

Works-In-Progress Presentation #1

Dr. Emma Steinberg
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San Francisco County, Cohort 3



Intro - About Us

Emma

- Pediatric Hospitalist
- Trained Chef
- Teach plant-based cooking classes, facilitate Food as Medicine trainings for healthcare providers at FQHCs, SF Food Insecurity Taskforce member



Kim

- Pediatrician
- Immediate Past President SFMMS
- Kaiser Permanente for 11 years, now working in advocacy, digital health technology, and teaching at UCSF



Background: Food as Medicine

- Food insecurity is prevalent and impacts health care costs and outcomes

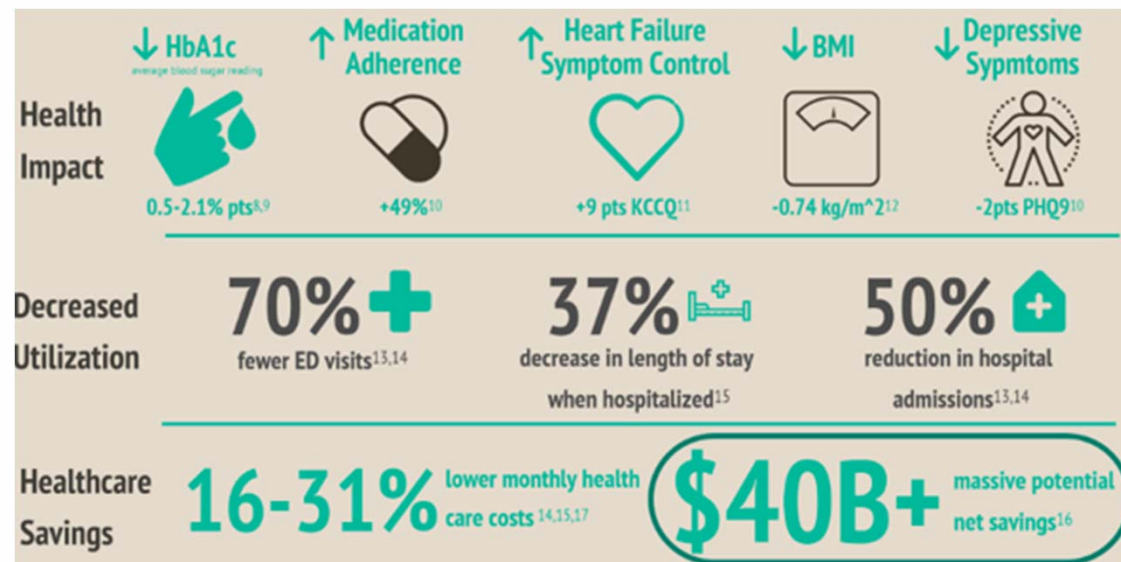


Adapted: Seligman HK, Schilling D. N Engl J Med. 2010;363:6-9.

Economic Research Service, USDA, 2016; Adapted from Seligman et al. NEJM. 2010;363:6-9

Background: Food as Medicine, cont.

- Growing body of evidence that providing food improves health outcomes and reduces health care costs



**Can/should the health care
system pay for “food as
medicine?”**

Coalition Building

- SFDPH → physician lead SFDPH chronic disease prevention → Food as Medicine coalition
 - Coalition of multiple organizations that are working towards expanded and better integrated food supports into the healthcare system
- We each have our own networks + strengths
 - Emma - Food Security Taskforce, Alameda County
 - Kim - Medical society connections



Food as Medicine
Collaborative



ALL IN ALAMEDA COUNTY
the new war on poverty



Our Goal

Public *and* private health insurers include medically supportive food interventions as a covered medical benefit

Benefits
to expanding medical
food support beyond
MTM

Culturally Relevant



Allows patients to access culturally diverse foods beyond what might be prepared as part of medically tailored meals

Sustainable



Less prescriptive diets/meals promotes culinary practice and long term nutritional change

Health Investment



Allows for broader reach of patients earlier on in disease course - promoting prevention and greater value

Cost Effective



Reduces overhead of meal prep and delivery

**CHAMPION
PROVIDER**
FELLOWSHIP

**1st Opportunity =
MediCal Waiver**

Background: MediCal Waiver Process

- Every 5 years, can expand access to services or coverage for individuals or programs not traditionally eligible
 - In Lieu of Services
 - Flexible Services
- Precedent in MA and NC → Medicaid pays for food based supports
- Once approved, MediCal health plans opt-in

Strategy

- Leveraging the media



- Leveraging organized medicine
 - Local medical societies



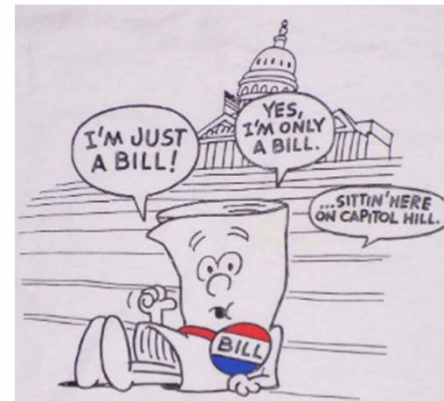
**2nd Opportunity =
State Legislature**

Leveraging the Legislature

- AB3118: Medically Supportive Food and Nutrition Services
 - Covid19 → narrowed scope
 - Passed health committee, held in Appropriations
- 2021 → AB368: Food Prescription Pilot within Alameda County

Taking Alameda County's 'food pharmacy' statewide: new bill

East Bay assemblyman's proposal would make food a covered MediCal benefit



**3rd Opportunity =
Organized Medicine**

CMA Resolution

- Formalize CMA support of Medically Supportive Nutrition Programs
 - Especially during emergencies, like Covid19
- Encourage medical schools to provide more education and training



SUCCESS!!!

2021 revised CalAim proposal includes our language!

CALIFORNIA ADVANCING AND INNOVATING MEDI-CAL PROPOSAL



State of California—Health and Human Services Agency
Department of Health Care Services



“Medically-supportive food and nutrition services, including medically tailored groceries and healthy food vouchers.”

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Successes and Challenges

- **Successes**

- Engaging local medical societies, leveraging network
- Strong coalition
 - Multidisciplinary
 - Extensive subject expertise
 - Well connected
- Lots accomplished in short period of time

- **Challenges**

- Scheduling
- Complexity of healthcare funding structures and decision-making landscape
- Covid19
 - Limited budget

Opportunities from Covid-19

- Broad recognition that poor nutritional status, SODH, and chronic health conditions lead to worsened outcomes for COVID-19 patients → interest in solutions and innovation
 - More medically tailored meal pilots
 - Expanded coalition
- Increased funding within SF for food insecurity

Next Steps

- Continue CalAIM advocacy
- Develop strategic plan for piloted implementation within county health plans and/or through local legislative process
- Work with CMA through resolution process
- Further advocacy for statewide legislative and budgetary support of these innovations

Get Involved

- Educate your local medical or dental society
- Discuss CalAim and AB368 with your local legislators
- Join efforts to encourage health plans to ensure robust implementation of food supports under CalAIM or as a pilot

Questions?

A close-up photograph of a silver stethoscope resting on a clipboard with a pen, set against a blurred background of a desk.

THANK YOU





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A Powerful Approach to Healthier Communities

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