

By Senator Polsky

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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.; defining terms; requiring the  
5       Agency for Health Care Administration, in conjunction  
6       with the Department of Health, to establish the Food  
7       is Medicine Pilot Program to provide Medicaid coverage  
8       for purchases and deliveries of prescribed health-  
9       promoting foods under certain circumstances; requiring  
10      the agency, in conjunction with the department, to  
11      seek federal approval and waivers for the pilot  
12      program; requiring the federal waiver application to  
13      seek matching funds; requiring referrals of pilot  
14      program patients to certain federal and federally  
15      funded programs; requiring allocation of a portion of  
16      the pilot program implementation budget to a specified  
17      organization for the establishment of a specified  
18      center; providing operation requirements for the  
19      center; providing reporting requirements; requiring  
20      the agency, in conjunction with the department, to  
21      adopt rules; providing requirements for the rules;  
22      providing an effective date.

23  
24 Be It Enacted by the Legislature of the State of Florida:

25  
26       Section 1. Section 409.90203, Florida Statutes, is created  
27 to read:

28       409.90203 Food is Medicine Pilot Program; Medicaid coverage  
29 for pilot program; federal approval and waivers; Florida Food is

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30 Medicine Center of Excellence.—

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

32 (a) "Center," unless the context clearly indicates  
33 otherwise, means the Florida Food is Medicine Center of  
34 Excellence established under this section and operated by the  
35 Florida Health and Nutrition Coalition.

36 (b) "Food is Medicine" means food-based interventions and  
37 services that include medically precise nutrition, medically  
38 tailored meals, or produce prescriptions, with nutrition  
39 education and specific supports provided to a person with a  
40 specific diet-related disease or chronic condition to  
41 effectively support behavioral change related to the consumption  
42 of healthful food and physical activity conducive to health and  
43 well-being while improving health outcomes and achieving health  
44 care cost savings through the control and reversal of the  
45 disease or condition and the prevention of further disease or  
46 condition complications.

47 (c) "Medically precise nutrition" means a medical nutrition  
48 groceries program provided to a Medicaid recipient through a  
49 prescription or referral from a physician licensed under chapter  
50 458 or chapter 459, or through a referral from a clinic or  
51 hospital staff member, a licensed clinical social worker, a  
52 registered dietitian/nutritionist, or a health plan, for fresh  
53 and health-promoting groceries purchased and distributed with  
54 nutrition education and specific supports to produce positive  
55 health outcomes for a specific diet-related disease or chronic  
56 condition.

57 1. The medical nutrition groceries program must be in a  
58 protocol standard selected, reviewed, and approved by a

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59 registered dietitian or registered dietitian/nutritionist  
60 licensed under s. 468.513 as part of a 6-month intervention  
61 treatment program that follows the model of healthful food  
62 prescription programs supported by research conducted by the  
63 Gerald J. and Dorothy R. Friedman School of Nutrition Science  
64 and Policy at Tufts University and implemented by the nonprofit  
65 organization Living Hungry and that is certified by the Florida  
66 Food is Medicine Center of Excellence to meet the quality and  
67 cultural standards and the health standards for the specific  
68 disease or chronic condition.

69 2. The medical nutrition groceries program may include  
70 supports through behavioral health counseling, Food is Medicine  
71 functional medicine classes, anatomy of disease classes, cooking  
72 classes, gym or exercise classes, weekly menus and shopping  
73 lists, grocery store tours, and motivational habit change  
74 supports such as peer mentoring and health coaching in a  
75 protocol designed for a Medicaid recipient with a specific diet-  
76 related disease or chronic condition to effectively control or  
77 reverse the disease or condition effects and prevent further  
78 disease or condition complications.

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

81 a. Picked up at the health plan facility or clinic or at an  
82 event organized by a community-based organization or by an  
83 entity under contract with the program, such as a grocery store;  
84 or

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

87 4. The medical nutrition groceries program:

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88 a. May include healthful recipes and healthfully prepared  
89 ingredients, herbs, spices, and sauces.

90 b. May include at-home laboratory tests, supplements,  
91 monitoring supplies, and telehealth components.

92 c. Must include nutrition education.

93 d. Must include a program evaluation to report health  
94 outcomes, including, but not limited to, biomarkers, nutrition  
95 security assessments, and healthful eating and behavior change  
96 surveys before and after the use of the program to evaluate the  
97 program's effectiveness.

98 (d) "Medically tailored meals" means a medical meal plan  
99 program, provided to a Medicaid recipient through a prescription  
100 or referral from a physician licensed under chapter 458 or  
101 chapter 459, or through a referral from a clinic or hospital  
102 staff member, a licensed clinical social worker, a registered  
103 dietitian or registered dietitian/nutritionist, or a health  
104 plan, for meals purchased and distributed with nutrition  
105 education and support to produce positive health outcomes for a  
106 person with a specific diet-related disease or chronic  
107 condition. The medical meal plan program must be designed,  
108 reviewed, and approved by a registered dietitian or registered  
109 dietitian/nutritionist licensed under s. 468.513 to reflect  
110 appropriate medical nutrition therapy based on evidence-based  
111 practice guidelines for the specific diet-related disease or  
112 chronic condition that requires the prescription or referral.

113 1. The meals under the medical meal plan program must be  
114 fully prepared by a Medicaid provider or by a person, entity, or  
115 community-based organization under contract with a Medicaid  
116 managed care organization or with a Medicaid provider and must

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117 be certified by the Florida Food is Medicine Center of  
118 Excellence to meet the quality and cultural standards and health  
119 standards for the specific disease or chronic condition. The  
120 meals may be:

121 a. Picked up at the health plan facility or clinic or at an  
122 event organized by a community-based organization or by an  
123 entity under contract with the program, such as a restaurant or  
124 grocery store; or

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

127 2. The medical meal plan program:

128 a. May include healthful recipes and healthfully prepared  
129 ingredients, herbs, spices, and sauces.

130 b. May include at-home laboratory tests, supplements,  
131 monitoring supplies, and telehealth components.

132 c. Must include nutrition education.

133 d. Must include a program evaluation to report health  
134 outcomes, including, but not limited to, biomarkers, nutrition  
135 security assessments, and healthful eating and behavior change  
136 surveys before and after the use of the program to evaluate the  
137 program's effectiveness.

138 (e) "Nutrition education" means a validated course and  
139 series of nutrition education classes in a 6-month intervention  
140 program such as the Expanded Food and Nutrition Education  
141 Program, a research-based nutrition education program funded by  
142 the United States Department of Agriculture which teaches  
143 participants to grocery shop and plan and cook nutritious meals  
144 through lessons given by in-language, in-culture  
145 paraprofessionals and other educators from the Extension Family

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146 and Consumer Sciences programs of the University of Florida  
147 Institute of Food and Agricultural Sciences (IFAS), with sites  
148 in multiple counties across the state. The term also includes  
149 surveys before and after the classes to measure habit changes  
150 and evaluate applications of nutrition education among Florida  
151 residents, especially among populations that endure a  
152 disproportionate share of food insecurity.

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

155 (g) "Produce prescription" means a program that is  
156 provided, through a prescription or referral from a physician  
157 licensed under chapter 458 or chapter 459, or through a referral  
158 from a clinic or hospital staff member, a licensed clinical  
159 social worker, a registered dietitian or registered  
160 dietitian/nutritionist, or a health plan, to a Medicaid  
161 recipient who has or is at risk of a specific diet-related  
162 disease or chronic condition such as diabetes, coronary artery  
163 disease, cancer, obesity, renal disease, celiac disease, asthma,  
164 or dementia, to purchase produce at no cost or low cost using a  
165 technology-enabled application such as About Fresh; a coupon; a  
166 voucher; a debit card; a digital currency; or other means of  
167 storing value to be redeemed for purchasing fresh or frozen  
168 produce.

169 1.a. The technology-enabled application, coupon, voucher,  
170 debit card, digital currency, or other means of storing value  
171 may be redeemed at a farm store, farm packing house, mobile  
172 farmers' market, market as defined in s. 414.456(1), or  
173 community-based organization site; or

174 b. The produce may be delivered to the residence of the

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

177 2. The program must be in a protocol standard selected,  
178 reviewed, and approved by a registered dietitian/nutritionist  
179 licensed under s. 468.513 as part of an intervention program  
180 that may include medical nutritional therapy by a registered  
181 dietitian/nutritionist, behavioral health counseling, Food is  
182 Medicine functional medicine classes, anatomy of disease  
183 classes, cooking classes, gym or exercise classes, weekly menus  
184 and shopping lists, grocery store tours, and habit change  
185 supports such as peer mentoring and health coaching designed for  
186 a Medicaid recipient with a specific diet-related disease or  
187 chronic condition to effectively control and reverse the disease  
188 or condition effects and prevent disease or condition  
189 complications. The program:

190 a. May include healthful recipes and healthfully prepared  
191 ingredients, herbs, spices, and sauces.

192 b. May include at-home laboratory tests, supplements,  
193 monitoring supplies, and telehealth components.

194 c. Must include nutrition education.

195 d. Must include a program evaluation to report health  
196 outcomes, including, but not limited to, biomarkers, nutrition  
197 security assessments, and healthful eating and behavior change  
198 surveys before and after the use of the program to evaluate the  
199 program's effectiveness.

200 (h) "Program evaluation" means an annual evaluation of a  
201 state Medicaid-funded program that uses medically precise  
202 nutrition, medically tailored meals, or produce prescriptions to  
203 assess fidelity of program implementation and overall program

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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 IFAS Food is Medicine evaluators or be a component of the program's implementation budget.

2. Must be 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 requiring high-cost patient care or having 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 food and services provided under the program.

(b) Seek:

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



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233 the pilot program, including any waivers necessary to obtain  
234 federal finances to secure Title XIX matching funds for the  
235 pilot program. The federal waiver application shall seek  
236 Medicaid matching funds for all general revenue, family  
237 contributions, and local contributions.

238 (c) Require IFAS nutrition education providers or other  
239 nutrition educators to refer pilot program patients to the  
240 federal Supplemental Nutrition Assistance Program, the Temporary  
241 Assistance for Needy Families program, and the Special  
242 Supplemental Nutrition Program for Women, Infants, and Children  
243 in order to meet the Centers for Medicare and Medicaid Services  
244 financial directive for Medicaid waiver for the pilot program.

245 (d) Provide a portion of the pilot program implementation  
246 budget, not to exceed 15 percent of the overall funds expended  
247 for the pilot program, to the Florida Health and Nutrition  
248 Coalition, a nonprofit corporation and coalition of Food is  
249 Medicine stakeholders in this state, to establish a network  
250 model central hub formed using the national best practices of  
251 the United States Department of Agriculture Gus Schumacher  
252 Nutrition Incentive Program and the National Institutes of  
253 Health. The central hub established by the coalition shall be  
254 called the Florida Food is Medicine Center of Excellence.

255 (3) (a) The Florida Health and Nutrition Coalition shall  
256 operate the Florida Food is Medicine Center of Excellence as an  
257 online, Florida-based research and expertise repository by  
258 accumulating data in the following areas:

259 1. Research.

260 2. Provision of services and activities such as referrals,  
261 food sourcing, and logistics.

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- 262       3. Community outreach and engagement.
- 263       4. Education and training.
- 264       5. Coverage for services such as billing and fulfillment of  
265 patients' needs.
- 266       6. Health disparities.
- 267       (b) The center, in collaboration with IFAS Food is Medicine  
268 evaluators, shall:
- 269           1. Inform program operators during the pilot program  
270 implementation.
- 271           2. Disseminate findings throughout this state and  
272 nationally through the center's stakeholder network.
- 273           3. Include in-language and in-culture Food is Medicine  
274 activities for Florida residents.
- 275       (c) The center shall report its research literature,  
276 validated program models, operational planning frameworks,  
277 nutrition standards, and strategies and tactics for effective  
278 program activities to the agency and the United States  
279 Department of Agriculture, the National Institutes of Health,  
280 and the Centers for Disease Control and Prevention.
- 281       (4) The agency, in collaboration with the center and IFAS,  
282 shall file an annual compilation report with the Legislature on  
283 the pilot program, any reduction in food insecurity, health  
284 outcome improvements and savings from the enrolled high-need  
285 patients and patients with high-cost patient care, and any  
286 advances in health equity.
- 287       (5) The agency, in conjunction with the Department of  
288 Health, shall adopt rules to implement and administer this  
289 section, including, but not limited to, rules relating to:
- 290           (a) The quality standard and quantity and the number of

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291 medically tailored meals delivered per week to a Medicaid  
292 recipient.

293 (b) The funds allowed per Medicaid recipient for medically  
294 precise nutrition, medically tailored meals, and produce  
295 prescriptions.

296 (c) Notification to Medicaid providers and Medicaid  
297 recipients of the availability of and requirements for medically  
298 precise nutrition, medically tailored meals, and produce  
299 prescriptions.

300 (d) The funds and model for evaluations for IFAS Food is  
301 Medicine evaluators.

302 (e) The funds and model for the best-practices information  
303 repository hub and stakeholder network at the Florida Food is  
304 Medicine Center of Excellence.

305 (f) Methodology for reimbursing Medicaid providers and  
306 other managed care organizations and health plans for products,  
307 events, services, classes, or activities provided under the  
308 pilot program by the providers, organizations, and plans that  
309 use medically precise nutrition, medically tailored meals, or  
310 produce prescriptions.

311 Section 2. This act shall take effect July 1, 2024.