1 A bill to be entitled 2 An act relating to Medicaid coverage for prescribed 3 foods for disease treatment and prevention; creating 4 s. 409.90203, F.S.; providing definitions; requiring 5 the Agency for Health Care Administration, in 6 conjunction with the Department of Health, to 7 establish the Food is Medicine Pilot Program to 8 provide Medicaid coverage for purchases and deliveries 9 of prescribed health-promoting foods under certain circumstances; requiring the agency, in conjunction 10 11 with the department, to seek federal approval and 12 waivers for the pilot program; requiring the federal 13 waiver application to seek matching funds; requiring 14 referrals of pilot program patients to certain federal 15 and federally funded programs; requiring allocation of 16 a portion of pilot program implementation budget to a specified organization for the establishment of a 17 18 specified center; providing operation requirements for 19 the center; providing reporting requirements; requiring the agency, in conjunction with the 20 21 department, to adopt rules; providing requirements for 22 the rules; providing an effective date. 23

Be It Enacted by the Legislature of the State of Florida:

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Section 1. Section 409.90203, Florida Statutes, is created to read:

409.90203 Food is Medicine Pilot Program; Medicaid coverage for pilot program providing medically precise nutrition, medically tailored meals, or produce prescriptions, with nutrition education and supports; federal approval and waivers; Florida Food is Medicine Center of Excellence.—

(1) As used in this section, the term:

- (a) "Center," unless the context clearly indicates
 otherwise, means the Florida Food is Medicine Center of
 Excellence established in this section by the Florida Health and
 Nutrition Coalition.
- (b) "Food is Medicine" means food-based interventions and services that include medically precise nutrition, medically tailored meals, or produce prescriptions, with nutrition education and specific supports provided to a person with a specific diet-related disease or chronic condition to effectively support healthful food and physical activity behavior change conducive to health and well-being while improving health outcomes and health care cost savings through the control and reversal of the disease or condition effects and the prevention of further disease or condition complications.
- (c) "Medically precise nutrition" means a medical
 nutrition groceries program provided to a Medicaid recipient
 through a prescription or referral from a physician licensed

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under chapter 458 or chapter 459, or through a referral from a clinic or hospital staff member, a licensed clinical social worker, a registered dietitian/nutritionist, or a health plan, for fresh and health-promoting groceries purchased and distributed with nutrition education and specific supports to produce positive health outcomes for a specific diet-related disease or chronic condition.

- 1. The medical nutrition groceries program must be in a protocol standard selected, reviewed, and approved by a registered dietitian or registered dietitian/nutritionist licensed under s. 468.513 as part of a 6-month intervention treatment program that follows the model of healthful food prescription programs supported by research conducted by the Gerald J. and Dorothy R. Friedman School of Nutrition Science and Policy at Tufts University and implemented by the nonprofit organization Living Hungry and that is certified by the Florida Food is Medicine Center of Excellence to meet the quality and cultural standards and the health standards for the specific disease or chronic condition.
- 2. The medical nutrition groceries program may include supports through behavioral health counseling, Food is Medicine functional medicine classes, anatomy of disease classes, cooking classes, gym or exercise classes, weekly menus and shopping lists, grocery store tours, and motivational habit change supports such as peer mentoring and health coaching in a

protocol designed for a Medicaid recipient with a specific dietrelated disease or chronic condition to effectively control or reverse the disease or condition effects and prevent further disease or condition complications.

3. The health-promoting groceries under the medical nutrition groceries program may be:

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- a. Picked up at the health plan facility or clinic or at an event organized by a community-based organization or by an entity under contract with the program such as a grocery store; or
- b. Delivered to the residence of the Medicaid recipient by the program or by an entity under contract with the program.
 - 4. The medical nutrition groceries program:
- a. May include healthful recipes and healthfully prepared ingredients, herbs, spices, and sauces.
- b. May include at-home laboratory tests, supplements, monitoring supplies, and telehealth components.
 - c. Must include nutrition education.
- d. Must include a program evaluation to report health outcomes, including, but not limited to, biomarkers, nutrition security assessments, and healthful eating and behavior change surveys before and after the use of the program to evaluate the program's effectiveness.
- (d) "Medically tailored meals" means a medical meal plan program provided to a Medicaid recipient through a prescription

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or referral from a physician licensed under chapter 458 or chapter 459, or through a referral from a clinic or hospital staff member, a licensed clinical social worker, a registered dietitian or registered dietitian/nutritionist, or a health plan, for meals purchased and distributed with nutrition education and support to produce positive health outcomes for a person with a specific diet-related disease or chronic condition. The medical meal plan program must be designed, reviewed, and approved by a registered dietitian or registered dietitian/nutritionist licensed under s. 468.513 to reflect appropriate medical nutrition therapy based on evidence-based practice guidelines for the specific diet-related disease or chronic condition that requires the prescription or referral. 1. The meals under the medical meal plan program must be fully prepared by a Medicaid provider or by a person, entity, or community-based organization under contract with a Medicaid managed care organization or with a Medicaid provider and must be certified by the Florida Food is Medicine Center of Excellence to meet the quality and cultural standards and health standards for the specific disease or chronic condition. The meals may be: a. Picked up at the health plan facility or clinic or at an event organized by a community-based organization or by an

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entity under contract with the program such as a restaurant or

grocery store; or

b. Delivered to the residence of the Medicaid recipient by the program or by an entity under contract with the program.

2. The medical meal plan program:

- a. May include healthful recipes and healthfully prepared ingredients, herbs, spices, and sauces.
- b. May include at-home laboratory tests, supplements, monitoring supplies, and telehealth components.
 - c. Must include nutrition education.
- d. Must include a program evaluation to report health outcomes, including, but not limited to, biomarkers, nutrition security assessments, and healthful eating and behavior change surveys before and after the use of the program to evaluate the program's effectiveness.
- (e) "Nutrition education" means a validated course and series of nutrition education classes in a 6-month intervention program such as the Expanded Food and Nutrition Education

 Program, a research-based nutrition education program funded by the United States Department of Agriculture which teaches participants to grocery shop and plan and cook nutritious meals through lessons given by in-language, in-culture paraprofessionals and other educators from the Extension Family and Consumer Sciences programs of the University of Florida Institute of Food and Agricultural Sciences (UF/IFAS), with sites in multiple counties across the state. The term also includes surveys before and after the classes to measure habit

changes and evaluate applications of nutrition education among Florida residents, especially among populations that endure a disproportionate share of food insecurity.

(f) "Pilot program" means the Food is Medicine Pilot Program established in this section.

- g) "Produce prescription" means a program that is provided through a prescription or referral from a physician licensed under chapter 458 or chapter 459, or through a referral from a clinic or hospital staff member, a licensed clinical social worker, a registered dietitian or registered dietitian/nutritionist, or a health plan, to a Medicaid recipient who has or is at risk of a specific diet-related disease or chronic condition such as diabetes, coronary artery disease, cancer, obesity, renal disease, celiac disease, asthma, or dementia, to purchase produce at no cost or low cost using a technology-enabled application such as About Fresh; a coupon; a voucher; a debit card; a digital currency; or other means of storing value to be redeemed for purchasing fresh or frozen produce.
- 1.a. The technology-enabled application, coupon, voucher, debit card, digital currency, or other means of storing value may be redeemed at a farm store, farm packing house, mobile farmers' market, market as defined in s. 414.456(1), or community-based organization site; or
 - b. The produce may be delivered to the residence of the

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Medicaid recipient or distributed through a market or store or through a Medicaid provider or health plan facility or clinic.

- 2. The program must be in a protocol standard selected, reviewed, and approved by a registered dietitian/nutritionist licensed under s. 468.513 as part of an intervention program that may include medical nutritional therapy by a registered dietitian/nutritionist, behavioral health counseling, Food is Medicine functional medicine classes, anatomy of disease classes, cooking classes, gym or exercise classes, weekly menus and shopping lists, grocery store tours, and habit change supports such as peer mentoring and health coaching designed for a Medicaid recipient with a specific diet-related disease or chronic condition to effectively control and reverse the disease or condition effects and prevent the disease or condition complications. The program:
- <u>a.</u> May include healthful recipes and healthfully prepared ingredients, herbs, spices, and sauces.
- b. May include at-home laboratory tests, supplements, monitoring supplies, and telehealth components.
 - c. Must include nutrition education.
- d. Must include a program evaluation to report health outcomes, including, but not limited to, biomarkers, nutrition security assessments, and healthful eating and behavior change surveys before and after the use of the program to evaluate the program's effectiveness.

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(h) "Program evaluation" means an annual evaluation of a
state Medicaid-funded program that uses medically precise
nutrition, medically tailored meals, or produce prescriptions.
These evaluations assess fidelity of program implementation and
overall program effectiveness, as well as health biomarker
outcomes, nutrition intake, health equity, healthful habit
adoption, and food insecurity. The annual evaluation:
1. May either be funded by the agency and conducted by
UF/IFAS Food is Medicine evaluators or be a component of the
program's implementation budget.

- 2. Is reported to the agency and the Legislature.
- (2) By July 1, 2025, the agency, in conjunction with the Department of Health, shall:
- (a) Establish the Food is Medicine Pilot Program to provide Medicaid coverage for purchases and deliveries of prescribed healthful foods in disease-specific protocols through programs that use medically precise nutrition, medically tailored meals, or produce prescriptions to meet the specific needs of Medicaid recipients who have or are at risk of a specific diet-related disease or chronic condition and who are high-need patients or patients with high-cost patient care or with the highest health care expenditures. The pilot program shall serve to establish the impact of healthful foods on health outcomes of Medicaid recipients and the cost-effectiveness of such practices.

226	(b)	Seek:
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- 1. The pilot program's approval by the United States

 Secretary of Health and Human Services under s. 1115 of the

 Social Security Act, which gives the secretary the authority to approve, for an initial 5-year period, experimental, pilot, or demonstration projects that are likely to assist in promoting the objectives of the Medicaid program.
- 2. Any federal waivers necessary for the implementation of the pilot program, including any waivers necessary to obtain federal finances to secure Title XIX matching funds for the pilot program. The federal waiver application shall seek Medicaid matching funds for all general revenue, family contributions, and local contributions.
- (c) Require UF/IFAS nutrition education providers or other nutrition educators to refer the pilot program patients to the federal Supplemental Nutrition Assistance Program, the Temporary Assistance for Needy Families, and the Special Supplemental Nutrition Program for Women, Infants, and Children to meet the Centers for Medicare and Medicaid Services financial directive for Medicaid waiver for the pilot program.
- (d) Provide a portion of the pilot program implementation budget, not to exceed 15 percent of the overall funds expended for the pilot program, to the Florida Health and Nutrition Coalition, a nonprofit corporation and coalition of Food is Medicine stakeholders in this state, to establish a network

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251	model center hub formed after the national best practices of the
252	United States Department of Agriculture Gus Schumacher Nutrition
253	Incentive Program and the National Institutes of Health. The
254	center hub established by the coalition shall be called the
255	Florida Food is Medicine Center of Excellence.
256	(3)(a) The Florida Health and Nutrition Coalition shall
257	operate the Florida Food is Medicine Center of Excellence as an
258	online, Florida-based research and expertise repository by
259	accumulating data in the following areas:
260	1. Research.
261	2. Provision of services and activities such as referrals,
262	food sourcing, and logistics.
263	3. Community outreach and engagement.
264	4. Education and training.
265	5. Coverage for services such as billing and fulfillment
266	of patients' needs.
267	6. Health disparities.
268	(b) The center, in collaboration with UF/IFAS Food is
269	Medicine evaluators, shall:
270	1. Inform program operators during the pilot program
271	implementation.
272	2. Disseminate findings throughout this state and
273	nationally through the center's stakeholder network.
274	3. Include in-language and in-culture Food is Medicine
275	activities for Florida residents.

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276	(c) The center shall report its research literature,
277	validated program models, operational planning frameworks,
278	nutrition standards, and strategies and tactics for effective
279	program activities to the agency and the United States
280	Department of Agriculture, the National Institutes of Health,
281	and the Centers for Disease Control and Prevention.
282	(4) The agency, in collaboration with the center and
283	UF/IFAS, shall file an annual compilation report with the
284	Legislature on the pilot program, the reduction of food
285	insecurity, health outcome improvements and savings from the
286	enrolled high-need patients and patients with high-cost patient
287	care, and advances in health equity.
288	(5) The agency, in conjunction with the Department of
289	Health, shall adopt rules to implement and administer this
290	section, including, but not limited to, rules relating to:
291	(a) The quality standard and quantity and the number of
292	medically tailored meals delivered per week to a Medicaid
293	recipient.
294	(b) The funds allowed per Medicaid recipient for medically
295	precise nutrition, medically tailored meals, and produce
296	prescriptions.
297	(c) Notification to Medicaid providers and Medicaid
298	recipients of the availability of and requirements for medically
299	precise nutrition, medically tailored meals, and produce

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CODING: Words stricken are deletions; words underlined are additions.

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prescriptions.

301	(d) The funds and model for evaluations for UF/IFAS Food
302	is Medicine evaluators.
303	(e) The funds and model for the best-practices information
304	repository hub and stakeholder network at the Florida Food is
305	Medicine Center of Excellence.
306	(f) Methodology for reimbursing Medicaid providers and
307	other managed care organizations and health plans for products,
308	events, services, classes, or activities provided under the
309	pilot program by the providers, organizations, and plans that
310	use medically precise nutrition, medically tailored meals, or
311	produce prescriptions.
312	Section 2. This act shall take effect July 1, 2024.