improve the quality of and access to health care by enhancing transparency, facilitating quality practice across state lines, and promoting telehealth. In addition, practitioners are made more accountable thus enhancing professional excellence. The Academy supports the intent of and believes that the NPDB has the potential "to improve the quality of health care by encouraging hospitals, State licensing boards, professional societies, and other entities providing health care services to identify and discipline those who engage in unprofessional behavior, and to restrict the ability of incompetent health care practitioners, providers, or suppliers to move from State to State without disclosure of previous damaging or incompetent performance."

¹ The Academy recently approved the optional use of the credential "registered dietitian nutritionist (RDN)" by "registered dietitians (RDs)" to more accurately convey who they are and what they do as the nation's food and nutrition experts. The RD and RDN credentials have identical meanings and legal trademark definitions.

RDNs are qualified Medicare providers eligible to independently provide and bill for medical nutrition therapy for multiple chronic diseases and conditions. Although RDNs are licensed to provide services in most states (typically as "licensed dietitian nutritionists" or LDNs), there are a handful of states (including California), that do not license RDNs and thus have no dietetics licensure boards that could report incompetent practice. The Academy seeks confirmation from the NPDB that these health care entities will be required to report RDNs. Further, we seek clarification whether these health care entities will be required to report RDNs (and other providers) in states in which the state does not license them to provide services. At this time, we note that publicly available data for RDNs does not appear to be available for particular states that do not license them to practice. In addition, the Academy asks HRSA to publicly disseminate a list of professional societies currently reporting to the NPDB.

We sincerely appreciate the opportunity to offer comments on the NPDB information collection, and would welcome the opportunity to discuss the above issues and the ability of the Academy to effectuate the NPDB's purpose with the NPDB team at HRSA in the near future. Specifically, we request a meeting to discuss the processes by which all health care practitioners are currently and will prospectively be reported to the NPDB from various entities. Please contact either Jeanne Blankenship by telephone at 312-899-1730 or by email at jblankenship@eatright.org or Pepin Tuma by telephone at 202-775-8277 ext. 6001 or by email at ptuma@eatright.org with any questions or requests for additional information.

Sincerely,

Jeanne Blankenship, MS RDN

Vice President

Policy Initiatives and Advocacy Academy of Nutrition and Dietetics

Glanne Blanken Ship, MSRDN

Pepin Andrew Tuma, Esq. Senior Director

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