

SUBJECT: Continuing the Texas State Board of Examiners of Dietitians

COMMITTEE: Public Health — favorable without amendment

VOTE: 8 ayes — Delisi, Laubenberg, Coleman, Dawson, Jackson, McReynolds, Solis, Truitt

0 nays

1 absent — Zedler

WITNESSES: For — Linda Farr, Hawley Poinsett, Texas Dietetic Association; Felicia Ricks, Texas Dietetic Association Renal Practice Task Force; Cathy Montgomery; (*Registered, but did not testify*: Greg Hooser, Texas Dietetic Association)

Against — None

On — Debbie Peterson, Department of State Health Services; Amy Trost, Sunset Advisory Commission

BACKGROUND: The Texas State Board of Examiners of Dietitians was established in 1983 and consists of six licensed dietitians and three members of the public. Board members are appointed by the governor with the consent of the Senate for six-year terms. The board's activities include: determining eligibility for a license; establishing a code of ethics; establishing examination requirements; issuing and renewing licenses; investigating complaints and taking enforcement actions; and approving preplanned professional experience programs.

Dietitians, generally, are professionals who specialize in nutrition. To become a licensed dietitian, an individual must hold a bachelors or graduate degree with a major in human nutrition, food and nutrition, nutrition education, dietetics, or food systems management, or equivalent internship and preplanned professional experience approved by the board. In addition, the applicant must complete an exam administered by the Commission on Dietetic Registration of the American Dietetic Association, a national trade group. There are about 3,600 licensed dietitians in Texas.

The board underwent Sunset review in 1993 and was continued by the 73rd Legislature. If not continued by the 79th Legislature, the board will be abolished September 1, 2005.

DIGEST: HB 1155 would continue the Texas State Board of Registered Dietitians until September 1, 2017. It would add standard sunset provisions governing conflicts of interest, gubernatorial designation of a presiding officer, grounds for removing a board member, training of board members, negotiated rulemaking, complaint procedures, standard licensing board recommendations, and conforming changes to legislation enacted in 2003.

The bill would take effect September 1, 2005.

SUPPORTERS SAY: HB 1155 appropriately would allow the Texas State Board of Registered Dietitians to continue. The board adequately oversees registered dietitians in Texas. Because it is structured as a board, the disciplinary process has a high level of professional input, which is important for this profession because dietitians' practices can be very complicated, particularly when relating to the care of fragile populations such as premature babies, intensive care patients, or end-stage renal disease patients.

The bill should not include a practice act because it concerns the governing structure for licensed dietitians, not their actual practice. Adding a practice act, a defined list of health care services that only license holders can perform, would take significant research and negotiation that has not yet been done. Instead of adding scope of practice issues to Sunset bills, the state should create a separate scope of practice committee, such as the one envisioned in HB 2706 by Delisi that would create a Health Professions Scope of Practice Review Commission.

OPPONENTS SAY: Texas does not need a separate board to perform these functions, according to the Sunset staff report. An advisory committee could offer professional input and the established Department of State Health Services process for handling complaints, and establishing rules could take care of the rest. There are very few complaints to the board each year and only 3,600 licensed dietitians, so a separate board is not needed.

Texas should establish a practice act for licensed dietitians. Anyone can present himself as a dietitian or nutritionist even though the person may not have any education, training, or experience in the field and may be representing a commercial interest. Nutrition education is an important

part of health care, and consumers should have some confidence that their source of information is reliable.

NOTES: The companion bill, SB 413 by Shapleigh, has been referred to the Senate Government Organization Committee.