

Policy Principles and Priorities

As one core element of our Mission, the American Nutrition Association is the leading policy advocate for the science and practice of personalized nutrition. Our Advocacy principles are rooted in our Values regarding the power and potential of nutrition to transform human health. We believe nutrition belongs at the core of our healthcare culture and system. We envision a healthcare system that transforms the health of Americans by creating opportunities for diverse nutrition providers to practice to the level of their training.

The ANA's primary policy goal is to expand public access to and usage of personalized nutrition through public and private policy. To accomplish that, the ANA advocates on behalf of the public and nutrition practitioners. We engage in state and federal legislative and regulatory matters, and in issues related to private employer and insurer policy.

We believe:

- Individuals should have equitable and affordable access to the nutrition practitioner of their choice.
- All health practitioners should be authorized to practice nutrition to the level of their training.
- Nutrition services should be insurance-reimbursable at appropriate rates, for prevention and for a wide range of health conditions.

Regulation of Nutrition Practice

Across the 50 states, nutrition regulation is a patchwork, and includes:

- Overly restrictive licensure laws that prevent unlicensed practitioners, regardless of their qualifications, from practicing any aspect of nutrition care;
- Licensure laws that allow unlicensed practitioners to offer individualized nutrition counseling not targeted to treat a medical condition;
- Licensure that is entirely optional, allowing unlicensed practitioners to provide any level of nutrition care;
- States with no laws governing the regulation of nutrition practice.

Unfortunately, many state licensure laws have outdated and draconian restrictions on which services even very highly qualified nutrition practitioners can legally offer.

At the ANA, we know that access to health coaching, individualized nutrition counseling, and medical nutrition therapy is key to reducing health burdens. We also recognize that different types and levels of nutrition care require different levels of practitioner training. We believe that if appropriately constructed, state nutrition licensure can help achieve the principles we outline.

It is in the context of these principles that the ANA supports state regulation frameworks that provide both licensure for nutrition practitioners holding appropriately accredited credentials, and an exemption authorizing other trained practitioners to provide individualized nutrition counseling that does not target diagnosed medical conditions (i.e. “medical nutrition therapy.”). We believe licensure laws should provide the authority for all practitioners to use earned legitimate credentials and titles to help the public identify and choose among various types of practitioners.

Insurance Reimbursement

Licensure also plays a role in broadening insurance reimbursement opportunities for nutrition practitioners. State and federal laws should recognize the role nutrition professionals can play in delivering highly effective, personalized nutrition care to Americans. Insurance reimbursement for nutrition services expands consumer choice, access, and affordability. This, in turn, lowers the barrier to access to nutrition care, especially for low-income and other underserved communities who have not historically had access to these services.

As government insurance plans, private insurers, and health care systems look to focus more on social determinants of health and health care outcomes, the role of nutrition practitioners must be elevated. Reimbursement rates for these providers should be sustainable and recognize the return on investment that nutrition services can provide to individual patients and the overall healthcare system.

Balanced regulation is needed to capitalize on the skills of a wide variety of professionals using nutrition to prevent, slow, or often reverse chronic disease and obesity.