
Healthcare Nutrition Council

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The following comments are submitted on behalf of the Healthcare Nutrition Council (HNC), an organization representing manufacturers of enteral nutrition formulas, parenteral solutions, supplies and equipment. HNC applauds the Department of Health and Human Services' (HHS) for developing a Strategic Plan for Fiscal Year (FY) 2018-2022 and including important topics like promoting better nutrition, adapting and implementing evidence-based programs and policies, such as implementing nutrition standards and guidelines. Specifically, HNC would like to comment on the strategies outlined under Strategic Goal 2: Protect the Health of Americans Where They Live, Learn, Work, and Play, Objective 2.1: Empower people to make informed choices for healthier living.

HNC strongly supports the strategy to “Promote better nutrition and physical activity”, specifically the point on “implementing nutrition standards and guidelines to help reduce chronic diseases and related health behaviors that impact older adults and people with disabilities”. It is widely recognized that nutritional status plays a significant role in health outcomes and healthcare costs. Addressing malnutrition is essential to improving overall healthcare and may ultimately reduce the economic burden incurred when caring for the oldest and sickest Americans. Malnutrition is generally defined as an acute, subacute or chronic state of nutrition, in which varying degrees of over nutrition or undernutrition with or without inflammatory activity have led to a change in body composition and diminished function (ASPEN). Malnutrition has also been defined as a state of nutrition in which a deficiency, excess, or imbalance of energy, protein, and other nutrients cause measurable adverse effects on body function and clinical outcomes (Elia). For older adult populations, nutrition therapy products can provide critical nutrition for those with a variety of underlying medical conditions who cannot sustain their nutritional needs through regular diet alone. For these populations, diets may be supplemented by nutrition therapy products or, in some cases, these products may provide sole source nutrition. Nutrition therapy products include enteral nutrition formulas, parenteral nutritional products, oral nutritional supplements and medical foods. It is important to recognize that there is a subset of individuals, especially those with chronic diseases, who are unable to maintain or improve their nutritional health without utilization of one or more of these products.

HNC encourages HHS to continue developing dietary guidance based off scientific research and evidence. For vulnerable populations, including older adults and infants, nutrition has a vital role in both health outcomes and physical/cognitive function. For older adults, consideration of chronic diseases and/or health conditions, as well as the impact of age-related changes in body systems, are important in developing dietary standards and guidelines as these help promote optimal health and physical/cognitive function. For infants and pediatric patients, proper nutritional guidance is critical for healthy growth and development in addition to the prevention of various health conditions (Chima, Barco).

As nutritional status contributes to morbidity, mortality, and economic burden associated with diseases and disorders, HNC urges HHS to adopt policies that promote enhanced nutritional care, such as malnutrition screenings, timely diagnoses of malnourished patients, and use of therapeutic diets and nutrition therapy products for patients. We believe that adopting patient-centered, malnutrition quality measures will also improve care coordination and eventually decrease costs to the system. Additionally, numerous studies have shown that adequate nutrition leads to lower medical costs, fewer readmissions, and overall improved patient outcomes. HNC stands ready to work with all stakeholders to develop these policies as one means to improve the public health system.

HNC also supports HHS's strategy outlining “increased collaboration with stakeholders, including industry, consumer, and public health groups, to enhance consumer nutrition education directed towards age and demographic groups with specific needs”. Working with stakeholders is key when developing HHS strategy and implementation. For example, HNC believes that addressing malnutrition, including

disease specific nutritional needs, is necessary to reduce hospital-acquired conditions, lower healthcare costs and improve the health and well-being of vulnerable patients. Quality malnutrition care is important for better health in specific populations. Malnutrition in older adults is often linked to economic and social factors and it can lead to more health disparities. According to a report from the AHRQ, older African Americans have a much higher rate of hospitalization that involved a diagnosis of malnutrition. The Congressional Black Caucus Institute recommended in their 2017 Transition Report that policymakers “recognize malnutrition as a preventable occurrence in the acute care hospitals and they support appropriate screening and treatment efforts, including the adoption of malnutrition-related quality measures in the federal quality reporting programs (Weiss).”

It is also important to note that a multidisciplinary care team comprised of nurses, dietitians, physicians and other professionals serve an essential role for the care of patients. These medical professionals are educated in providing quality nutrition with a focus on risk identification and risk reduction, particularly for patients who are at risk of malnutrition. The first four key components in the nutrition care process beginning with screening to identify those patients truly at risk, continue with the nutrition assessment performed by a registered dietitian to outline the patient’s nutrition status and provide recommendations to guide the care plan, and conclude with the provider medical diagnosis of malnutrition. HNC encourages HHS to further promote the use of nutrition screenings, assessments, diagnosis, and timely access to medically-indicated interventions. This will help to address the underdiagnoses of malnutrition in the healthcare institution and in the community and increase patient access to therapeutic nutrition products, which is shown to improve patient outcomes, lifestyle and overall health. As noted above, HNC urges HHS to collaborate and take action on the health and economic impact of disease-related malnutrition to help achieve our shared goals of promoting better nutrition and physical activity.

HNC appreciates the opportunity to provide comments on HHS’ Strategic Plan for FY 2018-2022. Now is the time to improve the nutritional status of all Americans. HNC applauds HHS for taking steps to make nutrition part of its strategic plan for the next four years. As the plan is finalized, we encourage HHS to prioritize policies and initiatives that identify and treat malnutrition, encourages proper nutrition and the development of cost-effective nutrition therapy products, and ensures access through adequate coverage and payment policies for nutrition therapy products. Advancing these initiatives will lead to better patient outcomes and may reduce healthcare costs by maintaining and improving nutritional status reducing morbidity, mortality, and readmission which all contribute to the economic burden associated with disease.

If you have any questions or would like additional information, please contact me at mjurch@kellencompany.com or at 202-207-1122.

Sincerely,

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