

Chapter 20: Healthy Start Enhanced Services Nutrition Assessment and Counseling (code 4501)

Introduction

Nutrition counseling consists of assessing dietary intake and assisting participants in their ability to make informed health decisions affecting their nutritional status. Nutrition counseling can aid in lowering the risk of chronic diseases and obesity. According to the World Health Organization's article "Nutrition counseling during pregnancy" published in July 2013, "the nutritional status of women when becoming pregnant and during pregnancy can have significant influence on both fetal, infant and maternal health outcomes."

This chapter discusses the standards and guidelines for a Healthy Start worker providing nutrition assessment and counseling services. Healthy Start "Nutrition Assessment and Counseling" is an enhanced service that goes beyond general information offered in a supportive manner as health promotion, education and anticipatory guidance. Only qualified Healthy Start workers providing face-to-face nutrition counseling with the participant/family will code 4501, "Nutrition Assessment and Counseling."

If Healthy Start does not or is not able to provide this enhanced service, a referral should be made to a licensed nutrition specialist in the community. When funding allows, Coalitions will work diligently to ensure that Healthy Start clients have access to nutrition services beyond what WIC provides through the hiring of qualified Healthy Start staff, contracting with external licensed nutrition specialists, coordinating with the participant's health insurance carrier, or by creating agreements with community partners to provide nutrition services to Healthy Start clients for low or no cost.

Definition of Service

Healthy Start nutrition counseling is **in addition to** the nutrition counseling that is provided to Women, Infants, and Children (WIC) participants. Nutrition counseling involves an intensive therapeutic nutrition assessment, as well as counseling by a qualified professional for populations found to be at high risk for adverse pregnancy and health outcomes.

Examples of nutritional risks include severe anemia, a medical condition that requires a special diet or affects nutrition (such as diabetes, HIV-infection, lactose intolerance, etc.), vegetarian/vegan diets, suspected or confirmed eating disorders, inadequate weight gain during the pregnancy, pre-pregnancy body mass index less than 19.8, pre-pregnancy body mass index greater than 35, pica, age 17 or younger while pregnant, among others.

Provider Qualifications

Florida Administrative Code Rule 64F-3.006(4) requires nutrition counseling be provided by professionals with one of the following credentials:

1. Registered Dietitian
2. Licensed Dietitian/Nutritionist as licensed by the Florida Department of Business and Professional Regulation
3. Public Health Nutritionist employed by a federal, state, or county agency

The Healthy Start nutrition counseling services provider is expected to have the following competencies:

- Knowledge of principles of normal and therapeutic nutrition, during pregnancy, postpartum, and childhood stages;
- Knowledge of drug and nutrient interactions;
- Knowledge and skill in nutrition and dietary assessment techniques and interpretation of data;
- Skill in writing clear, concise entries in the participant's electronic record using the local protocol for progress notes;
- Knowledge and skill in providing nutrition assessments and counseling to identified at-risk pregnant women, postpartum women, children, and their families;
- Knowledge, skills, and ability to provide nutrition education to participants of varied socioeconomic, cultural, language, and educational backgrounds;
- Knowledge of developmental stages of the human life cycle; and
- Ability to utilize creative approaches in the delivery of nutrition services.

Nutrition counseling must be provided in accordance with the constraints of the professional's practice act, established protocols and the individual's education, training, and experience.

Standards and Criteria

Standard 20.1 When funding is available, Healthy Start nutrition counseling services will be offered to all participants who are determined to be in need of nutrition services.

Criteria:

20.1.a Level of service is based upon the participant's or family's risk and needs identified on the Department of Health's Prenatal/Infant Risk Screen and from information obtained during the initial contact, initial assessment, and/or ongoing care; the nutritional assessment; local resources, local Healthy Start coalition funding decisions, and consideration of Healthy Start as the payer of last resort.

20.1.b With the participant's approval, the infants' father or the expectant father, significant others, and other household members are encouraged to participate in the education process.

20.1.c At the first nutrition counseling appointment, an intensive therapeutic nutrition

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assessment will be completed and a plan of care developed.

20.1.d At each nutrition counseling visit, nutrition counseling will be provided that is consistent with the plan of care and an evaluation of progress will be documented.

20.1.e Nutrition counseling services are provided in a manner that adheres to the National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care <https://www.thinkculturalhealth.hhs.gov/clas>.

Standard 20.2 Nutrition counseling services will be provided by qualified and trained providers.

Criteria:

20.2.a Qualifications are met as outlined in this chapter and the Florida Administrative Code 64F-3.006(4), Florida Statute Chapter 468 Part X, and Florida Administrative Code 64B 8-40 to 8-45.

20.2.b Nutrition counseling services shall be provided by individuals who have documentation of receiving specialized training in nutrition assessment forms and nutrition plan of care forms.

20.2.c Competency and up-to-date knowledge related to nutrition counseling is maintained.

Standard 20.3 Providers of nutrition counseling services will offer and initiate services in a timely manner.

Criterion:

Nutrition counseling services will be initiated within 30 calendar days after receipt of referral or identified need unless the need for more immediate initiation of services is evident.

Standard 20.4 The Healthy Start funded provider of nutrition counseling services will provide follow-up to the Healthy Start worker.

Criteria:

20.4.a When the provider of nutrition counseling is not the Healthy Start worker, written follow-up documenting receipt of referral, plan for initiation of services, and progress notes is provided to the Healthy Start worker within 30 calendar days of the service.

20.4.b The nutrition counselor participates in multidisciplinary team meetings.

Standard 20.5 Healthy Start funded providers of nutrition counseling services will respond to any additional identified needs.

Criteria:

20.5.a Additional identified needs are directly addressed by the nutrition counseling provider or by notifying the participant's Healthy Start worker. The participant's need, intervention provided and when appropriate, follow-up for any referrals given, are documented in the person's record.

20.5.b Nutrition counseling providers communicate with the Healthy Start worker who develops the individualized plan of care and the family support plan and collaborates as a part of the interdisciplinary team as indicated by individual need.

Standard 20.6 Providers of nutrition counseling services will accurately code service information in the approved data management system within three business days of service completion.

Criteria:

20.6.a Coding complies with the requirements of the Department of Health publication DHP 50-20 and as specified in Chapter 23, Healthy Start Coding, of these Healthy Start Standards and Guidelines.

20.6.b In order to code "Nutrition Assessment and Counseling" (code 4501), the nutrition counseling services MUST be provided face-to-face.

Standard 20.7 Providers of nutrition counseling services will document services in the approved data management system in a format determined by the local coalition and service provider within three business days of service completion.

Criteria:

20.7.a Services and attempts to provide services are documented in the approved data management system in the electronic record of the individual receiving the services.

20.7.b In the event that services are provided to another person on behalf of a Healthy Start participant, the services are only referenced in the Healthy Start participant's electronic record. The actual detailed documentation occurs in the record of the individual receiving the service.

20.7.c Documentation occurs in other components of the record, such as the family support plan, as appropriate.

Standard 20.8 Nutrition counseling service providers will develop and implement an internal continuous quality improvement (CQI) process.

Criterion:

The continuous quality improvement (CQI) process, developed in collaboration with the local Healthy Start coalition, includes an assessment of strengths, an assessment of areas needing improvement and a plan for assuring maintenance of program quality and

improvement.

Guidelines

Nutrition counseling involves providing an intensive therapeutic nutritional assessment, as well as counseling for at-risk pregnant and postpartum women and children who are threatened by conditions for which medical nutrition therapy would be beneficial.

Nutrition assessment and counseling is provided face-to-face with the participant or the family/caregiver of the infant/child and includes the process of gathering and assessing anthropometric and biochemical data from the medical record, performing a nutrition assessment, and evaluating the dietary intake. The plan of care is developed with the participant or the family/caregiver of the infant/child participant. The plan of care is based on the findings of the nutrition assessment and includes goals and methods to monitor or evaluate the participant's progress toward goal attainment.

Individual and family nutrition counseling is based on the nutrition assessment and must be consistent with the nutrition care plan. Therapeutic dietary counseling for diseases may be provided upon receipt of a written physician prescription.

The nutrition counseling process may involve one or a series of sessions to address the specific health outcome nutrition goals identified. Follow-up counseling sessions must monitor the participant's progress toward goal attainment, involve the participant or family/caregiver of the infant/child participant in their own care, and coordinate care with other members of the interdisciplinary team.

Nutrition assessment and counseling includes the following components of service:

1. Assessment of participant's nutrition status.
2. Development of a nutrition plan of care based on the findings of the nutrition assessment, including specific health outcome nutrition goals that involve the participant in her own care or the family in their infant's or child's care.
3. Provision of individual and family nutrition counseling consistent with the nutrition care plan.
4. Monitoring and evaluation by the nutritionist or dietitian of progress toward the nutrition care plan goals.
5. Referral to appropriate prenatal, postpartum, child/infant care and/or social services.
6. Participation in the family support plan process, when appropriate.
7. Coordination of care with other members of the interdisciplinary team.

Nutrition counseling must be tailored to the unique needs, interests, experiences, language, educational level, environmental limitations, cultural patterns, capabilities, and lifestyle of the participant. Education should be adapted to meet individual or group needs and the educator should be trained to work with an adult, low-literacy population as well as with adolescents. Different cultural beliefs and ethnic differences should be considered when presenting

information. An interpreter may be necessary when education is provided to non-English speaking participants.

Sessions can be provided in the home, neighborhood, school, workplace, or clinic, wherever the concerns, priorities, and needs of the participant and family can best be met. Locations for group sessions should meet the needs of the participants by encouraging and supporting attendance. Incentives such as transportation, child care or completion certificates may be necessary to encourage consistent participation in classes.

The nutrition counseling service provider should be familiar with the resources within the community for additional nutrition related education/support and the quality of the services delivered. A list of resources on nutrition education/support offered in the community should be made available to all participants. The statewide resource for information is the Family Health Line 1-800-451-2229.

Communication between the nutrition counseling service providers and other members of the team is essential to support the likelihood of a positive outcome. Multidisciplinary team communication should consist of:

1. Consent for routine release of protected health information (DH 3206), or other appropriate forms as determined by Department of Health's information security officer, signed by the participant for any information that is to be shared among payers, providers, or others;
2. Referrals to outside sources to assist the family in accessing services in the community;
3. Documentation of unmet family needs to be addressed by the Healthy Start worker, or, if system related, this information should be shared with the Healthy Start coalition; and
4. The sharing of accomplishments and progress on goals identified during the family support plan process with the Healthy Start worker and other interdisciplinary members.

Documentation

Nutrition counseling services, or the provision of nutrition counseling services, must be documented in the participant's electronic medical record in the approved data management system within three business days of service. Nutrition counseling documentation in the participant's electronic record must include:

- Authorization for release of information, signed by the participant, or on behalf of the participant, for any information that is to be shared among payers, providers, or others
- Nutritional Assessment
- Nutritional Plan of Care
- Progress Notes documenting educational content of each class/session
- Family Support Plan for Single Agency Care Coordination (DH 3151), as appropriate

Coding

Healthy Start services for nutrition counseling should be coded in accordance with approved protocols and procedures for coding. Healthy Start nutrition counseling services require a specific code for service delivery. "Nutrition Assessment and Counseling" (code 4501) should be entered into the approved data management system, by participant name, within three business days of service completion. The Healthy Start worker or the provider of the service should code one unit for every 15 minutes of services provided to the appropriate program component.

No group coding is allowed. This is necessary to provide for tracking, analysis, and program evaluation of client specific data. If a provider meets with two or more Healthy Start participants at the same time (group or classes), codes should be entered individually for each participant present.

Refer to Chapter 23, Healthy Start Coding, in the Healthy Start Standards and Guidelines for more specific information on coding, including coding for referrals and follow-ups.

Continuous Quality Improvement (CQI)

The CQI process should be designed to measure and help improve the extent to which nutrition counseling services are provided to Healthy Start participants and their families to eliminate or decrease risk factors that may affect a pregnancy or an infant's/child's health and well-being.

The Healthy Start Coalition should verify that the nutrition counselor continues to meet provider qualifications and has continued their training in nutrition counseling. Details of continuing education units, workshops, and training relevant to nutrition counseling should be documented in the provider's file and maintained.

Examples of targeted outcomes to be measured through the CQI process include:

1. Reduction or elimination of the original Healthy Start risk factors or their underlying situations as it relates to Nutritional Counseling.
2. Increased knowledge of:
 - Effects of eating habits upon nutrition and other health problems.
 - Underlying nutrition problem and the effects eating habits will have on health outcomes.
 - Negative behavioral food habits.
 - Skills in planning, buying and preparing nutritious foods.
3. Number of participants who achieve weight goals and other nutrition related goals as stated in the nutrition care plan.
4. Regular participation in the WIC program and other food assistance programs when eligible.

5. Increase in correct documentation in the approved data management system to show nutrition counseling was offered and/or provided to Healthy Start participants.
6. Increase in correct coding of “Nutrition Assessment and Counseling” (code 4501) in the approved data management system to show nutrition counseling was provided to Healthy Start participants by qualified professionals.
7. Adequate training opportunities for Healthy Start workers and nutrition counselors in the area of nutrition.

See Chapter 30, Continuous Quality Improvement, for additional information.

References

- Florida Department of Health <http://www.floridahealth.gov/programs-and-services/wic/nutrition-materials/index.html>
- FSU Partners for a Healthy Baby Curriculum www.cpeip.fsu.edu/PHB/
- Healthy People 2020 www.healthypeople.gov/
- United States Department of Agriculture Food and Nutrition Service <http://www.fns.usda.gov/wic/women-infants-and-children-wic>
- WIC Works <https://wicworks.fns.usda.gov/assessment-tools/measuring-and-weighing>
- American Academy of Pediatrics Committee on Nutrition. (2014). *Pediatric nutrition* (7th ed.). Elk Grove Village, IL: American Academy of Pediatrics.
- Centers for Disease Control and Prevention. (2015). *Body Mass Index (BMI)*. Retrieved from <http://www.cdc.gov/healthyweight/assessing/bmi/index.html>
- Centers for Disease Control and Prevention. (2010). *WHO growth standards are recommended for use in the U.S. for infants and children 0 to 2 years of age*. Retrieved from http://www.cdc.gov/growthcharts/who_charts.htm
- Procter, S. et al. (2014). Position of the Academy of Nutrition and Dietetics: Nutrition and lifestyle for a healthy pregnancy outcome. *Journal of the Academy of Nutrition and Dietetics*, 114(7), 1099-1103. Retrieved from http://www.eatrightpro.org/~media/eatrightpro%20files/practice/position%20and%20practice%20papers/position%20papers/position_healthy_pregnancy.ashx
- Snetselaar, L. (2009). *Nutrition counseling skills for the nutrition care process* (4th ed.). Sudbury, MA: Jones and Bartlett Publishers.
- U.S. Department of Health and Human Services Office of Women’s Health. (2010). *Mental health: Eating disorders*. Retrieved from <http://www.womenshealth.gov/mental-health/illnesses/eating-disorders.html>

Frequently Asked Questions

Q. What distinguishes the service of “Nutrition Assessment and Counseling” from the education services offered through care coordination?

A. Healthy Start nutrition counseling is provided by an appropriately credentialed nutrition professional. It includes a nutritional assessment followed by the development of a plan of care addressing risk factors with intensive therapeutic intervention. The nutrition counseling is consistent with the plan of care and includes monitoring and evaluation of the participant’s progress in meeting established health or nutritional goals.

When general nutrition information is offered in a supportive manner as education or anticipatory guidance, it is considered care coordination.

If all of the following criteria are met, it is considered an enhanced service and the provider should code the service as "Nutrition Assessment and Counseling" (code 4501):

- The provider must meet the Provider Qualifications listed in this chapter.
- The service must be provided face-to-face.
- A therapeutic nutritional assessment must be completed.
- A nutrition plan of care, at a minimum, must be initiated and updated at every visit.
- Specific educational or supportive topics relating to the enhanced service must be selected, presented, and listed in the participant's progress notes by the provider.

If the above requirements are not met, time spent is coded as “Care Coordination Face to Face” (code 3320) or “Care Coordination Tracking/ Not Face to Face” (code 3321), as appropriate.

Q. Can a nurse, social worker, or family support worker provide an enhanced nutrition service?

A. No, only those professionals listed under the Provider Qualifications section of this chapter can provide this service.

Q. Can WIC nutritionists provide this service?

A. Yes. However, the services the WIC nutritionist provides as a Healthy Start service must be above and beyond the nutrition counseling the participant would receive in WIC. In addition, Healthy Start funds must be used to pay for the WIC nutritionist’s salary for time devoted to the provision of Healthy Start nutrition counseling services to the Healthy Start participant.

- Q. Can WIC nutritionists code nutrition counseling to Healthy Start when they provide a nutrition service to a Healthy Start participant?**
- A.** Yes, as long as Healthy Start funds are used to pay the WIC nutritionist's salary for time devoted to the provision of this Healthy Start nutrition service. If Healthy Start funds are not available, then the WIC nutritionist may not code the nutrition service to the Healthy Start program and should code the service to a WIC service code instead. In addition, please remember that in order for the WIC nutritionist to code the service as a Healthy Start service, it must be a service that goes beyond the service a participant would receive in WIC.
- Q. If funds are available to pay for Healthy Start nutrition services, can this service also be counted as a nutrition education contact for WIC?**
- A.** Yes, but the WIC nutritionist must make sure not to double code. Time spent providing education the client would receive through WIC should be coded to WIC service codes. Time spent providing more intense nutrition counseling above and beyond what WIC provides should be coded to Healthy Start.
- Q. Can Healthy Start funding be used to provide nutrition training or purchase nutrition references for Healthy Start service providers?**
- A.** Yes, local Healthy Start coalitions may choose to provide funding for nutrition training or for the purchase of nutrition references for Healthy Start service providers.

NOTES:
