[Representative Name]

[Representative Email]

[Your Name]

[Private Practice or group you represent, if applicable]

[Your Address]

**Support for H6032 - The Telemedicine Coverage Act**

Dear [Representative or Senator XXXX]

My name is [Your first and last name] and I am a Registered Dietitian Nutritionist (dietitian) who resides in your district. I realize there are two versions of the telemedicine bill being considered by the General Assembly right now— a House version and a Senate version. I strongly urge you to support the House version (H6032), which includes a larger variety of healthcare providers, including RDNs. At a minimum, I would respectfully request that “medical nutrition therapy” be listed as an eligible coverage in the final version of a compromise bill.

*[You can use the below paragraphs or edit to state or list the reasons they should pass a version of the bill similar to the house version, starting with the most important or compelling reasons. Where possible, include any facts, figures, statements, and experiences to support your position. Sharing a story of a particular client who experienced health benefits from telehealth nutrition visits would fit here.]*

Medical nutrition therapy provided by a dietitian is a cost-effective way to prevent, treat and manage diseases such as diabetes, hypertension, dyslipidemia, and other chronic conditions. When medical nutrition therapy is provided as part of care, there are significant improvements in health markers like hemoglobin A1C (a marker of blood sugar control), blood pressure, and cholesterol.1 More visits with a dietitian may save money in healthcare expenses in the long term. For example, a person with diabetes has estimated medical costs twice that of a person without diabetes2 and in 2017, it was reported that 55% of Rhode Islanders with diabetes never attended an appointment to learn to manage their disease.3 Medical nutrition therapy can help patients improve their blood sugar control after 12 weeks.4

Over the past year RDNs have noticed a 50% reduction in missed appointments or “no-shows”. This means that telehealth has allowed more Rhode Islanders to receive medical nutrition therapy from dietitians. Approving the House of Representatives version of the bill will allow all Rhode Islanders to continue to have better access to nutrition care. The Senate version of this bill would ensure coverage and equal payment for only primary care physicians and behavioral health care providers, which while an important step forward, leaves out dietitians. Again at a minimum, we urge you to advocate for including “medical nutrition therapy” as an eligible coverage for telemedicine and parity in the final legislation.

By expanding the coverage of telemedicine you could help create a foundation for future generations of healthy people and families. Thank you for your consideration.

Sincerely,

[Your Name]

[Private practice or outpatient group you represent, if applicable]

[Address]

1. Academy of Nutrition and Dietetics. What is the evidence to support effectiveness of nutrition interventions and counseling provided by an RD when part of a healthcare team? 2009. Available at <https://www.andeal.org/topic.cfm?menu=4085&cat=3676>.

2. <https://www.americashealthrankings.org/explore/annual/measure/Diabetes/state/RI>

[3.https://health.ri.gov/data/diabetes/#:~:text=Rhode%20Island%20Numbers%202017,represents%20an%20additional%2024%2C800%20people](https://health.ri.gov/data/diabetes/#:~:text=Rhode%20Island%20Numbers%202017,represents%20an%20additional%2024%2C800%20people).

4. Parker AR, Byham-Gray L, Denmark R, Winkle PJ. The effect of medical nutrition therapy by a registered dietitian nutritionist in patients with prediabetes participating in a randomized controlled clinical research trial. J Acad Nutr Diet. 2014 Nov;114(11):1739-48.