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FY 2015 Houston EMA/HSDA Ryan White Part A Service Definition **Medical Nutritional Therapy** (Revision Date: 06/03/14)	
HRSA Service Category Title: **RWGA Only**	**Medical Nutritional Therapy**
Local Service Category Title:	**Medical Nutritional Therapy and Nutritional Supplements**
Budget Type: **RWGA Only**	**Hybrid**
Budget Requirements or Restrictions: **RWGA Only**	***Supplements:*** An individual client may not exceed $1,000.00 in supplements annually without **prior** approval by RWGA. ***Nutritional Therapy:*** An individual nutritional education/counseling session lasting a minimum of 45 minutes. Provision of professional (licensed registered dietician) education/counseling concerning the therapeutic importance of foods and nutritional supplements that are beneficial to the wellness and improved health conditions of clients. Medically, it is expected that symptomatic or mildly symptomatic clients will be seen once every 12 weeks while clients with higher acuity will be seen once every 6 weeks.
HRSA Service Category Definition: **RWGA Only**	***Medical nutrition therapy*** is provided by a licensed registered dietitian outside of a primary care visit **and may include the provision of nutritional supplements.**
Local Service Category Definition:	***Supplements:*** Up to a 90-day supply at any given time, per client, of approved nutritional supplements that are listed on the Houston EMA/HSDA Nutritional Supplement Formulary. Nutritional counseling must be provided for each disbursement of nutritional supplements. ***Nutritional Therapy:*** An individual nutritional education/counseling session lasting a minimum of 45 minutes. Provision of professional (licensed registered dietician) education/counseling concerning the therapeutic importance of foods and nutritional supplements that are beneficial to the wellness and improved health conditions of clients. Medically, it is expected that symptomatic or mildly symptomatic clients will be seen once every 12 weeks while clients with higher acuity will be seen once every 6 weeks. Services must be provided under written order from a state licensed medical provider (MD, DO or PA) with prescribing privileges and must be based on a written nutrition plan developed by a licensed registered dietician.
Target Population (age, gender, geographic, race, ethnicity, etc.):	HIV/AIDS infected persons living within the Houston Eligible Metropolitan Area (EMA) or HIV Service Delivery Area (HSDA).
Services to be Provided:	***Supplements:*** The provision of nutritional supplements to eligible clients with a written referral from a licensed physician or PA that specifies frequency, duration and amount and includes a written nutritional plan prepared by a licensed, registered dietician. *Nutritional Supplement Disbursement Counseling* is a component of

	Medical Nutritional Therapy. *Nutritional Supplement Disbursement Counseling* is a component of the disbursement transaction and is defined as the provision of information by a licensed registered dietitian about therapeutic nutritional and/or supplemental foods that are beneficial to the wellness and increased health condition of clients provided in conjunction with the disbursement of supplements. Services may be provided either through educational or counseling sessions. Also included in this service are follow up sessions with clients' Primary Care provider regarding the effectiveness of the supplements. The number of sessions for each client shall be determined by a written assessment conducted by the Licensed Dietitian but may not exceed twelve (12) sessions per client per contract year. ***Medical Nutritional Therapy:*** Service must be provided under written order of a state licensed medical provider (MD, DO, PA) with prescribing privileges and must include a written plan developed by state licensed registered dietician. Client must receive a full range of medical nutritional therapy services including, but not limited to, diet history and recall; estimation of nutrition intake; assessment of weight change; calculation of nutritional requirements related to specific medication regimes and disease status, meal preparation and selection suggestions; calorie counts; evaluation of clinically appropriate laboratory results; assessment of medication-nutrient interactions; and bio-impedance assessment. If patient evaluation indicates the need for interventions such as nutritional supplements, appetite stimulants, or treatment of underlying pathogens, the dietician must share such findings with the patient's primary medical provider (MD, DO or PE) and provide recommendations. Clients needing additional nutritional resources will be referred to case management services as appropriate and/or local food banks. Provider must furnish information on this service category to at least the health care providers funded by Ryan White Parts A, B, C and D and TDSHS State Services.
Service Unit Definition(s): **RWGA Only**	***Supplements:*** One (1) unit of service = a single visit wherein an eligible client receives allowable nutritional supplements (up to a 90 day supply) and nutritional counseling by a licensed dietician as clinically indicated. A visit wherein the client receives counseling but no supplements is not a billable disbursement transaction. ***Medical Nutritional Therapy:*** An individual nutritional counseling session lasting a minimum of 45 minutes.
Financial Eligibility:	Refer to the RWPC's approved *FY 2015 Financial Eligibility for Houston EMA Services*.
Client Eligibility:	***Nutritional Supplements:*** HIV-infected and documentation that the client is actively enrolled in primary medical care.

	Medical Nutritional Therapy: HIV-infected resident and documentation that the client is actively enrolled in primary medical care.
Agency Requirements:	None.
Staff Requirements:	The nutritional counseling services under this category must be provided by a licensed registered dietician. Dieticians must have a minimum of two (2) years experience providing nutritional assessment and counseling to PLWHA.
Special Requirements: **RWGA Only**	Must comply with Houston EMA/HSDA Part A/B Standards of Care, HHS treatment guidelines and applicable HRSA/HAB HIV Clinical Performance Measures. Must comply with the Houston EMA/HSDA approved Medical Nutritional Therapy Formulary.

FY 2016 RWPC "How to Best Meet the Need" Decision Process

Step in Process: **Council**		Date: **06/11/2015**
Recommendations:	Approved: Y:_____ No: _____ Approved With Changes:_____	If approved with changes list changes below:
1.		
2.		
3.		

Step in Process: **Steering Committee**		Date: **06/07/2015**
Recommendations:	Approved: Y:_____ No: _____ Approved With Changes:_____	If approved with changes list changes below:
1.		
2.		
3.		

Step in Process: **Quality Assurance Committee**		Date: **05/21/2015**
Recommendations:	Approved: Y:_____ No: _____ Approved With Changes:_____	If approved with changes list changes below:
1.		
2.		
3.		

Step in Process: **HTBMTN Workgroup**	Date: **04/14/2015**
Recommendations:	Financial Eligibility:
1.	
2.	
3.	

NUTRITION

WHY IS NUTRITION IMPORTANT?

Good nutrition means eating the right *kinds* and *amounts* of food. Good nutrition can be a problem for many people with HIV. In order to fight infection, the body uses energy and nutrients from food at an increased rate.

HIV infection can cause weight loss, but the medications you're prescribed may cause fat gain. In order to prevent muscle loss and/or fat gain, you should eat a variety of lean meat sources at least three times each day (eggs, poultry, fish, lean beef, chicken, pork). If you gain or lose more than 10lbs in 6 months, talk to your healthcare provider.

Some medications can upset your stomach, and some opportunistic infections can affect the mouth or throat. This makes it difficult to eat. Also, some medications and infections cause diarrhea. If you have diarrhea (see fact sheet 554,) your body actually uses less of what you eat. This is called malabsorption. If you experience an upset stomach, diarrhea, or mouth pain, see your doctor and dietitian.

NUTRITION GUIDELINES FOR PEOPLE WITH HIV

First, **eat more often**. Try to eat 4-6 times per day instead of 2-3 times per day. This will help prevent muscle loss. Extra muscle weight will help you fight HIV. This is very important. Many people want to lose weight, but for people with HIV, it can be dangerous.

Make sure you eat plenty of meat, fruits, and vegetables.

- **Meat** (protein) helps build and maintain your muscles. Chicken, pork, beef, fish, eggs, and dairy are the best foods to eat for muscle maintenance.
- **Fruits & Vegetables & Whole Grains** (carbohydrates) give you energy and antioxidants. These are "power" foods that will help you fight infections. Every meal should contain fruits and vegetables.
- **Nuts & oils** (fats) provide energy for low-intensity exercise and normal body functions. You need some — but not too much.

A moderate **exercise** program will help your body turn your food into muscle. Within 15 minutes after exercise, eat a small meal or snack with meat, fruits, and veggies or drink a glass of chocolate milk. Take it easy, and work exercise into your daily activities. See fact sheet 802 for more information on exercise.

Drinking enough **liquids** is very important when you have HIV. Extra water can reduce the side effects of medications. It can help you avoid a dry mouth and constipation. Remember that drinking tea, coffee, colas, chocolate, or alcohol can actually make you lose body liquid. The best way to know if you're getting enough water is to monitor the color of your urine. Light-yellow is ideal.

PRACTICE FOOD SAFETY

- Keep foods **out** of the temperature danger zone—41°–140° F.
- Wash your hands often. Use soap & water and scrub for at least 20 seconds. Wash hands immediately before and after handling raw food.
- Throw it out, when in doubt—never eat anything that you think is possibly spoiled.
- Wash all fresh produce thoroughly, even those that you remove the skin from, such as bananas, melons, and oranges.
- Sanitize countertops, cutting boards, and other food preparation areas frequently during meal preparation
- Never eat raw eggs or raw fish, such as in some eggnog recipes or sushi.
- Cook meat, poultry, and fish to the following recommended temperatures:
  - Poultry: 165° F
  - Ground meat: 155° F
  - Pork, beef, veal, lamb and fish: 145° F
- Reheat leftovers by heating to a minimum temperature of 145° F
- Avoid drinking well water

WHAT ABOUT SUPPLEMENTS?

Supplements can be dangerous. Avoid supplements unless you have discussed with your doctor and dietitian. Supplements (vitamins, minerals, protein powder, meal replacement drinks, amino acids, herbs) are often contaminated, expensive, and not regulated by the FDA. Supplements could contain ingredients that interfere with your medications.

THE BOTTOM LINE

Eating healthy foods is very important for people with HIV. When you are HIV-positive, you will need to change the types and amounts of foods you're eating.

Be sure to eat a balanced diet, including plenty of lean meats, fruits & vegetables, and whole grain foods. An exercise program will help build and maintain muscle.

Drink plenty of liquids to help your body deal with any medications you are taking.

Practice food safety. Keep your kitchen clean, wash foods, and be careful about food preparation and storage. If your tap water isn't pure, drink bottled water.

If you feel you need to use nutritional supplements, be sure to get some expert advice from your health care provider.

FOR MORE INFORMATION

US Government Food Safety Information: http://www.foodsafety.gov/

US Department of Agriculture dietary guidelines:
http://www.choosemyplate.gov

Dong K, Imai CM.. Medical nutrition therapy for HIV and AIDS. In: Mahan LK, Escott-Stump S, Raymond JL. Krause's Food and the Nutrition Care Process. St Louis, MO: Elsevier Saunders; 2012:864-883.

Reviewed August 28, 2014

SIDE EFFECTS

WHAT ARE SIDE EFFECTS?

Side effects are what a medication does to you that you don't want it to do. Medications are prescribed for a specific purpose, such as to treat HIV. Anything else the drug does is a side effect.

Some side effects are mild, like a slight headache. Others, like liver damage, can be severe and, in rare cases, fatal. Some go on for just a few days or weeks, but others might continue as long as you take a medication, or even after you stop. Some occur within days or weeks of starting a drug. Others may only show up after months or years of therapy.

WHO GETS SIDE EFFECTS?

Modern antiretroviral medications are very well tolerated and only rarely cause serious side effects. While some people taking antiretroviral medications (ARVs) can have side effects. Some people (such as those with liver or kidney disease) may body processes drugs more slowly than normal, and could have higher drug levels in their systems and have increased risk of ore side effects.

Some side effects become worse if the drug is taken on an empty stomach. Others may increase if the drug is taken with fatty food or drink such as whole milk.

Each medication comes with information on its most common side effects. **Don't assume that you will get every side effect that's listed!** Most people have few or only minor side effects when they take their ARVs as directed.

HOW TO DEAL WITH SIDE EFFECTS

There are several steps you can take to prepare yourself to deal with side effects. Learn about the normal side effects for the medications you're taking. The InfoNet fact sheets list common side effects for each drug.

- Talk to your health care provider about what side effects to expect. Ask when you should get medical attention because a side effect goes on too long, or has gotten severe.
- Find out if you can treat mild side effects with home remedies or over-the-counter medications.
- In some cases, your health care provider can write you a prescription for something you can take to deal with a side effect if it gets severe.
- Stock up! If you're having stomach problems, make sure you have plenty of food that you like to eat and that's easy on your stomach.
- **Do not stop taking any of your medications, or skip or reduce your dose, without talking to your health care provider!** Doing so can allow the virus to develop resistance (see fact sheet 126), and you might not be able to use some ARVs. ***BEFORE* side effects make you skip or reduce doses, talk to your health care provider about changing drugs!**

WHICH SIDE EFFECTS ARE THE MOST COMMON?

When you start antiretroviral therapy (ART), you may get headaches, hypertension, or a general sense of feeling ill. These usually improve and disappear over time.

Fatigue (Fact Sheet 551): People with HIV can feel tired at least part of the time. It's important to find the cause of fatigue and treat it accordingly.

Anemia (Fact Sheet 552) is caused by having low red blood cell counts and can cause fatigue. Anemia increases your risk of getting sicker with HIV infection. Routine blood tests can detect anemia, and it can be treated.

Digestive Problems: Many drugs can make you feel sick to your stomach. They can also cause nausea, vomiting, gas, or diarrhea. Home remedies include:

- Instead of three big meals, eat smaller amounts, more often.
- Avoid spicy foods.
- Ginger ale or ginger tea might settle your stomach. So can the smell of fresh lemon.
- Exercise regularly.

Don't skip meals or to lose too much weight! Marijuana (see Fact Sheet 731) or the prescription drug dronabinol can reduce nausea. Be careful with over-the-counter or prescription nausea drugs. They may interact with your ARVs.

Gas and bloating can be reduced by avoiding foods like beans, some raw vegetables, and vegetable skins.

Diarrhea (Fact Sheet 554) can range from a small hassle to a serious condition. Tell your health care provider if diarrhea goes on for more than a few days or if it's serious. Drink lots of liquids.

Lipodystrophy (Body Shape Changes, Fact Sheet 553) includes fat loss in arms, legs and face; fat gain in the stomach or behind the neck. People who start ARVs with low CD4 counts have increased risk of lipodystrophy.

High levels of fats and sugar in the blood (Fact Sheet 123), including cholesterol, triglycerides and glucose. These can increase the risk of heart disease (Fact Sheet 652) or stroke.

Skin Problems: Some medications cause rashes. Most are mild and temporary, but in rare cases they indicate a serious reaction. Talk to your health care provider if you have a rash. Other skin problems include dry skin or hair loss. Moisturizers help some skin problems.

Peripheral neuropathy (Fact Sheet 555) is a painful condition caused by nerve damage. Neuropathy normally starts in the feet or hands; it can also be caused by other medical conditions.

Osteoporosis (Fact Sheet 557) bone problems are common in people living with HIV. Bones can lose their mineral content and become brittle.. Get enough vitamin D and calcium from food or, if needed, supplements. Reducing tobacco, and weight-bearing exercise like walking or weight lifting can be helpful.

THE BOTTOM LINE

Some people who take ARVs have side effects. However, don't assume you will get every side effect you hear about!

Get information on the most common side effects and how to treat them. Read the InfoNet fact sheets on individual drugs and their side effects. Stock up on home remedies and other items that can help you deal with side effects.

Be sure you know when to go back to your health care provider because a side effect may have gone on too long or gotten severe.

Don't let side effects keep you from taking your medications! Do not assume that taking ARVs means you have to put up with the side effects. If you can't deal with them, if they continue for more than a few weeks, or they affect your quality of life, talk to your health care provider about changing your drugs.

Revised August 10, 2014