



March 28, 2022

The Honorable Jim McGovern
Chair, Committee on Rules
United States House of Representatives
Washington, D.C. 20515

The Honorable Tom Cole
Ranking Member, Committee on Rules
United States House of Representatives
Washington, D.C. 20515

Dear Chairman McGovern, Ranking Member Cole, and Distinguished Members of the House Committee on Rules,

Thank you for the opportunity to provide written comments for the record as a follow-up to the Rules Committee Food is Medicine field visit to the Tufts Friedman School on March 4th attended by Chairman McGovern, Representative Perlmutter, and Representative DeSaulnier. We appreciate the opportunity to share our innovative approach to addressing food insecurity through partnerships with health care providers, and ask that members of Congress support the study and replication of similar programs in states across the country.

Project Bread, a statewide anti-hunger organization in Massachusetts, knows from our 50-plus year history that while there are impactful programs for the person experiencing food insecurity, the system can be incredibly challenging to navigate. That is where Project Bread comes in – our work focuses on removing barriers and ensuring people who are food insecure are connected to solutions.

Project Bread leads on policy solutions, such as our campaign to make universal free school meals permanent here in Massachusetts, and our support of a Common Application for the Supplemental Nutrition Assistance Program (SNAP) and other critical programs. We appreciate your work in Congress to expand and improve these critical federal nutrition programs.

We also lead on systemic solutions, like our Flexible Services Program pilot under the 1115 MassHealth Demonstration Waiver that we launched in April 2020, with Community Care Cooperative, Boston Medical Center, and Boston Children's Hospital to address hunger as a part of health. With this program, we receive referrals from these three Accountable Care Organizations (ACOs) and work closely with patients for 6 to 9 months to address their barriers to food access. We sign them up for SNAP, supplement SNAP with grocery store gift cards, and for 12% of our patients, we refer them for medically tailored meals, including programs such as Community Servings.

However, food is not the only thing these patients lack. 82% of them need basic kitchen equipment such as plates, cups, utensils, toasters, and in some cases, a refrigerator. We also provide nutrition counseling, cooking classes, and transportation to grocery stores and food





programs. There are many barriers to accessing food, and we work to address them all through intensive case management with a coordinator who speaks the patient's native language.

Since we launched this program, we have helped over 4,000 patients to date, and we will serve and additional 3,000 this year. Take one of our clients, "CM," as an example. She enrolled in our program after losing her job. We helped her apply for SNAP, and she now receives \$205 in benefits each month. As part of the program, she received 6 months of grocery store gift cards totaling \$900. Because of a medical condition requiring her to eat soft foods, we worked with her to identify nutritious meals that worked for her, and we bought her a blender and other kitchen items to help with meal preparation. As of this past fall, she was back to working two days a week and has regular access to healthy food.

This program should serve as a national model, and the results prove that it works. Our data shows that we have reduced food insecurity by 25%, increased fruit and vegetable consumption by a half serving per day, and increased SNAP utilization by 12.4%.

In addition to improving outcomes for patients and reducing health care costs, we are excited to be leveraging health care as an access point. When providers screen for food insecurity, they want to know where to send their patients. Partnerships between health care providers and organizations like Project Bread are vital. This program also provides us an incredible data feedback loop so that we can see what is working and what is not. In partnership with Dana Farber Cancer Institute, our latest research will look at what aspects of this program are sustainable to produce a long-term reduction in food insecurity to help inform future models.

It is famously said that states are the laboratories of a democracy. This is a model that is working and should be further studied, replicated, and supported by Congress. Other states should take advantage of the waivers offered by the Centers for Medicare and Medicaid Services (CMS) to implement programs like this. It is the kind of systemic change needed to permanently solve hunger.

Thank you for your time and consideration.

Sincerely,

Erin McAleer
President & CEO
Project Bread

