California Medically Tailored Meal Pilot Overview

A growing body of research is demonstrating the valuable role that high quality food support can play for patients struggling with both chronic and acute illness. Patients who are malnourished have longer hospital stays, worse side effects, worse treatment outcomes and longer recovery times. Among low-income patients, food insecurity leads to lower adherence to medications and more frequent emergency room visits and hospitalizations.

The Food is Medicine Coalition, a national coalition of medical nutrition providers, is working to document how medically tailored meals – meals that are designed to meet the nutritional needs of a specific illness – can lead to better outcomes and lower health care costs with the goal of changing health care policy so that meals become a reimbursable expense for insurers.

With this goal in mind, a coalition of six agencies across California, worked with Senator Mike McGuire and the legislature to approve and fund a three-year $6 million pilot project in California. The pilot will provide a 5 month medically tailored meal and nutrition education intervention to 1,000 Medi-Cal patients with congestive heart failure (CHF). A research team from UCSF and Stanford will evaluate the impact of the intervention on specific health markers and overall health care utilization and cost using the Medi-Cal claims data base.

This is the largest study of its kind to have been conducted and the agencies that are involved with the study are committed to insuring we leverage this opportunity to drive change for patients and for health care. Funding from the state covers the specific costs of the intervention itself, but does not cover equipment, capacity building, or education and advocacy work that will be needed to accomplish policy change. We are looking for private funders to assist with these added costs in order to insure that the opportunity presented by this state-funded pilot leads to long-term change here in California and beyond.

For more information, please contact:

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Key Information about the State-wide Pilot Project:

- The California Legislature and Governor Brown approved a three year, $6 million pilot to evaluate the impact of a medically tailored meal intervention on the health outcomes and health care costs of seriously ill Medi-Cal patients with congestive heart failure.
- This is the largest study of its kind to be conducted, and the first multi-county and multi-organization study in the United States.
- The study will be conducted in seven counties in California – Sonoma, Marin, Alameda, San Francisco, Santa Clara, Los Angeles and San Diego – by the following organizations: Ceres Community Project, Food for Thought, Mama’s Kitchen, Project Angel Food, Project Open Hand, and The Health Trust.
- Patients selected for the study will be high utilizers of health care services with a CHF diagnosis and have been on Medi-Cal or at least a year (to provide pre-intervention data). Patients need to be able to refrigerate and re-heat food.
- Patients will be provided with a medically tailored meal intervention. This means:
  - Meals will be approved by an RDN to reflect appropriate dietary therapy based on evidence-based practice guidelines. Diet/meals will be recommended by an RDN based on nutritional assessment and/or by a health care provider to address medical, symptoms, allergies, medication management and side effects to ensure the best possible nutrition-related health outcomes.
  - A nutritional assessment and monthly consults with an RDN to support patients in learning to shop, cook and eat healthy food on a budget.
- The intervention being tested includes five months of meals tapering from 100% of required nutrition in month one to 33% of nutrition on month five along with case management support.
- The pilot is slated to begin in early 2018.
- $2,000,000 has been authorized for the 2017-2018 budget cycle. Funding must be reauthorized for the subsequent two years of the pilot. Funding covers the direct costs of the intervention as well as administrative and evaluation costs.
- The project is being overseen by Department of Health Care Services. An outside evaluator, most likely Drs. Hilary Seligman and Sanjay Basu, will evaluate the results.
- The evaluation will look at changes in health status such as changes in hemoglobin A1C, health care utilization such as emergency department visits, skilled nursing use, readmissions, overall cost of care, and other measures to determine improvements in health and impacts on health care costs compared to other similar Medi-Cal patients and to the data for study participants prior to the intervention.
- Approximately 1,000 patients will be included in the study.
- The goal of the pilot project is to demonstrate the cost effectiveness of including medically tailored meals as an essential health benefit which would be covered by Medi-Cal, and to inform long-term policy change in California and beyond to make this benefit available to the broader Medi-Cal population.
The work in this pilot builds on important work done by members of the national Food is Medicine Coalition:
  o Study published 2013 showing a 28-32% decline in overall health care costs among patients receiving 100% nutrition for six months from MANNA in Philadelphia: http://journals.sagepub.com/doi/full/10.1177/2150131913490737
  o Study published January 2017 showing 63% drop in hospitalizations and a 50% increase in adherence to medication among Diabetes and/or AIDS/HIV patients receiving 100% nutrition for six months from Project Open Hand: https://www.ucsf.edu/news/2017/01/405651/food-medicine-hiv-positive-and-type-2-diabetes-patients