

November 29, 2018

The Honorable Alex Azar  
U.S. Department of Health and Human Services (HHS)  
200 Independence Ave. SW  
Washington, DC 20201

Dear Secretary Azar,

The Defeat Malnutrition Today coalition and the Academy of Nutrition and Dietetics write to commend you on your comments recognizing malnutrition as a serious crisis in the American health care system and to recommend some actions the Administration could take to help alleviate this issue.

Defeat Malnutrition Today is a diverse coalition of over 80 national, state, and local organizations who are committed to defeating older adult malnutrition across the continuum of care, including community, healthy aging, nutrition, advocacy, health care professional, faith-based, and private sector groups. We are focused on advancing this fight through federal and state policy and advocacy.

The Academy of Nutrition and Dietetics represents more than 100,000 registered dietitian nutritionists (RDNs), nutrition and dietetic technicians, registered (NDTRs), and advanced-degree nutritionists. The Academy is the largest association of food and nutrition professionals in the United States and is committed to improving the nation's health through food and nutrition across the lifecycle.

In [your comments](#) to the Hatch Foundation for Civility and Solutions on November 14, 2018, you stated:

Data from the Agency for Health Research and Quality at HHS found that Americans with malnutrition are twice as costly to treat at the hospital as those who come in well-nourished. In fact, malnutrition is involved in 12 percent of non-maternal, non-neonatal hospital stays—\$42 billion each year in healthcare spending. Naturally, a number of private health providers and payers have already tried addressing this issue: One ACO in Chicago, for instance, began screening high-risk patients for malnutrition, and then supporting them after discharge from the hospital with follow-ups, referrals, and nutrition coupons. The savings were huge: more than \$3,800 per patient.

As you recognized, malnutrition is a costly and dangerous problem—but savings can be achieved for our health care system through identifying patients with malnutrition and providing malnourished patients with appropriate nutrition care support both during and after discharge from acute care.

Both a composite electronic clinical quality measure (eCQM) and an eCQM measure set for the Hospital Inpatient Quality Reporting Program in the Centers for Medicare and Medicaid Services (CMS) have been submitted to CMS. The measures address malnutrition screening, assessment of those patients found to be at risk of malnutrition, a recorded diagnosis of malnutrition, and a nutrition care plan for patients to follow after discharge from the hospital.

It is through this care model that the root cause of malnutrition, including chronic disease, illness, injury and social determinants, can be identified and treated. As an eCQM, this measure set or composite can also help reduce the burden of data collection and increase provider visibility of a patient's nutrition risk

and care plan. In fact, the ACO mentioned in your speech was a test site for the malnutrition eCQM measure set.

We ask you to work with CMS to secure the adoption of these eCQMs, and **we request a meeting with HHS to discuss how to better position and advance malnutrition quality in health policy.**

Second, our coalition also urges HHS to update the national health surveys and the national health indicators and goals for older Americans to include malnutrition.

HHS should routinely include malnutrition screening measures in national health surveys of older adults, such as in the Administration for Community Living's National Survey of Older Americans Act Participants and in the Centers for Disease Control and Prevention's National Health and Nutrition Examination Survey (NHANES). HHS should also include malnutrition among national key health indicators and in the Healthy People 2030 goals for older adults.

In short, these surveys, goals and indicators help shape public health programs and guide healthcare professionals; malnutrition should be a part of them.

We appreciate your consideration of our thoughts and look forward to working with you to implement steps to combat malnutrition. Please email Bob Blancato, National Coordinator of the Defeat Malnutrition Today coalition, at [rblancato@matzblancato.com](mailto:rblancato@matzblancato.com) if you have any questions or need further clarification.

Sincerely,



Bob Blancato, MPA  
National Coordinator  
Defeat Malnutrition Today



Jeanne Blankenship, MS, RDN  
Vice President, Policy Initiatives and Advocacy  
Academy of Nutrition and Dietetics