



Healthy Food Policy

- Food is [closely linked](#) to health and well-being, with poor diet being a [major contributor](#) to poor health in the United States.
- There are [diet-related disparities](#) that lead to poorer health among some racial and ethnic groups, exacerbating existing health disparities.
- A healthy diet is [essential](#) for childhood growth and development, chronic disease reduction and management, and increased longevity.

Existing resources and policy tools that address food and diet	Who in state government can address food and diet
<ul style="list-style-type: none"> - Nutrition assistance programs - Subsidized fruit and vegetable programs - Medicaid contracting requirements - State negotiation of food procurement and purchasing - Bans on “lunch shaming” in schools - Healthy food prescription programs - Medically tailored meals for Medicaid beneficiaries 	<ul style="list-style-type: none"> - State department of education - Medicaid agency - Public health department - State department of agriculture - State department of corrections

State Policy Options

- Leverage state purchasing power.** States can require healthy food [purchasing](#) from schools, hospitals, correctional facilities, and other state institutions. They can also encourage [local](#) governments to follow suit in their schools and communities.
- Build reimbursement into state Medicaid plans and managed care contracts.** State Medicaid agencies can consider investing in the social determinants of health and including healthy food policy in their efforts by reimbursing for evidence-based community nutrition, food-as-medicine, or [medically tailored meal](#) programs.
- Use state regulatory levers.** States can pass laws to require or encourage hospitals to offer [healthier food](#) to patients and staff, as encouraged by the American Medical Association’s [resolution](#) calling for hospitals to serve “a variety of healthy food, including plant-based meals” to patients, staff, and visitors. States can also leverage their [community benefit](#) or [certificate/determination of need](#) policies to encourage tax-exempt hospitals to invest in nutrition programs.
- Align data collection.** Medicaid, public health, and SNAP data collection and sharing can be aligned to ensure that interventions seek to help individuals and communities with the greatest need.
- Authorize meal delivery services as needed.** As a result of the COVID-19 pandemic, [states](#) are approved for [US Department of Agriculture \(USDA\) waivers](#) that authorize school meal distribution. [Maryland](#) and [Florida](#) have developed websites with interactive maps showing locations for grab-and-go meals. During emergencies, [counties](#) can use school buses to deliver meals to students with at-risk family members. [Arizona](#) and [Iowa’s approved](#) 1135 waivers for Medicaid emergency authority [both expand eligibility](#) for home-delivered meals.
- Allow retailers to accept SNAP benefits for online food purchases.** A [pilot program](#) gives states the option to test the feasibility of online SNAP benefit usage. [New York](#), [Washington](#), [Missouri](#), and others have had their waivers approved.

Evidence and Resources for State Leaders

Policy	Resource	Notes
Leveraging State Purchasing and Healthy Food Procurement Power	Centers for Disease Control and Prevention’s (CDC) Food Service Guidelines: Case Studies from States and Communities	Every day, millions of Americans eat foods provided or sold at their workplaces or in other institutional settings. Making changes in the types of food and beverages available in these settings can improve the diets of people who eat there. This resource can be used to create a food environment that makes healthier food and beverage options available.
	CDC’s Smart Food Choices: How to Implement Food Service Guidelines in Public Facilities	The purpose of this document is to help states implement food service guidelines in government work sites or other public facilities to increase the availability of healthier choices at food service venues, including cafeterias, concession stands, snack bars, and vending machines.
	Washington State’s Healthy Nutrition Guidelines for Vending & Micro-Markets	The guidelines were developed for Washington State agencies, and encourage other employers, businesses, and organizations to use them. To meet the Healthy Nutrition Guidelines, each vending machine and micro-market must meet product mix guidelines; food and nutrient guidelines; and promotion, placement and calorie display guidelines.
Medicaid Contracting Requirements	One of Virginia’s health plans covers home-delivered meals for patients and family members for a limited time after discharge from a hospital.	Medicaid managed care contractors are required to address access to healthy foods, among other social determinants of health.
	Michigan’s Medicaid managed care contracts .	In Michigan, Medicaid managed care contractors are required to coordinate services and referrals for people who face challenges accessing food.
Healthy Food Prescriptions and Medically Tailored Meals	Washington DC’s Produce Plus Program	Annually between June and September, eligible DC residents—those with an ID card from any of the following: SNAP, Medicaid, TANF, Medicare QMB, WIC, the Senior Farmers Market Nutrition Program, or SSI Disability—will be able to receive up to \$20 per week in fresh, local produce at farmers’ markets throughout the area.
	California’s Medically Tailored Meals Pilot Program	The program provides three meals a day for three months for people with congestive heart failure, and it will be evaluated to determine its impact on emergency room use, hospital readmission, and admission to long-term care facilities.
	New York’s Medicaid plans contract with a community-based organization to provide meals to those with life-threatening illnesses	The organization says it has reduced health care costs by 28 percent, compared to people with similar diagnoses who did not receive medically tailored meals.