

LDA WEBSITE PRESIDENT'S MESSAGE

By Jo Jo Dantone-DeBarbieris, MS, RD, LDN, CDE

OCTOBER 2009

First of all I wish to thank our LDA Board of Director for their permission to revise, renovate, and renew our LDA Website. I think it is FABULOUS! Most of the credit for all this great look and hard work goes to Kristy Harrigill from Eunice, LA. Kristy is our new Web Page Chair. She took a few ideas which we discussed in conference calls, added her imagination, and passed along what we wanted to Scott Wilson, our Web Master. Kristy and Scott have worked hand in hand to accomplish the new refreshing look. Although some areas are still under construction, 80% of the site is complete. Please let Kristy know what you think or what needs to be added at kpharrigill@charter.net.

Health care reform is a hot subject in Washington, DC as well as everywhere else in the nation. While at ADA FNCE in Denver this past week, the Senate Finance Committee and the Senate Health, Education, Labor and Pension (HELP) bills were merged and will be presented to the full Senate soon. The House bill is expected to be completed by late October. After the Senate and House bills pass their respective votes from the full houses, they will be combined. This will be when it is very important that you write letters of support to keep the existing language intact. As it stands at the time of this writing, here is a breakdown of what is in the Senate bill that could pertain to us as dietitians:

Annual Wellness Visit in Medicare

- The bill establishes an annual wellness visit for all Medicare beneficiaries and includes a personalized prevention plan that starts with a health risk assessment that is completed prior to or at the wellness visit.
 - Both the risk assessment and the prevention plan may be done by a registered dietitian under the supervision of a physician.
 - The personalized prevention plan includes the risk assessment and a strategic plan for lifestyle improvements (including nutrition, weight loss, and exercise)
- There are no co-payments or deductibles for these services. The provisions would become effective on January 1, 2011.

Removal of Barriers to Preventive Services in Medicare

- **Eliminates co-payments and deductibles for preventive services listed under the Welcome to Medicare Physical (which includes Medical Nutrition Therapy)**
- Allows Health and Human Services to add preventives services with a grade of A or B as recommended by U.S. Preventive Services Task Force. (USPSTF gives intensive nutrition behavioral counseling a positive B rating).
- The provisions would effective on January 1, 2011.

Incentives for Healthy Lifestyles Demonstration Project in Medicare

- Creates a three-year demonstration project to test incentives to improve lifestyle choices that impact health, including diet, exercise and smoking.
- Qualified programs must be based on evidence for best practices.
- **The demonstration would include strategies to avoid the onset of diabetes, help reduce weight, lower cholesterol and to improve diabetes self-management.**

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- Successful programs can be extended for two years beyond the demonstration.

Improve access to preventive services in Medicaid

- Includes expansion of preventive services given a positive rating by the USPSTF
- Establishes a five-year grant program to incentivize healthy lifestyles including: weight reduction, reduce cholesterol, **and avoid the onset of diabetes and diabetes self-management.**

Independence at Home Pilot Program

- Establishes a demonstration program that would provide direct, home-based care
- Qualified programs would focus on reduction of hospitalizations, and would improve health outcomes of patients with one or more chronic diseases
- Registered dietitians are listed among the qualified providers in these programs

It is imperative that members pay special attention to all Action Alerts sent from ADA. Writing letters designed by ADA to be specific to our issues is the one action we can all take in order to ensure that our voice is heard in the middle of what may seem to be chaos. Use the following procedures to link to your letters to Members of Congress.

- Go to www.eatright.org, enter your user name and password
- Click on the “Advocacy & the Profession” green tab at the top
- Click on “Grassroots Manager” tab on the side (last one in the list before “My ADA”)
- Click on “Take Action” tab at the top, then follow the instructions

Please feel free to call on the Washington, DC staff at anytime when you have questions or concerns. Here is listing of their contact information. The office number is 1-800-877-0877.

Government Relations Contacts

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ADA Vice President for Policy Initiatives Stephanie Patrick and ADA Director of Government Relations Ron Smith elected to leave ADA as of Friday, September 11, 2009. All of us who have worked with Stephanie and Ron over the better part of the past 10 years will surely miss them. I know you will join me in thanking them for all the hard work they did for the ADA membership and our public policy efforts.

During this transition period, the ADA Washington office is being managed by Mary Hagar PhD, RD, FADA. Susan Roberts, JD, MS, RD has been hired as a policy and communications consultant to assist ADA's Washington office staff for the next several months to develop an environmental scan. The scan will include an assessment of the current policy landscape, including opportunities and challenges in both the legislative and regulatory areas, identify key issues in these areas, and develop an action plan with strategies for addressing these issues with the goal of ADA becoming a policy leader in food and nutrition.

And finally, ADA's PIA (Policy Initiatives and Advocacy) office in Washington, DC made a decision in early October to send On The Pulse e-newsletter each week to every ADA member. On The Pulse was a subscriber only e-newsletter which was only reaching about 1200 members. Now it is reaching 70,000 members. That was a great decision, don't you think?!