



**House Committee on Rules: Ending Hunger in America
Field Tour at Community Servings and
Discussion on the Importance of Medically Tailored Meals
March 4, 2022**

Community Servings is a not-for profit organization providing medically tailored meals (MTM) to individuals experiencing serious illness and nutrition insecurity throughout Massachusetts. As advocates for the House Committee on Rules' efforts related to Ending Hunger in America, we appreciate the opportunity to share our expertise and input on policy approaches that will address hunger, food insecurity, and nutrition insecurity.

At Community Servings, our mission is to actively engage the community to provide medically tailored meals (MTMs) to individuals and their families experiencing critical or chronic illness and nutrition insecurity. We provide home-delivered meals and nutrition services with made-from-scratch meals that are customized to meet the nutritional and medical needs of our clients who are fighting illnesses like HIV/AIDS, diabetes, cancer, kidney disease, and many others. We offer 15 medical diets, with up to three combinations per client, and we serve the client's family and caregiver as well. This year, Community Servings will provide over 875,000 meals to 4,000 critically ill individuals and their families.

Community Servings commends the House Committee on Rules' commitment to eradicating hunger and improving the lives of Americans through nutrition, especially the efforts to include medically tailored meals in this critical initiative. Our program has been proven through three clinical research studies to improve diet quality, reduce healthcare utilization and costs, and reduce food insecurity for chronically ill participants. The most recent and largest study done on MTM, "Receipt of a Medically Tailored Meal Program and Healthcare Utilization: An Instrumental Matching Analysis," published in JAMA in April 2019, showed that healthcare costs were lowered 16% (net savings) for those receiving medically tailored meals from Community Servings, and that the participants saved \$753 a month on average in comparison to a matched cohort. The researchers also found in this study that, based on Massachusetts All Payer Claims data, participation in an MTM program was associated with 49% fewer inpatient admissions and 72% fewer nursing facility admissions.¹

¹ "Receipt of a Medically Tailored Meal Program and Healthcare Utilization: An Instrumental Matching Analysis". 2019. JAMA—Internal Medicine

These groundbreaking results were consistent with an earlier study, which also showed 16% lower healthcare costs in Community Servings' MTM program participants in comparison to both those receiving non-medically tailored meals and a control group not participating in any meal program.² Additionally, a research study testing whether the participation in an MTM program improved dietary quality for food-insecure diabetic patients, found that individuals had a 31.4 increase on the Healthy Eating Index (HEI) for those enrolled in Community Servings' MTM program, further validating the effectiveness in both health outcomes and cost savings for chronically ill clients.³

To expand access to the cost-saving and life-saving MTM intervention, there are several initiatives the federal government can support. These include:

Convening of a White House Conference on Food, Nutrition, Hunger, and Health

One of the most significant barriers to more effective prevention and delayed progression of chronic health conditions in the US is lack of access to healthy and affordable food, resulting in population level incidence of food insecurity and malnutrition. An outsized portion of adverse health outcomes find their root in lack of access to good nutrition, and that lack of access is predicated on healthcare inequities – both racial and socioeconomic. Community Servings serves those adversely affected by the epidemic of serious and chronic illness in our country, which disproportionately affects communities of color. Our experience of service has shown us the deep disparities in health outcomes that our communities face and demonstrates that good nutrition is part of the solution. While MTMs have been shown to improve health outcomes, there is no comprehensive sustainable funding source in health care for this highly effective and low-cost intervention.

Given the population level impacts of poor nutrition and food security, the racial and socioeconomic inequities that lead to and exacerbate those impacts, as well as the inequitable access to MTMs across the country, a comprehensive and systematic approach is essential. The White House Conference on Food, Nutrition, Hunger, and Health would create a process and a plan to address issues of food insecurity, racial and socioeconomic health inequities, and integration with health care on an unprecedented national scale.

Passage of MTM Pilot Demonstration Act

Approximately [80% of older adults have at least one chronic disease, and almost 70% of Medicare beneficiaries have two or more.](#)ⁱⁱ However, most Medicare beneficiaries

² "Meal Delivery Programs Reduce The Use Of Costly Health Care In Dually Eligible Medicare And Medicaid Beneficiaries". 2018. Health Affairs

³ "Medically Tailored Meal Delivery for Diabetes Patients with Food Insecurity: a Randomized Cross-over Trial". 2018. *Journal of General Internal Medicine*

currently have no access to medically tailored meal services. MTMs serve as a tool to increase patient satisfaction and reduce nutrition insecurity for individuals who are at high risk of admission to institutional settings including hospitals and skilled nursing facilities. Through the creation of a Medicare pilot, [H.R. 5370, the Medically Tailored Home-Delivered Meals Demonstration Pilot Act of 2021](#)ⁱⁱⁱ would provide MTMs to qualifying Medicare enrollees who are referred by a medical professional or health care plan. To ensure the best possible outcomes for enrollees - many of whom experience limitations on activities of daily living – meal plans for MTMs are designed by Registered Dietitian Nutritionists (RDNs). As both an MTM provider and an advocate for addressing social determinants of health, eradicating malnutrition and hunger, and bending the health care cost curve, Community Servings knows this investment in MTMs stands to benefit Medicare enrollees struggling with severe and chronic disease(s) and food insecurity, and yield considerable cost-savings to the Medicare program.

Passage or Approval of Chairman McGovern’s Resolution Around Nutrition Education Requirements in Medical Schools

Doctors are often the most important voice in an individual’s health. Yet, doctors are not trained adequately on nutrition science in medical school. According to a recent brief, *Doctoring our Diet: Policy Tools to Include Nutrition in U.S. Medical Training*, “despite the overwhelming evidence linking food with health, nutrition receives little attention in medical school and throughout the education of physicians.”^{iv} Undergraduate medical education programs devote less than 1% of all lecture hours to nutrition science and diet, and there are no accrediting requirements for nutrition curriculum and competencies at the graduate and continuing medical education levels. This lack of education leaves physicians inadequately trained in providing nutrition guidance or knowing when to refer patients to nutrition professionals. As a nutrition service provider that receives referrals from physicians and other health professionals, we understand how critical it is for doctors to understand the role of nutrition in their patients’ health and thus be able to refer to nutrition programs that can help prevent and treat chronic health conditions. Therefore, we commend Chairman McGovern’s resolution for its push to medical schools to create meaningful nutrition education.

Thank you again for the opportunity to present this information, and for the Committee’s dedication to eradicate hunger in America.

ⁱⁱ Getting the Facts on Healthy Aging. *National Council on Aging Center for Healthy Aging for Professionals*. 2021. <https://www.ncoa.org/article/get-the-facts-on-healthy-aging>

ⁱⁱⁱ H.R.5370 - 117th Congress (2021-2022): Medically Tailored Home-Delivered Meals Demonstration Pilot Act of 2021. (2021, September 24). <https://www.congress.gov/bill/117th-congress/house-bill/5370>

^{iv} Broad Leib EM, Shapiro M, Chan A, Negowetti N, Borzi L, Eteessami S, Hartmann T, Hoover A, Jeong J, Loucks S, Pocock T, Williamson A. *Doctoring Our Diet: Policy Tools to Include Nutrition Education in U.S. Medical Training*. *Harvard Law School Food Law and Policy Clinic*. 2019. https://chipi.org/wp-content/uploads/2013/12/Doctoring-Our-Diet_-September-2019-V2.pdf