



Certification Board for Nutrition SpecialistsSM

July 30, 2013

John Wiesman, DrPH, MPH, Secretary of Health
Office of the Secretary
Washington State Department of Health
P.O. Box 47890
Olympia, Washington 98504-7890

Dear Secretary Wiesman:

I am writing on behalf of the Certification Board for Nutrition Specialists (CBNS) in opposition to the Sunrise Application being considered for a Diabetes Educator credential and regulatory board. CBNS is the foremost credentialing body for advanced degree, Clinical Nutritionists. Our Certified Nutrition Specialist (CNS) certificants must hold Masters or PhDs in nutrition or a health field (and have specific nutrition education if the latter), pass a rigorous clinical nutrition exam, and have 1000 minimum hours of practice experience to earn the CNS designation. Diabetes care is certainly well within the scope of a CNS.

We believe that this application and request as presented, does not meet the burden of proof for creating an additional regulatory body, and that as written, has unintended consequences that likely create financial harm as well as harm to the health and the rights of Washingtonians.

- The proposed regulation and draft legislation as written would control a broad universe of providers who currently provide or may provide services to those diagnosed with diabetes. It also would regulate those who work with anyone “at risk for diabetes” a definition so broad as to include all residents of the State of Washington.
- As written, this regulation forces State of Washington healthcare professionals to spend time and money to meet this new set of licensing requirements for the purpose of insurance reimbursement for which many of them already qualify. If deemed prudent this need can be met without placing additional regulatory burdens on already licensed professionals.
- The application for Sunrise Review does not present evidence of harm and thus does not satisfy a key criterion for a new regulation.
- This proposed regulation and legislation as written interferes with the business of many

President and Vice Presidents

Sidney J. Stohs, PhD, CNS, FACN, ATS, President

Jeffrey Blumberg, PhD, FACN, FASN, CNS, Executive Vice President

Jeffrey Bland, PhD, FACN, CNS • Corinne L. Bush, MS, CNS,

Stanley J. Dudrick, MD, CNS, FACN • Jonathan W. Emord, JD



occupations and professionals that already work on lifestyle solutions with those with or at risk for diabetes. We believe the proposed regulation as written would erect barriers that do not currently exist which would reduce and limit rather than increase qualified providers who are helping *prevent new cases of diabetes*.

- The proposed scope of practice in effect conflates more specialized medical care relating to diabetes (e.g. use of insulin pump, medication regulation) with less specialized (dietary planning and exercise) that many professionals in multiple professions are qualified to give and currently do provide, and that are essential to prevention.
- Many of the professions exempted from the proposed regulation have little or no requirement for nutrition training (social workers, psychiatrists, exercise physiologists), a key piece of diabetes prevention and treatment, while at the same time advanced degree, Certified Nutrition Specialists (CNS) in the State of Washington would be prohibited from providing diabetes care unless supervised or seeking additional licensure under the proposed legislation. Nutrition professionals as a category are omitted from the proposed regulation.
- Sec 3 (1) prohibits use of the title “Licensed Diabetes Educator”, and “use of any title or description of services” without a license which broadly and non-specifically impinges on advertising, and title, and Sec 3 (2) mandates a non-diabetes educator health care professional who provides or supports individuals with diabetes to be supervised by a licensed diabetes care provider. Sec 4 states “this chapter does not modify or alter the practice, licensed, certified, or registered in a health care profession...”. It is unclear who might be exempt and who not. In either case Sec 3 (1) is far too broad and vague.
- This regulation would limit qualified professionals from giving the guidance to which consumers already have free access through books, workshops, and other media sources. It also would have the effect of prohibiting the consumer from choosing the provider from whom they want to get help.

While we could support in theory the creation of a Licensed Diabetes Educator credential and protecting the use of its title for the purposes of insurance reimbursement to providers who are qualified but not currently able to be reimbursed for providing Diabetes Self Management Training, the proposed regulation as written we believe is too broad and has unintended consequences. We are amenable to working towards the creation of such a credential if it:

- 1) did not require duplicate credentialing for credentialed professionals in order for them to continue providing a service they already provide;
- 2) did not place vague and overly broad restrictions on use of title and description of services;
- 3) did not interfere with or change existing provider qualifications for insurance reimbursement for diabetes care, and
- 4) differentiated preventive care services and lifestyle counseling that does not involve diagnosis, treatment planning, or involvement in medication regimens, and did not



require credentialing for the former beyond what currently exists in the State of Washington.

Sincerely,

A handwritten signature in black ink that reads 'Sidney J. Stohs'. The signature is written in a cursive style with a small 'J' and a period after the first name.

Sidney Stohs, PhD, CNS, FACN, ATS
President
Certification Board for Nutrition Specialists