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May 28, 2024

The Honorable Richard Roth, Chair
Senate Health Committee
1021 O Street, Room 3310
Sacramento, CA 95814

RE: Support for AB 1975 (Bonta)— Medi-Cal: Medically Supportive Food and Nutrition Services

Dear Chair Roth,

Local Health Plans of California (“LHPC”) is writing in support of AB 1975 (Bonta), which would transition medically supportive food and nutrition interventions from pilot services in the California Advancing and Innovating Medi-Cal (CalAIM) Initiative to a permanent Medi-Cal benefit. As the statewide trade association representing all 17 of California’s non-for-profit and community-based health plans, which collectively cover 70% of the state’s Medi-Cal managed care enrollees or nearly 9.3 million Californians, LHPC has observed firsthand how medically supportive food and nutrition interventions positively impact the health outcomes of Medi-Cal members.

Prior to the piloting of food-based interventions through CalAIM, local plans recognized the critical role that nutrition plays in improving Medi-Cal members’ health outcomes. In response, many local plans took the initiative to provide medically tailored meals and other nutrition-focused benefits to their members, particularly for those living with chronic diseases directly impacted by nutrition, such as diabetes and high blood pressure. Now, through CalAIM’s Community Supports, many local plans have continued to provide these services, and some have begun to offer them for the first time. In the first 18 months of CalAIM, more than 26,000 low-income patients have accessed food-based services, making it the second most utilized of 14 community supports. Building upon this experience, making medically supportive food and nutrition interventions a permanent Medi-Cal benefit would help to expand access to these services across the state, and thereby help to improve health outcomes for the most medically vulnerable and reduce health care spending. For example, researchers estimate that subsidizing healthy foods for Medicaid and Medicare patients could save \$40 billion to \$100 billion in health care costs nationally.

Transitioning medically supportive food and nutrition interventions to permanent Medi-Cal benefits will improve health outcomes and advance health

equity across California. It will also reduce avoidable healthcare costs, and support the prevention, not just the treatment, of chronic conditions. For these reasons, LHPC supports AB 1975 and urge your 'aye' vote to support medically supportive food and nutrition access for Medi-Cal recipients.

Sincerely,

Katie Andrew

Katie Andrew
Director of Government Affairs
Local Health Plans of California

cc:

Assemblymember Bonta
Members, Senate Health Committee