

## FOOD &amp; NUTRITION

# Report Shows Food is Medicine Interventions Would Save Lives and Billions of Dollars

Incorporating targeted nutrition strategies into health care will improve health and quality of life, reduce work for hospitals, and cut healthcare costs, experts say



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September 26, 2023

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Incorporating targeted food and nutrition strategies into healthcare on a national level will improve health and quality of life, reduce work for hospitals, and cut healthcare costs, according to experts studying Food is Medicine (FIM) efforts. The health and economic benefits of this approach are [detailed in a report out today](#) from researchers at the Food is Medicine Institute at the [Friedman School of Nutrition Science and Policy at Tufts University](#), through support from [The Rockefeller Foundation](#).

The *True Cost of Food: Food is Medicine Case Study* quantifies the potential health and economic benefits of FIM efforts, which refer to food-based nutrition interventions integrated into the healthcare system to treat or prevent chronic diet-related disease. This approach has shown promise in recent years for not just boosting nutrition and improving health outcomes, but also for reducing food insecurity and increasing health equity.

According to research data presented in the report, national implementation of Medically Tailored Meals (MTMs) in Medicare, Medicaid, and private insurance for patients with both a diet-related condition and limited ability to perform activities of daily living could avert approximately 1.6 million hospitalizations and result in an estimated net savings of \$13.6 billion in health care costs in the first year alone, after accounting for implementation costs.

Further, the report shows that national implementation of produce prescription programs for patients with both diabetes and food insecurity could avert 292,000 cardiovascular events and add 260,000 quality-adjusted life years—a measure of how well a treatment lengthens or improves patients' lives—while being highly cost effective from a health perspective (based on an incremental cost-effectiveness ratio of \$18,100/quality-adjusted life years) and cost saving from a societal perspective (based on a net savings of \$-0.05 billion).

"Today's report further demonstrates how FIM interventions like medically tailored meals and produce prescriptions, combined with nutrition education for doctors and insurance coverage of nutrition counseling provided by a registered dietitian, could make a real difference in the 10,000 weekly [U.S. deaths](#) and [\\$1.1 trillion](#) in annual healthcare spending and lost productivity due to poor diets," says the report's senior author, Dariush Mozaffarian, a cardiologist and Director of the Food is Medicine Institute.

The *True Cost of Food: Food is Medicine Case Study* report comes in the wake of September 2022's historic White House [Conference on Hunger, Nutrition, and Health](#) and accompanying [National Strategy on Hunger, Nutrition, and Health](#), both of which centered the need to harness the potential of FIM. The report discusses several potential national policy solutions, organized broadly around developing infrastructure, generating opportunities and funding, and strengthening United States Department of Agriculture nutrition programs.

"The true costs of our food system—the environmental impact of how food is produced, the working conditions of the people who grow our food, and the impacts on our health, health care spending,

and health equity are too often left off the price tag,” said Devon Klatell, Vice President, Food Initiative at The Rockefeller Foundation. “This report can assist governments, companies and consumers in better evaluating the value of Food is Medicine interventions by considering not just the price paid for food, but the return on investment in improved health outcomes they can deliver. We look forward to working with all sectors to further advance our collective knowledge and understanding of the potential of Food is Medicine interventions.”

The report findings are built on the foundations of two studies published separately in peer-reviewed scientific journals. The first, *Association of National Expansion of Insurance Coverage of Medically Tailored Meals With Estimated Hospitalizations and Health Care Expenditures in the U.S.*, is a health and economic evaluation of the true cost of expanding implementation of MTMs nationally. The second, *Health and Economic Impacts of Implementing Produce Prescription Programs for Diabetes in the United States: A Microsimulation Study*, is a health and economic evaluation of the true cost of expanding implementation of produce prescriptions nationally for adults with diabetes and food insecurity.



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