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Title: Expand Medicaid Transportation to Include Healthy Grocery Destinations
Introduced by: Brent Oldham for the Medical Student Section
Original Author: Abigail Cheng
Referred to: Reference Committee B
House Action: **APPROVED AS AMENDED**

Whereas, food insecurity (defined as disruption of food intake or eating patterns due to lack of money and other resources) increases the risk of developing chronic diseases such as obesity, type II diabetes, and cardiovascular disease^{1,2,3,4,5}, and

Whereas, health care expenditures from 2011-2013 of food-insecure individuals were \$1,863 higher per person compared to food-secure individuals, resulting in \$77.5 billion of additional health care spending⁶, and

Whereas, individuals covered by Medicaid are correlated with food insecurity and lack of access to a grocery store⁷, and

Whereas, 17.9 percent of Michigan residents are food insecure, and 1.8 million Michigan residents, including 300,000 children, live in communities that have limited access to supermarkets^{8,9}, and

Whereas, Michigan ranks 16th in state rates of household food insecurity, and 11th in state rates of very low household food security, defined as multiple disruptions of eating patterns and reduced food intake due to food insecurity^{5,10}, and

Whereas, over 60 percent of Michigan residents receiving Food Assistance Program benefits are also enrolled in Medicaid¹¹, and

Whereas, individuals of lower socioeconomic status often have to travel greater distances with limited public transportation options to the nearest supermarket due to fewer supermarkets per person in lower socioeconomic neighborhoods^{12,13,14,15}, and

Whereas, non-emergency medical transportation services covered by State Medicaid includes transportation for prescriptions and medical supplies but not grocery stores, farmers markets, and food banks and pantries^{16,17}, and

Whereas, access to supermarkets is associated with lower adolescent Body Mass Index (BMI) and access to convenience stores was associated with higher BMI and being overweight^{15,18}, and

Whereas, one of the top-grossing supermarkets in the Los Angeles, California area, Numero Uno, transports over 2,000 passengers a week to and from their store (average three-eight miles) without charging extra and at a cost of less than one percent of the store’s gross revenues^{19,20,21}, and

Whereas, a pilot grocery shuttle began in February 2019 in north Nampa, Idaho to bring residents of this food desert to a Winco supermarket every Saturday, free of charge²², and

Whereas, Chicago, Illinois has incorporated “Fresh Moves Mobile Market” to bring nutritious produce to schools, communities, and health centers²³, and

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56 Whereas, in 2013, Detroit’s Community Health and Social Services (CHASS) began an initiative called
57 “The Fresh Prescription” to help patients at CHASS gain access to fresh fruits and vegetables, resulting in a
58 dramatic decrease in A1C levels of patients with diabetes who participated in this initiative⁸, and
59

60 Whereas, a 10-week pilot program in Michigan’s Upper Peninsula to improve food access, involving a
61 local farmer’s market and 32 patients with at least one chronic disease, motivation to begin a healthy
62 lifestyle, and demonstrated difficulty in accessing fruits and vegetables, resulted in an increase of 1.2 cups of
63 fruits and vegetables consumed per day, significant increase in reported quality of life, and a cumulative 54-
64 pound weight loss⁸, and
65

66 Whereas, current MSMS policy (Res86-17) supports “access to fresh produce and food education
67 programs within food desert communities including programs and policies that remove barriers to and
68 incentivize mobile produce market operations and the purchasing and consumption of fresh produce;”²⁴
69 therefore be it
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71 RESOLVED: That MSMS support inclusion of supermarkets, food banks and pantries, and local
72 farmers markets as destinations covered by Medicaid transportation.
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75 WAYS AND MEANS COMMITTEE FISCAL NOTE: \$1,000 or more for costs related to the adoption of new or
76 revised MSMS or AMA policy.

Relevant MSMS Policy:

Fresh Produce Access and Intake in Food Deserts

MSMS supports access to fresh produce and food education programs within food desert communities (as defined by the US Department of Agriculture) including programs and policies that remove barriers to and incentivize mobile produce market operations and the purchasing and consumption of fresh produce. (Res86-17).

Relevant AMA Policy:

Combating Obesity and Health Disparities H-150.944

Our AMA supports efforts to: (1) reduce health disparities by basing food assistance programs on the health needs of their constituents; (2) provide vegetables, fruits, legumes, grains, vegetarian foods, and healthful dairy and nondairy beverages in school lunches and food assistance programs; and (3) ensure that federal subsidies encourage the consumption of foods and beverages low in fat, added sugars, and cholesterol.

¹ Babey SH, Diamant AL, Hastert TA, Org E. UCLA Recent Work Title Designed for Disease: The Link Between Local Food Environments and Obesity and Diabetes Permalink <https://escholarship.org/uc/item/7sf9t5wx> Publication Date. 2008. <https://escholarship.org/uc/item/7sf9t5wx>.

² Castillo DC, Ramsey NL, Yu SS, Ricks M, Courville AB, Sumner AE. Inconsistent Access to Food and Cardiometabolic Disease: The Effect of Food Insecurity. *Curr Cardiovasc Risk Rep.* 2012;6(3):245-250. <http://www.ncbi.nlm.nih.gov/pubmed/22629473>.

³ Ahern M, Brown C, Dukas S. A National Study of the Association Between Food Environments and County-Level Health Outcomes. *J Rural Heal.* 2011;27(4):367-379. doi:10.1111/j.1748-0361.2011.00378.x

⁴ Gundersen C, Ziliak JP. Food Insecurity And Health Outcomes. *Health Aff.* 2015;34(11):1830-1839. doi:10.1377/hlthaff.2015.0645

⁵ Office of Disease Prevention and Health Promotion. Food Insecurity. <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/food-insecurity>. Accessed February 27, 2019.

⁶ Berkowitz SA, Basu S, Meigs JB, Seligman HK. Food Insecurity and Health Care Expenditures in the United States, 2011-2013. *Health Serv Res.* 2018;53(3):1600-1620. doi:10.1111/1475-6773.12730

⁷ Tolzman C, Rooney B, Duquette RD, Rees K. Perceived barriers to accessing adequate nutrition among food insecure households within a food desert. *WMJ.* 2014;113(4):139-143. <http://www.ncbi.nlm.nih.gov/pubmed/25211800>.

⁸ Bitely J. Food as Medicine: How the BCBSM Foundation Supports Produce Prescription Programs.

<https://www.mibluesperspectives.com/2018/05/24/food-as-medicine-how-the-bcbsm-foundation-supports-produce-prescription-programs/>. Accessed February 25, 2019.

⁹ Feeding America. Hunger in America: Michigan. <https://www.feedingamerica.org/hunger-in-america/michigan>. Published 2018. Accessed February 18, 2019.

¹⁰ Jensen-Coleman A, Smith MD. Food Security in the U.S. <https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-us/interactive-charts-and-highlights/#States>. Accessed February 22, 2019.

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- ¹¹ Month R. Trend Table: 25 Food Assistance Program: FAP Cases Also Receiving FIP , SDA , SSI and Medicaid Trend Information Fiscal Years 2017 , 2018 and 2019 FIP Cases Food Assistance Program: FAP Cases Also Receiving FIP , SDA , SSI and Medicaid Trend Informatio.; 2019. https://www.michigan.gov/documents/dhs/DHS-Trend_Table_25_269237_7.pdf.
- ¹² Gallagher M, Associates MG. Good Food Access For Families And Communities: Michigan Good Food Work Group Report Series. East Lansing; 2011. https://www.canr.msu.edu/michiganfood/uploads/files/Good_Food_Access_Report.pdf.
- ¹³ United States Department of Agriculture. Access to Affordable and Nutritious Food: Measuring and Understanding Food Deserts and Their Consequences Report to Congress.; 2009. https://www.ers.usda.gov/webdocs/publications/42711/12716_ap036_1_.pdf.
- ¹⁴ Evans A, Banks K, Jennings R, et al. Increasing access to healthful foods: a qualitative study with residents of low-income communities. *Int J Behav Nutr Phys Act.* 2015;12(S1):S5. doi:10.1186/1479-5868-12-S1-S5
- ¹⁵ Coveney J, O'Dwyer LA. Effects of mobility and location on food access. *Health Place.* 2009;15(1):45-55. doi:10.1016/j.healthplace.2008.01.010
- ¹⁶ CMS. Medicaid Non-Emergency Medical Transportation Booklet for Providers. Cms. 2016:1-17. <https://www.cms.gov/medicare-medicaid-coordination/fraud-prevention/medicaid-integrity-education/downloads/nemt-booklet.pdf>.
- ¹⁷ Powers BW, Rinefort S, Jain SH. Nonemergency Medical Transportation. *Jama.* 2016;316(9):921. doi:10.1001/jama.2016.9970
- ¹⁸ Powell LM, Auld MC, Chaloupka FJ, O'Malley PM, Johnston LD. Associations Between Access to Food Stores and Adolescent Body Mass Index. *Am J Prev Med.* 2007;33(4):S301-S307. doi:10.1016/j.amepre.2007.07.007
- ¹⁹ Transportation Research Board. Numero Uno Market Shopper's Shuttle Service Case Study. In: *Using Public Transportation to Reduce the Economic, Social and Human Costs of Personal Immobility.* Washington, DC: The National Academies Press; 1998:259-268. <https://www.nap.edu/read/9438/chapter/17#260>.
- ²⁰ UC Davis Health Newsroom. Free Shuttles Can Close the Grocery Gap. <https://health.ucdavis.edu/publish/news/newsroom/2793>. Published 2003. Accessed February 28, 2019.
- ²¹ Cassady D, Mohan V. Doing Well by Doing Good? A Supermarket Shuttle Feasibility Study. *J Nutr Educ Behav.* 2004;36(2):67-70. doi:10.1016/S1499-4046(06)60135-8
- ²² Barnhill F. In Nampa's Food Desert, Hospitals Team Up With Free Shuttle To Grocery Store. Boise State Public Radio. <https://www.boisestatepublicradio.org/post/nampas-food-desert-hospitals-team-free-shuttle-grocery-store#stream/0>. Published 2018. Accessed February 28, 2019.
- ²³ Urban Growers Collective. Fresh Moves Mobile Market. <https://urbangrowerscollective.org/fresh-moves-mobile-market/>. Published 2018. Accessed February 28, 2019.
- ²⁴ Michigan State Medical Society. MSMS Policy Manual. <https://www.msms.org/msmspolicies>. Published 2018. Accessed February 14, 2019.