

Oral Testimony: Ohio Malnutrition Prevention Commission October 23, 2017

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The Defeat Malnutrition Today coalition appreciates the opportunity to testify for the Ohio Malnutrition Prevention Commission on evidence-based approaches to lowering the rates of older adult malnutrition.

Defeat Malnutrition Today is a coalition with over 60 members who are committed to defeating older adult malnutrition across the continuum of care.

As you are aware, malnutrition is unfortunately a common issue across all care settings. In the acute care hospital setting, it is estimated that approximately 20 to 50 percent of admitted patients are malnourished or at-risk of malnutrition. And further, as you know, malnutrition can cause adverse and costly outcomes. Research documents that malnourished older adults make more visits to physicians, hospitals, and emergency rooms.

The good news is that older adult malnutrition is very preventable. Our coalition has some suggestions for the Commission to consider as it carries out its important work in finding evidence-based approaches to lowering the rates of older adult malnutrition:

1) Support efforts to implement malnutrition screening and assessment across healthcare settings.

Though malnutrition has been recognized as a problem by the Centers for Medicare and Medicaid Services (CMS), it has not been included in U.S. national health objectives nor has it been integrated into the CMS quality measures. The Academy of Nutrition and Dietetics and Avalere Health submitted quality measures to CMS for inclusion in 2018's Hospital Inpatient Quality Reporting Program, but they were not accepted by CMS in their final rule. As a state, Ohio can encourage the federal government to adopt these measures. However, it can also independently support hospitals' adoption of these screening and assessment procedures regardless of federal decisions.

2) Support registered dietitians and their work.

Registered dietitians (RDs) are on the front lines of this epidemic at a clinical level, and Ohio should recognize this. RDs are critically needed in health facilities state- and nation-wide and as a pioneer in the field of older adult malnutrition, Ohio is poised to make an impact here. By encouraging proper Medicare/Medicaid reimbursement of RDs and encouraging hospitals to hire these crucial healthcare providers, screening and assessment procedures (as well as follow-up nutrition care plans) will be easier to come by at hospitals.



3) Support public awareness campaigns on older adult malnutrition.

Many people know malnourished older adults, but few know how to identify this issue, and fewer still know what to do about it. Ohio can pioneer public awareness campaigns through the Department of Health and local senior centers, Meals on Wheels programs, and Area Agencies on Aging to inform older adults, their caregivers, and their families about malnutrition and how to address it at a personal level.

4) Support local Area Agencies on Aging, senior centers, and Meals on Wheels programs. One of the best front-line defenses against older adult malnutrition is a local community nutrition program. The state of Ohio and local governments must properly fund these programs in order for them to continue to make an impact in their communities. Spending money on these programs will ultimately save money for Ohio by lowering spending on Medicaid due to better health for lower-income older adults—and, keeping older adults in their homes longer, which these programs enable, is the ultimate cost-saver for the state.

In March 2017 at the American Society on Aging conference, the coalition's Malnutrition Quality Collaborative launched the *National Blueprint: Achieving Quality Malnutrition Care for Older Adults.* The coalition would welcome the opportunity to discuss this Blueprint and the ideas it contains with the Commission.

Thank you for the opportunity to testify today. I have provided longer written comments for your use as well.