Welcome
Building an Ecosystem of Health Symposium
2019
January 28, 2019
Oakland, California
Welcome Remarks

Mark Ryle, LCSW, CEO
Project Open Hand, Outgoing CalFIMC Chair

Jolene Fassbinder, MSG, MACM
Archstone Foundation

Richard Ayoub, Executive Director
Project Angel Food, Incoming CalFIMC Chair
California Pilot Program Agencies
Agenda

1. Medi-Cal Medically Tailored Meals Pilot Overview
2. Context: Overview of Social Determinants of Health
3. Consensus Workshop
4. Lunch
5. Action Planning Workshop
6. Reaction Panel
Medi-Cal MTM Pilot Program

Ana Ayala, VP of Programs

Project Open Hand
What We Know – The Issues

1 in 3
People enter the hospital malnourished

92%
77%
Older adults with at least one chronic disease
Older adults with at least two [NCoA]

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

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

Source: National FIMC www.fimcoalition.org
What We Know – How Medically Tailored Meals Can Help

- **16%** net healthcare cost savings
- **23%** more likely to be discharged to home
- **50%** increase in adherence
- **28%** reduction in hospitalizations
- **11** new studies on the impact of MTM are in progress across the country at FIMC agencies

Source: National FIMC www.fimcoalition.org
June 2017
SB 97 budget bill was approved by the legislature and signed by Governor Jerry Brown

October 2016
Senator McGuire embarked on a crusade to get funding secured in the budget for a statewide pilot program

June 2017
SB 97 budget bill was approved by the legislature and signed by Governor Jerry Brown

April 2018
The Medi-Cal Medically Tailored Meals Pilot Program started enrollment

Before 2016
FIMC was forming and research on MTM was being conducted

June 2016
California FIMC began to form National FIMC momentum

April 2017
Assemblymember David Chiu sponsored the budget ask in the state assembly subcommittee

March 2018
CalFIMC Website Launches promoting Pilot Program

Today 2019
Candice - 5th Client in the Statewide CHF Program
Video
https://www.youtube.com/watch?v=8q73Ze0Q_CE
MTM Pilot Program Background

- 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.
- **Enroll 1,000 clients** over the course of 3 years.
- The pilot is conducted in **seven counties** in California – Alameda, Los Angeles, San Diego, San Francisco, Santa Clara, and Sonoma.
- The **California Department of Health Care Services (DHCS)** has oversight over the program.
What is the Medi-Cal MTM Program?

The Medi-Cal MTM Pilot Program is a medical nutrition intervention for high utilizing Medi-Cal beneficiaries with a diagnosis of congestive heart failure (CHF). The intervention is 12 weeks in duration.

- **Who:** Persons on Medi-Cal with a diagnosis of congestive heart failure (CHF) and have a history of being a high utilizer of health care services and/or likely at risk for hospital readmission

- **Intervention Goal:** Reduce healthcare costs and improve health outcomes

- **Cost:** No cost to patient. Must be on Medi-Cal.
The Intervention

Home-Delivered Medically Tailored Meals (MTM)
• 12 weeks of complete nutrition, home delivery

Community-Based Medical Nutrition Therapy (MNT)
• Four Medical Nutrition Therapy sessions, 2 in-person

Wellness Checks & Client Engagement
• Monitoring and maintenance of client engagement
Medically Tailored Meals

All meals for 12 weeks

Medically tailored for CHF patients

Periodic wellness checks during delivery
## Medical Nutrition Therapy

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**Community-based**

Four sessions in the course in 12 weeks

Two sessions at home or in community-setting
Information & Referral Services

Program engagement case management by client services

Referral to community-based resources by client services

Contact medical provider(s) when a high risk for readmission is identified, and if appropriate
How to Refer

A completed referral form is required. A clinician (MD, PA, NP, LCSW, RN, etc.) must make the referral (Although some bypass referral if DHCS identifies person as meeting criteria).

Client Services conducts eligibility assessments.

Meals should begin within 72 hours of enrollment, but no later than 7 days.
101 clients have enrolled to date in all counties. Of those:

- 53 clients are currently receiving the intervention.

56 clients are no longer receiving the intervention. Of those:

- 34 clients completed full 12 weeks - 61% completion rate
- 22 clients ended before 12 weeks
Other Program Information

Data Collected

- Enrollment & Claims (via DHCS)
- Health Outcomes Survey
- Counts of meals, MNT sessions, missed deliveries
- Readmission dates and reasons

Known Challenges

- Low and slow enrollment
- Clients difficult to find
- Learning to find the right amount of intervention
Program Governance

Project Open Hand is the pilot program administrator:
- Holds contract with DHCS
- Program management and compliance
- Coalition coordination

California Food is Medicine Coalition
- Leadership Committee: Overall guidance
- Client Services & Accreditation Committees
Questions