



# Nutrition and Aging Resource Center

## Oral Nutrition Supplements

### Considerations for Senior Nutrition Programs

This tip sheet explains how oral nutrition supplements (ONS) can be offered, funded, and documented in your senior nutrition program. ONS are typically ready-to-drink beverages that provide nutrients like carbohydrates, protein, fat, vitamins, and minerals. They may be recommended by a registered dietitian or other health professional to help participants enhance their nutrient intake. Please refer to your state and local policies to ensure proper procedures are followed.

### Planning

ONS are not a necessity within the senior nutrition program but can be a tool to meet the nutritional needs of your participants. If you are deciding whether to add these supplements to your program, consider the following.

- Whether state and local policies allow these supplements, and if so, what procedures must be followed.
- The need for and interest in ONS within your program. Participant surveys and client intake forms may help make this determination.
- ONS are not one size fits all; some supplements may interact with chronic conditions or medications. Consider medical recommendations for participants to receive ONS.
- How your program will pay for ONS. They may increase your food costs, but there are different ways to pay for them – this document outlines several ways.
  - The issue brief, [Identifying the Total Cost of a Meal](#), can help you determine how ONS will impact your program's costs.

## Incorporating

There are two ways ONS can be incorporated into senior nutrition programs:

1. **Offer them *separately or in addition to congregate and home-delivered meal services.***

ONS can be consumed with the meal or at another time. When served in addition to meals or offered to eligible persons who do not actively participate in the meal program, these supplements can be helpful for people who:

- Are at high nutritional risk.
- Have increased protein and calorie needs.
- Have unmet nutritional needs because of a health condition, food insecurity, or limited ability to grocery shop or cook meals.

2. **Incorporate them as an option as *part of a congregate or home-delivered meal.***

[Older Americans Act](#) (OAA) meals must meet the current Dietary Guidelines for Americans (DGAs) and provide one-third of the Dietary Reference Intakes (DRIs). See [Nutrition Requirements of the OAA](#) for a basic summary.

A provider could offer an OAA meal and include an ONS as an optional choice. For example, ONS can be provided as an option instead of milk.

## Funding

There are different funding streams to consider when purchasing ONS. If you plan to use OAA funds, it is essential to understand the proper way to purchase ONS for your program.

### OAA Title III-C Nutrition Services

ONS may be funded by OAA Title III-C funds whether they are provided as part of a program meal or provided separately.

*Remember: OAA meals must meet the current DGAs and provide one-third of the DRIs.*

### OAA Nutrition Services Incentive Program (NSIP)

**NSIP funds cannot be used to purchase ONS.** NSIP funds may only be used to purchase domestically produced foods. As these supplements are considered processed pharmaceutical products, they do not meet the definition of domestically produced food. Find more information in the [NSIP FAQ](#).

## Other Ways to Fund

**Title III-B:** ONS can be covered if their use complies with state and local policies and funds are available, as ONS are considered “other services as necessary for the general welfare”, as indicated in Sec 321(26).

**Title III-E:** These funds can be used for supplemental services on a limited basis to complement the care provided by caregivers under OAA Section 373(b)(5). The care recipient must have impairments in two or three activities of daily living (ADL) to be considered eligible for supplemental services.

**Other sources to help defray costs:** Nutrition programs may be able to negotiate a discount or join a Group Purchasing Organization or a Purchasing Consortium. Donors or partners within the community can be approached to help cover or contribute towards the cost of ONS.

## Reporting

Ensuring correct documentation of ONS in your program’s reporting is very important. **ONS alone may not be counted as a meal.** ONS purchased with OAA funds can be reported in the State Performance Reporting (SPR) systems.

### OAA Title III-C

**If provided separately from or in addition to a program meal:** SPR “other services” enhance program services in addition to the reported elements of meals, nutrition education, and nutrition counseling. If offered separately from a meal, ONS would be counted under “other services” within the SPR. ONS may be provided to appropriate meal participants as well as non-participants if these individuals meet Title III-C eligibility.

**If offered as part of the meal:** Report the meal per usual as a C1 or C2 meal. The ONS should be considered part of the food cost and included in reporting meal expenditures.

### OAA Nutrition Services Incentive Program (NSIP)

If an ONS is offered within an OAA meal that meets all NSIP meal requirements, the meal may be counted as an NSIP meal in the SPR.

## Reporting for Other Ways to Fund

**Title III-B:** ONS would be reported as “other services.” The state should be able to document why Title III-C cannot cover the cost so the program can justify using other limited OAA funds for their purchase.

**Title III E:** Eligible ONS should be reported as “supplemental services.”

## Other Considerations

Participants may always choose to eat only certain items from a meal. If served as part of a meal, a participant may select only the ONS or any combination of items offered. However, if a participant consistently chooses to consume the ONS and not the meal, the program should consider engaging the participant, for example, by:

- Offering a referral for nutrition counseling to assess their nutritional needs, provide individualized guidance, and assist with identifying dietary interventions that meet the participant’s needs.
- Offering a referral to a primary care physician, a case manager, or additional meal providers to determine if additional services might be appropriate to support the participant’s nutrition, health, socialization, and well-being.
- Reviewing existing policies and procedures, including training activities, monitoring practices, and funding approaches, to identify cost-effective ways to best meet the needs of program participants.