

Nutrition Quality Guide



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Purpose

- This Quality Guide is intended to be a reference guide to those who are looking to offer timely initiation of nutrition therapy for patients with serious and/or chronic illness. Clinically appropriate nutrition therapy may reduce costs, avoidable hospital admissions, ED utilization and improve care.
- Support Primary Care Providers through the application of evidence-based materials and clinical experiences for patients who would benefit from nutrition therapy.
- Nutrition therapy can help to improve quality of life for patients with chronic or serious life-threatening illness. Patients with these illnesses can be challenging for physicians, hospitals, and health plans. Nutrition therapy can assist in the management of these patients and provide them with a better quality of life by creating an understanding of their disease state.

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Benefits of Nutrition Therapy

What is Nutrition Therapy?



Nutrition Therapy is defined as the treatment of a medical condition by means of adjusting the quantity, quality and methods of nutrient intake. Registered Dietitians are experts in the field of Nutrition Therapy.

Registered Dietitians are nutrition experts who have met strict criteria to earn the RD credential from the Academy of Nutrition and Dietetics and complete continuing professional education requirements to maintain this credential.

Registered Dietitians engage with patients to:

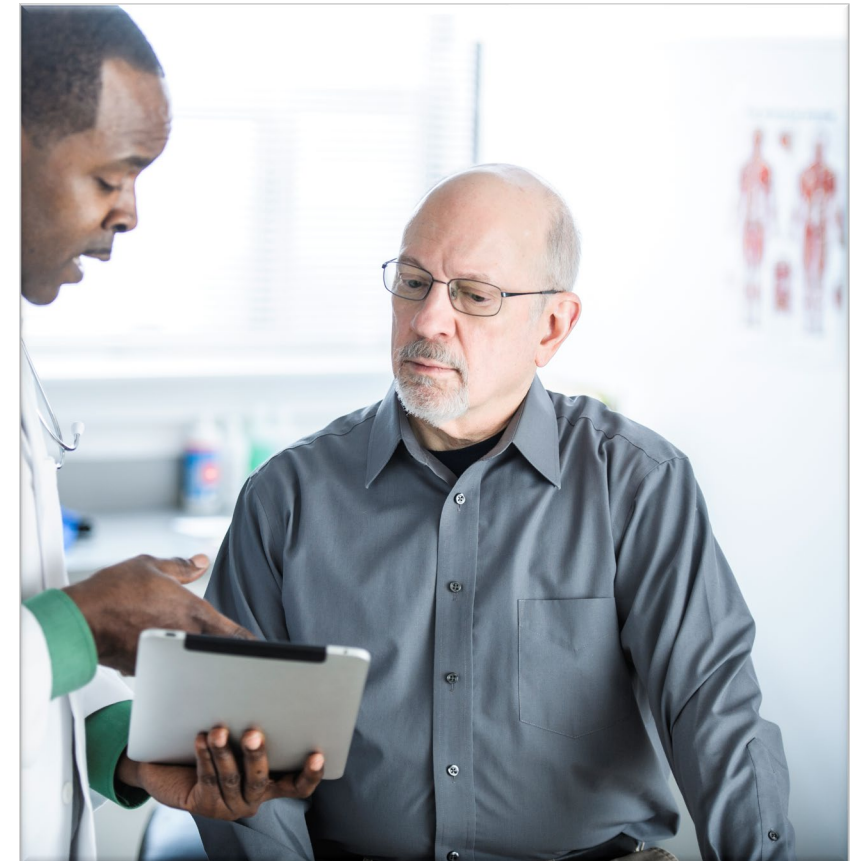
- Adjust nutrient intake and meal timing based on medication regimens and activity levels
- Recommend food substitutions for those patients with intolerances and/or food allergies
- Educate parents regarding nutrient needs and feeding schedules for infants and children
- Partner to solve Social Determinants of Health issues such as food insecurity and access

Registered Dietitians can collaborate with providers to:

- Make recommendations regarding supplements and medication schedules for patients based on labs
- Recommend formula types and feeding schedules for infants
- Adjust feeding schedules and type for those patients utilizing enteral nutrition

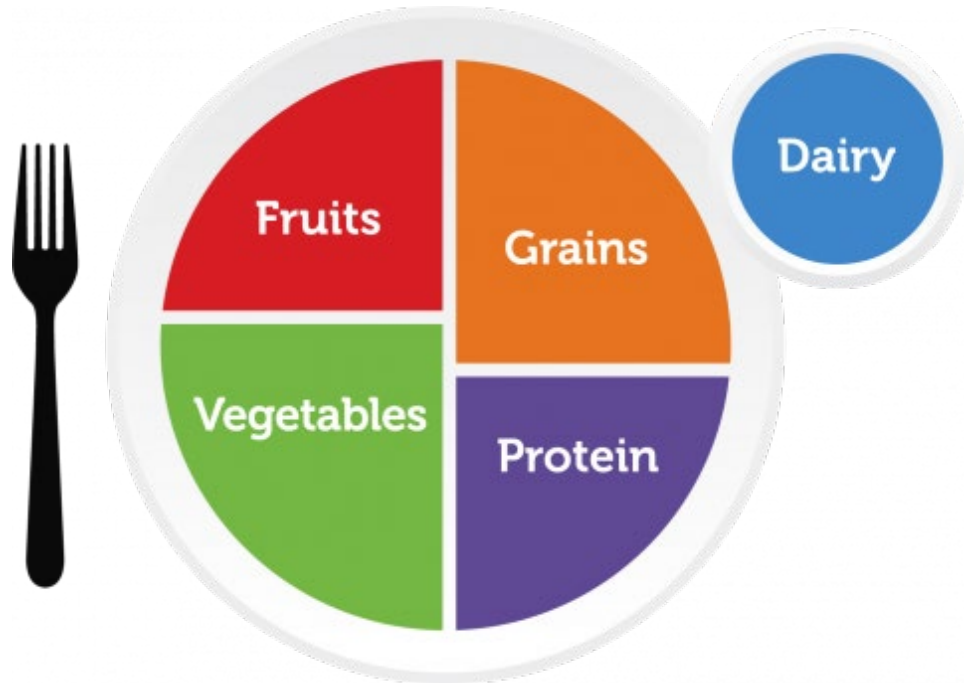
Benefits of Nutrition Therapy

- Slow or reverse symptoms of chronic disease
 - Reduce the risk or progression of chronic diseases
 - Type 2 diabetes, heart disease and obesity
 - Increase daily energy and activity levels
 - Promote sustainable weight loss through an individualized balanced nutrition plan
 - Support healthy pregnancy and feeding methods
 - Manage symptoms of food allergies and intolerances
 - May improve mental health and well-being
 - Assist in the treatment of disordered eating:
 - anorexia nervosa, bulimia nervosa or binge eating disorder
 - Aid in the treatment of malnutrition and nutritional deficiencies
 - Maximize athletic performance
 - Ensure proper development in children and adolescents
-
- Find a Nutrition Expert Near You:
 - <https://www.eatright.org/find-a-nutrition-expert>



United States Department of Agriculture - MyPlate

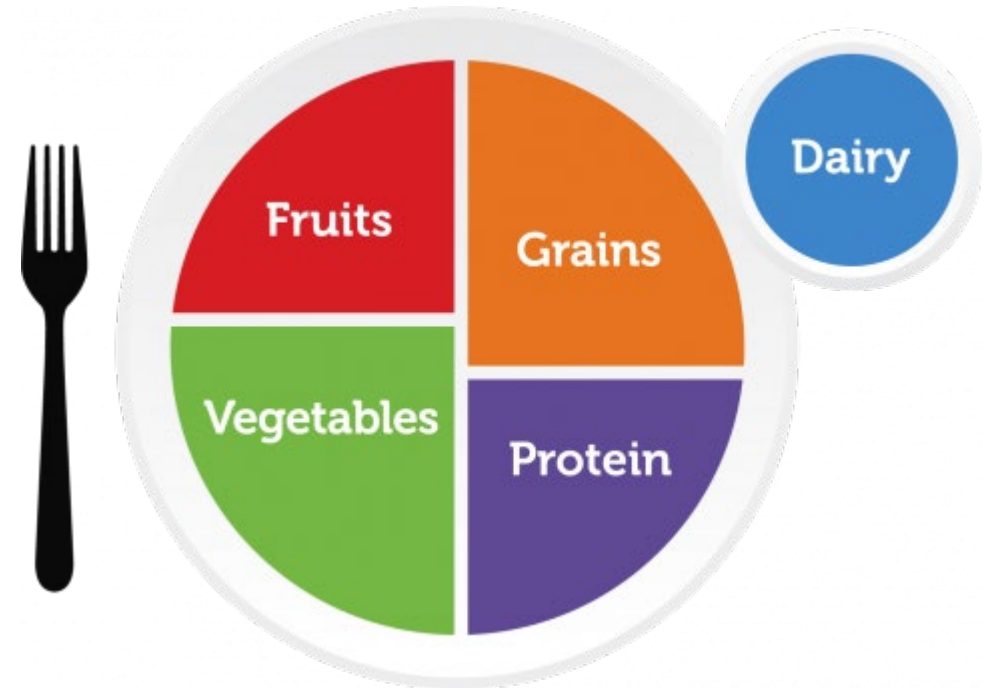
USDA MyPlate



- Nutrition guide that serves as a recommendation based on the Dietary Guidelines for Americans
 - Replaced the USDA's MyPyramid guide in 2011
- Designed as a guideline for Americans to base their plate around in order to make educated food choices
- Also available for specific disease states such as Chronic Kidney Disease or diabetes
- Source: <https://www.myplate.gov/>

USDA MyPlate Food Groups


- **Fruit**
 - At least half of the recommended amount should come from whole fruit
- **Vegetables**
 - Includes raw, cooked, fresh, frozen, canned, dried/dehydrated vegetables
- **Grains**
 - Make half your grains whole grains
- **Protein**
 - Includes vegetarian/vegan options
- **Dairy**
 - Move to low-fat or fat-free dairy milk or yogurt (or lactose-free dairy or fortified soy versions)



MyPlate Plan

- MyPlate Plan shows specific food group targets – what and how much to eat within your calorie allowance
- Food plan is personalized based on:
 - Age
 - Sex
 - Height
 - Weight
 - Physical Activity level
- Available for ages 12 months up to 100 years old

USDA Food and Nutrition Service
United States Department of Agriculture



Start simple with MyPlate Plan

The benefits of healthy eating add up over time, bite by bite. Small changes matter. Start Simple with MyPlate.

A healthy eating routine is important at every stage of life and can have positive effects that add up over time. It's important to eat a variety of fruits, vegetables, grains, protein foods, and dairy or fortified soy alternatives. When deciding what to eat or drink, choose options that are full of nutrients. Make every bite count.

Food Group Amounts for 2,400 Calories a Day for Ages 14+ Years

Fruits	Vegetables	Grains	Protein	Dairy
2 cups	3 cups	8 ounces	6½ ounces	3 cups
Focus on whole fruits Focus on whole fruits that are fresh, frozen, canned, or dried.	Vary your veggies Choose a variety of colorful fresh, frozen, and canned vegetables—make sure to include dark green, red, and orange choices.	Make half your grains whole grains Find whole-grain foods by reading the Nutrition Facts label and ingredients list.	Vary your protein routine Mix up your protein foods to include seafood; beans, peas, and lentils; unsalted nuts and seeds; soy products; eggs; and lean meats and poultry.	Move to low-fat or fat-free dairy milk or yogurt (or lactose-free dairy or fortified soy versions) Look for ways to include dairy or fortified soy alternatives at meals and snacks throughout the day.

Weight Management

Weight Management

- According to the CDC, obesity is a serious and costly chronic disease that affects overall health, health care costs, productivity and military readiness. Obesity costs the US healthcare system \$147 billion a year.
- From 1999-2000 through 2017-2018, the prevalence of obesity in the US increased from 30.5% to 42.4%. During the same time, the prevalence of severe obesity (Adult BMI > 40) increased from 4.7% to 9.2%.
- For children and adolescents aged 2-19 years in 2017 - 2018:
 - 19.3% obesity prevalence
 - 13.4% 2-5 years of age
 - 20.3% 6-11 years of age
 - 21.2% 12-19 years of age
- Several factors influence the prevalence of obesity. These include, but are not limited to:
 - Race, age, socioeconomic status and education

Weight Management - BMI

- BMI is an easy screening tool to measure weight category for ages 2+
- Adult Body Mass Index (BMI)
 - Underweight: ≤ 18.5 kg/m²
 - Healthy weight: 18.5 to < 25 kg/m²
 - Overweight: 25.0 to < 30 kg/m²
 - Obesity: ≥ 30.0 kg/m²
- Pediatric Body Mass Index (BMI)
 - Underweight: < 5 th percentile
 - Healthy weight: 5th - 85th percentile
 - Overweight: 85th - < 95 th percentile
 - Obese: ≥ 95 th percentile
 - [CDC Growth Charts](#)



Highmark's Preventive Schedule Weight Management

Highmark Preventive Schedule 2024

- Adults with BMI 25-29.9 (overweight) and 30-39.9 (obese) are eligible for additional nutritional counseling visits specifically for obesity.
- Adults with BMI 40 and over are eligible for Nutritional Counseling
- Children with a BMI in the 85th to 94th percentile (overweight) and the 95th to 98th percentile (obese) are eligible for additional nutritional counseling visits specifically for obesity

Senior Nutrition

Senior Nutrition

- Men and women are living longer, enjoying energetic and active lifestyles well into their 80s and 90s.
- Study after study confirms eating well and being active can make a dramatic difference in the quality of life for older adults.
- Eating a variety of foods from all food groups can help supply the nutrients a person needs as they age.
- A healthy eating plan emphasizes fruit, vegetables, whole grains and low-fat or fat-free dairy; includes lean meat, poultry, fish, beans, eggs and nuts; and is low in saturated fats, trans fats, salt (sodium) and added sugars.

Senior Nutrition Talking Points for Providers

- As adults age, they need fewer total calories, but higher amounts of some nutrients, especially calcium and vitamin D.
 - In terms of nutrition, focus on quality not quantity.
 - For both optimal physical and mental health, make every calorie count.
 - Choose a variety of foods from all of the MyPlate food groups regularly.
- Retired people on limited incomes may have trouble buying enough nutrient-rich foods to meet all their nutritional needs.
 - Options to explore may include senior meal sites, Meals on Wheels or supplemental nutrition assistance programs in the community.
- The golden years are not the time for extreme diets or drastic weight loss.
 - Focus should be placed on eating better while staying within calorie needs.
 - Fad diets frequently eliminate entire food groups, which can lead to serious nutrient gaps.
 - Rapid weight loss often leads to a loss of lean body mass, the opposite of what older people need for good health.

Senior Nutrition Tips



- Recommendations from the Dietary Guidelines for Americans:
 - **Eat fruits and vegetables.** They can be fresh, frozen or canned. Eat more dark green vegetables such as leafy greens like collard greens or mustard greens or broccoli, and orange vegetables such as carrots, pumpkin, butternut squash and sweet potatoes.
 - **Vary protein** choices with more fish, beans and peas.
 - Eat at least three ounces of **whole-grain** cereals, breads, crackers, rice or pasta every day. Choose whole grains whenever possible.
 - Have three servings of **low-fat or fat-free dairy** (milk, yogurt or cheese) that are fortified with vitamin D to help keep your bones healthy.
 - Make the fats you eat **polyunsaturated and monounsaturated fats**. Switch from solid fats to oils when preparing food.

Nutrition Programs for Seniors

Find food and nutrition programs that focus on the needs of older Americans, age 60 and over.

Assistance for Seniors Age 60 and Over

USDA, Food and Nutrition Service

The Food and Nutrition Service (FNS) has programs that cater to our nation's seniors, age 60 and over.

Child and Adult Care Food Program (CACFP): Adult Day Care Centers

USDA, Food and Nutrition Service

The Child and Adult Care Food Program (CACFP) helps adult care centers provide nutritious foods for older adults and adults with disabilities.

Commodity Supplemental Food Program (CSFP)

USDA, Food and Nutrition Service

The Commodity Supplemental Food Program (CSFP) works to improve the health of low-income persons at least 60 years of age by supplementing their diets with nutritious USDA Foods.

Nutrition Programs for Seniors

Food Distribution Program on Indian Reservations

USDA, Food and Nutrition Service

The Food Distribution Program on Indian Reservations (FDPIR) provides USDA Foods to income-eligible households living on Indian reservations and to Native American households residing in designated areas near reservations or in Oklahoma.

Senior Farmers' Market Nutrition Program (SFMNP)

USDA, Food and Nutrition Service

Learn about Senior Farmers' Market Nutrition Program (SFMNP), which provides low-income seniors with access to locally grown fruits, vegetables, honey and herbs. Read more in the [SFMNP Fact Sheet](#) (PDF | 230 KB).

Supplemental Nutrition Assistance Program (SNAP)

USDA, Food and Nutrition Service

The Supplemental Nutrition Assistance Program (SNAP) provides nutrition benefits to supplement the food budget of needy families so they can purchase healthy food and move toward self-sufficiency.

Nutrition Programs for Seniors

Administration for Community Living: Nutrition Services

HHS, Administration on Aging

Learn about nutrition services for seniors, including congregate meals, home-delivered meals, and other supportive programs.

Older Americans Act (OAA) Nutrition Programs Fact Sheet

HHS, National Institutes of Health, Administration on Aging

The Older Americans Act (OAA) Nutrition Programs, part of the Administration on Aging within the Administration for Community Living, provide grants to states to help support nutrition services for older people throughout the country.

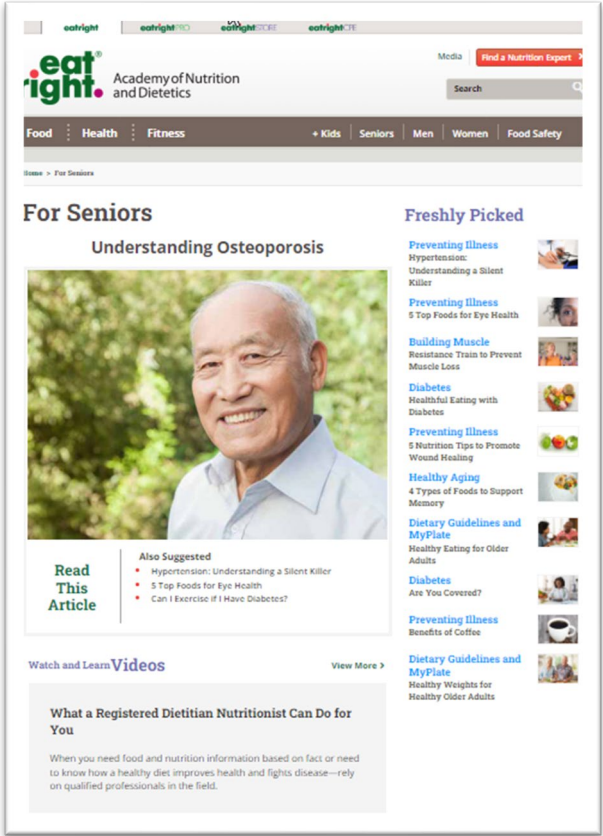
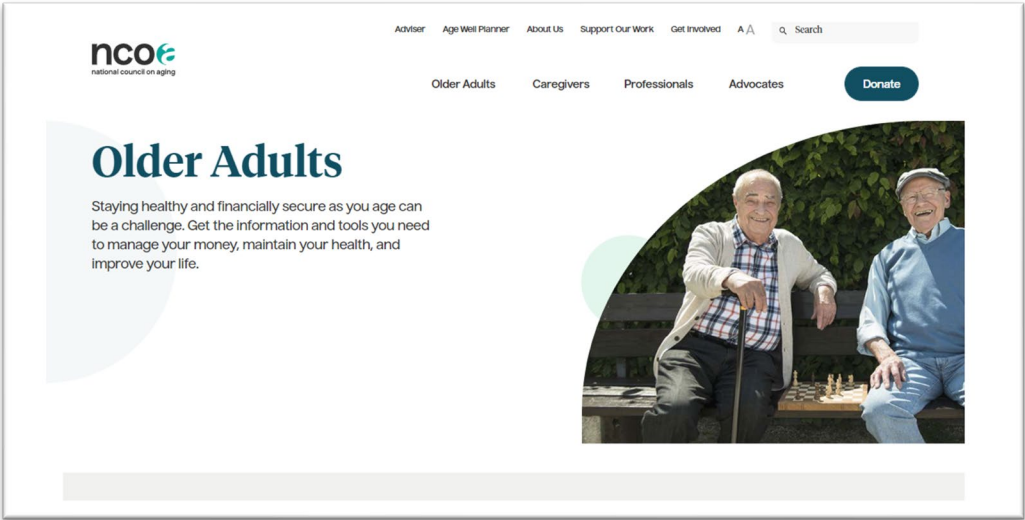
Find a Meals on Wheels Provider Near You (link is external)

Meals on Wheels

Search for senior meal delivery and nutrition programs in your local area.

Senior Nutrition Patient Education Resources

- [Healthy Eating Tips for Seniors \(ncoa.org\)](https://www.ncoa.org)
- [Nutrition - Alliance for Aging Research](https://www.nutritionalliance.org)
- [For Seniors \(eatright.org\)](https://www.eatright.org)



Pediatric Nutrition

Breastfeeding Nutrition Tips

Breastfeeding Basics

- A typical feeding is every 2-3 hours for 20-30 minutes per early hunger cues
 - licking lips, sticking tongue out, rooting, putting his/her hand to mouth repeatedly
- Feedings longer than 20-30 minutes are not typically more productive and can contribute to maternal discomfort and infant frustration as well as excessive energy expenditure
- Baby should feed from first breast until drained as indicated by infrequent swallows, then start on opposite breast at the next feed. The amount of time on each breast is highly variable depending on breast milk production.
- Fore milk is higher in lactose and fluid; hind milk is higher in fat and calories.
- If supplemental feedings are necessary, efforts should be made to preserve breastfeeding by using minimal volumes of supplement, using expressed milk as much as possible, and attempting use of supplemental feeders or syringes to reduce nipple confusion.

Nutrition Tips for Infants



•**Infant Feeding:** Watch for early hunger cues- Licking lips, sticking tongue out, rooting

Age	Amount
Day of Life 1 and 2	1/2 – 1 ounce every 2-3 hours
3 days – 2 weeks	1 – 2 ounces every 2-3 hours
2 weeks	2 – 3 ounces every 2-3 hours
2 months	4 – 5 ounces every 3-4 hours
4 months	4-6 ounces every 3-4 hours
6 months	Up to 8 ounces every 4-5 hours

Formula Selection

- General Purpose “Starter” formulas: Similac ProAdvance, Enfamil NeuroPro, Good Start Gentle
- Partially Hydrolyzed Protein for Cow’s Milk Protein Intolerance: Similac Total Comfort, Enfamil Gentlease,
- Low Lactose for Lactose Intolerance: Similac Sensitive, Enfamil Sensitive
- Extensively Hydrolyzed, Hypoallergenic: Similac Alimentum, Enfamil Nutramigen, Good Start Extensive HA
- Elemental, Amino Acid Based: Similac Elecare, Neocate, Mead Johnson PurAmino
- Organic Formulas- Happy Baby Organics and Happy Baby Sensitive, Earth’s Best Organic, Similac Organic

Progression to Complementary Foods

Age and Development	Pureed to Solids	Baby Led Weaning
<p>4-6 months Supported Sitter</p> <ul style="list-style-type: none"> • able to support and turn head • shows interest in food • moves tongue forward when lips are touched 	<ul style="list-style-type: none"> ▪ Stage 1 single ingredient foods, thin purees ▪ Infant Cereal 3-4T 1-2 times/day ▪ Fruits and Vegetables 2T 1-2 times/day 	<ul style="list-style-type: none"> ▪ Breast milk or formula only
<p>6-9 Months Sitter</p> <ul style="list-style-type: none"> • sits independently • palm grasps objects • uses lips to clear food from spoon 	<ul style="list-style-type: none"> ▪ Stage 2 foods, thicker purees ▪ Infant Cereal ¼ cup 2x/day ▪ Fruit and Veggie 2 T 2x/day ▪ Meat, bean purees 1 T/day ▪ *Egg, peanut butter introduced ▪ Sippy cup introduced 	<ul style="list-style-type: none"> ▪ Baby self selects and feeds ▪ Large chunks of soft foods
<p>9-12 months Crawler</p> <ul style="list-style-type: none"> • pincer grasp develops • begins to self-feed with fingers • begins to mash food with jaw 	<ul style="list-style-type: none"> ▪ Stage 3 foods ▪ Soft, mashed, cubed table foods, finger foods ▪ Cheese and Yogurt 	<ul style="list-style-type: none"> ▪ Self feeding progresses ▪ Diced foods offered as pincer grasp develops
<p>12- 15 months</p>	<ul style="list-style-type: none"> ▪ Diced and soft table foods 	<ul style="list-style-type: none"> ▪ Diced and soft table foods

Nutrition Tips for Selective Eaters



Division of Feeding Responsibility

- The parents are responsible for what and when
- Child is responsible for how much

Crossing boundaries contributes to many feeding struggles including obesity, picky eating, failure to thrive. Can be very difficult to overcome the dynamic.

- Ensure a regular schedule of meals and snacks
- Limit grazing and caloric beverages in between meals
- Children should sit at the table for meals for at least 15 minutes, and distractions should be limited
- Provide 1-2 accepted foods and 1 experimental food. Repeated exposures are often needed
- The parents should avoid nagging the child to eat
- Positive reinforcers may be used for sitting at the table or touching, tasting, or trying new foods

Failure to Thrive

Definition

- ✓ Weight Loss of more than 7-10% of body weight
- ✓ More than 2 major centiles crossed
- ✓ Infant weight or length under the 3rd percentile

Review feeding schedule for adequacy

- ✓ Infants feeding every 3-4 hours
- ✓ Children 3 meals and 2-3 snacks, 2-3 hours apart.
- ✓ Children should sit at the table for meals for at least 15 minutes, and distractions should be limited.

Tips for Nutritional Adequacy

- ✓ Fortifying calories in formula, breast milk
- ✓ High calorie, high protein foods
- ✓ Supplements and timing

Screening for Disordered Eating

Common Red Flags include:

- Significant weight loss (even if starting out overweight) and/or plateauing on the growth curve
- Primary or secondary amenorrhea
- Bradycardia, dizziness, and/or syncope
- GI complaints - loss of appetite, reflux, recurrent abdominal pain or vomiting
- Abnormal eating or excessive exercise

Screening Questions (2 or more positive answers is a positive screen)

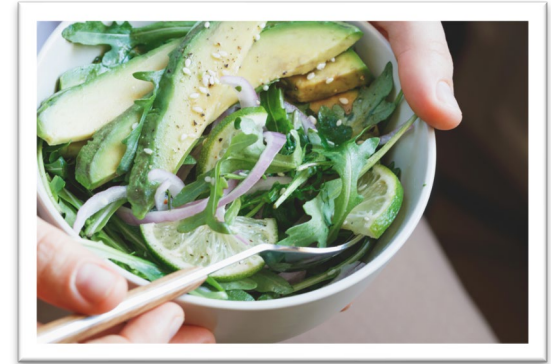
Ask the patient **AND** the caregiver separately/privately:

- ✓ Do you make yourself vomit because you feel uncomfortably full?
- ✓ Do you worry that you have lost control over how much you eat?
- ✓ Have you recently lost 15lbs or more in a three-month period?
- ✓ Do you believe yourself to be fat when others say you are too thin?
- ✓ Would you say that food dominates your life?

Weight Management Adults

Tips to Manage Weight Through Nutrition

- A healthy diet pattern follows the Dietary Guidelines for Americans which emphasizes:
 - Whole grains
 - Fruits
 - Vegetables
 - Lean protein
 - Low-fat and fat-free dairy products
 - Majority of hydration from water
- Meal replacement shakes or structured meal plans also shown to be effective
 - Replace 1-2 meals per day with a meal replacement shake (low sugar, high protein) or structured meal plan
- Alternative meals plans may be effective if calorie deficit is achieved; recommend consultation with Registered Dietitian to ensure nutritional adequacy prior to initiating.



Tips to Manage Weight Through Activity

Physical Activity Guidelines for Americans

- Increase physical activity gradually over time → “start low and go slow”
- Aerobic physical activity:
 - At least 150-300 minutes a week of moderate-intensity activity, or
 - 75-150 minutes per week of vigorous-intensity activity, or
 - An equivalent combination of moderate- and vigorous-intensity aerobic activity spread throughout the week
- Muscle-strengthening activities of moderate or greater intensity that involve all major muscle groups on 2 or more days per week
- Older adults
 - Include balance training each week
 - If unable to meet 150 minutes of moderate-intensity aerobic activity per week because of chronic conditions, they should be as physically active as their abilities and conditions allow



Medication Options

- Estimated only 2-3% of adults eligible for weight loss medications receive a prescription for one
- Currently 6 FDA-approved medications for weight loss:

Medication	Maximum Dosage
Phentermine	Oral pill, 37.5 mg once daily
Orlistat (Xenical, Alli)	Oral pill, 120 mg TID with meals. Vitamin supplementation required
Qsymia (phentermine-topiramate ER)	Oral pill, 15mg phentermine/92 mg topiramate ER once daily
Contrave (naltrexone/bupropion HCL)	Oral pill, 8mg naltrexone/90mg bupropion twice daily
Saxenda (liraglutide)	Injection, 3 mg once daily
Wegovy (semaglutide)	Injection, 2.4 mg once weekly

- Need to assess patient's past medical history, insurance coverage and personal preferences prior to prescribing

Additional Considerations

- Assess need for referral to Behavioral Health if patient is open to this option
 - Often weight management is a complex combination of genetics, environment and behavior.
- Consider your language when speaking about weight:
 - Person first language
 - “An obese person” → “A person with obesity”
 - “Obese children” → “Children with obesity”
 - “Large size” → “Individuals with higher weight”
 - Avoid the use of language that implies individual blame
 - Adopt positive language about obesity and people with obesity

Patient Education Websites

Physical Activity Guidelines for Americans:

- https://health.gov/sites/default/files/2019-10/PAG_ExecutiveSummary.pdf

USDA My Plate:

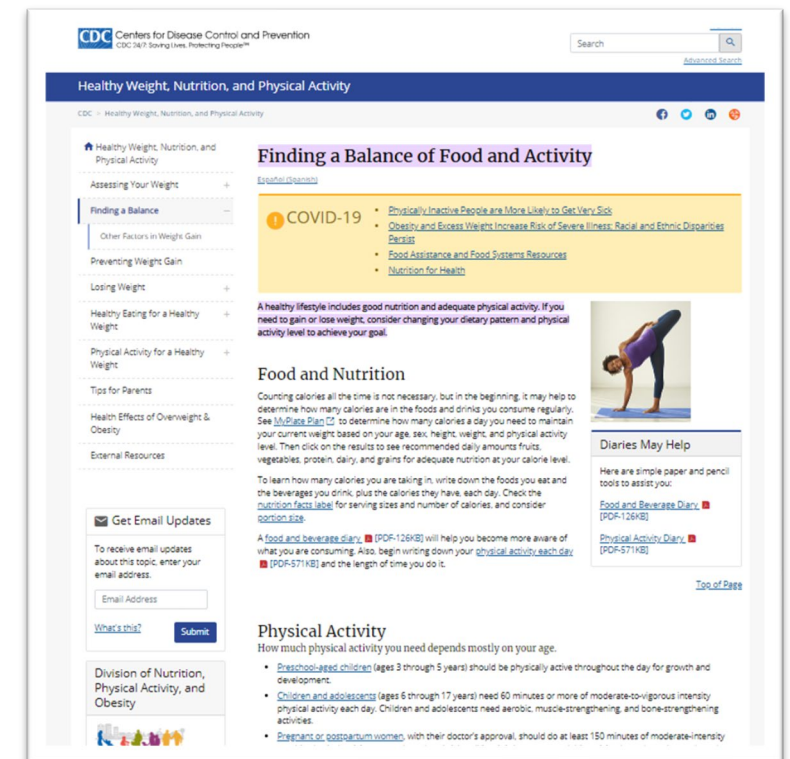
- <https://www.myplate.gov/>

NIH Aim for a Healthy Weight:

- https://www.nhlbi.nih.gov/health/educational/lose_wt/control.htm

CDC Finding a Balance of Food and Activity:

- <https://www.cdc.gov/healthyweight/calories/index.html>



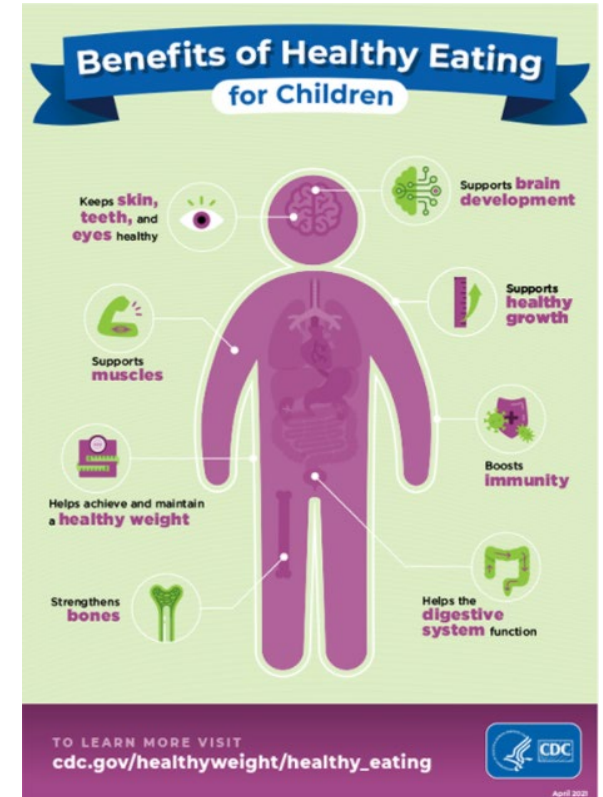
Weight Management Pediatrics

Pediatric Weight Management Talking Points for Providers

- There is no single solution to the obesity epidemic.
- BMI and Waist Circumference are two screening tools to estimate weight status and assess disease risk.
- The goal for overweight children is to reduce the rate of weight gain while allowing for normal growth.
- Following a healthy meal pattern sets a good example for your children.
- Small changes over time can be very successful.

Nutrition Tips for Pediatric Weight Management

- Replace sugared-sweetened beverages with water or low-fat milk
- Fill 1/2 the plate with produce
 - No salt added canned vegetables
 - Frozen vegetables without sauces
 - Fresh, in season vegetables
 - Eat whole fruits instead of juice
 - Choose a rainbow of colors
- Add starch for 1/4 of the plate
- Add lean protein for 1/4 of the plate
- Portion food onto a plate instead of eating directly out of the container
- Consume more home cooked meals while eating at the table
- Limit snacking but if needed, choose snacks wisely
 - Per serving, <3 g sugar, < 10% daily value for fat, < 2 g saturated fat
- Avoid eating while TV watching, gaming or scrolling
- Find ways to manage stress other than eating
- Choose an activity that is enjoyable and strive for 60 minutes per day
- Move in some way everyday



Patient Education Websites

USDA My Plate

- <https://www.myplate.gov/>

National Hunger Hotline

- 1-866-3-HUNGRY or 1-877-8-HAMBRE

CDC Division of Nutrition, Physical Activity, and Obesity:

- <https://www.cdc.gov/nccdphp/dnpao/index.html>

Centers for Disease Control

- www.cdc.gov/healthyweight/healthy_eating

Childhood Obesity Foundation

- <https://childhoodobesityfoundation.ca/>

USDA

- <https://www.nutrition.gov/topics/healthy-living-and-weight/weight-management-youth>

American Academy of Pediatrics

- <https://www.healthychildren.org/English/health-issues/conditions/obesity/Pages/default.aspx>

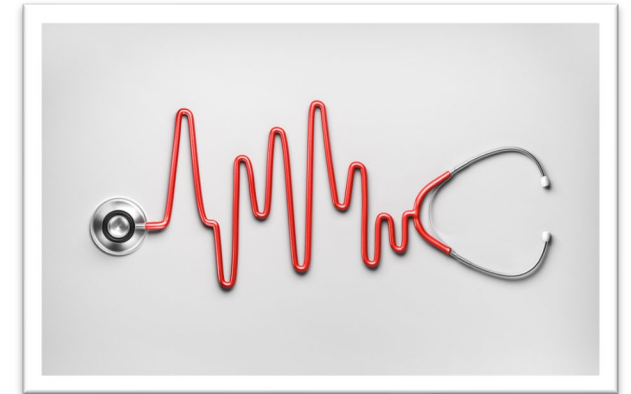


Cardiovascular Disease

Cardiovascular Disease

According to the CDC,

- An estimated 80% of cardiovascular disease, including heart disease and stroke, are preventable.
- Only 1 in 10 U.S. adults eat the recommended amount of vegetables and only 1 in 8 eat a sufficient amount of fruit
- Lifestyle choices can put people at a higher risk for heart disease
 - Unhealthy diet
 - Increased salt intake that may lead to hypertension
 - Physical inactivity
 - Excessive alcohol use
- According to the American Heart Association, only about one in five adults and teens get enough exercise to maintain good health



Cardiovascular Disease Talking Points

Nutrition

- Aim to fill half your plate with a variety of fruit and vegetable servings every day
- Eat fatty fish – salmon, lake trout, albacore tuna, sardines – twice per week
- Consume whole grain products most often and minimize refined grains
- Limit sodium by preparing meals with less salt and choose no-salt-added foods
- Balance the number of calories you eat with the activity you do every day

Physical Activity

- Get at least 150-300 minutes per week of moderate-intensity aerobic activity or 75 minutes per week of vigorous aerobic activity, or a combination of both, preferably spread throughout the week
- Add moderate- to high-intensity muscle-strengthening resistance activity on at least 2 days per week.
- Children 3-5 years old should be physically active and have plenty of opportunities to move every day
- Kids 6-17 years old should get at least 60 minutes per day of moderate to vigorous physical activity

Nutrition Tips for Cardiovascular Disease

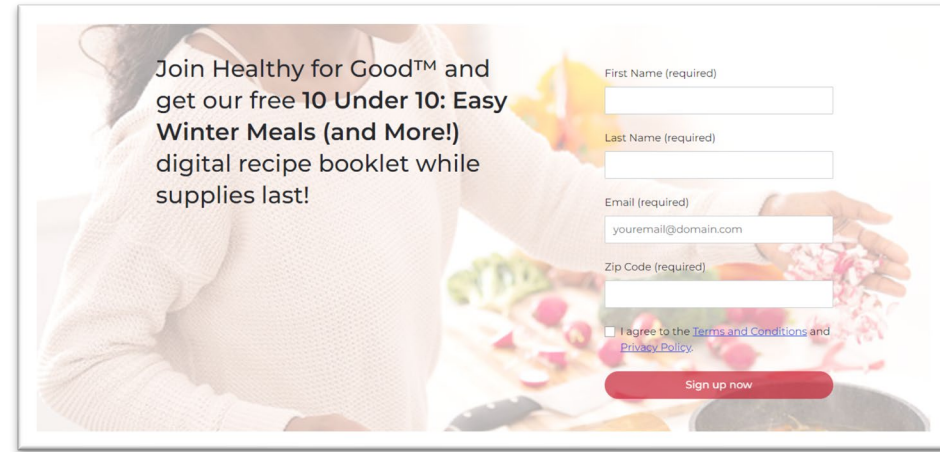
Mediterranean Diet

- Fruits, vegetables, beans and whole grains are the key
 - Plant-based foods are the foundations for heart healthy meals – beans, lentils, legumes
 - Fish and seafood have a star role in the Mediterranean diet
 - Olive oil, nuts and seeds provide healthful fats
-
- Making small changes are sustainable
 - Add a fruit to breakfast
 - Place a bit more veggies on the plate at every dinner
 - Change up the meal pattern by replacing coffee with black or green tea a few days each week
 - Look for the Heart-Check label when shopping in grocery stores or dining out



Patient Education Websites

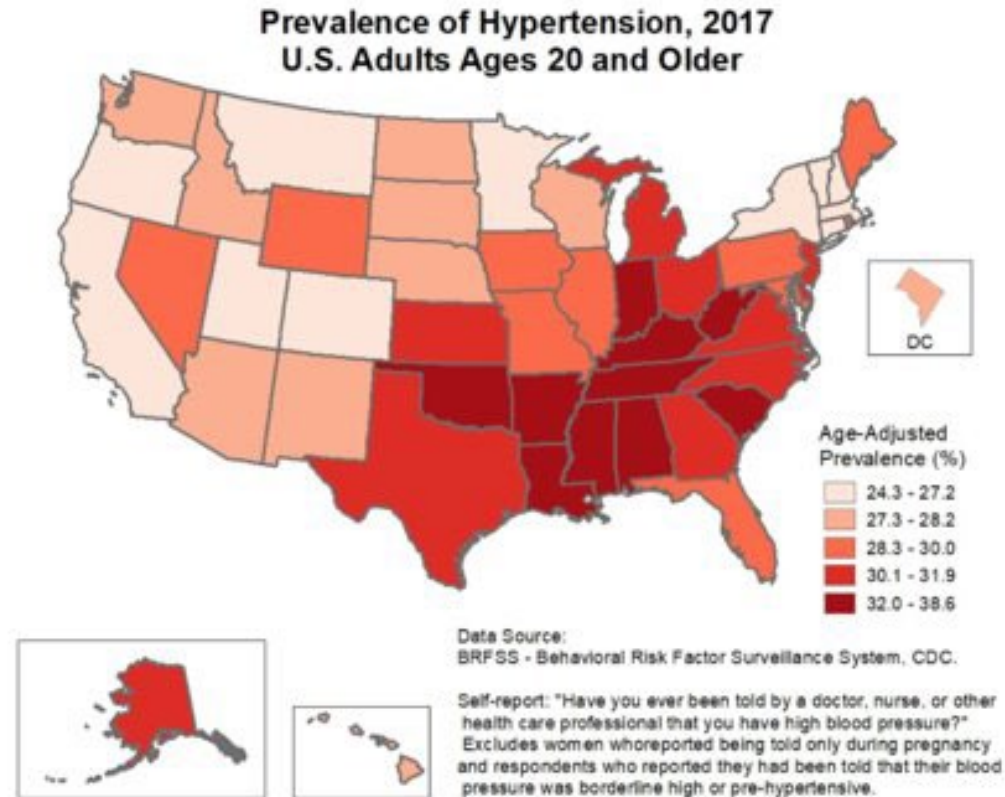
- <https://www.heart.org/en/healthy-living/healthy-eating>
- <https://www.heart.org/en/healthy-living/healthy-for-good-sign-up>
- <https://www.myplate.gov/myplate-plan>
- https://www.nhlbi.nih.gov/health/educational/lose_wt/eat/recipes.htm
- <https://www.eatingwell.com/>
- <https://www.eatright.org/health/wellness/heart-and-cardiovascular-health/love-your-heart-love-your-food>



Hypertension

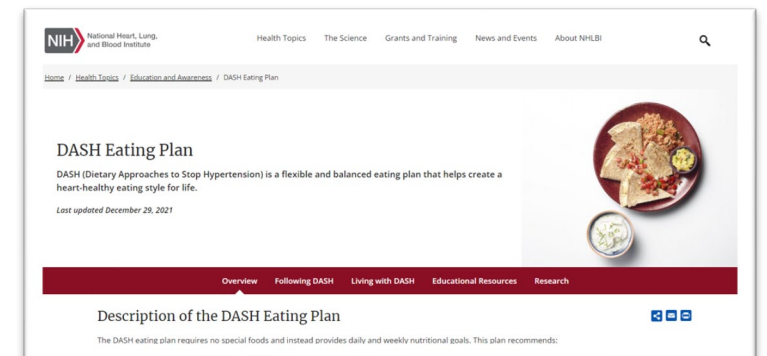
Hypertension

Having hypertension puts you at risk for heart disease and stroke, which are the leading causes of death in the United States.



Hypertension Talking Points for Providers

- The Dietary Approaches to Stop Hypertension (DASH) diet includes foods that are rich in potassium, calcium and magnesium. These nutrients help control blood pressure. The diet also limits foods that are high in sodium, saturated fat and added sugars.
- The standard DASH diet limits sodium to 2,300 mg a day. That's roughly the amount of sodium in 1 teaspoon of table salt.
- Eat a variety of colorful foods. Antioxidants help fight inflammation and aging. Flavonoids also have properties that could help prevent blood clots. In a study published last year in the American Heart Association journal Hypertension suggests flavonoids in foods such as berries, red wine, apples and pears may influence gut bacteria in a way that lowers blood pressure.

















Nutrition Tips for Hypertension

Dietary Approaches to Stop Hypertension (DASH) Eating Plan




- ✓ Eating 8-10 servings of vegetables and fruits will provide
 - magnesium, potassium and fiber
- ✓ Whole grains will also supply these nutrients, but smaller servings will be sufficient
- ✓ For calcium, include fat-free or low-fat dairy products
 - canned salmon, edamame, almonds
- ✓ Fish, poultry, beans, nuts are great sources of lean protein
- ✓ Limiting foods that are high in saturated fat
 - fatty meats and tropical oils such as palm or coconut oils
- ✓ Limiting sugar-sweetened beverages and sweets

When following the DASH eating plan, it is important to choose foods that are:

- ✓ Low in saturated and trans fats
- ✓ Rich in potassium, calcium, magnesium, fiber, and protein
- ✓ Lower in sodium

DASH Eating Plan	
The Benefits: Lowers blood pressure & LDL "bad" cholesterol.	
✓ Eat This	⚠ Limit This
 Vegetables	 Fatty meats
 Fruits	
 Whole grains	 Full-fat dairy
 Fat-free or low-fat dairy	
 Fish	 Sugar sweetened beverages
 Poultry	
 Beans	 Sweets
 Nuts & seeds	
 Vegetable oils	 Sodium intake

www.nhlbi.nih.gov/DASH

Patient Education Websites

- <https://www.nhlbi.nih.gov/education/dash-eating-plan>
- <https://www.heart.org/en/health-topics/high-blood-pressure>
- <https://www.mayoclinic.org/healthy-lifestyle/nutrition-and-healthy-eating/in-depth/dash-diet/art-20048456>
- <https://www.webmd.com/hypertension-high-blood-pressure/high-blood-pressure-diet>
- https://www.nhlbi.nih.gov/files/docs/public/heart/hbp_low.pdf

Diabetes

Understanding Diabetes

Type 1 Diabetes

- The pancreas either makes no or too little insulin. Type 1 is an autoimmune disease that often begins in childhood. It cannot be prevented through diet or lifestyle, though they can be helpful in managing this condition.

Type 2 Diabetes

- The pancreas does not make enough insulin, or the body doesn't effectively use the insulin it makes (or the available insulin if given as a shot). Type 2 usually develops slowly. Nearly 89% of individuals with this type of diabetes have a body mass index that is overweight or obese.

How to Reduce Your Risk for Diabetes

- You can prevent or delay Type 2 diabetes by making changes to your eating style, being physically active and by losing a certain amount of weight if you have a body mass index (BMI) that is categorized as overweight or obese. These steps also lower your risk for diabetes complications.

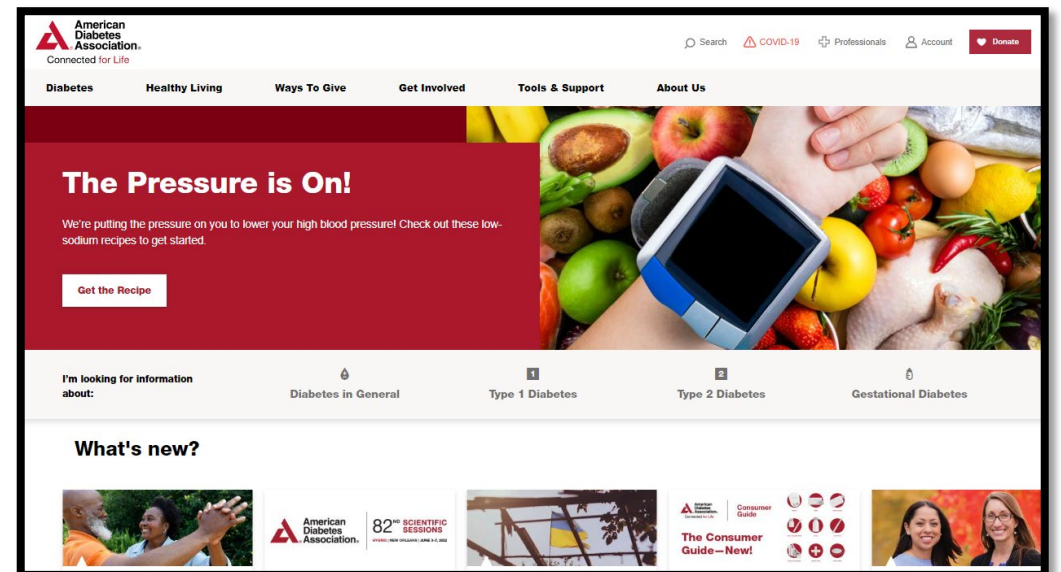
Food doesn't cause diabetes; it is part of the strategy for managing the disease.

Tips to Manage Diabetes Through Nutrition

- Limit foods and drinks that are high in added sugars.
- Select smaller portions, spread out over the day.
- Make your carbs count by choosing whole grains, fruit and vegetables, which will help limit sources of refined carbohydrates.
- Enjoy a variety of whole-grain foods, fruits, vegetables, lean sources of protein, and low-fat or fat-free dairy products every day.
- Eat less saturated fat by focusing on healthy fat sources such as avocados, olive and canola oil, nuts and seeds.
- Limit your consumption of alcohol, if you choose to drink. Be sure to discuss with your health care provider.
- Use less salt.

Patient Education Websites

- www.diabetes.org
- www.Diabetesfoodhub.org
- <https://www.eatright.org/health/diseases-and-conditions/diabetes/how-an-rdn-can-help-with-diabetes>
- <https://www.cdc.gov/diabetes/managing/eat-well.html>



Nutrition Based Resources

1. Fill **HALF** your plate with **non-starchy vegetables**.

- Non-starchy vegetables are lower in carbohydrate, so they do not raise blood sugar very much.

2. Fill one **QUARTER** of your plate with **lean protein foods**.

- Foods high in protein such as fish, chicken, lean beef, soy products, and cheese are all considered “protein foods.”

3. Fill one **QUARTER** of your plate with **carbohydrate foods**.

- Foods that are higher in carbohydrate include grains, starchy vegetables, beans and legumes, fruit, yogurt, and milk. These foods have the greatest effect on blood sugar.

Introducing the Diabetes Plate Method



Disease Specific Nutrition

**Chronic Kidney Disease
Oncology
COPD / Asthma
GI Disorders**

Chronic Kidney Disease Nutrition

CKD Stages 1-4

- Your kidneys help keep the right balance of nutrients and minerals in your body. But if you have kidney disease, your kidneys may not do this job very well. You will need to adjust your diet to maintain the delicate balance.

Dialysis

- You will need to carefully plan your meals and keep track of the amount of liquids you eat and drink. It helps to limit or avoid foods and beverages that have lots of potassium, phosphorus and sodium.

What you eat may help you manage your CKD and potentially prevent or slow down the disease from progressing faster.

RD's can help with the following:

- Make the best food choices based on your lifestyle and lab tests
- Balance the intake of calories, protein, carbohydrate, fat, sodium, phosphorus, potassium, vitamins and minerals
- Help you to keep your kidney disease from getting worse

Chronic Kidney Disease Nutrition

Resources

- <https://www.niddk.nih.gov/health-information/kidney-disease/chronic-kidney-disease-ckd/eating-nutrition>
- <https://www.kidney.org/nutrition/Kidney-Disease-Stages-1-4>
- https://kitchen.kidneyfund.org/?_ga=2.182212071.1738906835.1641406526-1681161836.1641406526&_gac=1.48885394.1641406526.EAlalQobChMIpcapsJqb9QIViK_ICh37awAdEAAYASAAEgLdk_D_BwE
- https://www.dpcedcenter.org/staying-healthy/nutrition/?utm_source=google&utm_medium=cpc&utm_campaign=Nutrition&gclid=EAlalQobChMIpcapsJqb9QIViK_ICh37awAdEAAYAiAAEgIP9vD_BwE
- <https://www.eatright.org/health/diseases-and-conditions/kidney-disease/how-an-rdn-can-help-with-kidney-disease>

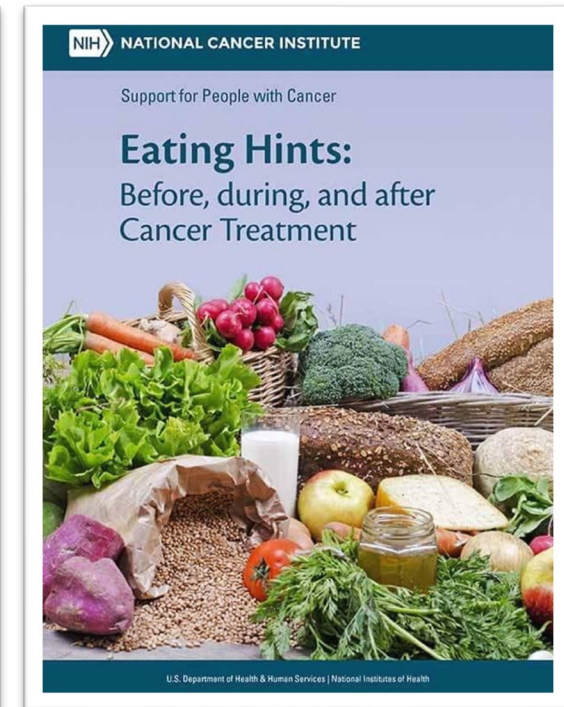
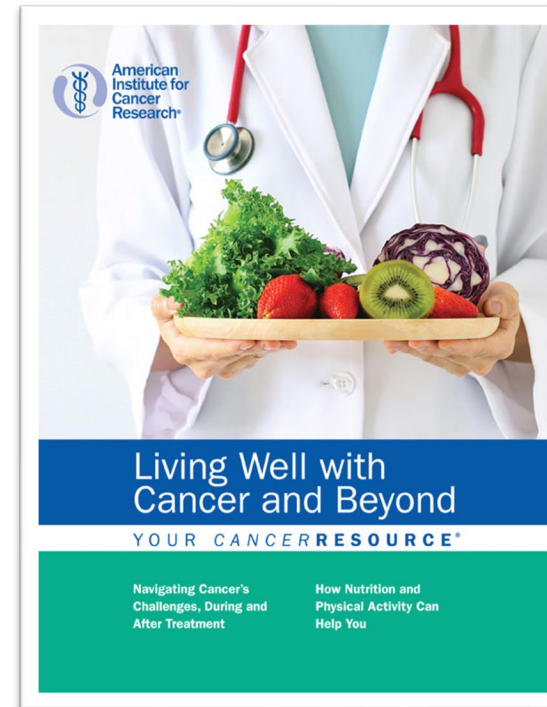
Oncology

- General nutrition tips:
 - Eat several small meals a day instead of 3 large meals
 - Eat high-protein foods first in your meal while your appetite is strongest – foods such as beans, chicken, fish, meat, yogurt and eggs
 - Eat your largest meals when you feel hungriest, whether that’s at breakfast, lunch or dinner
 - Keep food interesting by changing recipes and seasonings or eating at nice restaurants
 - Keep favorite foods and high-calorie foods and beverages around the house and other places you go
 - Limit or avoid red or processed meats
 - Experiment with different calorie/protein supplements – liquids, powders, bars, etc.
- Avoid inactivity – individuals should be as physically active as their abilities and conditions allow to help preserve lean body mass.



Oncology

- Weight Gain
 - Commonly seen during treatment for breast cancer in women undergoing hormonal therapies or steroid treatment.
 - Refer to Adult Weight Management section for further tips.
- Free Publications for Patients (links on Resource page):
 1. AICR Living Well with Cancer and Beyond
 2. NIH National Cancer Institute Eating Hints: Before, during, and after Treatment



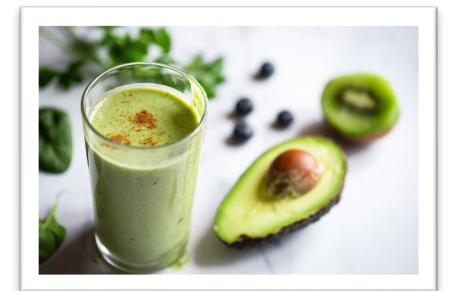
Oncology

Resources for Patients:

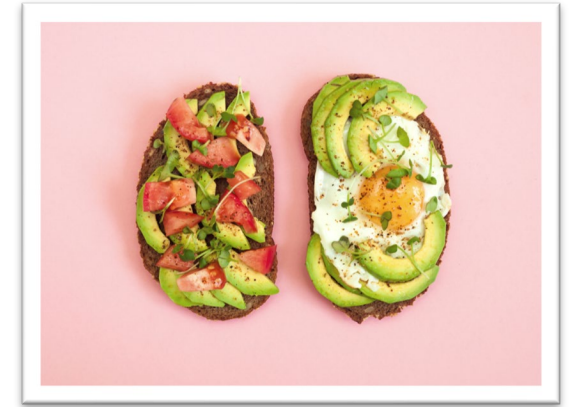
- **American Cancer Society - Eating Well During Treatment:**
<https://www.cancer.org/treatment/survivorship-during-and-after-treatment/coping/nutrition/once-treatment-starts.html>
- **Oncology Nutrition Dietetics Practice Group:**
<https://www.oncologynutrition.org/on/erfc/healthy-nutrition-now/foods>
- **AICR Living Well with Cancer and Beyond free Resource:**
<https://store.aicr.org/collections/survivorship>
- **NIH National Cancer Institute Eating Hints: Before, during and after Cancer Treatment free booklet:** <https://www.cancer.gov/publications/patient-education/eating-hints>

COPD / Asthma Nutrition Tips

- Antioxidants and vitamins in fruits and vegetables may help to decrease lung inflammation
- Avoid foods that trigger allergic reaction – sulfites are a possible trigger and are found in condiments, pickled foods, processed foods, wine and dried fruits
- Carbohydrates require more oxygen and produce more CO₂ so a meal pattern lower in carbohydrates and more healthy fats may help with easier breathing
- Vitamin D – low levels have been associated with increased risk of asthma attacks
- Consume foods with Omega-3 fatty acids – tuna, salmon, walnuts – the benefit is not entirely clear but these foods have been shown to exhibit anti-inflammatory properties
- Avoid foods that cause gas which may cause chest tightness and trigger a flare up



COPD / Asthma Nutrition



Resources

<https://www.mayoclinic.org/diseases-conditions/asthma/expert-answers/asthma-diet/faq-20058105>

<https://www.webmd.com/asthma/guide/asthma-diet-what-you-should-know>

<https://www.lung.org/blog/asthma-and-nutrition>

[https://www.thelancet.com/journals/lanres/article/PIIS2213-2600\(17\)30306-5/fulltext?elsca1=tlxpr](https://www.thelancet.com/journals/lanres/article/PIIS2213-2600(17)30306-5/fulltext?elsca1=tlxpr)

GI Disorders Nutrition

General Advice

- Keeping a food diary is the best way to determine which foods negatively trigger the GI tract.
 - Consume smaller meals
 - Probiotics are live microorganisms that might influence the body's immune response and help the body return to a healthy state.
 - Prebiotics are nondigestible food components that stimulate growth of probiotics
-
- **Irritable Bowel Syndrome:** monitor carbs, spicy and fatty foods, dairy products, coffee and alcohol
 - **Crohn's Disease:** avoid carbonated beverages, popcorn, nuts, fat, salt, lactose
 - **Constipation:** adjust fiber and water intake
 - **Diverticulitis:** a low fiber diet while symptomatic followed by a high fiber diet, exercise and drinking lots of water to prevent return of the disease
 - **Gastroesophageal Reflux Disorder:**
 - Weight loss if applicable
 - Smaller meals and not right before bedtime
 - Decrease alcohol, caffeine
 - Avoid nicotine



GI Disorders Nutrition

- <https://www.fda.gov/consumers/consumer-updates/irritable-bowel-syndrome-treatments-arent-one-size-fits-all>
- <https://www.nccih.nih.gov/health/irritable-bowel-syndrome-in-depth>
- <https://www.nccih.nih.gov/health/probiotics-what-you-need-to-know>
- <https://www.niddk.nih.gov/health-information/digestive-diseases/crohns-disease/eating-diet-nutrition>
- <https://www.niddk.nih.gov/health-information/digestive-diseases/constipation/eating-diet-nutrition>

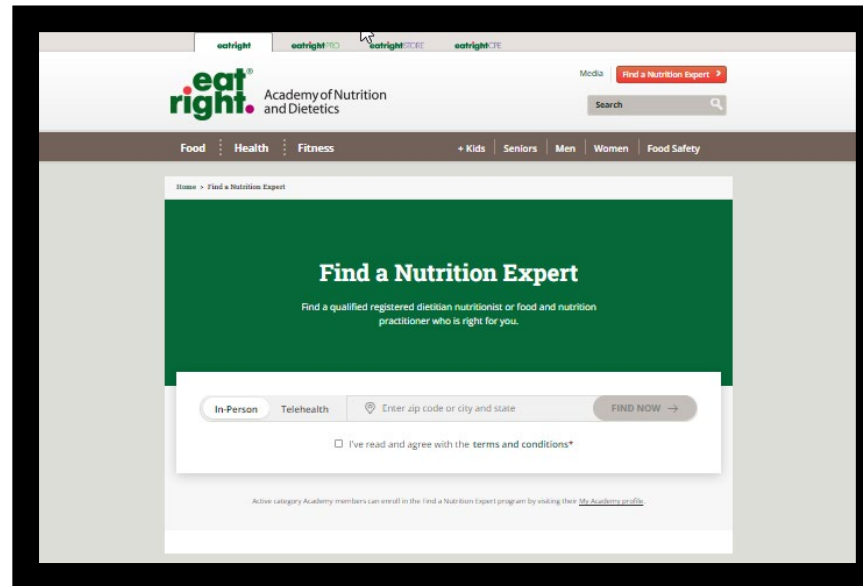
Registered Dietitian Referrals

Referral to a Registered Dietitian

Highmark Provider Search via the Highmark Member Portal

Find a Nutrition Expert Near You:

<https://www.eatright.org/find-a-nutrition-expert>



Referral to a Highmark Wellness Coach

Highmark CM/DM Referral via Highmark's Provider Portal

- Request a consult from one of Highmark's Wellness Coaches or Registered Dietitians

The screenshot shows a 'How It Works' page for the Predictal feature. At the top, there are three feature cards: 'Predictal' (highlighted with a red box), 'Provider Data Maintenance', and 'Provider Facing Analytics'. Below this, the text 'To access the feature:' is followed by a list of steps: 1. Log into Availity, 2. Select the Predictal tab, 3. Providers will see two options: Case Management Referrals and Case Management Inquiry, and 4. Follow the steps to submit a CM/DM referral or complete an inquiry. To the right, a screenshot of the provider portal interface shows a sidebar with 'Case Management Referrals' and 'Case Management Inquiry' highlighted in blue, with red arrows pointing to these options. The main content area shows a 'New Auth Submission' button and a table with columns for ID#, Start of Care Date, Authorization Type, Service Type, Last updated by, and Actions.

How It Works

To access the feature:

- Log into Availity
- Select the Predictal tab
- Providers will see two options:
 - Case Management Referrals
 - Case Management Inquiry
- Follow the steps to submit a CM/DM referral or complete an inquiry

Predictal
Utilization mgmt. tool to submit, update, and inquire on authorization requests.

Provider Data Maintenance
Providers can view and make updates to their provider file records

Provider Facing Analytics
Access specialist efficiency reports

Case Management Referrals

Case Management Inquiry

New Auth Submission

ID#	Start of Care Date	Authorization Type	Service Type	Last updated by	Actions
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Wellness Coaching for Highmark Members

Personal Wellness Coaching

Personal Wellness Coaching is individual telephonic lifestyle coaching with a wellness coach who is a clinically trained Registered Dietitian, Exercise Physiologist or health and wellness professional. Coaches work one-on-one with members to support, educate, and empower them to improve their health through lifestyle changes.

My Weight Management Journey

This comprehensive program guides members on how to begin their weight management journey and build the skills to maintain long term success. Members will work with an experienced coach to learn how to choose the right nutrition approach for them, mindful eating skills, build an activity plan and overcome personal barriers that influence weight loss.

Aim for Change

The Aim for Change program is designed to help members learn about healthy eating basics, the value of physical activity and how both nutrition and physical activity are key components for successful long-term weight management and improved health. This program also addresses a member's barriers to change and helps guide and position them for success.

Nutrition Resources for Highmark Members

Nutrition Resources for Highmark Members

Located on the Provider Resource Center - Education Manuals



Clinical Care & Wellness Services	Line of Business				Region*	
	Commercial	Medicare Advantage	ACA	PA	WV	DE
COMPREHENSIVE LIFESTYLE PROGRAMS						
<p>Aim for Change</p> <p>The Aim for Change program is designed to help members learn about healthy eating basics, the value of physical activity and how both nutrition and physical activity are key components for successful long-term weight management and improved health. This program also addresses a member's barriers to change and helps guide and position them for success.</p>	■	■	■	■	■	■
<p>Daily Steps to Less Stress</p> <p>The Daily Steps to Less Stress Program is a stress awareness program designed to help members build skills and learn techniques that can help them cope with and balance life's day-to-day ups and downs. Members can engage with an experienced coach to assess their levels of stress, recognize areas for improvement, learn proven strategies to cope with stress and become more stress-resilient.</p>	■	■	■	■	■	■
<p>My Weight Management Journey</p> <p>This comprehensive program guides members on how to begin their weight management journey and build the skills to maintain long term success. Members will work with an experienced coach to learn how to choose the right nutrition approach for them, mindful eating skills, build an activity plan and overcome personal barriers that influence weight loss.</p>	■	■	■	■	■	■
<p>How To Be Tobacco-Free</p> <p>The program is designed for anyone using tobacco - cigarettes, cigars, e-cigarettes, or chew - and want to quit. Members will work with a Tobacco Treatment Specialist to understand their nicotine dependence, identify triggers, cope with withdrawal symptoms, cravings, and stress, and set a personalized quit plan to become tobacco free.</p>	■	■	■	■	■	■
<p>Time to Sleep Well</p> <p>The Time to Sleep Well Program is a sleep awareness program where members can learn techniques and effective tools to help improve the quality of their sleep. Members can engage with an experienced coach to assess their sleep patterns, recognize areas for improvement and learn proven strategies to improve their sleep.</p>	■	■	■	■	■	■

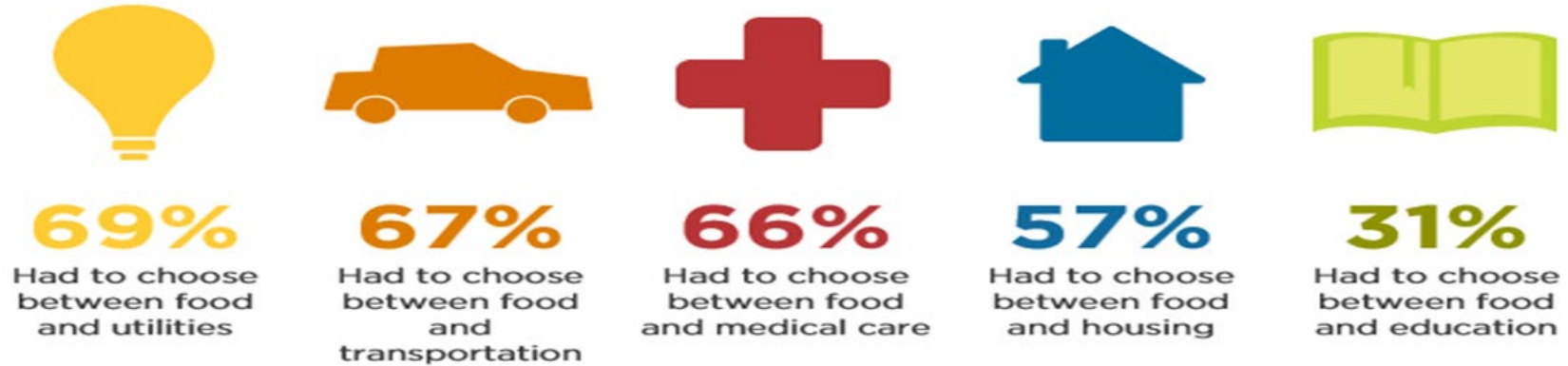
*Lines of business may vary by region.

The Highmark Member Programs are offered for the providers' consideration and assessment, are not required by Highmark (other practices may be more suitable for the provider) and are not to be viewed as a check or mark of services under any plan or other program. The provider's medical judgment must remain independent. Highmark shall not be liable for any adverse effects or consequences resulting from a provider's referral of a member to a Highmark Member Program set forth in this catalog. Highmark is also not recommending particular treatments or health care services, and the Highmark Member Programs are not intended to be a substitute for professional medical advice, diagnosis, or treatment.

Highmark is a registered trademark of Highmark, Inc., which is an independent company that provides a secure, web-based portal between providers and health care insurance companies.

Food Insecurity

Food Security is an Issue



They also told us about the many ways they stretch their food budget or work to supplement it:



Social Worker Benefit for Highmark Members

Food Insecurity

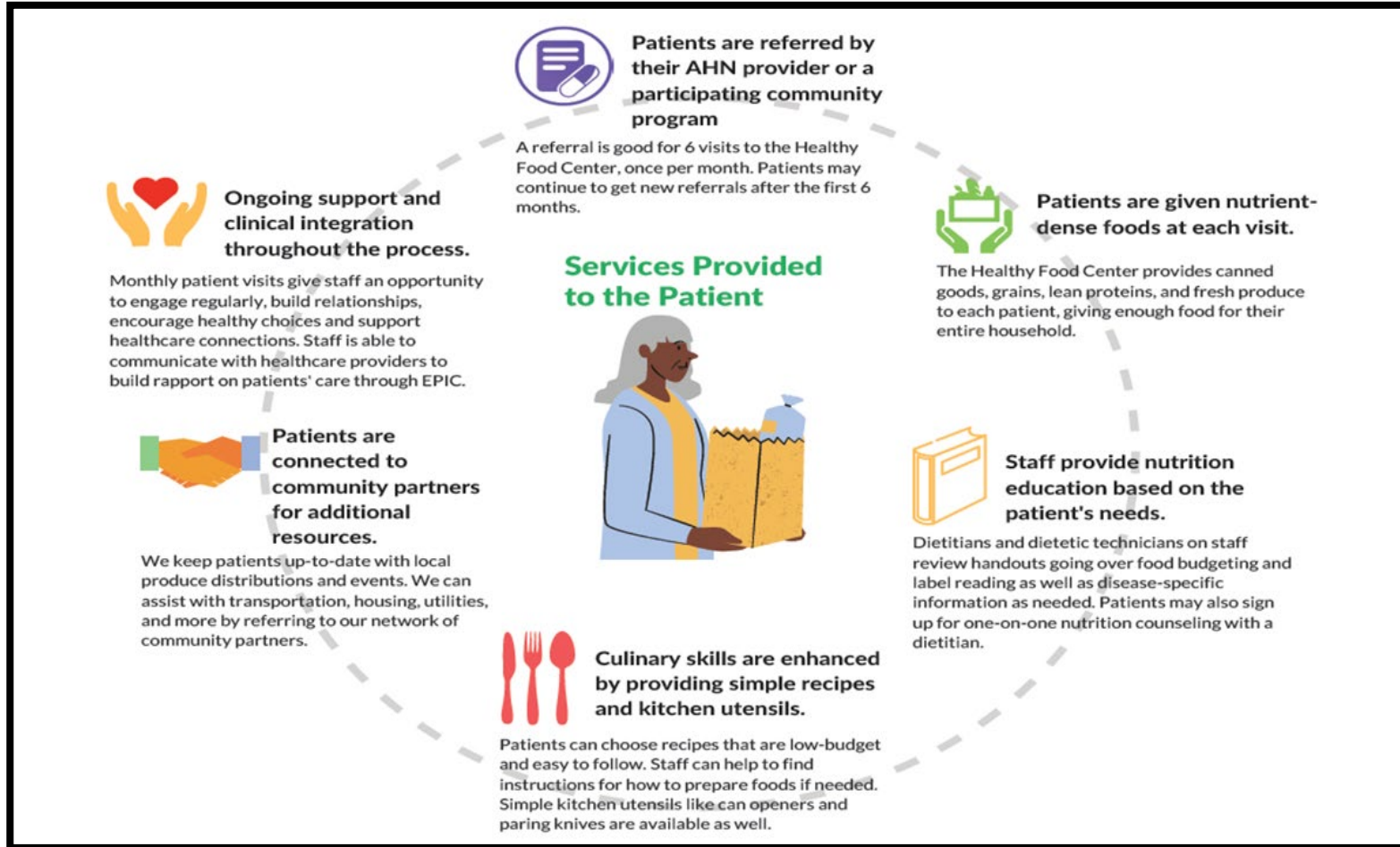
Assistance with food insecurity:

- Determine members true needs
 - food insecure
 - lack of transportation to food stores
 - Lives in an area where access to food is an issue ("food desert")
- Assess for member's eligibility for food assistance programs such as WIC and Food Stamps
- Connect member with resources in their local area (food banks, food pantries)
- Look for opportunities where members may save money (ex. apply for LIHEAP, financial assistance for medical bills, prescription assistance) to enable funds to be allocated for groceries

If member declines referral to a Social Worker or needs immediate assistance, can access <https://highmark.findhelp.com/> to find local resources

Healthy Food Center Overview

To positively impact the health of those served by AHN through the improvement of their Food Environment.



Current Locations
West Penn Hospital
Allegheny General Hospital
Jefferson Hospital
Saint Vincent Hospital
Forbes Hospital

Coming Soon
Allegheny Valley

Food Security Resources

Delaware

- [Food Bank Resource Locator](#)
- <https://delawaretoday.com/food/delaware-food-farmacy/>

Pennsylvania

- <https://www.feedingpa.org/pa-healthy-pantry-initiative/>
- <https://www.geisinger.org>
- <https://sites.psu.edu.produce.rx>

New York

- <https://www.health.ny.gov.nutrition.hpnap.region>

Food Security Resources

American Community Gardening Association:

- <https://communitygarden.org>

Bread for the World Institute:

- www.bread.org

Community Supported Agriculture:

- www.nal.usda.gov/afsic/community-supported-agriculture

Food Environment Atlas:

- www.er.usda.gov/FoodAtlas

National Center for Children in Poverty:

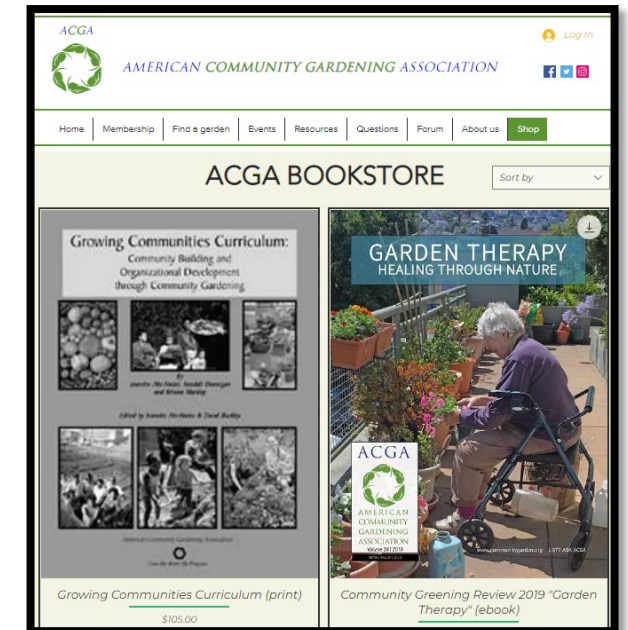
- www.nccp.org

Rural Poverty and Well-Being:

- www.ers.usda.gov/topics/rural-economy-population/rural-poverty-well-being.aspx

Food Security in the United States:

- www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-us.aspx



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3. **American Diabetes Association.** What is the Diabetes Plate Method? Feb. 2020. Available at: <https://www.diabetesfoodhub.org/articles/what-is-the-diabetes-plate-method.html#:~:text=The%20Diabetes%20Plate%20Method%20is,you%20need%20is%20a%20plate>

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- <https://www.cdc.gov/mmwr/volumes/71/wr/mm7101a1.htm>
- <https://www.heart.org/en/healthy-living/fitness/fitness-basics/aha-recs-for-physical-activity-in-adults>
- <https://www.cdc.gov/brfss>
- <https://www.dietaryguidelines.gov/>
- <https://www.cdc.gov/bloodpressure/prevent.html>
- <https://www.ahajournals.org/doi/10.1161/HYPERTENSIONAHA.121.17441>
- <https://www.eatright.org/food/planning-and-prep/cooking-tips-and-trends/make-it-mediterranean>