

Securing Healthy Food Access through Targeted Programming

Counter Tools' Healthy POS Webinar Series

Tuesday, September 22nd, 2020

2:00pm EST

Moderator: Jackie Boards, Counter Tools

Speakers: Neal Curran and Sam Hoeffler, Reinvestment Partners



About Counter Tools

Counter Tools is a non-profit organization. Our vision is a nation where healthy living is equitable across communities and every person has access to healthful choices.



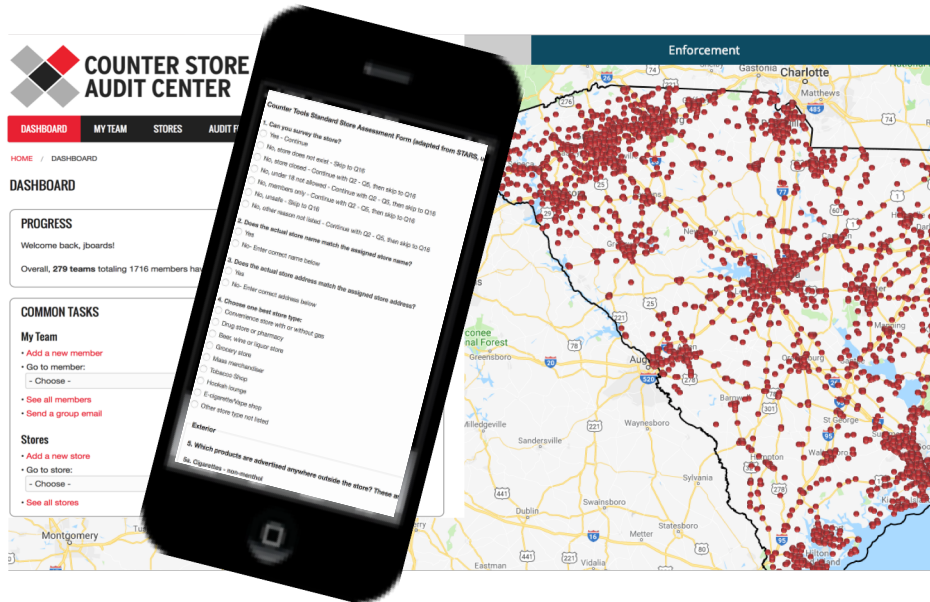
Our Team



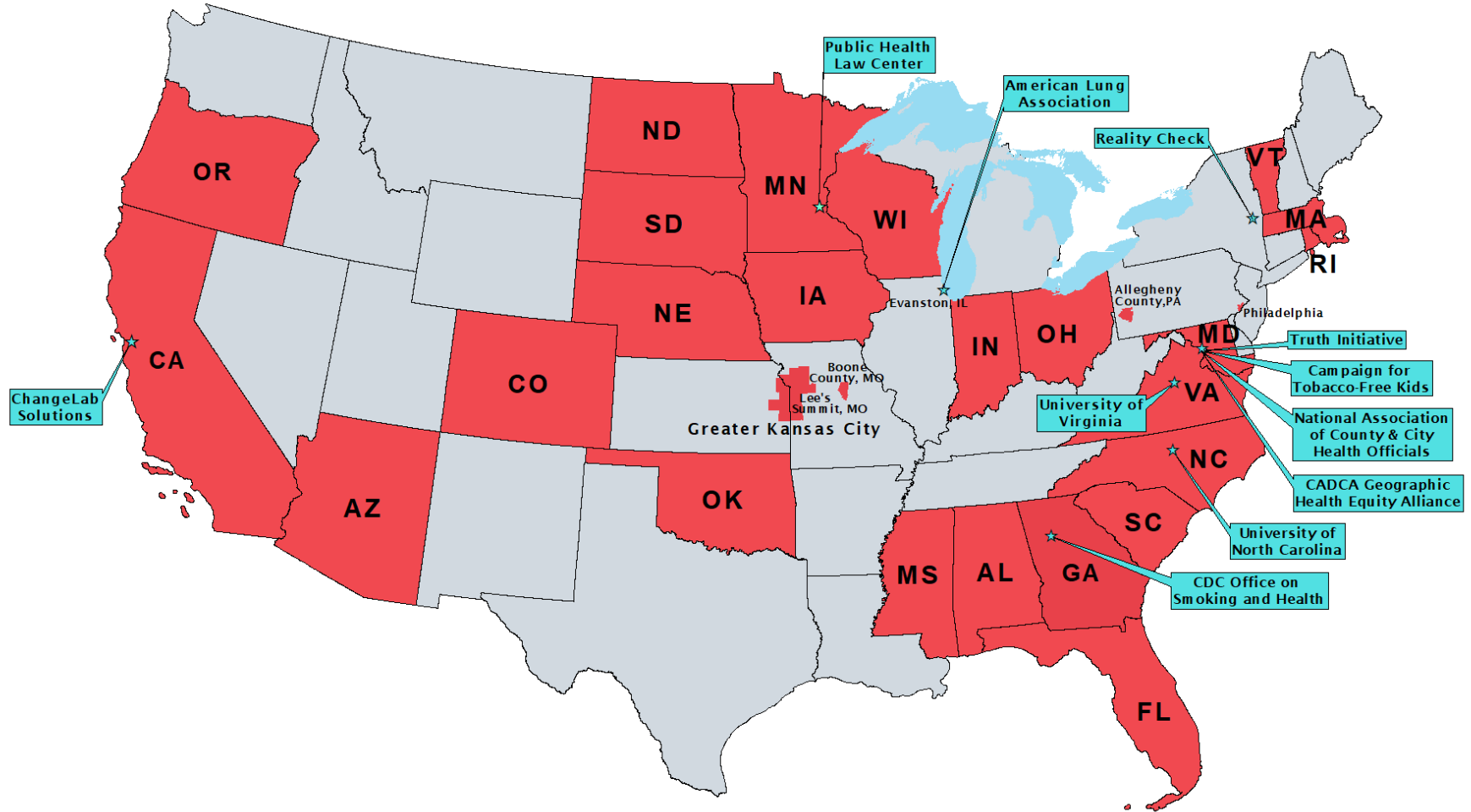
What We Do

We work with our partners to advance place-based public health and health equity through policy, systems and environmental changes.

- Consulting
- Training
- Storytelling
- Providing Tech Tools
- Supporting Advocacy Efforts
- Disseminating Science and Best Practices



Our Partners



THE UNIVERSITY of NORTH CAROLINA at CHAPEL HILL





Healthy Food Access Through Produce Prescriptions

Tuesday September 22nd, 2020 2:00pm EST

Neal Curran — Director of Food Programs

Sam Hoeffler — Program Manager

Reinvestment Partners



Agenda

- Introductions
- Overview of Reinvestment Partners & the Nutrition Incentive Hub
- Background of food and health systems
- Opportunities through healthcare
- Produce prescriptions
- Near-term opportunities

Reinvestment Partners

Reinvestment Partners' mission is to foster healthy and just communities by empowering people, improving places, and influencing policy. We address the problems of poverty and social injustice in the areas of food, housing, community development, health, and financial services.



About the Nutrition Incentive Hub

National coalition of partners that provides training, technical assistance, and evaluation for SNAP incentive and produce prescription programs

Our objective: Strengthen access to fruits and vegetables

- Supporting Gus Schumacher Nutrition Incentive Program (GusNIP) grantees
 - Funded through 2018 Farm Bill
 - Formerly known as the Food Insecurity Nutrition Incentive Program (FINI)

This work is supported by Gus Schumacher Nutrition Incentive Grant Program grant no. 2019-70030-30415 project accession no. 1020863 from the USDA National Institute of Food and Agriculture.

Services offered:

1:1 Technical assistance

Relevant communities of practice

Webinars

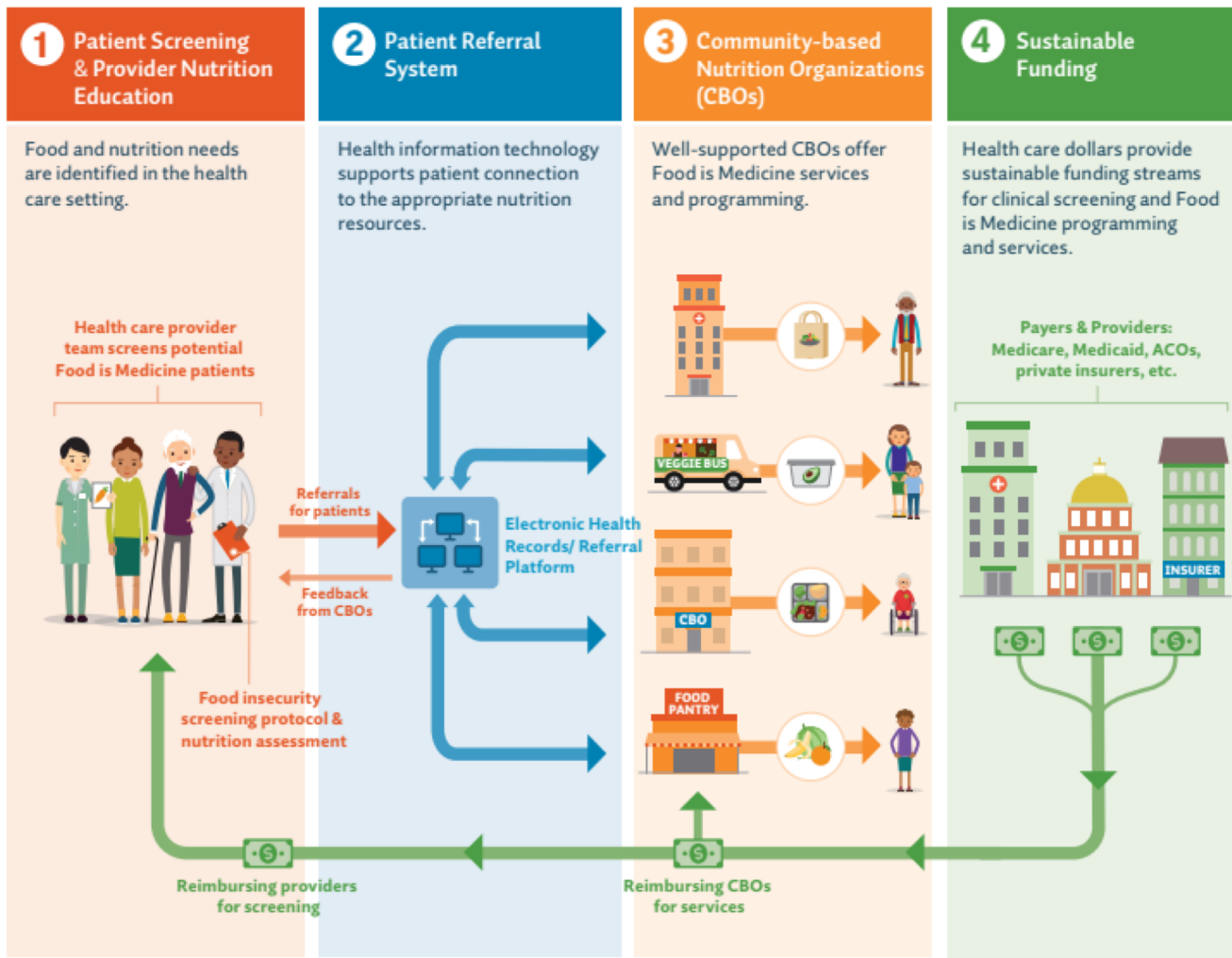
Slack channels

Resource toolkits and templates

For more information, please visit

<https://www.nutritionincentivehub.org/>





5 Systemic change throughout private and public sectors to support Food is Medicine

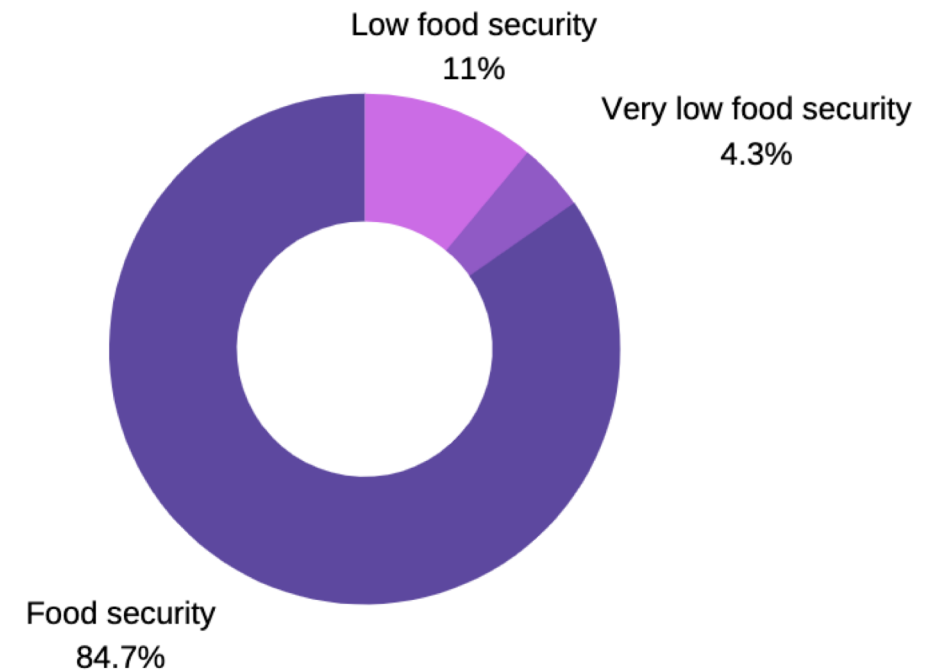
- Explicit support and concrete commitments from:
- Providers
 - Payers
 - Community-based organizations
 - State & federal policy makers
 - Philanthropy
 - Advocacy groups

Health and the Food System



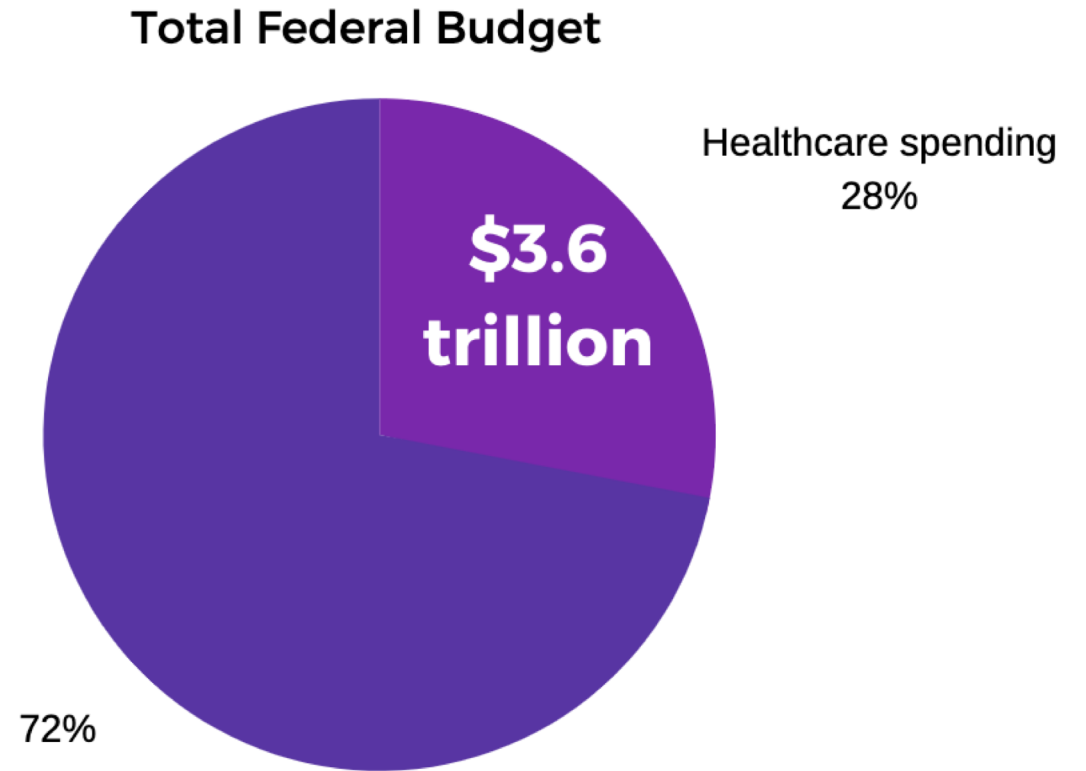
Food Insecurity and Diet-related Illness

- Prevalence of diet related chronic disease
 - More than 100 million Americans have diabetes or prediabetes
 - 2,300 Americans die each day from cardiovascular disease
 - 75% of US adults are overweight or obese



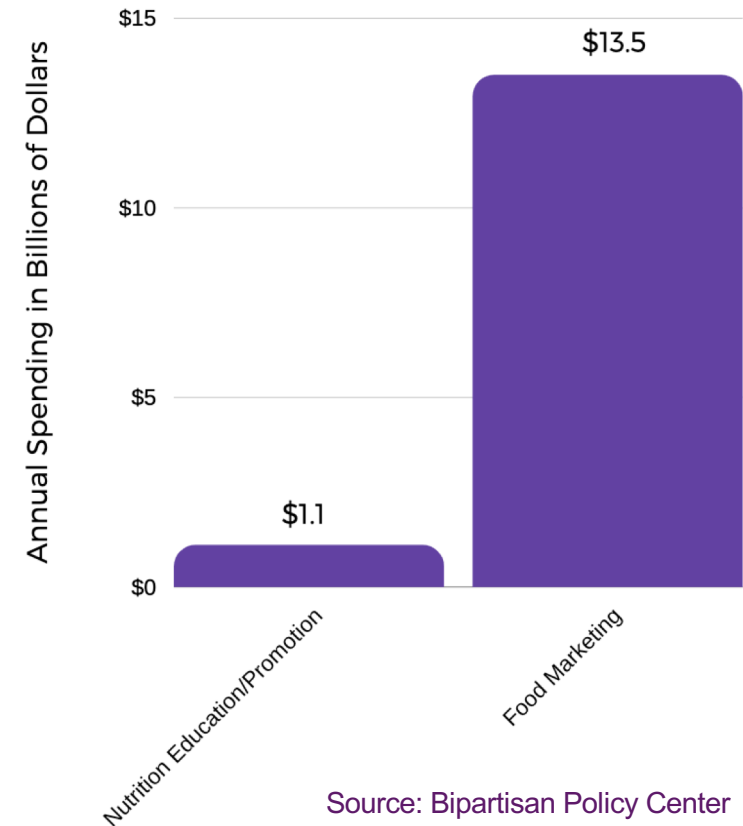
Diet-related Illness and Healthcare

- Diabetes: \$335B/year
- CVD: \$351B/year
- Obesity: \$1.72T/year
- 5% of the population accounts for 50% of healthcare spending



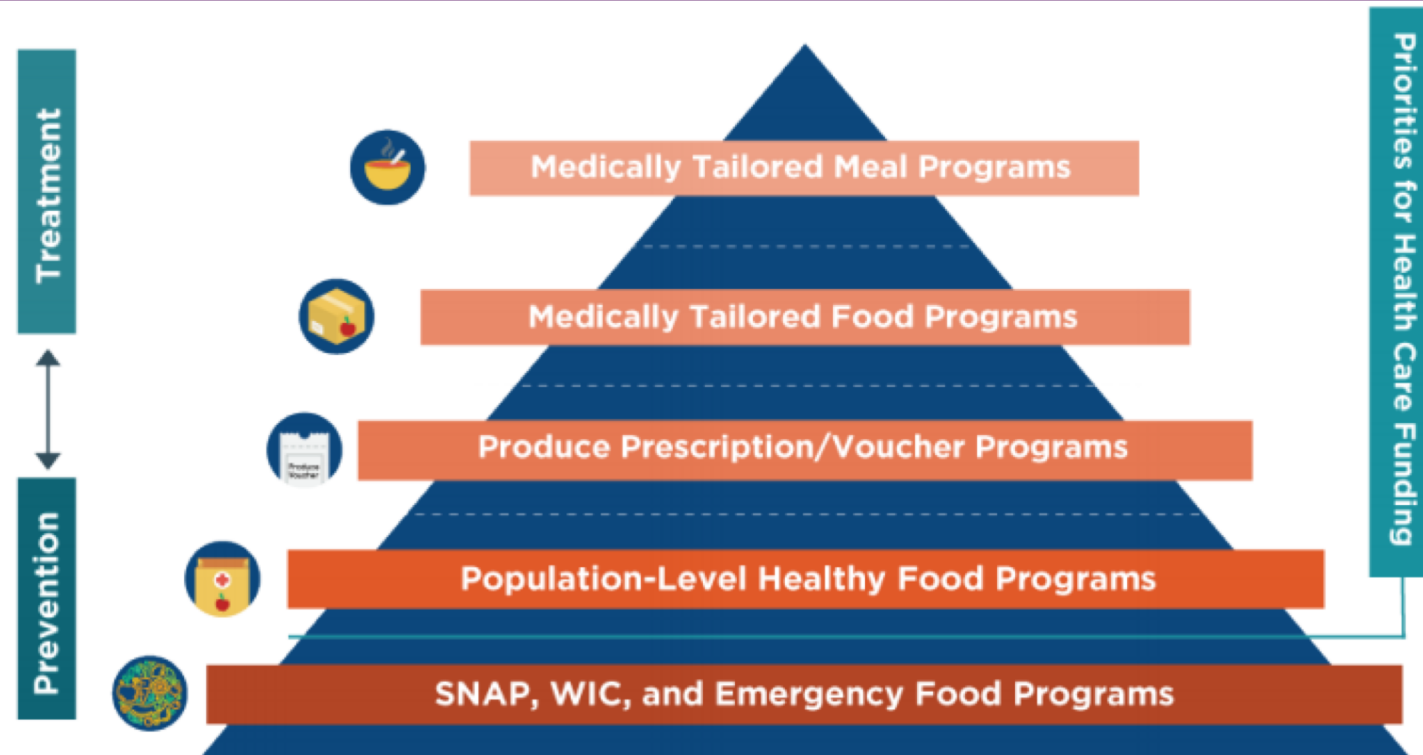
Food System Design

- Profits are concentrated in food processing and manufacturing
- Grocery retailers operate on very thin profit margins (1-3%); operators drive sales towards high margin consumer packaged goods, not lower margin items like produce
- Marketing of processed food dwarfs healthy food promotion efforts



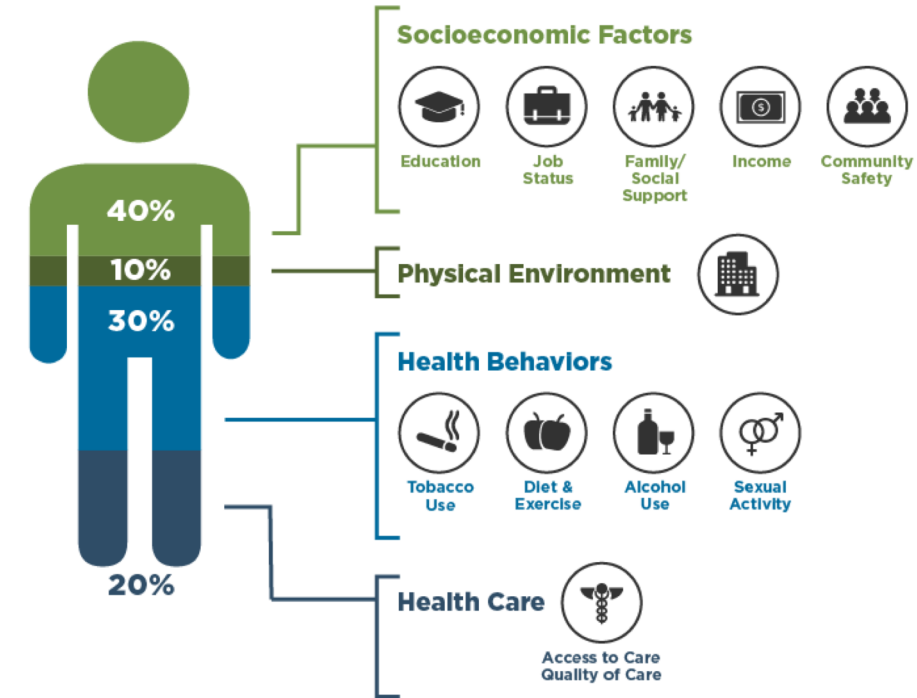
Scope of Nutrition Interventions

- **Education**—DPP, MNT, cooking classes
- **Outreach and promotion**—advertising, SNAP-Ed, marketing restrictions
- **Policies, systems, and environment changes**—behavioral nudges, label warnings, bans, taxes, institutional programs,
- **Food benefits**—SNAP, WIC, food banks, meals, nutrition incentives



Opportunities in Healthcare

- Social Driver of Health Framework
 - Leveraging healthcare to address social needs
 - Changes in screening, intervention, evaluation
 - Create services that reimburse for SDOH interventions, targeted population health services
- Movement towards value-based care
- Food is a preventive strategy with important potential downstream health and cost outcomes



Produce Prescriptions



Produce Prescriptions



- Restricted benefit
 - Items
 - Distribution mechanism
 - Amount
- Targeted population

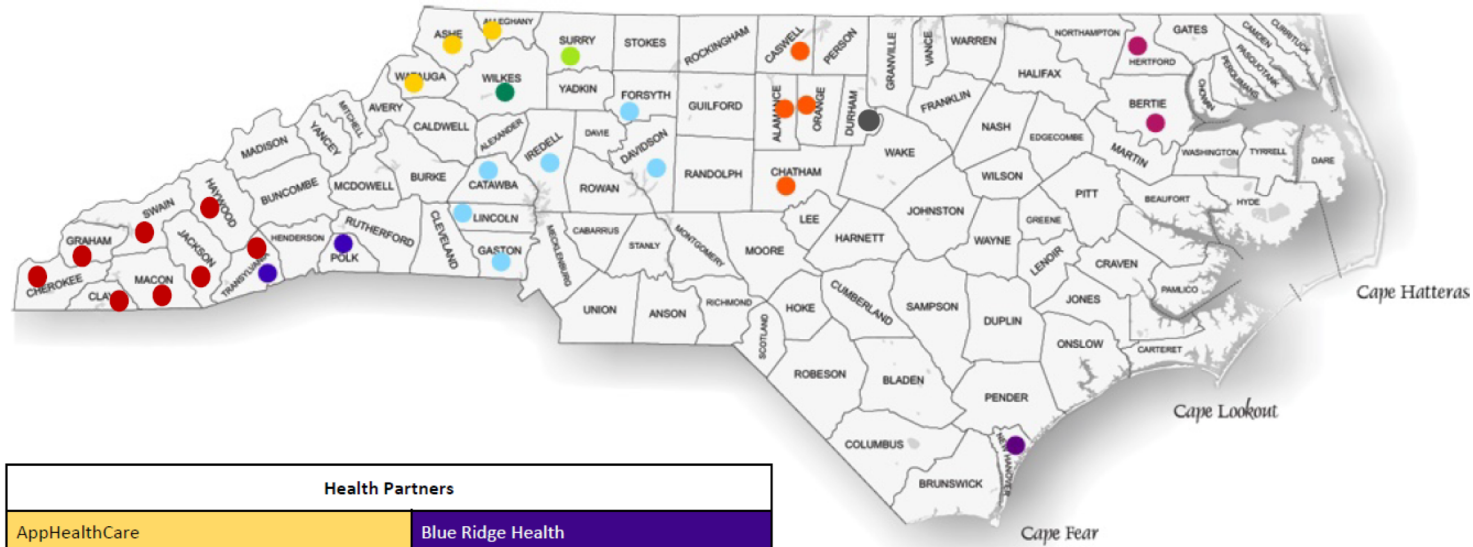
Produce Prescriptions

- Can be implemented across health providers and geographies
 - Healthcare partners
 - Use of electronic payments
- Track utilization
- Evaluate outcomes
 - Food security
 - Health status
 - Cost reduction
 - Improved healthcare quality

Reinvestment Partners' Produce Prescription Program

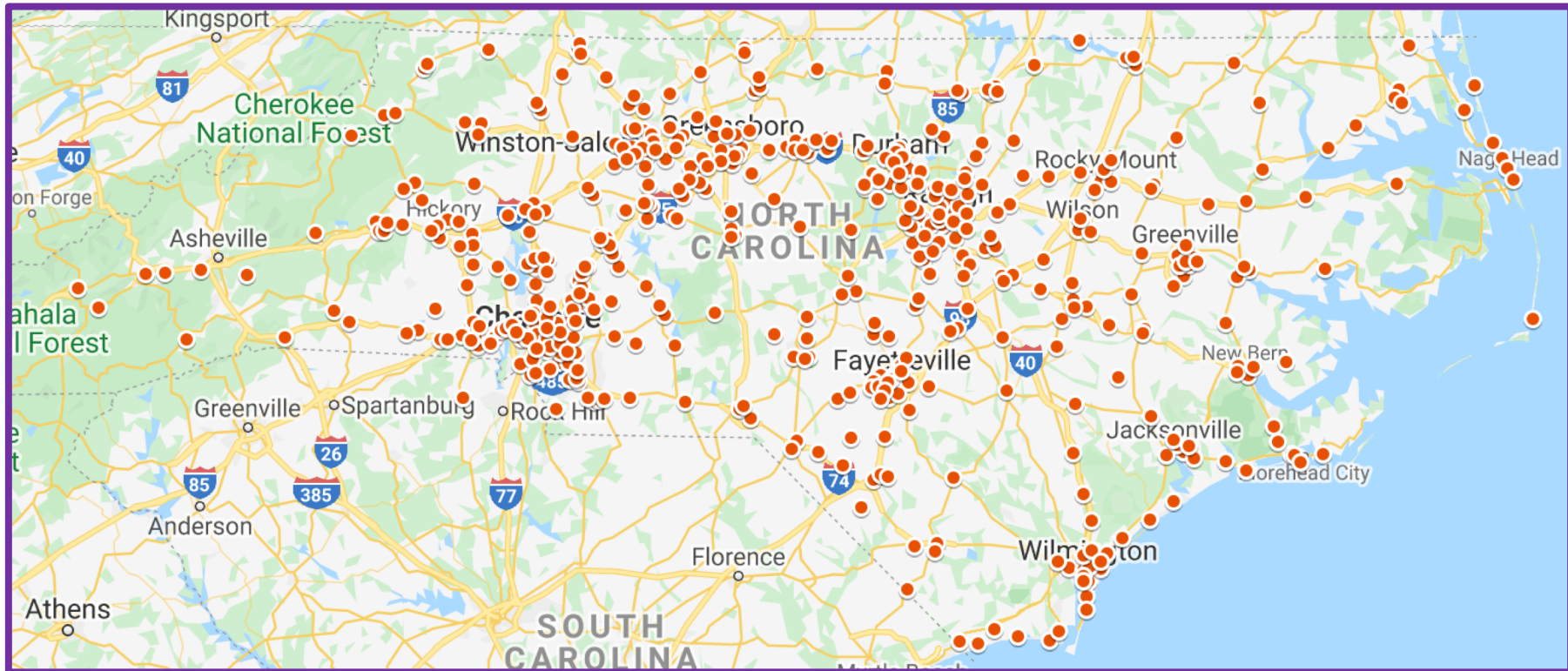


Clinical Partners



Health Partners	
AppHealthCare	Blue Ridge Health
Gaston Family Health Services	Piedmont Health Services
Wilkes County Health Department	Surry County Health and Nutrition Center
MountainWise	Bull City Bucks – Lincoln, Duke
Roanoke Chowan Community Health Center	MedNorth Health Center

Grocery Partner



Data and Evaluation

- Enrollment data
 - Date
 - Enrolling site
- Line level purchase data for every redemption, including:
 - Item description
 - UPC #
 - Unique customer ID #
 - Amount
- Research team will pair program data with participants' health records to evaluate health impacts and cost implications

Where to start?

- Identify key stakeholders
 - Healthcare provider
 - Food distribution partner (retailer, farmers market, CSA, etc.)
 - Program implementer/practitioner
 - Funder
- Consider critical design elements
- Critical bottleneck: money for food
 - Consider long-term funding implications of program design

Key Stakeholders for system change

- Patient: works with existing retailers, easy distribution, agency
- Provider: easy distribution, material benefit, serves large pop.
- Payer: implementation partnership, track utilization, targeted benefit
- Retailer: adaptable to existing technology, implementation partnership, increased revenue

Long-term strategy for system change

- Ongoing funding through the healthcare sector as a reimbursable benefit
 - Medicare: Supplemental benefit
 - Medicaid: Value-added benefit, Medicaid Transformation waivers



Questions?



Contact

Neal Curran

Director of Food Programs
Reinvestment Partners

neal@reinvestmentpartners.org
919-667-1000 x 50

Sam Hoeffler

Program Manager
Reinvestment Partners

sam@reinvestmentpartners.org
919-667-1000 x 37

www.nutritionincentivehub.org

info@nutritionincentivehub.org

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hello@countertools.org



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