Peer-reviewed research demonstrates that MTMs lead to improved health outcomes, lower cost of care and more satisfied patients. In fact, adding MTMs to a care plan led to 70% reductions in emergency department visits by dually eligible individuals, 52% reductions in hospital admissions, reductions in skilled nursing facility admissions by 72%, and 16% decreases in net health care costs.

MTMs are science-based.
Peer-reviewed research demonstrates that MTMs lead to improved health outcomes, lower cost of care and more satisfied patients. In fact, adding MTMs to a care plan led to 70% reductions in emergency department visits by dually eligible individuals, 52% reductions in hospital admissions, reductions in skilled nursing facility admissions by 72%, and 16% decreases in net health care costs.

MTMs are cost effective.
A recent national cost-modelling study showed that if all eligible patients received access to MTMs, the U.S. could save $13.6 billion and avoid 1.6 million hospitalizations in the first year.

We need innovative solutions for health care.
Our health care system demands viable and innovative solutions that adapt to patients’ medical needs. CMS waivers and regulatory flexibility have provided an opportunity for health plans to pay for medically tailored meals and some state Medicaid agencies have developed alternative payment structures for MTMs.

OUR REQUEST:
To maximize access to medically tailored meals and cost-savings for taxpayers, Congress should:

Make MTMs a fully reimbursable benefit in Medicare and Medicaid.
To reach additional populations and take advantage of state/federal cost sharing, Congress could approach coordinated nutrition care from the public insurance side. There are two legislative options for establishing this limited MTM benefit:

Create a Covered Benefit for MTMs for Eligible Beneficiaries in Medicare Part B
- More equitable coverage can be achieved by adding “medically tailored meals” to the list of services covered as “medical and other health services” under Medicare Part B.

Create a Covered Benefit for MTMs for Eligible Beneficiaries in Medicaid.
- Administration of this benefit would similarly pass through the Medicaid program’s gates of eligibility, authorization, and ongoing reassessment as above for Medicare Part B.

Implement a Medicare Pilot in Medicare Part A
An interim step to a full benefit is to conduct a large analysis of the service in practice.

Congress could reintroduce and pass legislation similar to the bipartisan H.R. 5370, the Medically Tailored Home-Delivered Meal Demonstration Pilot Act:
- Funds an MTM pilot program in Medicare Part A.
- Gives CMS the opportunity to replicate at scale previous research studies showing the positive results in the Medicare population.
What you need to know about MTM Federal Funding

THE BACKGROUND:
In 2022, FIMC agencies in 25 states provided over 12.3 million medically tailored meals to people living with chronic illness in their homes and communities.

Current funding: Some individual states and Medicaid and Medicare managed care plans use CMS waivers and regulatory flexibilities to pilot coverage of medically tailored meals. In these circumstances, MTM organizations work across the healthcare system to provide coverage and access to medically tailored meals for some of the most vulnerable Americans.

Reduces spending: This relationship benefits patients, MTM organizations, health systems, insurers, and governments through fewer hospitalizations, emergency department visits, and referrals to skilled nursing facilities, which leads to a reduction in overall health spending.

Why it matters: While much success has been seen in these pilots, they remain on the margins of innovation and fall short of establishing the widespread coverage needed to ensure equitable access to these critical services across the U.S.

Changing healthcare policy to fund, deliver and explicitly evaluate the MTM intervention in Medicare and Medicaid would solve this issue.

THE OPPORTUNITY:
Medically tailored meal organizations are heavily dependent on the services of volunteers and donors to ensure that Americans receive this lifesaving service.

The catch: There is no distinct federal funding stream to support the preparation and distribution of medically tailored meals.

What we should do: Access to robust federal funding is critical for medically tailored meal organizations to expand access to high-quality and nutritious meals for chronically ill patients in need.

THE IMPACT:
Foster health and achieve savings: Maximize access to medically tailored meals and cost-savings for taxpayers through federal funding for MTMs.

“Medically tailored meals are one of the least expensive and most effective ways to improve our healthcare system in an equitable way.”
— ALISSA WASSUNG, FIMC EXECUTIVE DIRECTOR

The Food is Medicine Coalition (FIMC) is a coalition of 35 nonprofit medically tailored food and nutrition service providers throughout the U.S. focused on advancing policy, research and best practices around evidence-informed medical food and nutrition interventions. Visit fimcoalition.org to learn more.