

Frequently Asked Questions Regarding Licensure of RDNs in Utah

What additional requirements would Utah RD/RDNs need to meet in order to become licensed? Would Utah RD/RDNs who are already certified be required to sit for a new exam or provide additional continuing education to maintain licensure?

At this point in time it is unlikely that there would be any additional requirements to become licensed for dietitians who are currently certified in Utah. It is possible that the Utah Department of Professional Licensure may require that RD/RDNs applying for licensure provide additional documentation with their application, like a Dietetic Internship Verification Statement, but it is unlikely that an additional exam would be required.

In the dietetic licensure laws of other states, applicants are only required to show proof of their fitness to practice dietetics and the accepted proof is usually the applicant's registration with the Commission on Dietetic Registration.

Any changes to continuing education requirements would be based on the final language of the licensure law.

Would licensure increase the bi-annual cost to the state?

There likely will not be a cost difference between certification and licensure, especially if we stay under the same board. The state of Utah already has a dietetics board that is governed by the Utah Department of Professional Licensure. If a practice exclusivity* clause is built in, the board may need to pay an investigator to investigate violations so the cost may increase related to that or similar issues. There aren't examples from other states where the cost would necessarily increase just because it switches from certification to licensure.

*Practice exclusivity definition: only those the state has properly licensed may engage in activities falling within the regulated profession's scope of practice.

What is the difference between licensure and certification? Are there any drawbacks to becoming licensed? Would licensure for Utah RD/RDNs be the only option or would Utah RD/RDNs still be able to be certified?

Certification can be defined simply as title protection; only registered dietitians can use the term "dietitian". The Academy of Nutrition and Dietetics elaborates on that definition: "A state government certification regulates the use of a professional or occupational title, e.g., certified nurse assistant or certified public accountant. Certification does not establish a monopoly of service; anyone can perform the functions of a nurse assistant or an accountant. Generally, only members of an occupation or profession who have become certified by complying with specified training and testing requirements are

allowed to use a protected title. It is generally illegal to use the "certified" title without the proper credentials. Frequently, state standards for certification are found in "right-to title" statutes and are called state certification acts."

Licensure can be defined simply as scope or practice protection, which would be more than the title protection allowed by certification. The Academy of Nutrition and Dietetics defines it thus: "Licensing is the most restrictive legislative regulation, other than outright prohibition of professional practice, and usually requires specific educational attainment and passage of a competency examination. Licensing programs often include (1) title protection for licensees, meaning that only those the state has properly licensed may use a particular title or hold themselves out as members of a particular profession, and (2) practice exclusivity, meaning only those the state has properly licensed may engage in activities falling within the regulated profession's scope of practice. The goal of licensure is to ensure that licensees have the minimal degree of competency necessary to ensure that the public's health, safety, and welfare are reasonably well protected.

Most scopes of practice in licensure law contain only a general statement about the responsibilities, education requirements, and a non-specific list of allowed duties and do not explicitly enumerate services that are complex or beyond their scope. Unless a duty or practice is explicitly identified as "not within scope", then the person should be able to perform that service.

Licensure for RDNs would become the only option – we would not retain the ability to only be certified without being licensed. Licensure would provide all of the benefits of certification, plus more.

What would licensure allow Utah RD/RDNs to do? Would licensure limit how RD/RDNs are currently practicing?

If the Utah Academy of Nutrition and Dietetics, with the support of its members, decides to move forward with obtaining licensure, we would be able to protect the public from harmful nutrition advice provided by professionals who do not have the appropriate training.

Licensure would not limit how RD/RDNs are currently practicing, especially if we are careful with how we write the resulting regulations to accompany the licensure law. The goal would be to more clearly define what RDNs can do, with no explicitly limiting any activities.

Would licensure increase reimbursement opportunities?

It is possible that licensure would increase the reimbursement opportunities for Utah RD/RDNs because many insurance companies currently only allow "licensed professionals" to become providers with those insurance companies.

Do we have a lobbyist? Are they on the board full-time?

The Utah Academy of Nutrition and Dietetics does not currently have a lobbyist. Historically we have had a lobbyist but the national Academy of Nutrition and Dietetics (AND) recommended that affiliates only have a lobbyist when they are actively pursuing legislation.

Should UAND pursue licensure, the UAND Board will determine, with the advice of AND, if a lobbyist will help the effort be successful. The lobbyist would not be a member of the UAND executive board, but rather a paid consultant for the board.

How would licensure help the public distinguish between dietitians and nutritionist?

Dietetic licensure will ensure that consumers in the state of Utah, who are seeking medical nutrition therapy (MNT), will be able to identify which professionals are qualified to provide MNT. Licensing of dietitians and nutritionists protects the public health by establishing minimum educational, experience and exam criteria for those individuals who hold themselves out to be experts in food and nutrition. The state has an obligation to protect the health and safety of the public, and licensing dietitians and nutritionists is consistent with this obligation. Utah citizens will be able to find qualified professionals to help them manage their diabetes, heart health, weight loss, renal disease, and other conditions that require specific and individualized advice. Licensure will not prevent or prohibit individuals from providing general nutrition advice at a fitness gym, public school, or other wellness setting. It will also not prohibit professionals such as physicians from providing services to help manage these chronic diseases within their own scopes of practice.

What would UAND members need to do to help this be successful?

The Utah Academy of Nutrition and Dietetics needs the support of members to help by contacting their legislators with examples of how they have improved the health of their patients and clients because of their specialized training. We also need members to contact their legislators with examples of patients or clients who were harmed because they received incorrect or inaccurate nutrition advice from unqualified professionals.

Utah legislators also want to ensure access to care for their constituents, so providing stories of people who could not receive necessary health care services because they could not afford the out-of-pocket payment are helpful. We need to help them understand that by becoming licensed dietitians, insurance providers are more likely to cover these services for their constituents.

How will licensure affect RD/RDNs who do not work in a clinical setting?

Licensure affects all RD/RDNs in Utah regardless of practice setting. All RDNs are responsible for influencing the health of the Utahns, whether at the community or public health level through policy development and other activities, or through individual or group MNT activities in various care settings, or in multiple other settings. All RDNs would need to be licensed in Utah to provide services in Utah. This would apply to RDNs who live in other states but provide services within the borders of Utah and/or to Utah citizens.