

**MEDICAID FOOD
SECURITY NETWORK**

Medicaid Food Security Network Summit

**MAY 7-8, 2025
WASHINGTON, DC**





Working with Medicaid on Administrative Change as a Hunger Organization

May 8th, 2025

Medicaid Food Security Network Summit 2025

Session Facilitators



Kathryn Jantz
Senior Associate,
HealthBegins



Elise August
Director, Health Systems
Innovation, Feeding
America

**MEDICAID FOOD
SECURITY NETWORK**

Session Speakers



Dawn Opel
Chief Innovation Officer
and General Counsel, Food
Bank Council of Michigan



Kelcie Silvio
Senior Policy Analyst,
Voices for Georgia's
Children



Meaghan Butler
Senior Food is Medicine
Director, Federation for
Virginia Food Banks

**MEDICAID FOOD
SECURITY NETWORK**

Agenda

- Welcome and Policy Pathways- Kathryn
- Food Bank Council of Michigan- Dawn
- Federation for Virginia Food Banks - Meaghan
- Voices for Georgia's Children- Kelcie
- Q & A - Elise

Objectives

Attendees will be able to:

- describe the steps food access organizations took to build successful partnership with their state Medicaid agencies or MCOs
- discuss approaches to overcoming challenges, lessons learned and ways to approach partnership building to reach mutual goals.



Opportunities to address food insecurity using Medicaid flexibilities



FOOD INSECURITY
SCREENING &
REFERRAL



SNAP & WIC
ENROLLMENT
INFRASTRUCTURE



ASSISTANCE &
NAVIGATION



DATA, EVALUATION,
& CONTINUOUS
IMPROVEMENT



INVESTMENTS &
BENEFITS

Leveraging existing infrastructure:

workforce mobilization, workflow and training changes, administrative change

Policy and Program Opportunities

FOOD INSECURITY SCREENING & REFERRAL



- Health Risk Assessment
- Social Needs Screening & Referral

ASSISTANCE & NAVIGATION



- Care Coordination / Care Management
- Community Health Workers

SNAP & WIC ENROLLMENT INFRASTRUCTURE

- Single application
- SNAP and WIC Data Sharing

Quality Improvement, Population Health and Social Drivers of Health Plans



- CBO Partnerships
- SNAP or WIC data sharing
- Performance Improvement Plans

INVESTMENTS & BENEFITS



- 1115 Waiver
- Community Reinvestment
- In Lieu of Services
- Hospital Financing-Related Projects
- Medical Loss Ratio
- Values Added Services
- Value-Based Care

Medicaid Food Security Partners Program (MFSP)

Cohort 1

GEORGIA



OKLAHOMA



VIRGINIA



MICHIGAN



Medicaid Food Security Partners Program (MFSP)

Cohort 2

TEXAS



OHIO



NEW MEXICO

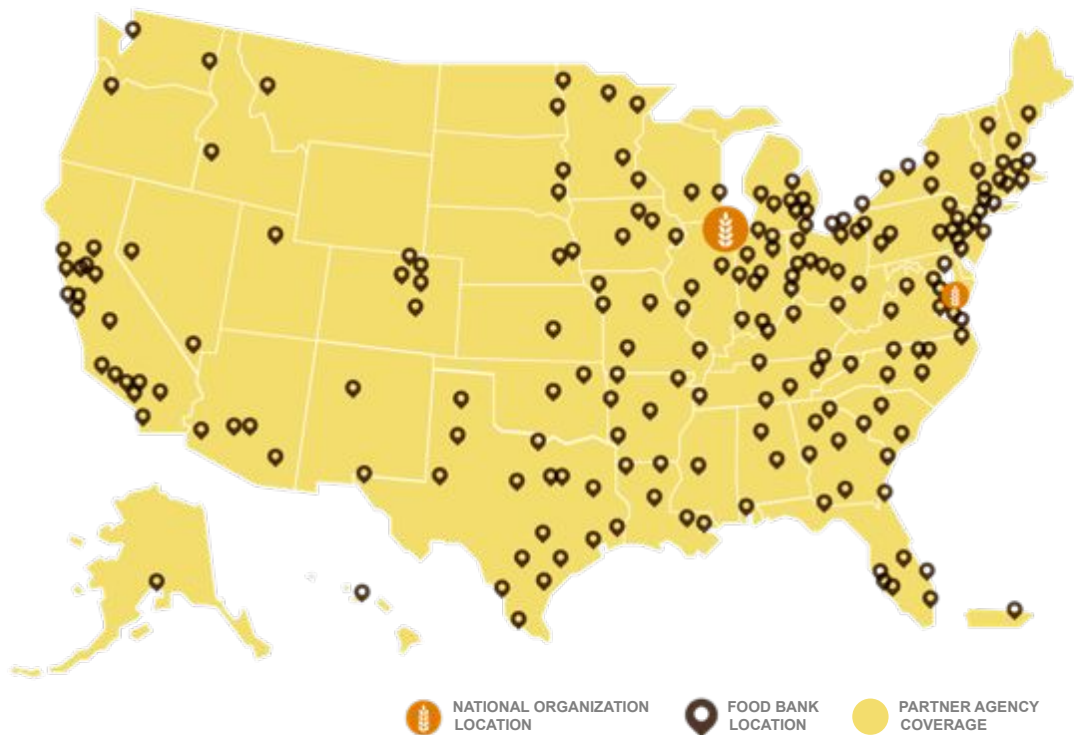


SOUTH CAROLINA



The Feeding America Network

FEEDING AMERICA



NATIONAL ORGANIZATION



National vision
focused on local
needs



Innovative,
visionary
leadership



Leverages
national
partnerships



Trusted
expert and
convener

FOOD BANK NETWORK



Reaches
every
county

60K

Pantries
and meal programs



Regional and
local authority on
hunger relief



Connects to
millions of
volunteers

Nutritious Food Helps Everyone Thrive

91%

of neighbors surveyed agreed that
“food is medicine,” and you will feel
better physically, emotionally
and mentally if you have regular
access to healthy foods



Efforts Across Our Network

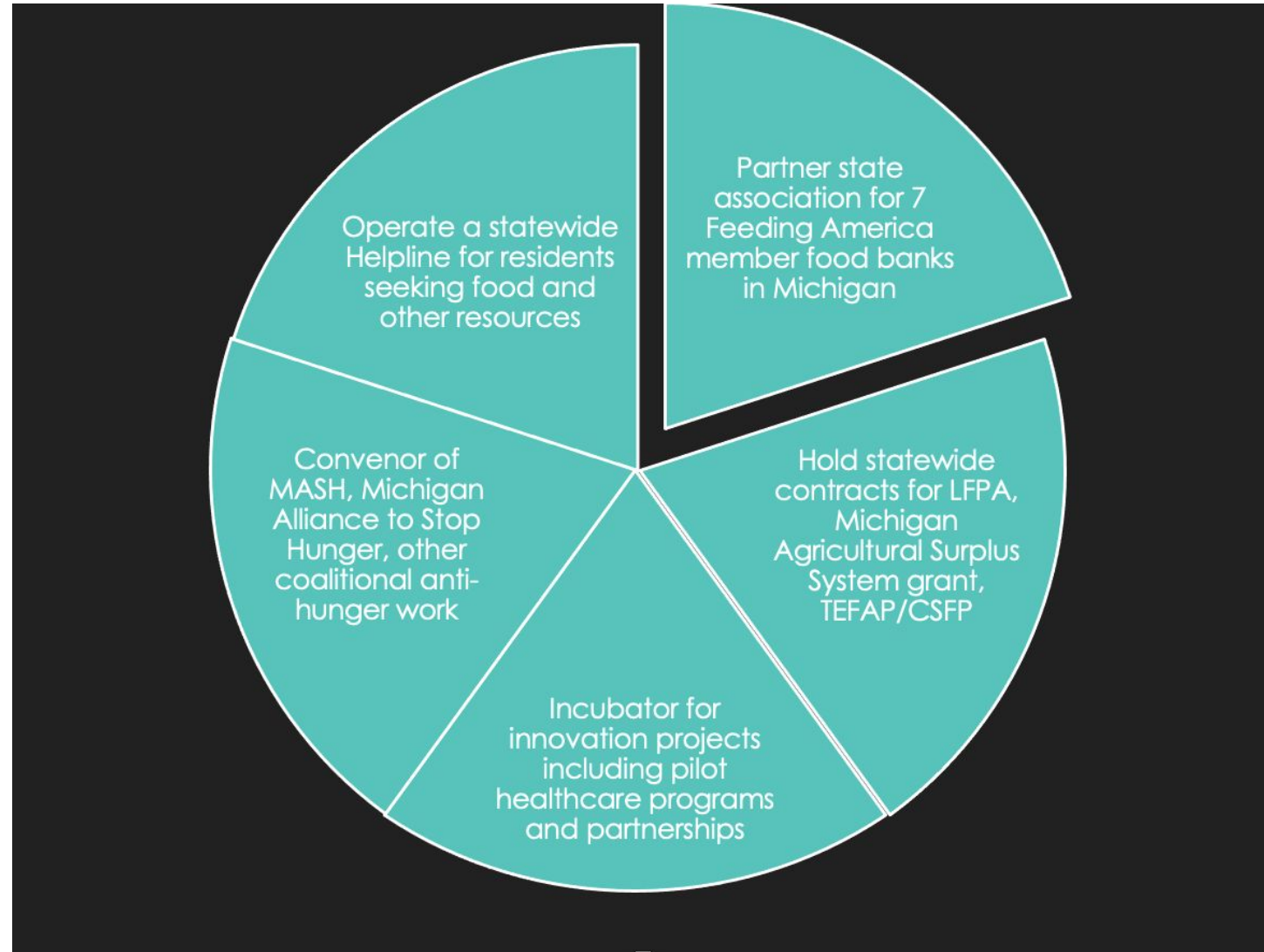
- Over 80% of the network engaged in health care partnerships.
- About 50% of the network engages in food insecurity screening and referrals with their healthcare partners.
- Over 80% of the network engages in SNAP outreach.
- 115 food banks have implemented HER Nutrition Guidelines.



Food Bank Council of Michigan



Food Bank Council of MI as Anti-Hunger Organization





REQUEST FOR INFORMATION

Michigan's Comprehensive Health Care Program: Proposed In Lieu of Services to Cover Nutrition Services *March 2024*

In October 2023, the Michigan Department of Health and Human Services (MDHHS) launched a [competitive procurement](#) for Michigan's Medicaid Health Plans (MHPs). MDHHS seeks to deliver Michigan residents an equitable, coordinated and person-centered system of care that will ultimately provide a healthier future through this rebid process. The new MHP contracts start in October 2024.

In line with this overarching goal, MDHHS [embedded changes](#) in the new MHP contracts to strengthen Medicaid services provided to enrollees. Several of these changes seek to address social determinants of health through investment in and engagement with community-based organizations. The introduction of in lieu of services (ILOS) is one of these important changes and will allow MHPs to pay for nutrition services that have been shown to improve health.ⁱ MDHHS seeks public feedback through this Request for Information on a draft set of ILOS.

ILOS in MI

- optional set of benefits for “food and nutrition services”
- FBCM submitted response based on our networks’ collective experience in FAM
- FBCM also reviewed and provided input for several other partners’ responses, which led to creation of coalitions working on specific aspects of the policy implementation



Synopsis of Feedback

- A. Enrollee needs
- B. Potential eligible populations
- C. Statewide service availability
- D. CBO capacity
- E. TA needs



April 5, 2024

Director Elizabeth Hertel
333 South Grand Avenue
PO Box 30195
Lansing, Michigan 48909

Cc: Meghan Hodge-Groen, Senior Deputy Director, Behavioral and Physical Health and Aging Services Administration; Brad Barron, Director, Managed Care Plan Division; and Penny Rutledge, Director, Bureau of Medicaid Care Management and Customer Service

Dear Director Hertel:

The Food Bank Council of Michigan (FBCM) is delighted to respond to MDHHS' *Request for Information: Michigan's Comprehensive Health Care Program: Proposed In Lieu of Services (ILOS) to Cover Nutrition Services, March 2024*. FBCM applauds MDHHS' efforts to address the social determinants of health through investment in and engagement with community-based organizations (CBOs), and specifically, this opportunity for Michigan's Medicaid Health Plans (MHPs) to utilize ILOS to address members' food and nutrition needs.

FBCM is a 501(c)(3) partner state association of Feeding America, representing Michigan's seven Feeding America-member food banks in the state of Michigan (Gleaners Community Food Bank, Detroit; Forgotten Harvest, Oak Park; Food Gatherers, Ann Arbor; Greater Lansing Food Bank, Lansing; South Michigan Food Bank, Battle Creek; the Food Bank of Eastern Michigan, Flint; and Feeding America West Michigan; Comstock Park) and its statewide network of over 2000 distribution agencies. Each member food bank serves a geographic service area of the state in which they provide food resources to communities, and together, the network serves all 83 counties of the state of Michigan. FBCM holds statewide contracts with MDHHS and MDE, respectively, to purchase directly from Michigan farmers and distribute Michigan agricultural products statewide through the Michigan Agricultural Surplus Program (\$12M in FY24) and the USDA Local Food Purchasing Assistance Program (\$9M over FY22-25). FBCM also holds a statewide SNAP Outreach partnership agreement with MDHHS, which includes operating a Food and Other Resources Helpline, providing public benefits application assistance and resource referrals to clients statewide, and particularly serving those Michiganders experiencing specific access barriers such as older adults, individuals with disabilities, individuals in need of language interpretation services, BIPOC individuals, and families with children. In short, FBCM is experienced in distributing local food to Michiganders with low-income and works each day with Michigan residents for whom inequities in food and nutrition service are most profoundly experienced.

Suggestions-to-Policy Guidance

- ✓ Home delivery
- ✓ Definition of local
- ✓ Populations included
- ✓ Duration of intervention
- ✓ Model contract and pricing guidance
- ✓ Workflow guidance (templates)

Federation for VA Food Banks



Federation of Virginia Food Banks

Mission

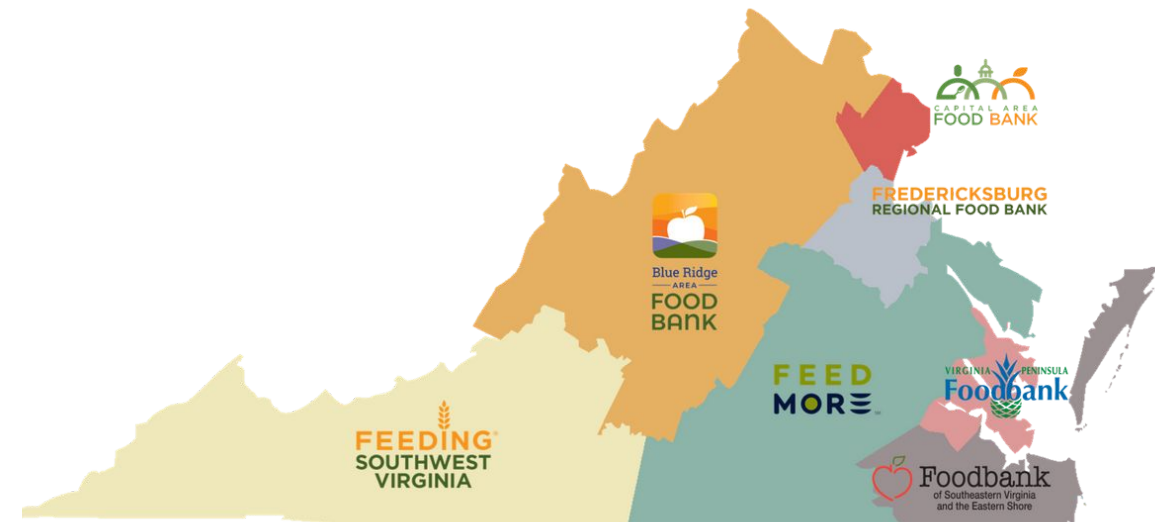
Facilitate statewide collaboration among Virginia's food banks, partners, and neighbors to improve nutrition security and empower strong, healthy communities.

Vision

A healthier, food secure Virginia.

Impact

- 700,000+ individuals served annually
- Through 2,000+ local distributing partners
- Reaching 100% of Virginia zip codes



VA Food Banks' Health Equity Plan

THE FEDERATION OF VIRGINIA FOOD BANKS AND ITS MEMBERS ARE COMMITTED TO ...

**Listening to
Neighbors**

listening to and learning from their neighbors to direct their collective efforts.

**Embedding
Health
Equity**

embedding health equity values, initiatives, and measurements into their strategic plans.

**Strengthening
Health
Partnerships**

being reliable, competent and trusted partners to support health equity.

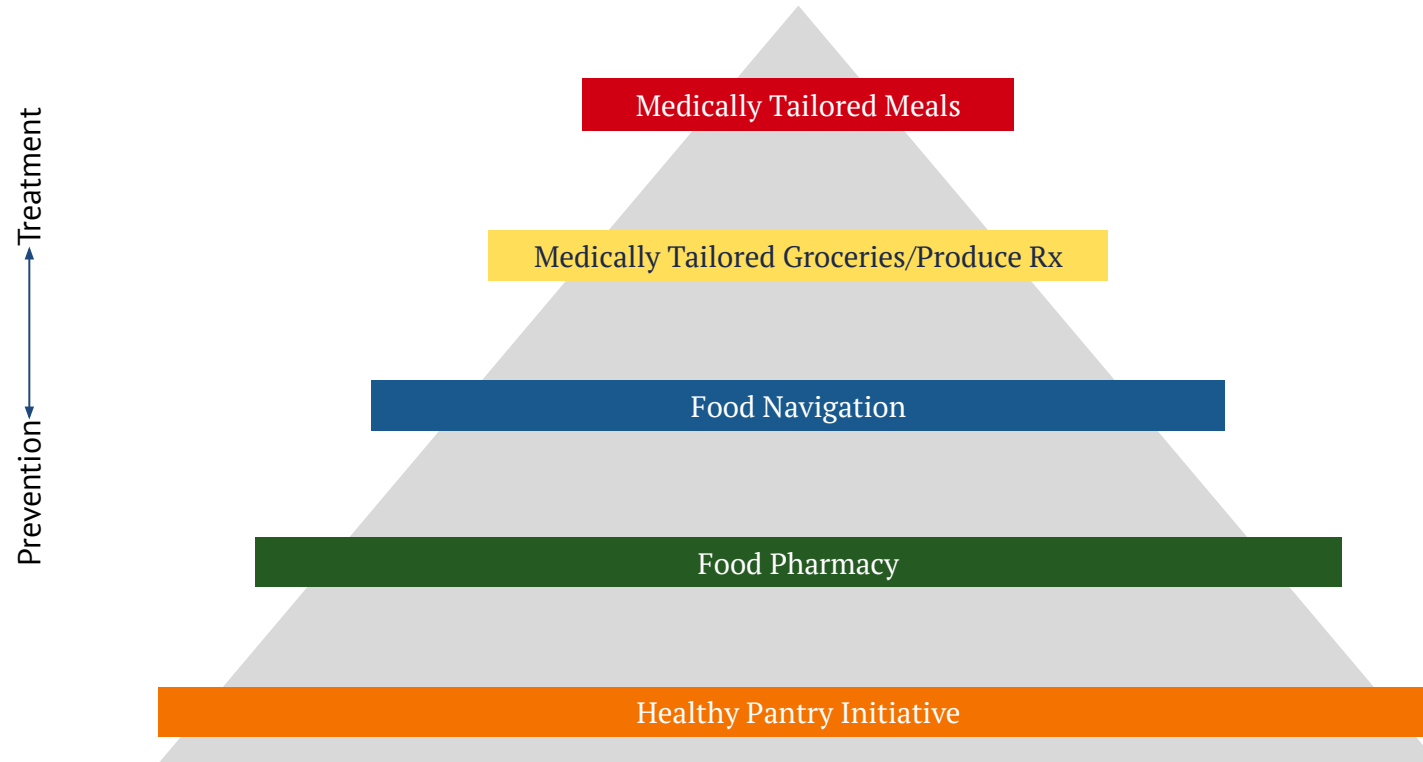
**Growing
Network
Capacity**

developing organizational and network capacity to ensure equitable access to healthy food across Virginia.

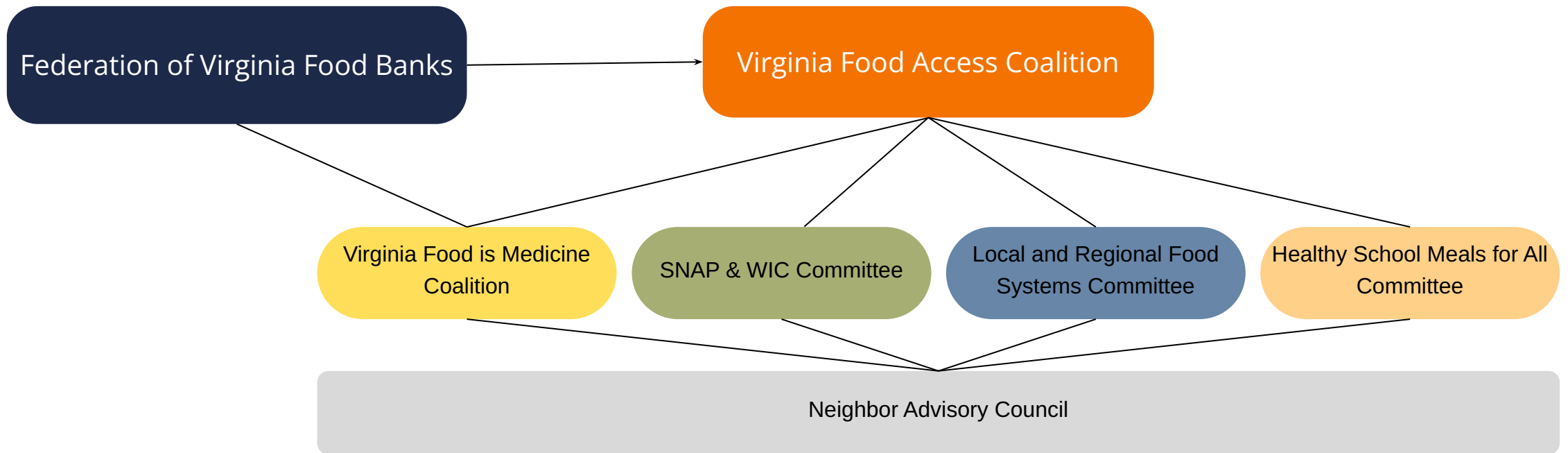


FEDERATION OF
VIRGINIA FOOD BANKS

Food Bank Food is Medicine Offerings



Food Access Advocates in Virginia



FIM Coalition



Aetna Better Health® of Virginia



Food is Medicine Advocacy Timeline

Phase 1: Building the Foundation

January 2023

Federal guidance clarified ILOS authority can be used for health-related social needs

July 2023

Contracted with State Health Partners for Medicaid technical assistance. Virginia Medicaid merges 2 managed care programs - Medallion and CCC+ into Cardinal Care

August 2023

DMAS issued Cardinal Care RFP requiring MCOs to address health-related social needs (specifically mentioning nutrition) and prompting MCOs to submit proposals for ILOS

October 2023

Virginia Food is Medicine Coalition formed; drafted and submitted a Governor's budget request to seek federal authority to amend an existing 1115 waiver to include food and nutrition.

Food is Medicine Advocacy Timeline

Phase 2: Strategic Adaptation

December 2023

Initial request not included in Governor's budget, first meeting with DMAS

July 2023

Developed alternative budget language for ILOS and a feasibility study for amending an existing 1115 and/or 1915c waiver

February 2024

Language introduced in House and Senate. DMAS attached a fiscal impact to House version. We removed the mention of developing an ILOS benefit from the language and kept feasibility study to lessen perceived administrative cost burden. Budget amendments did not pass.

Item 288 #64h

First Year - FY2025

Second Year - FY2026

Health and Human Resources

Department of Medical Assistance Services

\$419,323

\$169,323

GF

\$419,323

\$169,323

NGF

1.00

1.00

FTE

Food is Medicine Advocacy Timeline

Phase 3: The Pivot

September -
October 2024

Pivoted strategy to focus more narrowly on pregnant/postpartum population, solely via ILOS. Developed targeted ILOS language for pregnant/postpartum Medicaid members.

Key factors driving pivot:

- DMAS identified pregnant women as priority population - Political viability improved with maternal health focus
- Verified w/ DMAS that ILOS required only budget authority, no direct appropriations
- Administrative feasibility enhanced with "streamlined" requirements (<1.5% threshold)

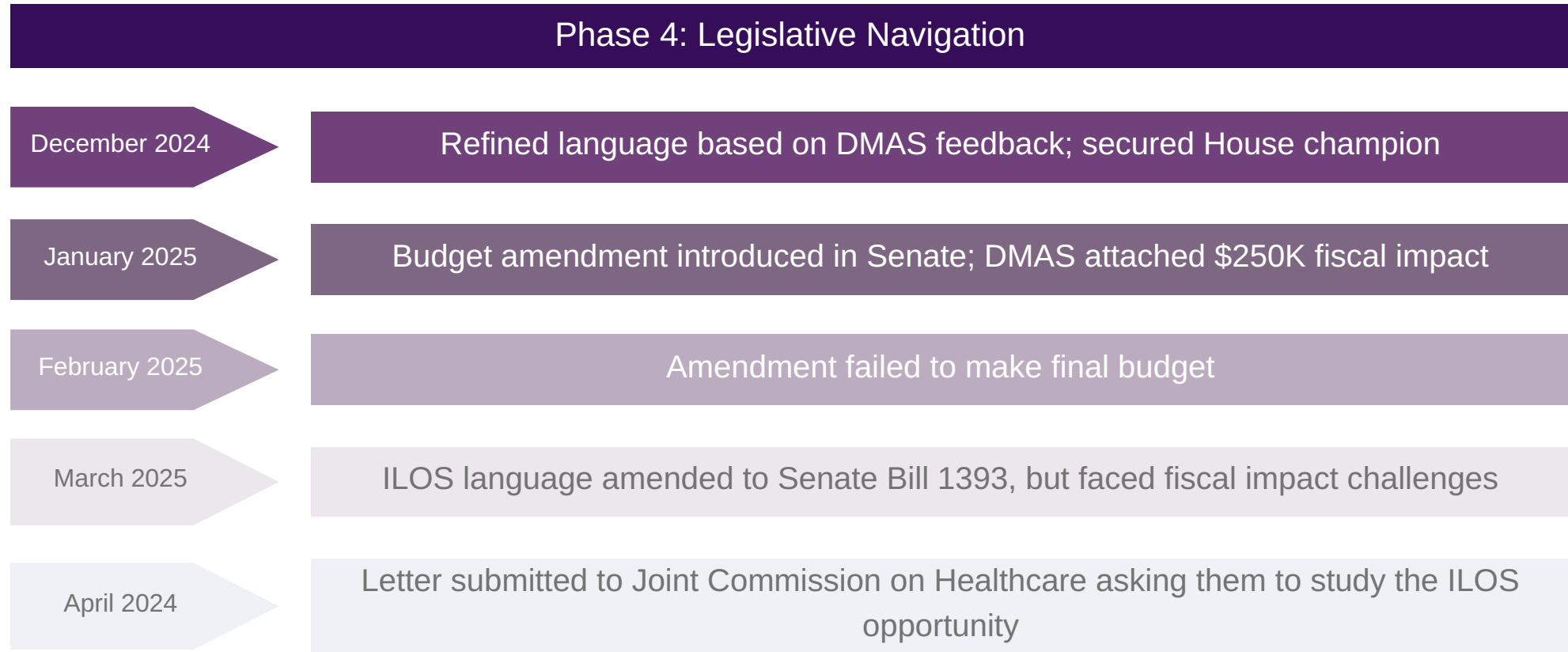
October 2024

Received DMAS feedback on technical requirements:

Need to specify services being replaced, indicate the need to demonstrate cost effectiveness, and clarify that ILOS is optional for MCOs



Food is Medicine Advocacy Timeline

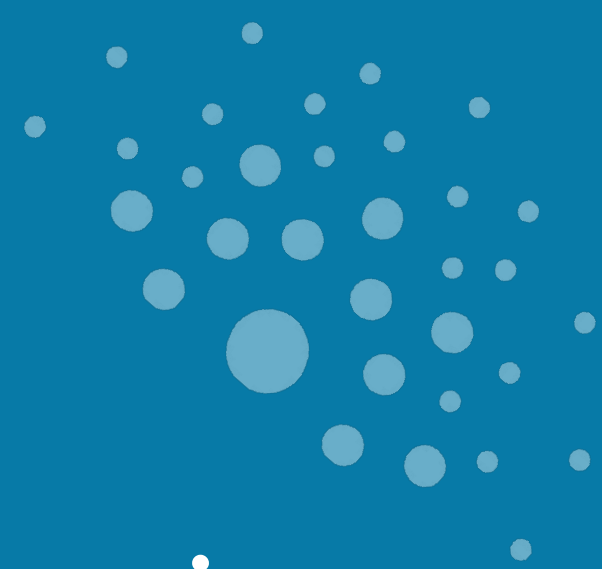


Key Lessons Learned

- Balance grassroots engagement with strategic adaptability
- Develop technical expertise in Medicaid authorities to establish credibility
- Apply lessons from other states while respecting your state's unique context
- Challenge assumptions and don't take parties or decision makers for granted
- Anticipate fiscal concerns and equip champions with specific counterarguments
- Don't underestimate the amount of education you have to do, and the right time to do so
- Establish and maintain Medicaid agency relationships at multiple levels

Next Steps

- Maintain coalition momentum through regular meetings and communication
- Deepen MCO relationships and expand existing FIM pilots
- Build Virginia-specific evidence base for FIM implementation
- Explore administrative advocacy alongside legislative approaches
- Keep Food is Medicine top of mind for state legislators. Monitor federal guidance to capitalize on emerging opportunities
- Create policy brief for incoming administration and cultivate relationships early
- Refine and proactively share cost-effectiveness narrative with legislators
- Educate key decision makers on ILOS and 1115 waiver mechanics
- Position FIM within broader health advocacy campaigns



Food is Medicine Landscape in Georgia

Kelcie Silvio, LMSW, MPH, Senior Policy Analyst

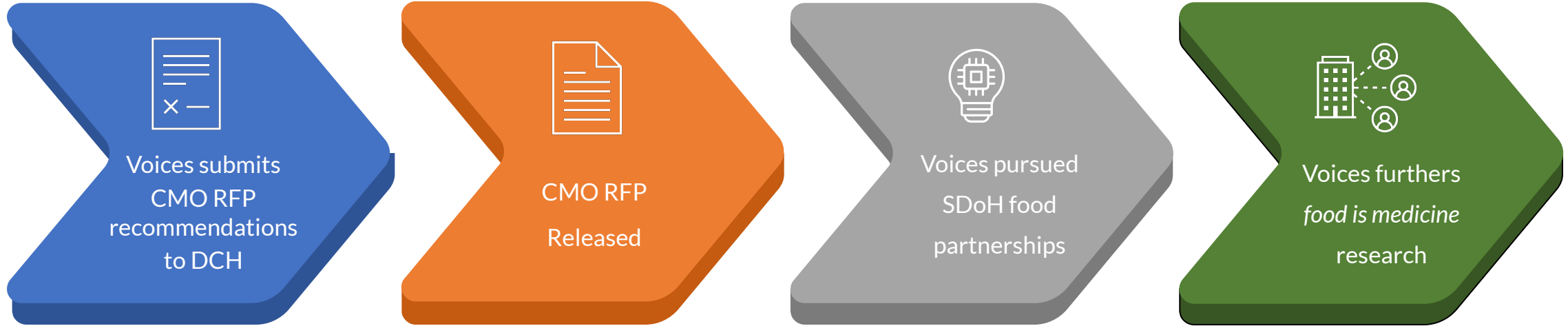
Voices for Georgia's Children



Educate. Convene. Influence.



INITIAL RESEARCH & BUY-IN



● **SPRING 2022**

Voices submitted CMO RFP SDoH feedback via the Continuous Program Improvement workgroup, RFI process, & letter to DCH commissioner

● **FALL 2023**

DCH released their RFP (which included Voices recs); internal Voices RFP analysis of SDoH components; due by potential CMOs
December 2023

● **SPRING 2024**

Voices identified & pursued funding / networking opportunities to support food in Medicaid initiatives

● **SUMMER 2024**

Voices engaged state and national partners to detail SDoH food opportunities within Medicaid programing

Educate. Convene. Influence.

RESEARCH AND ADVOCACY

RESEARCH

- ❖ National partner engagement (MFSN, CBPP)
- ❖ Multi-state conversations (CO, DE)
- ❖ Literature scan (peer reviewed, grey)

ADVOCACY

- ❖ Monthly meetings w. Medicaid & WIC, anti-hunger partners
- ❖ Memo to Medicaid Dir. & WIC Dir.
- ❖ Targeted conversations w. CMOs

IDENTIFIED OPPORTUNITIES

- ❑ **Data-sharing agreement** between Medicaid & WIC to support WIC enrollment and certification
- ❑ **Postpartum Box Pilot** to include wipes, diapers, & food supports as a benefit for new moms
- ❑ **CMO Proposal Language** such as food billing codes; food insecurity screenings & referrals / outcome tracking & reporting; WIC activities alignment

Educate. Convene. Influence.

ADVANCING INITIATIVES & OPPORTUNITIES

Data-Sharing Agreement

- Continuing to garner buy-in from WIC + Medicaid
- Researching best-practice contract language and gap-data opportunity

CMO Proposal Opportunities

- Reviewing awarded proposals for nutrition strategies
- Develop comprehensive strategies crosswalk; Prioritize opportunities crosswalk with DCH

Postpartum Pilot

- Develop eligibility, benefit, & billing protocols
- Finalize features, establish evaluation plan, & launch pilot

Educate. Convene. Influence.

CHALLENGES

CMOs

- Conflicting financial and programmatic priorities
- Lack of cross-team collaboration protocols and processes

Medicaid

- Federal uncertainty around Medicaid
- Bureaucratic red tape
- Contracting and legal timelines

WIC

- Staff capacity
- Conflicting department priorities
- Contracting and legal timelines

FACILITATORS

CMOs

- Existing pilots
- Leverage state Medicaid Quality Measures
- Trusted relationship with plan president

Medicaid

- New leadership / build relationships
- Federal WIC + Medicaid coordination guidance
- Federal SDoH guidance

WIC

- Longstanding, trusted relationship w/ WIC Dir.
- Statewide WIC Workgroup co-facilitators

Educate. Convene. Influence.

Q * A



THANK YOU

Your feedback is important to us, please take a moment to fill out our survey. The first 10 respondents get a \$10 e-gift card, and you can submit the survey multiple times if you think of more to share.

