July 10, 2024

The Honorable Tammy Baldwin Chair, Senate Subcommittee on Labor, Health, and Human Services 141 Hart Senate Office Building Washington, DC 20510

The Honorable Shelley Moore Capito Vice Chair, Senate Subcommittee on Labor, Health, and Human Services 172 Russell Senate Office Building Washington, DC 20510 The Honorable Robert Aderholt Chair, House Subcommittee on Labor, Health, and Human Services 266 Cannon House Office Building Washington, DC 20515

The Honorable Rosa DeLauro
Ranking Member, House Subcommittee on
Labor, Health, and Human Services
2413 Rayburn House Office Building
Washington, DC 20515

Dear Chairwoman Baldwin, Chairman Aderholt, Vice Chair Capito, and Ranking Member DeLauro:

As you work to complete the FY 2025 Labor, Health and Human Services, Education, and Related Agencies appropriations bill, we write to respectfully request that the subcommittee provide robust funding and include language to better integrate nutrition into our health care system. This letter's 81 signatories represent organizations collectively employing more than 767,000 Americans and totaling more than \$320 billion in annual U.S. revenue and/or budgets. The signatories reflect multiple sectors and types of organizations including academia, anti-hunger, consumer advocacy, health care, health care professional associations, food production and manufacturing, food retail, life insurance, meal providers, non-profit, pharmacies, public health, research, and technology, and come from at least 24 U.S. states<sup>2</sup> and Washington, DC (see appendix of signatories by state).

In the United States, <u>poor diets</u> are estimated to cause more than 500,000 deaths each year and are the top driver of poor health outcomes. Our country's rates of diet-related chronic diseases are high: for example, 7 in 10 adults have <u>overweight or obesity</u>, 1 in 2 have <u>diabetes or prediabetes</u>, and 14 in 15 have <u>suboptimal cardiometabolic health</u>. Diet-related chronic diseases create enormous economic challenges for American businesses, families, and individuals through rising healthcare premiums, out-of-pocket-costs, missed work, and lower productivity. The yearly combined U.S. healthcare spending and lost productivity from poor diets is estimated at <u>\$1.1 trillion each year</u>. Diet-related illness is also a matter of national security: nearly 8 in 10 U.S. young adults aged 17-24 <u>do not qualify for military service</u>, with excess weight as the leading medical disqualifier.

Congress has an opportunity to improve health and lower health care costs by directing federal resources to better integrate nutrition into our health care system; specifically, by advancing nutrition science as well as food is medicine efforts.

Food is medicine (FIM) interventions reflect the critical link between nutrition and health, integrated into health care delivery. These include programs that provide nutritionally tailored meals, groceries, and produce to support disease management, prevention, or optimal health and are linked to the health care system as part of a patient's treatment plan. Evidence suggests that medically tailored

<sup>&</sup>lt;sup>1</sup> Data reflecting number of employees and annual revenue and/or budget for listed signatories are not 100% complete as they reflect data retrieved from <a href="https://www.guidestar.org/">https://pitchbook.com/</a>, and individual organizational websites, as available.

<sup>&</sup>lt;sup>2</sup> AR, AZ, CA, CO, CT, DE, FL, ID, IL, IN, MA, MD, MI, MN, MO, NJ, NY, OH, OK, PA, SC, TX, VA, and WI

meals (MTMs) in high-risk, high health care-utilization patients may be <u>cost-saving</u>, and produce prescriptions in more general patients with diet-related conditions may be highly <u>cost-effective</u> (or cost-saving from a societal perspective).

Congress should make the following targeted investments in food is medicine:

1. Programmatic request for the National Institutes of Health, Office of the Director:

Meaningfully increase funding for the Office of Nutrition Research (ONR) at the National Institutes of Health (NIH) to support continued work on the 2020-2030 Strategic Plan for NIH Nutrition Research and the Food is Medicine Networks or Centers of Excellence. A 2019 NIH analysis compared the amount of dedicated NIH prevention research funding for risk factors of death and disability, and concluded that large gaps exist between the top causes of poor health and the research funding allocated to address them—with poor nutrition at the top. Despite this conclusion, and while rates of diet-related disease and associated health care spending continue to rise, funding levels for nutrition research and training (as a percentage of total NIH spending) have been flat at approximately 5% since FY 2015. Exciting scientific breakthroughs are on the horizon, but robust investment in federal nutrition research is critical to allow our nation to pursue exciting new fundamental, clinical, and translational discoveries to address these problems.

2. Programmatic request for the Office of the Secretary, General Departmental Management:

Increase General Departmental Management by \$5 million over the President's Budget Request to support the Department's ongoing Food is Medicine work.

3. Report language for the Office of the Secretary, General Departmental Management:

The bill includes \$5 million within General Departmental Management to maintain support for ongoing efforts in the Office of Assistant Secretary for Health for the *Food is Medicine: A Project to Unify and Advance Collective Action* project. This funding should be dedicated to continuing to implement a federal strategy to reduce nutrition-related chronic disease and food insecurity to equitably improve health. With this funding, the committee encourages the Assistant Secretary to work with federal partners and external organizations and communities nationwide to further develop and disseminate resources, guidance, and tools to advance Food is Medicine initiatives across the country, such as efforts to encourage screening for food and nutrition security across health care.

4. Report language for Department of Health and Human Services, Office of the Secretary:

Medically Tailored Meals and Produce Prescriptions: The Committee recognizes the importance of medically tailored meals (MTMs) and produce prescription programs. MTMs are home-delivered meals tailored for patients living with severe, complex, and chronic illnesses. Patients are identified by a medical professional or health care plan, and a Registered Dietitian Nutritionist customizes the meals to the patient's nutritional and medical needs. Produce prescriptions programs are a medical treatment or preventative service for individuals who have diet-related health risks or conditions, food insecurity, or other documented access challenges to nutritious foods, and are referred by a healthcare provider or health insurance plan. These prescriptions are fulfilled through food retail or home

delivery and enable patients to access healthy produce with no added fats, sugars, or salt, at low or no cost to the patient. The Committee directs the Secretary to look across the Department to identify programs that could allow coverage for MTMs and Produce Prescriptions. The Committee encourages the Department to expand access to coverage of MTMs and Produce Prescriptions in the identified programs.

5. Report language for the Department of Health and Human Services, Office of the Secretary

Nutrition Education for Doctors: The Committee is aware that in the United States today, poor diets are the leading cause of death and disability, as nutrition has strong ties to illnesses such as heart disease, stroke, cancer, and diabetes. Yet on average, medical schools provide only 19 hours of nutrition education throughout a student's four years of schooling, and nutrition-related competencies are limited or absent from most medical specialties in graduate medical education. Therefore, the Committee encourages the Department to pursue all opportunities to encourage medical accrediting bodies such as the Accreditation Council for Graduate Medical Education, the Association of American Medical Colleges, the American Association of Continuing Medical Education (CME), and state CME organizations, to incorporate nutrition competencies into their training requirements and to report back to the Committees within 180 days on planned activities.

We appreciate your consideration of these requests to better integrate nutrition into health care. These sensible, evidence-based strategies can improve the health of the nation, making the country stronger and more competitive and reducing the human and economic burden of chronic disease for all Americans.

Sincerely,

Food is Medicine Institute, Tufts University

Boston, MA

About Fresh, Inc. Boston, MA

Academy of Nutrition and Dietetics Chicago, IL

American College of Lifestyle Medicine Chesterfield. MO

American Public Health Association Washington, DC

American Society for Nutrition Rockville, MD

Association of State Public Health Nutritionists Tucson, AZ Azuluna

Woodstock, CT

Brightseed, Inc.

South San Francisco, CA

Center for Health Law and Policy Innovation

of Harvard Law School

Cambridge, MA

Center for Science in the Public Interest

Washington, DC

Ceres Community Project North San Francisco, CA

Children's Hospital of Philadelphia

Philadelphia, PA

ChristianaCare Wilmington, DE Community Servings Jamaica Plain, MA

Connecticut Food Association

West Harford, CT

DC Greens Washington, DC

**Defeat Malnutrition Today** 

Washington, DC

Devoted Health, Inc. Waltham, MA

EatWell

Brookline, MA

Fair Food Network

Detroit, MI

FARE (Food Allergy Research and Education)

McLean, VA

First Focus on Children

Washington, DC

Florida Health and Nutrition Coalition

West Palm Beach, FL

FMI - The Food Industry Association

Arlington, VA

Food Industry Alliance of NYS, Inc.

Albany, NY

Food is Medicine Coalition

Nationwide

FoodMed Certified by Validation Institute

Needham, MA

**GA Foods** 

St. Petersburg, FL

George Washington University Office of

Integrative Medicine & Health

Washington, DC

Global Salmon Initiative

Global

Growers for Grace PBC

Aiken, SC

Healthcare Nutrition Council

Washington, DC

HumanCo New York, NY

Hunger Free America

New York, NY

Hungry Harvest Baltimore, MD

Idaho Hunger Relief Task Force

Boise, ID

Indian Society of Parenteral and Enteral

Nutrition Chennai, India

Indiana Retail Council

Indianapolis, IN

Instacart

San Francisco, CA

International Fresh Produce Association

Newark, DE

January AI

Menlo Park, CA

John Hancock

Boston, MA

Lipton Teas and Infusions

Englewood Cliffs, NJ

LiveWell Greenville

Greenville, SC

Live Healthy Spartanburg

Spartanburg, SC

Living Hungry, Inc. Delray Beach, FL

Lowcountry Street Grocery Charleston, SC

McCormick Science Institute Cockeysville, MD

Meals on Wheels California San Francisco, CA Michigan Farmers Market Association East Lansing, MI

Minnesota Grocers Association St. Paul, MN

Missouri Retailers Association Jefferson City, MO

National Association of Chain Drug Stores (NACDS) Arlington, VA

National Association of Nutrition and Aging Services Programs (NANASP) Washington, DC

National Association of Pediatric Nurse Practitioners New York, NY

National Produce Prescription Collaborative Washington, DC

North American Blueberry Council Folsom, CA

Ocean Spray Cranberries, Inc. Lakeville-Middleboro, MA

Oklahoma Grocers Association Oklahoma City, OK

Pennsylvania Food Merchants Association Camp Hill, PA

PepsiCo Purchase, NY Public Health Institute's Center for Wellness and Nutrition Sacramento, CA

San Diego State University San Diego, CA

Seafood Nutrition Partnership Arlington, VA

Season Health Austin, TX

Simply Good Foods Denver, CO

Society of Behavioral Medicine Milwaukee, WI

Spartanburg Regional Healthcare System Spartanburg, SC

Step One Foods Eden Prairie, MN

Teens for Food Justice New York, NY

Territory Foods Arlington, VA

The Alliance for a Hunger Free New York/The Food Pantries for the Capital District/NYS FAM Coalition
Albany, NY

The Community Grocer (TCG Groceries) Philadelphia, PA

The Greater Boston Food Bank Boston, MA

The Kroger Co. Cincinnati, OH

Unilever United States Englewood Cliffs, NY Union of Concerned Scientists Cambridge, MA

University of Florida Institute for Food and Agricultural Sciences Gainesville, FL Well Fed Little Rock, AR

Wholesome Wave Bridgeport, CT

#### APPENDIX: SIGNATORIES BY STATE

# **Arkansas**

• Well Fed

# Arizona

• Association of State Public Health Nutritionists

# California

- Brightseed, Inc.
- Ceres Community Project
- Instacart
- January AI
- Meals on Wheels California
- Public Health Institute's Center for Wellness and Nutrition
- San Diego State University

## Colorado

- North American Blueberry Council
- Simply Good Foods

## Connecticut

- Azuluna
- Connecticut Food Association
- Wholesome Wave

# Delaware

- ChristianaCare
- International Fresh Produce Association

# Florida

- Florida Health and Nutrition Coalition
- GA Foods
- Living Hungry, Inc.
- University of Florida Institute for Food and Agricultural Sciences

#### Idaho

Idaho Hunger Relief Task Force

#### Illinois

Academy of Nutrition and Dietetics

# <u>Indiana</u>

• Indiana Retail Council

# Massachusetts

- About Fresh, Inc.
- Center for Health Law and Policy Innovation of Harvard Law School
- Community Servings

#### APPENDIX: SIGNATORIES BY STATE

- Devoted Health, Inc.
- EatWell
- Food is Medicine Institute, Tufts University
- FoodMed Certified by Validation Institute
- John Hancock
- Ocean Spray Cranberries, Inc.
- The Greater Boston Food Bank
- Union of Concerned Scientists

#### Maryland

- American Society for Nutrition
- Hungry Harvest
- McCormick Science Institute

### <u>Michigan</u>

- Fair Food Network
- Michigan Farmers Market Association

## Minnesota

- Minnesota Grocers Association
- Step One Foods

#### Missouri

- American College of Lifestyle Medicine
- Missouri Retailers Association

## New Jersey

- Lipton Teas and Infusions
- Unilever United States

# New York

- Food Industry Alliance of NYS, Inc.
- HumanCo
- Hunger Free America
- National Association of Pediatric Nurse Practitioners
- PepsiCo
- Teens for Food Justice
- The Alliance for a Hunger Free New York/The Food Pantries for the Capital District/NYS FAM Coalition

#### Ohio

• The Kroger Co.

### Oklahoma

• Oklahoma Grocers Association

# Pennsylvania

#### APPENDIX: SIGNATORIES BY STATE

- Children's Hospital of Philadelphia
- Pennsylvania Food Merchants Association
- The Community Grocer (TCG Groceries)

#### South Carolina

- Growers for Grace PBC
- LiveWell Greenville
- Live Healthy Spartanburg
- Lowcountry Street Grocery
- Spartanburg Regional Healthcare System

## **Texas**

Season Health

# <u>Virginia</u>

- FARE (Food Allergy Research and Education)
- FMI The Food Industry Association
- National Association of Chain Drug Stores (NACDS)
- Seafood Nutrition Partnership
- Territory Foods

# Wisconsin

• Society of Behavioral Medicine

## Washington, DC

- American Public Health Association
- Center for Science in the Public Interest
- DC Greens
- Defeat Malnutrition Today
- First Focus on Children
- George Washington University Office of Integrative Medicine & Health
- Healthcare Nutrition Council
- National Association of Nutrition and Aging Services Programs (NANASP)
- National Produce Prescription Collaborative

# Global

- Global Salmon Initiative
- Indian Society of Parenteral and Enteral Nutrition

# Nationwide

• Food is Medicine Coalition