

Foodsmart FAQ

Updated 2/5/2024

Data

Will Foodsmart be tracking clinical outcomes?

Yes, Foodsmart will be providing and tracking data related to clinical outcomes. In partnership with Foodsmart, the Flexible Services team access data and reporting tools to share on a regular cadence with RSOs.

Regarding nutrition, what is the difference between budget versus allocations?

MassHealth gives ACOs a certain budget for their Flexible Services Program. MGB calculates the total number of referrals for flexible services using that budget, cost per member per enrollment and Medicaid risk lives.

Food Insecurity

How will Foodsmart handle nutritional education needs versus food insecurity?

When members meet with a Foodsmart RD for the first time they will have the opportunity to share previous nutrition intervention or programs they may have worked with in the past. RSOs will also be able to share this type of information when referring. This collaborative meeting, and RSO input, combined with the Nutriquiz (a snapshot of daily behaviors around food), will guide the RD and member in crafting the most appropriate care plan to meet the member's needs.

How does this program intersect/interact with the MGB Food Justice strategy work that Priscilla Wang and team came to speak to us about a few months ago? (SNAP enrollment etc)?

Priscilla Wang's team leads the United Against Racism Nutrition Equity strategy. This is a broad nutrition equity strategy for MGB that focuses on advancing nutrition equity for all patients, through the pillars of increasing access, food as medicine, community investments and advocacy. They have specific programming focused on connecting ACO members to SNAP and WIC but is not the same as Flexible Services. Their other initial programming is not specifically Medicaid oriented.

Miscellaneous

Will Revere Food Pantry be contracted with Foodsmart?

No, Foodsmart is not contracted with Revere Food Pantry. RSOs will handle Revere Food Pantry the same way as was done in the past. There is future discussion about the possibility of Foodsmart contracting with Revere Food Pantry in phase 2, but for now, that is not the case.

Engagement

How fast is Foodsmart processing referrals and what will the turnaround time look like?

Foodsmart's RDs will be looking at referrals as they come through, on a daily basis. Our Flexible Services team is finalizing a list of KPIs to track this quarter, which will include referral turnaround time.

Background

What is Foodsmart?

Foodsmart is the nation's largest provider group of telehealth registered dietitians (RDs) who offer medical nutrition therapy (MNT) and nutrition counseling. They also counsel patients on using Foodsmart's system of meal planning and grocery shopping. This, combined with Foodsmart's integrated food delivery marketplace, healthier eating becomes easier, faster, and more affordable, especially for underserved communities.

Why did MGB HP and MGB decide to contract with Foodsmart?

MGBHP and MGB chose to contract with Foodsmart to standardize access, promote equity, reduce the administrative burden of referrals on RSOs, and increase member access to resources dedicated to food security. Through Foodsmart, members can have six visits with registered dietitians, supporting SNAP enrollment and developing a patient centered care plan completed customized to their circumstances utilizing SSOs.

What SSOs are contracted with Foodsmart?

About Fresh, Community Servings, Fresh Food Generation, Just Roots, and Western Massachusetts Food Partnership.

What experience does Foodsmart have with Medicaid?

Foodsmart has extensive experience working with Medicaid plans nationwide. With a network of over 600 RDs in all 50 states, Foodsmart holds contracts to serve Medicaid managed care plans across the country. RDs are specifically trained to help Medicaid members navigate food insecurity while improving nutrition quality.

How will Foodsmart support MGB ACO members?

Screen for Flex Services: Upon referral from qualified health providers in the MGB network, members will have the opportunity to work with a nutrition coach (RD) and screen for relevant nutrition services such as weekly food boxes, medically tailored meals, food cards to use for healthy fruits & vegetables.

Eat Better: As part of their care plan, Foodsmart RDs will guide MGB members through a course of nutrition education and skill development to enable them to eat more healthfully while receiving support around how to shop for better food on a limited budget. This is done during the time the member is receiving Flex Services food support in order to thoughtfully transition the member on, and off, of food assistance, and set them up for success on the other side.

Save Money: Foodsmart provides members with opportunities to **save money** on their groceries through its price comparison tools, and by elevating the healthiest foods that fit budgets. By gaining support on how to grocery shop digitally and compare prices, the average grocery cart costs 34% less through Foodsmart. **Save Time**: Working with Foodsmart can help members **save time**, since their RD nutrition coach and the platform will help select recipes that fit their time constraints and budget, as well as cultural preferences and number of mouths to feed, then automatically set up a grocery cart to order food or groceries for pickup/delivery, saving members 2-5 hours each week on time required to shop for groceries. Through shopping for groceries online, with support, members also overcome transportation challenges to both getting to/from grocery stores, as well as transporting food.

When does Foodsmart start?

January, 2024

Is there a utilization cap on Foodsmart in regards to Flex Program?

Members may be enrolled in flexible nutritional support services for up to 6 months.

There is federal language out about renewals after 6 months. Do we know anything more about it from MassHealth?

We do not plan to extend enrollments or offer renewals at this time. We will be monitoring referral utilization to re evaluate if necessary and if capacity allows.

Engagement and Access

Who is the on Foodsmart Care Team?

The Foodsmart Care Team supporting MGB consists of approximately 25 RDs supported by administrative coordinators who assist with scheduling.

Is meeting with an RD required to access goods/services or can members opt out?

Yes, it is required. As members engage with their dietician, they will have to opportunity to gain tactics to help maintain a sustainable path after their flexible services end. It is also critical that the RD monitors the member's clinical progress and utilization of food administration to maximize the potential for positive outcomes. As there are variations in member's willingness/readiness to engage in the nutrition care; the RD can realign the nutrition care plan.

Are there any other additional requirements for participation?

No. A member must be in the MGB ACO and eligible for flexible services.

How are member's expected to sign consent forms- can they give verbal consent or is a Docusign/physical signature required?

All new members fill out a digital consent form- one time only- during the virtual check-in immediately prior to their first appointment. If a digital signature is not feasible, Foodsmart can accept verbal consent.

How will Foodsmart incorporate cultural considerations? What languages do they speak?

Foodsmart hires RDs with cultural considerations in mind and provides specific training. RDs are well-versed in culturally competent flavors and ingredients. They speak over dozens of languages natively and interpreter services are available for languages they do not speak.

What can members use the Foodsmart app for?

The Foodsmart app complements virtual visits with nutrition coaches. Members can browse recipes, use meal planner tools, access grocery coupons, and directly order from the Foodsmart Marketplace.

Are there alternative options if members are unable to access/utilize the Foodsmart app and its resources? How will Foodsmart accommodate these members?

Foodsmart's goal is to meet members where they are in terms of internet access/technology. The expectation is that members participating in this program will have access to internet for the telehealth appointment. However, telehealth appointments can be audio only if needed, rather than utilizing the app/virtual appointments. Foodsmart RDs can provide information in the mail.

How will member feedback be assessed and included in process improvement activities? What would be the escalation process for member complaints such as access, RD concerns, etc?

All members are asked to take an NPS survey shortly after their appointments with a dietitian. This will allow Foodsmart to gauge how favorably they come away from their experience. If there's an issue, members can

email support@foodsmart.com, and Foodsmart plans to establish a "508" help line to address concerns as they arise. Additionally, RSOs can reach out to the Flexible Services team directly to escalate issues.

Will members have the opportunity to share with RDs inventions that have been successful in the past or historical strategies for food security? i.e. will it be a patient centered collaborative setting?

Absolutely. Members are encouraged to share any relevant information, for example, current circumstances, medical history, family history, or previous work with registered dietitians or nutrition coaches.

Does Foodsmart have any criteria they can share around how RDs will determine what services members will receive/what SSOs they will be connected to?

Foodsmart uses a proprietary patient evaluation criterion to identify the best food care intervention. Their method combines a patient's clinical presentation (diagnoses, health challenges and goals) with an assessment of the type of food support best matching SDOH circumstances, as well as, their unique food/preferences which includes food restrictions and allergies. This allows for members to receive the most appropriate food relative to their social and lifestyle circumstances and personal preferences. Members will receive up to 6 months of an intervention depending on their presentation and Foodsmart titrates the intervention up and down based upon RD observations.

Will RSOs have opportunities to meet with Foodsmart other than at the Meet and Greet and/or be involved in program evaluation?

We are chartering a committee that will allow for RSO teams to participate in process and programming evaluation, alongside the MGB, MGB Health Plan and Foodsmart teams.

How and when will RSOs receive data from and about Foodsmart?

Findhelp will function as a closed loop referral home. This means that RSOs will be able to see SSO enrollment in Findhelp following Foodsmart referrals. The MGB Flexible Services team is committed to providing regular updates and data to RSOs about Foodsmart.

How can RSOs impact decisions and provide input about care plans and SSO referrals?

Foodsmart welcomes and encourages RSOs to provide input on the VPR form. This can be done in Part II, when asked, "Please add any additional information about HNBC or Risk Factors that can be useful to inform delivery of services."

What should RSO referral teams tell members? Is there a script?

A script is pending with Foodsmart and we will share it as soon as possible. We will also provide an informational flyer/brochure. Referral teams may share information from this FAQ, as well.

Program Operations

What role do RSOs and care teams play in this process in the new model? How will care teams identify/refer members?

The role of RSOs and care teams has not changed. They will continue to refer members through the existing VPR/Findhelp process.

How will RSOs and care teams see member enrollment?

RSOs and care teams will refer members to Foodsmart using the existing referral process. Foodsmart will create a referral loop using Findhelp, allowing RSOs/care teams to see enrollment in specific programming following referrals.

How will Foodsmart work with RSOs?

RSOs will refer members to Foodsmart. Foodsmart plans to build relationships with RSOs, including providing an informational training sessions.

Will RSOs be given slots amounts for specific SSOs?

RSOs will be given total slots for nutrition referrals. Foodsmart will receive the referrals and refer to the appropriate SSOs.

How will Foodsmart work with SSOs?

Foodsmart will function as the nutrition hub, with SSOs are the spokes. Foodsmart RDs will craft care plans consisting of the best fit SSOs to meet the member's needs and geography. Once Foodsmart has finalized contracts we will share the organizations they will work with.

Will the claims-based member lists that Foodsmart generates be restricted by catchment areas and/or will they be referred for a certain type of service? Or are RSOs able to select any ACO members (beyond the Foodsmart lists) from any catchment for these services, the way we can with Community Servings?

MGB will provide Foodsmart with members, Foodsmart will not be generating lists. Foodsmart will determine the type of service by need and geography and refer to the appropriate SSO. RSOs will have a total number of referrals for nutrition services connecting members to the Foodsmart hub.

Will members who started services in 2023 have to connect with an RD to continue services into 2024?

No. Members who began services in 2023 will continue for the up to 6 month duration without needing to meet with Foodsmart RDs.

Food Insecurity

What intervention(s) are provided that have an impact on patients' long(er)-term food security (once food is no longer being provided through Flexible Services)? What evidence is Food Smart able to provide about the short and long-term impact to food insecurity and health outcomes once program enrollment has ended? Foodsmart has a dossier of research supporting their work, specifically related to food insecurity and health outcomes. For example, a 2022 study displayed that 42% of food insecure members became food secure following at least 6 months of Foodsmart platform use. Further research supports improved health outcomes related to diabetes, hypertension and obesity. Ultimately, when the Flex Services food support ends, the member will have developed skills to remain food secure, better manage chronic disease, and live a healthier life through better nourishment.

Technology

How will Foodsmart and Findhelp work together?

All Flexible Services referrals, for both nutrition and housing, will continue to be placed using the VPR + Findhelp system. Foodsmart will receive referrals through Findhelp, the same way SSOs have been. RSOs are now referring directly to Foodsmart for all nutrition referrals. When Foodsmart places referrals to SSOs, RSOs will be able to see, in Findhelp, that the referral was placed, where it was placed to and the status.

How will Foodsmart and Epic work together?

On 1/2/24, Epic will update to reflect the transition to the Foodsmart Hub model. Please see the screenshot below for an example.

2) Name Organization

Southern Middlesex Opportunity Council (SMOC)	Metro Housing Boston	Community Teamwork Inc (CTI)	NeighborhoodWorks Housing Solutions
BWH's Vida Felize	MGH Food Pantry	Vinfen	Wayfinders
Foodsmart	Housing Families		