Medi-Cal Medically Tailored Meals (MTM) Pilot Program

Fact Sheet

California Food is Medicine Coalition (CalFIMC)

We are an association of nonprofit organizations in California that provide medically tailored meals and nutrition services to thousands of severely and chronically ill individuals. We are also part of the national association, the Food is Medicine Coalition.

Background & Need

There is no federal nutrition support for sick and hungry individuals in the United States, unless they have HIV, and even that support does not cover all who are in need. For that reason, CalFIMC agencies receive private donations to meet their annual budgets, and some are even forced to create waiting lists because the need in their communities is so great. As more people are diagnosed with chronic illnesses that require specific diets, the need for nutrition support will only grow.

The Solution

By making medically tailored nutrition a service integrated into our healthcare system for this high-risk, high-need, high-cost population, we can produce:

- Better health outcomes
- Improved Patient Satisfaction
- Lower Cost of Care
- Triple Aim

The Outcomes

Research is beginning to demonstrate the benefits of medically tailored meal interventions.

- 16% Net healthcare cost savings
- 23% More likely to be discharged to home
- 50% Reduction in hospitalizations
- 50% Increase in medication adherence
- New studies on the impact of MTM are in progress around the US

57%

57% Predicted rise in chronic illnesses by 2020 [WHO]

86%

86% Portion of healthcare spending attributed to individuals with chronic health conditions [CDC]

92%

92% Older adults with at least one chronic disease [NCoA]

77%

77% Older adults with at least two chronic diseases [NCoA]

1 in 3

1 in 3 People enter the hospital malnourished

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The Medi-Cal Medically Tailored Meals (MTM) Intervention

The Medi-Cal MTM Pilot Program is 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. The California Department of Health Care Services (DHCS) oversees the program and is responsible for producing an evaluation report to the California legislature when the pilot concludes. DHCS contracts directly with Project Open Hand (POH) to administer the program and POH subcontracts with the CalFIMC agencies in the pilot counties. The program launched in April 2018 and is expected to end in 2021.

**Intervention Services**

**Home-delivered Medically Tailored Meals**

Clients receive 12 weeks of home-delivered medically tailored meals. The meals provide up to complete daily nutrition, but no less than 66% of daily nutrition. Medically tailored meals (MTM) are meals approved by a registered dietitian that reflect appropriate dietary therapy based on evidence-based practice guidelines. Daily meals include breakfast, lunch, and dinner. Meals are delivered frozen, fresh, or hot.

**Community-based Medical Nutrition Therapy (MNT)**

Clients meet with a registered dietitian and receive medical nutrition therapy through evidence-based application of the Nutrition Care Process, which is focused on prevention, delay or management of diseases and conditions, and involves an in-depth assessment, periodic reassessment, and intervention. There are four sessions of MNT performed in a community setting, such as at the client’s home or at an agency office.

**Wellness Checks & Client Engagement**

During the intervention, client services staff respond to missed meal deliveries or nutrition therapy sessions with the goal to ensure clients stay engaged. To support client services, a short survey called a wellness check is completed by delivery drivers at the point of delivery to collect information on the status of the client. This information is used by client services teams to identify potential issues which may prevent clients from engaging with the intervention.

**Who Can Participate**

To participate, persons should be on Medi-Cal with a record (ICD-10) of having congestive heart failure (CHF) and high acuity, but are stable enough to receive home-delivered meals.

- Currently on Medi-Cal
- Have an ICD-10 diagnosis of CHF in the past 12 months
- Had an inpatient stay or emergency department visit within the last 12 months.

To support the evaluation at the end of the pilot program, persons must also meet additional requirements:

- Had continuous Medi-Cal in the last 12 months
- Had a primary care or specialty care visit within the last 12 months

**Pilot Program Goals**

The State of California has the opportunity to integrate ‘food as medicine’ interventions into Medi-Cal health coverage programs. This would mean that more Californians could receive nourishing meals tailored to their medical needs and medical nutrition therapy services at no cost during a vulnerable period in their lives.

The explicit goal of the pilot is to demonstrate the cost benefits through analysis of Medi-Cal claims data among beneficiaries who received services. Goals established by the California Food is Medicine Coalition go further and aim to standardize and replicate medically tailored meal interventions throughout California.

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Sourced from FIMC 2019 Policy Priorities Fact Sheet at www.fimcoalition.org

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