

Philadelphia, PA: Hunger in America Local Solutions for a National Crisis

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It was a pleasure to welcome Congressman Jim McGovern (MA-02), Congresswoman Mary Gay Scanlon (PA-05), Congressman Dwight Evans (PA-03) to MANNA today. Thank you for coming to our facility to see *Food is Medicine* at work for Philadelphians with acute and chronic conditions. Thank you also Congressman McGovern for your important leadership to create a White House Conference on Food, Nutrition and Hunger. We especially thank you and the co-authors of the bill for spotlighting the impact of food and nutrition as a mechanism for preventing or delaying the progression to late-stage disease, improving health outcomes for those with acute illness, and lowering healthcare costs. We look forward to participating in the conference.

MANNA is revolutionizing healthcare with nutrition interventions, harnessing the power of food as medicine. **Our evidence-based nutrition program improves health and quality of life by delivering medically tailored meals and professional nutrition counseling as an integral part of medical treatment.** From hands-on cooking classes and nutrition counseling to the delivery of 3 meals a day, 7 days a week, MANNA provides nourishment, hope, and healing.

Our Program

As you were able to see during your visit, our focus is on those members of our community who represent the smallest population, but who have acute illness: individuals with multiple conditions who need specialized nutrition. They are among the highest risk patients in our communities who also account for disproportionately high medical spending.

The home-delivered, medically tailored meal component of our program provides support during times of health crisis. Medically tailored meals (MTM) are meals approved by a registered dietitian nutritionist (RDN) that reflect appropriate dietary therapy based on evidence-based practice guidelines. Clients are referred to MANNA by a health care provider to address a medical diagnosis, symptoms, medication management and side effects, and to ensure the best possible nutrition-related health outcomes. Diet/meals are recommended by a RDN based on a nutritional assessment. Medically tailored meals are the most comprehensive Food is Medicine intervention.

MANNA's program consists of delicious meals with 12 different diet options that meet national nutrition standards and disease-specific recommendations coupled with customized nutrition counseling to help clients understand the impact of their diet on their health. With the ability to layer up to three menu modifications at a time, our dietitians can select the right combination for each client, taking any co-conditions or treatment side effects into account.

Our Clients

MANNA serves clients with an **acute nutritional need** due to **serious illness** in the Greater Philadelphia area, including Southern New Jersey. In addition, we currently support people all across the Pennsylvania through our payer partnerships which we anticipate expanding to both New Jersey and Delaware. We provide comprehensive medical nutrition for people with more than 100 illnesses and co-morbidities including cancer, HIV/AIDS, diabetes and renal disease. All of MANNA's meals are prepared

in our large-scale commercial kitchen by the loving hands of professional chefs and thousands of volunteers, keeping true to the organization's founding ethos of neighbors nourishing neighbors.

One of our clients, Beth, is 61 years old and has been fighting Stage 4 endometrial cancer. For more than eight months, she has been receiving MANNA's medically tailored meals and her nutrition has improved greatly. With meals tailored to her needs, she can focus on getting well rather than making meals. "I've even gained a few pounds in spite of my illness! God only knows how thankful I am for the meals." With the support of MANNA's program, Beth is able to keep her weight high enough to continue her treatments and improve her health.

As you learned while visiting our kitchens, people battling cancer must maintain a certain weight to withstand chemotherapy, but the side effects of treatment include lack of appetite and altered taste, along with lack of energy. This can lead to wasting. Our meals allow for multiple modifications to assist in increasing and maintaining weight while also addressing these side effects. For people with cancer, like Beth, keeping weight up enough to withstand harsh treatments is essential.

MANNA's program empowers clients to take control of their own needs, removing barriers to the nutrition they require. It also helps to provide a measure of independence for those who may be reliant on caregivers for their basic needs. For example, one of our clients relied heavily on family members to go grocery shopping and prepare her foods because she was too weak from her illness and medications to do so herself. Starting on MANNA meals not only gave her the nutrition her doctor prescribed, but also gave back her independence and lessened her reliance on the rest of her family. "Your meals have been a blessing from God. I have had a lot of tragedy in my family this year, and it is so comforting to know I have [MANNA's meals] there. In light of all of this, it is truly a blessing."

In addition to the nutrition, stability, and independence our meals provide, MANNA offers individual nutrition counseling so that our clients can better understand their unique diet and nutrition needs. Since their diets are often complex and difficult to follow, our clients receive one-on-one counseling with our licensed dietitians where their dietary needs are explained in detail, and recipes and suggestions can be tailored to their circumstances and preferences. The sessions not only help our clients to understand their current needs, but also helps them to continue eating healthy meals after our program is over.

Evidenced-Based

MANNA's findings, published in the *Journal of Primary Care & Community Health* in 2013, remain the gold standard for medically tailored meals research. This peer-reviewed research demonstrated that access to the nutritional food and counseling sessions from MANNA helps to **lower overall health care costs by 28%, shorten the length of hospital stays by 37%, and increase the likelihood of being sent home rather than to another care facility by 23%**.¹ In 2019 we established the MANNA Institute to continue to pursue research and evaluation into the efficacy and cost savings of comprehensive medical nutrition for people with serious illnesses.

More recent research carried out by our national partners has also demonstrated significant improvements in health outcomes and associated cost savings for Medicare and Medicaid beneficiaries

¹ Gurvey J, Rand K, Daugherty S, Dinger C, Schmeling J, Laverty N. Examining health care costs among MANNA clients and a comparison group. *J Prim Care Community Health*. 2013 Oct;4(4):311-7. doi: 10.1177/2150131913490737. Epub 2013 Jun 3. PMID: 23799677.

who receive Medically Tailored Meals. In an article published in Health Affairs in 2018, researchers analyzed claims data and found providing MTMs for patients dually eligible for Medicaid and Medicare resulted in fewer emergency department visits, emergency transportation services, and inpatient admissions as compared to dually eligible patients not enrolled in the meal program. Compared to matched controls, dually eligible patients receiving MTMs experienced a 70% reduction in emergency department visits, a 52% reduction in inpatient admissions, and a 72% reduction in emergency transportation events. The **MTM intervention resulted in a 16% net reduction in health care costs**, and the net savings after factoring in the cost of the meals was \$220 per month per patient.²

Today the MANNA Institute is expanding this body of evidence by collaborating on cancer studies with Fox Chase Cancer Center and the Jefferson Sidney Kimmel Cancer Center, and a renal disease study with researchers at New York University and the University of Pennsylvania, among others. The findings generated by these studies will help build the case for MANNA's larger policy change agenda and the expansion of our payer relationships. Plans for future studies include partnering with the Hospital of the University of Pennsylvania to study malnutrition among heart failure patients.

In addition to the formal research, multiple public payers have incorporated the MANNA intervention into their services for high-risk populations, and their real-world outcomes demonstrate both improved health and decreased costs. For example, Health Partners Plans, a Medicaid Managed Care Organization, incorporated MANNA's services into their management of high-need/high-cost members. More than 25% of diabetic members who received the service were able to lower their hemoglobin A1C levels, and in-patient hospitalizations were reduced by more than 27%.³ A similar partnership resulted in a 30% decrease in hospitalizations and a nearly 25% reduction in overall medical costs. These partnerships have been recognized by the Pennsylvania Department of Human Services for their contribution to Value Based Care and as a Best Practice by The Advisory Board Company.

Our Context

Eligibility for MTMs from MANNA is based solely on nutritional risk, however the characteristics of MANNA's clients highlight the intersecting challenges that many in the greater Philadelphia area face while combating critical illnesses. 97% of MANNA clients report incomes below 200% of the Federal Poverty Level, with an average income of only \$9,862 annually, whereas the median income in Philadelphia stands at \$46,116. In FY20 MANNA's client population⁴ was 65% Black, 33% White, 1% Asian, and 1% Native American, while Philadelphia's population is only 42% Black. These differences highlight the disproportionate burden of serious illness in low-income, minority communities.

Not surprisingly, our clients in low-income neighborhoods also face compounding issues such as systemic poverty and racism that make it extremely hard for them to access the nutrition they need to get and stay healthy. In Philadelphia, neighborhoods are still significantly segregated by race, and lower income neighborhoods have higher percentages of minority populations. These areas experience higher

² Berkowitz, S.A., Terranova, J., Hill, C., Ajayi, T., Linsky, T., Tishler, L.W. and DeWalt, D.A., 2018. Meal delivery programs reduce the use of costly health care in dually eligible Medicare and Medicaid beneficiaries. *Health Affairs*, 37(4), pp.535-542.

³ Health Partner Plans & Metropolitan Area Neighborhood Nutrition Alliance. (2017). *Food as Medicine Model: A Framework for Improving Member Health Outcomes and Lowering Health Costs*. Health Partners Plans. <https://www.healthpartnersplans.com/redirect/foodismedicine.html>

⁴ MANNA asks for ethnicity and race information separately, in accordance with U.S. Census data collection. Nine percent of our clients identify as Hispanic/Latinx, compared to 15.2% of Philadelphia residents.

rates of food insecurity, lower life expectancies, and with higher rates of chronic and serious illnesses, including the COVID-19 virus.⁵ Data from Drexel University shows that the neighborhoods with predominantly non-Hispanic Black populations have been disproportionately affected as well. Many of the most highly segregated neighborhoods are also within the top ten most impoverished zip codes, showing a correlation between the economic status of neighborhoods with non-Hispanic Black populations and rates of COVID-19 cases.⁶

In Philadelphia, heart disease and cancer disproportionately affect low-income and marginalized communities⁷. Unfortunately, these communities not only have a higher likelihood of these diseases, but also experience systemic barriers to receiving treatment. For example, many chronic and serious illnesses are impacted by nutrition but accessing healthy foods can be difficult, especially for families living paycheck to paycheck. One in five⁸ Philadelphians are food insecure, lacking access to grocery stores with healthy foods, or the funds to afford them. When someone who is food insecure also suffers from a serious illness, a vicious cycle is triggered: without the proper nutrients, their health can deteriorate, decreasing their prospects for recovery and lowering their quality of life. COVID-19 has only exacerbated the issue and MANNA's clients face even greater barriers to accessing healthy foods. Many struggle to access and afford healthy foods at the best of times, but now their compromised immune systems mean that a simple trip to the grocery store can be life-threatening. Our services bring the nutrition they need safely to their doors.

Proper nutrition can improve the body's response to treatments, mitigate side effects, increase energy, and help the body to heal. Conversely, the absence of nutrition can increase side effects and fatigue, decrease the effectiveness of the medications and treatment regimens, and ultimately lead to continued poor health outcomes. Many of MANNA's clients suffer from multiple comorbidities that make a nourishing and appropriate diet even more essential. For those clients at risk for food insecurity, it is nearly impossible for them to get the appropriate nutrition for their prescribed diets without assistance. Although food insecurity alone is not a qualifier for MANNA's service, it certainly contributes to acute nutritional risk. **We applaud the focus you and your colleagues are putting on this issue by proposing the White House Conference on Food, Nutrition and Hunger.**

Vision for the Future

Even though medical diets have been prescribed for decades, the current healthcare system is not equipped to incorporate nutrition as part of the treatment process. Patients are given orders for medical diets by their health care providers, then left on their own to follow the stipulated diet without assistance. As these diets can be complex and/or expensive, patients struggle to understand and follow them, so their illnesses often worsen. MANNA's service resolves this by providing free, home-delivered,

⁵ Department of Public Health, City of Philadelphia. (2020). Health of the City: Philadelphia's Community Health Assessment 2020. <https://www.phila.gov/media/20201230141933/HealthOfTheCity-2020.pdf>

⁶ Drexel University Urban Health Collaborative. (2020, June). COVID-19 in Context: Racism, Segregation, and Racial Inequities in Philadelphia. Drexel University. https://drexel.edu/~media/Files/uhc/briefs/COVID_DATA.ashx?la=en

⁷ Department of Public Health, City of Philadelphia. (2020). Health of the City: Philadelphia's Community Health Assessment 2020. <https://www.phila.gov/media/20201230141933/HealthOfTheCity-2020.pdf>

⁸ Feeding America. (2017). Food Insecurity in Philadelphia County. Map the Meal Gap. <https://map.feedingamerica.org/county/2017/overall/pennsylvania/county/philadelphia>

medically tailored meals coupled with disease-specific nutrition counseling, empowering our clients to continue eating the appropriate diet once they transition back to cooking for themselves.

MANNA envisions a world where all those with serious illnesses can access prescribed medical diets as easily as they access their medications at a pharmacy. Just as a wheelchair or a walker can be prescribed and delivered, or physical therapy is prescribed and referred to a rehab center, MANNA believes medical nutrition services should function in the same way. MANNA, our peer agencies, and our research partners, are providing the additional scientific evidence needed to demonstrate the benefits of medical nutrition and to persuade both lawmakers and insurance payers to include medically tailored meals as a covered healthcare service. MANNA is grateful for the leadership of Congressman McGovern, Congresswoman Scanlon, Congressman Evans as we partner to advocate for these changes for patients in Pennsylvania and across the nation.

Thank you.