

*** DRAFT - NOT YET FILED ***

173-4-05

Meal service.

(A) "Meal service" means a service through which a congregate nutrition program, a home-delivered nutrition program, or a restaurant and grocery meal service provides a safe and nutritious meal to consumers to help sustain health through a congregate nutrition program, home-delivered nutrition program, or restaurant and grocery meal service.

(B) Minimum requirements for a meal service in addition to the mandatory clauses under rule 173-3-06 of the Administrative Code:

(1) Nutritional adequacy:

(a) The provider shall only provide a meal that complies with the most recent "Dietary Guidelines for Americans" which are published by the secretaries of the United States department of health and human services and the United States department of agriculture and found on <http://www.health.gov/dietaryguidelines> and summarized below:

(i) Reduce daily sodium rate to less than two thousand three hundred milligrams and further reduce intake to one thousand five hundred milligrams for persons who are fifty one or older and those of any age who are african american or have hypertension, diabetes, or chronic kidney disease.

(ii) Consume less than ten per cent of calories from saturated fatty acids by replacing them with monounsaturated and polyunsaturated fatty acids.

(iii) Consume less than three hundred milligrams of dietary cholesterol per day.

(iv) Keep trans fatty acid consumption as low as possible by choosing food that contains synthetic choices of trans fats, such as partially hydrogenated oils, and by limiting other solid fats.

(v) Reduce the intake of calories from solid fats and added sugars.

(vi) Limit the consumption of foods that contain refined grains, especially refined grain food that contains solid fats, added sugars, and sodium.

(vii) Consume foods fortified with vitamin B12, such as fortified cereals or dietary supplements.

(viii) If alcohol is consumed, consume it in moderation.

(ix) Increase physical activity and reduce time spent in sedentary behaviors.

(x) Maintain appropriate caloric balance between each state of life: childhood, adolescence, adulthood, pregnancy and breast feeding, and older age.

(xi) Follow food-safety recommendations when preparing and eating foods to reduce the risk of food-borne illnesses.

(b) The provider shall provide a meal that meets one-third of the dietary reference intakes (DRIs), which are a comprehensive set of nutrient reference values based on healthy persons for assessing and planning individual and group diets. The food and nutrition board, institute of medicine, and the national academy of sciences establishes DRIs and lists them on <http://fnic.nal.usda.gov/>.

(c) The provider shall use rule 173-4-05.1 of the Administrative Code to determine nutritional adequacy.

(2) Menu planning:

(a) The provider shall assure that all menus meet the meal requirements of this rule.

(b) The provider shall assure that consumers have opportunities for input about the food items it offers as part of self-directed care.

(c) The provider shall only offer a menu that is approved by a LD.

(d) The provider shall only offer menu substitutions that are approved by a LD.

(e) The provider shall list the serving size for each food item on each production menu.

(3) Ingredient information: The provider shall offer information on the ingredient content of meals served through a system that is approved by the AAA.

(4) Consumer choice: Consistent with self-directed care practices, the provider shall offer a consumer the opportunity to make choices about the meals served by using one or more of the following methods:

(a) At a minimum, allow each consumer to choose from three of the

following:

(i) Meat and meat alternates;

(ii) Vegetables;

(iii) Fruits;

(iv) Bread or bread alternates;

(v) Milk or milk alternates;

(vi) Desserts (if offered); or,

(vii) Meat or meat-alternate entrees combined with servings of other foods.

(b) Allow consumers to select an alternative meal type (e.g., boxed lunch, frozen meal, or vacuum-packed meal) that has the same nutrient content of a regular meal or follows the meal pattern for a regular meal;

(c) Offer consumers of home-delivered meals options regarding the frequency of meal deliveries; or,

(d) Allow consumers to make an informed choice at each meal regarding the menu, food alternates, and portion sizes, based on the availability of food items. The provider shall retain records to show that it informs consumers of the benefits and risks of dietary choices, so long as the AAA approves of the method for recording this information.

(5) Therapeutic and modified meals: A provider shall only provide therapeutic or modified meals if those meals meet the additional requirements under rule 173-4-05.2 of the Administrative Code.

(6) Alternative meals: A provider shall only provide alternative meals if those meals meet the additional requirements under rule 173-4-05.3 of the Administrative Code.

(7) Medical food and food for special dietary use: A provider shall only offer medical food or food for special dietary use if the food meets the additional requirements under rule 173-4-05.4 of the Administrative Code.

(8) Dietary supplements: The AAA shall not allow dietary supplements nor reimburse a provider for them unless they qualify as medical food or food for special dietary use under rule 173-4-05.4 of the Administrative Code. Under the "Dietary Supplement Health and Education Act of 1994," 21 U.S.C. 321, dietary supplements are intended for ingestion in pill, capsule, tablet, or liquid

form.

(C) Units of service:

- (1) Congregate nutrition program: A unit of service is one meal prepared and served under this rule and rule 173-4-04 of the Administrative Code.
- (2) Home-delivered nutrition program: A unit of service is one meal prepared and delivered under this rule and rule 173-4-04.1 of the Administrative Code.
- (3) Restaurant and grocery meal service: A unit of service is one meal acquired under this rule and rule 173-4-04.2 of the Administrative Code.

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