

**STATE OF NEVADA  
AGING AND DISABILITY SERVICES DIVISION**

**SERVICE SPECIFICATIONS  
MEDICAL NUTRITION THERAPY**

**Any exception to these Service Specifications must be requested in advance, in writing, and approved by the Deputy Administrator.**

**PURPOSE:**

To promote quality of service, the Aging and Disability Services Division (ADSD) has established service specifications that contain general guidelines. ADSD will use these service specifications as the basis for assessing program performance. The service specifications that each grantee must follow consist of GENERAL REQUIREMENTS, according to the funding source, and SERVICE-SPECIFIC REQUIREMENTS established for each funded service.

**SERVICE DEFINITION:**

Medical Nutrition Therapy (MNT) service screens older individuals to determine if they are nutritionally “at risk.” If an individual is identified as “at risk,” a nutrition assessment is conducted by a registered dietitian to ascertain if counseling/education, additional meals, nutrition supplements and/or case management may be required.

**SERVICE CATEGORIES AND UNIT MEASURES:**

The following unit measures must be used to document the amount of service provided:

***One unit equals completion of one client contact to screen, assess, intervene, counsel and/or provide education.***

**SPECIFICATIONS:**

1. Required Services:
  - 1.1 Clients are screened to determine if they are at a high risk for nutrition-related problems or have poor nutritional status. Screening reveals the need for an in-depth nutritional assessment, which may require medical diagnosis and treatment, as well as nutrition counseling, as a specific component in a comprehensive health care plan.
    - 1.1.a Clients may be classified as “high risk” if they are low-income, are taking multiple medications, have multiple nutrition-related diseases (e.g. diabetes, hypertension, chronic heart conditions, cancer), and/or have physical disabilities or other functional impairments that result in increased dependence on others.

- 1.2 Once a client is identified as “high risk,” an assessment will be completed to establish a nutrition plan.
  - 1.2.a Nutrition assessment is the measurement of indicators of dietary or nutrition-related factors in order to identify the presence, nature, and extent of impaired nutritional status of any type, and to obtain the information needed for intervention to improve nutritional care. This includes developing a plan of care and reviewing it with the client.
- 1.3 The nutrition plan can include: nutrition intervention, counseling or education, additional meals, nutrition supplements and/or case management.
  - 1.3.a Nutrition intervention is an action taken to decrease the risk or to treat poor nutritional status. Nutrition interventions address the multiple causes of nutritional problems and therefore include actions that may be taken by many different health and social service professionals, as well as family and community members. Intervention actions may include, but are not limited to: utilization of meal programs, home care services, dental services, pharmacist advice, nutrition counseling, and specialized medical and/or dietary treatment, e.g. enteral nutrition therapy.
  - 1.3.b Nutrition counseling provides individualized guidance on appropriate food and nutrient intakes for those with special needs, taking into consideration health, cultural, socioeconomic, functional and psychological factors. Nutrition counseling may include advice to increase or decrease nutrients in the diet; to change the timing, size or composition of meals; to modify food textures; and, in extreme instances, to change the route of administration – from oral to feeding tube to intravenous.
  - 1.3.c Nutrition education imparts information about foods and nutrients, diets, lifestyle factors, community nutrition resources and services to people to improve their nutritional status.
- 1.4 Frozen meals, sack lunches, cold meals, supplements, and/or shelf-stable meals can be used to provide supplemental meal service to clients.
- 1.5 The availability of insurance or a third-party payer to defray costs should be explored.

## 2. Nutrition Service Standards:

- 2.1 Nutritionists or dietetic technicians may provide client counseling and education under the direction of a registered dietitian. Minimum qualifications include:
  - 2.1.a At least a two-year associate’s degree in nutrition from a U.S. regionally-accredited college or university or a dietetic technician program approved

by the Commission on Accreditation for Dietetics Education (CADE), or the American Dietetic Association (ADA).

3. Evaluation Documentation:

- 3.1 All long-term recipients will be evaluated and certified as to the need for the service. The continued need for service is to be reviewed annually, or as the client's condition improves or changes, and be documented by staff to assure program resources are being appropriately allocated. Documentation must include:
  - 3.1.a The date service was started;
  - 3.1.b A copy of the screening tool identifying risk factors, the assessment, the care plan and documentation of follow-up;
  - 3.1.c The estimated length of time the individual is expected to receive nutrition therapy. The length of certification must be based on the client's health condition and cannot exceed 12 months. A reassessment must be conducted for an additional 12-month period, if applicable; and
  - 3.1.d The date of certification and signature of certifying social worker or registered dietitian.