

Testimony of Brooke Fredrickson, RDN, LRD, CDCES
North Dakota Board of Dietetic Practice Board Member
In Support of SB 2187
January 25, 2021

Chair Lee and Members of the Committee:

My name is Brooke Fredrickson, and I am representing the North Dakota Board of Dietetic Practice (NDBODP) in support of SB 2187. I have been a licensed registered dietitian since 2005, and I have been serving on the dietetics board since 2014. The North Dakota Board of Dietetic Practice oversees the licensing of registered dietitians and nutritionists as enacted by North Dakota Century Code (NDCC) Chapter 43-44. This Century Code was instituted in 1985 to protect the public's health from being harmed by unqualified persons through incompetent or unethical practice of nutrition care services.

NDCC Chapter 43-44 was passed 35 years ago and has not been changed since that time. The NDBODP is proposing changes to modernize this chapter for the following reasons:

1) To update and add current industry definitions relevant to the practice of nutrition and dietetics, including medical nutrition therapy (MNT). MNT is the provision of nutrition care services for the treatment or management of a disease or medical condition. MNT plays a critical role in our healthcare system through the nutritional management of diseases such as diabetes, cardiovascular disease, obesity, cancer, high blood pressure, kidney disease, celiac disease or those with other medical conditions including food allergies, eating disorders, and pre-diabetes. The practice of MNT includes a heightened risk for harm because of its direct relationship to disease; and therefore, the NDBODP wants to ensure that those engaging in MNT are both qualified and licensed.

2) To expand who may qualify for licensure as a nutritionist. The proposed changes will eliminate licensure to provide "general nutrition services" and will expand the educational requirements and scope of practice of licensed nutritionists to include medical nutrition therapy. In doing this, the board added two new educational pathways and has established standards for Certified Nutrition Specialists and Diplomates of the American Clinical Board of Nutrition to apply for licensure to practice nutrition, including MNT. Under the current statute, these individuals are excluded from licensure in ND.

In doing this, the currently 33 licensed nutritionists will have the option to continue to be licensed under a grandfathering provision in the proposed changes.

3) To add clarity to the law regarding what licensed and unlicensed individuals may do. While a license will be required to provide medical nutrition therapy, it is neither the purpose of this bill nor the intent of the board of dietetic practice to restrict the expression

of general nutrition information, guidance or encouragement about food, lifestyle, or dietary practices, whether through general publication or in one-on-one interactions.

To assist in providing that clarity:

- The board has eliminated the definition of “general nutrition services”; as previously mentioned, the intent is to no longer license individuals to provide general nutrition services.
- The board has added the definition “general nonmedical nutrition information.” This definition explains what an unlicensed individual can do. As you will note in the definition, it allows unlicensed individuals to provide nutrition information and education if it is not for the treatment of a disease or medical condition.
- The board has also expanded the exceptions to licensure in the law that provide clarity on individuals exempt from licensure.

In addition to these primary purposes the board has added a scope of practice for licensed individuals, addressed telehealth, included the option to conduct criminal background checks, maintained reciprocity for dietitians, and waived licensure fees for active military and their spouses serving in North Dakota. Lastly, the bill gives the board the ability to provide interpretive guidance about the statute.

The NDBODP asks that you vote “yes” on the proposed changes to Chapter 43-44 as the modernized bill will protect the public from potential harm by ensuring that those who practice medical nutrition therapy are qualified and licensed to do so, without hindering the provision of nutrition services for healthy populations.

SB 2187	Summary of proposed changes to Chapter 43-44 by section
Section 1	Added the ability to do criminal background checks if required by the board.
Section 2	Added relevant and updated definitions to include current industry terms. Current statute has 8 definitions, proposed changes include 28 definitions.
Section 3	Makeup of the board - Minor updates to language, including circumstances for closed board meetings that would protect privacy of patient’s testimony and medical records.
Section 4	Added ability for the board to provide “interpretive guidance”.
Section 5	Changed the set fee to “not to exceed” giving the board the option to change fees in the future. Also included the waiving of fees for active military and military spouses.
Section 6	Updated language on the use of nutrition titles and credentials with the purpose to prevent the use of anything indicating that the unlicensed individual is able to practice dietetics and nutrition or provide MNT. Any use of the term “therapy” or “therapist” in conjunction with nutrition in a title might indicate that the person is licensed to practice medical nutrition therapy when they are not. The definition of therapist according to the Merriam-Webster Dictionary is an individual specializing in the therapeutic medical treatment of impairment, injury, disease, or disorder.

Section 7	Expanded requirements for licensed nutritionists – requiring minimum of Masters degree with supervised practice and exam. Added pathway for CNS and DACBN for licensure.
Section 8	Updated language for licensing dietitians, including having current registration with the Commission on Dietetic Registration.
Section 9	Removed language specific to 1985.
Section 10	Added clause relating to the grandfathering of currently licensed nutritionists.
Section 11	Added scope of practice for licensed dietitians and nutritionists.
Section 12	Changed and added exceptions from licensure to provide more clarity. Updated language consistent with other statutes and new definitions. #10 - Added exception to provide nutrition information, education, guidance, health coaching, and nonmedical weight control as long as it does not constitute MNT and they do not refer to themselves a nutritionist, licensed nutritionist, licensed registered dietitian or as a provider of MNT. #11 - Added exception for providing medical weight control services (i.e. diabetes prevention program, Sanford Profile). #12 – Added exception for providing nutrition services to family.
Section 13	Added section on qualified supervision and requirements for supervisors.
Section 14	Changed limited permit to provisional license. Included when a provisional license is required.
Section 15	Added clarifying language to the reciprocity clause and added nutritionist.
Section 16	Removed third party authority of code of ethics and gave authority to the board.
Section 17	Clarified board authority regarding injunction.
Section 18	Added line to indicate that each act of unlawful practice is a separate offense.
Section 19	Defined who is responsible for legal fees for disciplinary actions.
Section 20	Added section on requirements for telehealth
Section 21	Defined licensure requirements for out-of-state practitioners who provide services for ND residents up to 30 days per year.
Section 22	Added clause for criminal background checks.

This concludes my testimony, and I am happy to answer any questions.