

Medically Tailored Home-Delivered Meals Program Pilot Act



Passing the Medically Tailored Home-Delivered Meals Demonstration Pilot Act will **save money and save lives by expanding access to MTMs**. The bill would expand access to Medically Tailored meals by **creating a Medicare pilot** to address the link between diet, chronic diseases, and the health of Medicare enrollees and people with disabilities.



The bill cares for seniors and people with disabilities. The bill will ensure that medically vulnerable seniors and people with disabilities can access medically tailored meals and produce data from the pilots that will help America build a resilient and cost-effective health care system



The bill is cost neutral. By offsetting the revenue that hospitals receive for each MTM pilot participant with an equivalent reduction in the amount of per-patient discharge fees from CMS, the bill creates budget neutrality.

Among individuals with complex health conditions, medically tailored meals (MTMS) led to:¹

16%

Reduction in Net Health Care Costs

50%

Decrease in Hospitalization

70%

Drop in Emergency Department Visits

According to an independent cost-modeling study by the Tufts Friedman School of Nutrition Science and Policy, if all eligible patients received MTM, nearly:²

2.6M

hospitalizations could be avoided

& \$23.7B

could be saved in just the first year.

¹Berkowitz SA, Terranova J, Randall L, Cranston K, Waters DB, Hsu J. Association between receipt of a medically tailored meal program and health care use. JAMA Intern Med. 2019;179(6):786-793. doi:10.1001/jamainternmed.2019.0198

²Deng, S., Hager, K., Wang, L., Cudhea, F. P., Wong, J. B., Kim, D. D., & Mozaffarian, D. (2025). Estimated impact of medically tailored meals on health care use and expenditures in 50 US states. Health Affairs, 44(4), 433-442. <https://doi.org/10.1377/hlthaff.2024.01307>

About The Medically Tailored Home-Delivered Meals Program Pilot

GOAL:

Evaluate the impact of a medically tailored meal intervention on health care utilization, clinical outcomes, patient satisfaction, and overall health care expenditures for Medicare beneficiaries living with certain diet-sensitive chronic health conditions following in-patient hospitalization.

THE MTM INTERVENTION:

- ✓ Pilot will operate in at least **40 HOSPITALS**.
- ✓ Medicare beneficiaries with certain chronic health conditions will receive a **12-WEEK MINIMUM** MTM Intervention.
- ✓ The MTM intervention includes at least **2 MTMS PER DAY**, or more; and access to one-on-one nutrition counseling, education and/or **MEDICAL NUTRITION THERAPY**.

Health conditions include:

- Congestive heart failure
- Diabetes
- COPD
- Chronic kidney disease
- Other diseases that frequently cause patients to need care in hospitals



ELIGIBILITY:

- ✓ To participate in the demo, a hospital must attest that it has: (1) no outstanding Medicare overpayments; (2) at least 3 Medicare quality stars; and (3) the ability to comply with program requirements. Hospitals may apply in partnership with any entity that can provide the full intervention of meals and nutritional counseling/Medical Nutrition Therapy.
- ✓ CMS is required to implement the demonstration in diverse geographic regions, including rural and medically-underserved communities to participate in the demonstration.
- ✓ Eligible individuals must have at least 2 or more activities of daily living limitations.

FIMC supports an experience requirement of at least one year for organizations providing MTMs and partnering with hospitals.

REPORTING:

THE HHS SECRETARY WILL REPORT KEY OUTCOMES:

- Health care utilization
- Hospital admission and readmission
- Skilled nursing facility admission
- Patient satisfaction
- Overall cost to the Medicare program
- Relevant clinical outcomes for an individual's chronic health conditions

The bill requires the Department of Health and Human Services (HHS) to:

- **Examine the feasibility and impact of implementing cost sharing requirements.**
- **Analyze the health outcomes of people participating in the MTM pilot program and compare the results to outcomes from individuals using similar services provided by Medicare Advantage plans.**
- **Determine the number of MTM pilot participants who also participate in a similar federal or state program.**

CURRENT STATUS OF MEAL COVERAGE IN MEDICARE

In traditional Medicare - covering approximately half of Medicare beneficiaries - there is **NO COVERAGE FOR MEDICALLY TAILORED MEALS** at all.

In the Medicare Advantage Program--covering about 50% of Medicare beneficiaries -- insurers can **OPT** to include meals as a supplemental benefit for **CERTAIN BENEFICIARIES** under narrow circumstances.

Where a demonstration model achieves savings and maintains or improves quality, **CMS** has the **AUTHORITY TO EXPAND** the model to the full Medicare program.

MEDICALLY TAILORED MEALS DEFINED

The Medically Tailored Meal (MTM) intervention is the comprehensive process of delivering meals to individuals living with severe, complex or chronic illness(es) using therapeutic, evidence-based dietary specifications for conditions, based on an assessment of the individual's nutrition needs by a Registered Dietitian Nutritionist (RDN) or other nutrition professional.