AMENDMENT NO. ________  Calendar No. ________
Purpose: To establish a medically tailored meals program.


H. R. 2

To provide for the reform and continuation of agricultural and other programs of the Department of Agriculture through fiscal year 2023, and for other purposes.

Referred to the Committee on ________________ and ordered to be printed

Ordered to lie on the table and to be printed

AMENDMENT intended to be proposed by Mr. SANDERS to the amendment (No. ________) proposed by

Viz:

1  At the end of subtitle C of title IV, add the following:

2  **SEC. 43. MEDICALLY TAILORED MEALS PROGRAM.**

3  (a) **DEFINITIONS.**—In this section:

4  (1) **ELIGIBLE ENTITY.**—The term “eligible entity” means an entity that is a partnership between a food organization and a health organization.

5  (2) **FOOD ORGANIZATION.**—The term “food organization” means—

6  (A) a medically tailored meals organization;
(B) an emergency feeding organization (as defined in section 201A of the Emergency Food Assistance Act of 1983 (7 U.S.C. 7501));

(C) a senior center or other organization that provides meals to older individuals;

(D) a farmer’s market;

(E) a community-supported agriculture program;

(F) an agricultural cooperative;

(G) a local public benefit corporation; and

(H) a nonprofit organization focused on food insecurity or improving local food systems, such as a food hub or a Meals on Wheels program.

(3) HEALTH ORGANIZATION.—The term “health organization” means—

(A) a Federally-qualified health center (as defined in section 1905(l)(2)(B) of the Social Security Act (42 U.S.C. 1396d(l)(2)(B)));

(B) a hospital or clinic operated by the Department of Veterans Affairs;

(C) a facility operated by the Indian Health Service or the governing body of an Indian tribe (as defined in section 4 of the Indian
Self-Determination and Education Assistance Act (25 U.S.C. 5304));

(D) a nonprofit hospital that is—

(i) a critical access hospital (as defined in section 1861(mm)(1) of the Social Security Act (42 U.S.C. 1395x(mm)(1)));

(ii) a disproportionate share hospital that receives payments under section 1886(d)(5)(F) of the Social Security Act (42 U.S.C. 1395ww(d)(5)(F)); or

(iii) a Medicare-dependent, small rural hospital (as defined in section 1886(d)(5)(G)(iv) of the Social Security Act (42 U.S.C. 1395ww(d)(5)(G)(iv))); and

(E) a sole community hospital (as defined in section 1886(d)(5)(D)(iii) of the Social Security Act (42 U.S.C. 1395ww(d)(5)(D)(iii))).

(4) Low-income household.—The term “low-income household” means a household—

(A) in which 1 or more individuals are receiving—

(i) assistance under a State program funded under part A of title IV of the Social Security Act (42 U.S.C. 601 et seq.);
(ii) supplemental security income payments under title XVI of the Social Security Act (42 U.S.C. 1381 et seq.);

(iii) supplemental nutrition assistance program benefits under the Food and Nutrition Act of 2008 (7 U.S.C. 2011 et seq.);

(iv) assistance under the Medicaid program under title XIX of the Social Security Act (42 U.S.C. 1396 et seq.);

(v) free or reduced price school meals under the Richard B. Russell National School Lunch Act (42 U.S.C. 1751 et seq.) or the Child Nutrition Act of 1966 (42 U.S.C. 1771 et seq.);

(vi) assistance under the low-income home energy assistance program established under the Low-Income Home Energy Assistance Act of 1981 (42 U.S.C. 8621 et seq.); or

(vii) payments under—

(I) section 1315, 1521, 1541, or 1542 of title 38, United States Code; or
(II) section 306 of the Veterans’ and Survivors’ Pension Improvement Act of 1978 (38 U.S.C. 1521 note; Public Law 95–588); or

(B) that has an income that, as determined by the State in which the household is located, does not exceed the greater of—

(i) an amount equal to 200 percent of the poverty level for that State; and

(ii) an amount equal to 80 percent of the median income for that State.

(5) Medically tailored meals organization.—The term “medically tailored meals organization” means an entity that has experience providing medically tailored meals and individualized medical nutrition therapy or nutrition counseling to meal recipients, as determined by the Secretary.

(6) Medically tailored meals program.—The term “medically tailored meals program” means a program under which meals are designed by a registered dietitian or other nutrition professional, as determined by the Secretary, to benefit a low-income individual with a chronic condition.

(7) Wellness.—The term “wellness” means the 8 dimensions of wellness described by the Sec-
Secretary of Health and Human Services for purposes of the Eight Dimensions of Wellness program administered by the Substance Abuse and Mental Health Services Administration.

(b) Establishment.—

(1) In general.—The Secretary, in coordination with other applicable Federal agencies, shall establish a program under which the Secretary shall award grants to eligible entities to conduct pilot projects to demonstrate and evaluate the impact of a medically tailored meals program on low-income individuals with 1 or more chronic conditions that may be improved by access to a healthy diet.

(2) Duration.—The Secretary shall carry out the program under paragraph (1) for a 5-year period beginning on the date that is 5 months after the date of enactment of this Act.

(3) Location.—The Secretary shall award grants under paragraph (1) to eligible entities that are located in not less than 10 States.

(c) Grants.—

(1) Application.—

(A) In general.—To be eligible to receive a grant under subsection (b)(1), an eligible entity shall submit to the Secretary an application
at such time, in such manner, and containing such information as the Secretary shall require, including the information described in subparagraph (B).

(B) CONTENTS.—An application submitted under subparagraph (A) shall include—

(i) a description of the methods by which a medically tailored meals program will target low-income individuals with 1 or more chronic conditions that may be improved by access to a healthy diet;

(ii) a plan for the screening and enrollment of the individuals targeted under clause (i);

(iii) a plan for the evaluation of each individual that is participating in the medically tailored meals program—

(I)(aa) at the time of entrance into the program, after 3 months of participation in the program, and after 6 months of participation in the program; or

(bb) halfway through the duration of the program and at the completion of the program; and
that includes a plan to conduct an assessment of—

(aa) the health of the individual, including—

(AA) the effect on each identified chronic condition of the individual and on the overall health of the individual;

(BB) the reliance of the individual on medication to control each identified chronic condition of the individual; and

(CC) the perception of the individual of the overall personal health and wellness of that individual;

(bb) any reduction of individual and household food insecurity;

(cc) any reduction in overall health care spending and costs, including out-of-pocket costs, inpatient hospitalization, emer-
ergency department visits, emergency transport, and spending on medication;

(dd) any increased consumption of domestic fruits and vegetables; and

(ee) any other clinically significant factor, as determined by the Secretary, in coordination with the Secretary of Health and Human Services.

(iv) a description of a plan to include educational opportunities relating to nutrition for individuals participating in a medically tailored meals program;

(v) a description of the partnership that constitutes the eligible entity and the role of each partner in carrying out a medically tailored meals program;

(vi) documentation of any necessary partnership agreements or memoranda of understanding with a State Medicaid agency or other appropriate entity to evaluate the effectiveness of a medically tailored meals program.
meals program in reducing health care use
and associated costs; and

(vii) a description of the methodology
for the collection and aggregation of data
under subsection (d)(1) to analyze the ben-
efit of a medically tailored meals program
on individuals participating in that pro-
gram.

(C) SUBMISSION DEADLINE.—The Sec-
retary shall not accept an application under
subsection (A) that is submitted less than 1
year before the date on which the program ter-
minates under subsection (b)(2).

(2) PRIORITY.—The Secretary shall give pri-
ority to an eligible entity submitting an application
under paragraph (1) that—

(A) is a nonprofit organization that has
demonstrable experience, as determined by the
Secretary, in—

(i) providing medically tailored meals
to individuals;

(ii) reducing individual and household
food insecurity; or

(iii) providing low-income individuals
with access to health care;
(B) is located in a State that has one of the 5 oldest populations, as measured by median age;

(C) is located in a State that has an agreement with the Federal Government that contains targets for health outcomes and quality of care that include prioritization of chronic conditions; or

(D) has demonstrated support for the development of local or regional agriculture and food systems, as determined by the Secretary.

(3) GRANT DURATION.—A grant awarded under this section shall be for a period of not less than 2 years.

(d) PILOT PROJECTS.—

(1) IN GENERAL.—An eligible entity conducting a pilot project under a grant awarded under subsection (b)(1) shall measure and evaluate the impact of the pilot project on the factors described in items (aa) through (ee) of subsection (c)(1)(B)(iii)(II).

(2) INDIVIDUAL PARTICIPATION.—An eligible entity conducting a pilot project under a grant awarded under subsection (b)(1) shall ensure that an individual participating in the pilot project is en-
rolled and active in the pilot project for not less than 1 year.

(c) TECHNICAL ASSISTANCE.—Of the funds under subsection (g), the Secretary may use not more than $1,000,000 to provide technical assistance to eligible entities awarded grants under subsection (b)(1).

(f) REPORT.—Not later than 180 days after the termination of the program under subsection (b)(2), the Secretary shall submit to the Committee on Agriculture and the Committee on Energy and Commerce of the House of Representatives and the Committee on Agriculture, Nutrition, and Forestry and the Committee on Health, Education, Labor, and Pensions of the Senate a report that contains the recommendations of the Secretary, in consultation with the Secretary of Human Services—

(1) on the advisability and feasibility of the continuation or expansion of that program; and

(2) that are based on the impact of the program on the factors described in items (aa) through (ee) of subsection (c)(1)(B)(iii)(II).

(g) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to carry out this section $20,000,000 for each of fiscal years 2019 through 2023.