

MAP: Improving Community-Based Social Supports to Achieve Maternal Infant Health Equity and Quality: Food and Housing Security

Breakout Room Summary

January 24, 2024

Theme 1: Improving individual's and families' access to reliable and affordable healthy foods

<p>Logistics and financing of the Eat Well Initiative</p>	<ul style="list-style-type: none"> • A mobile grocery store or farmers market is not a new concept, but it is new to healthcare. It took a lot of community outreach and sensing to identify where the van needed to go. Virtua leaned on existing partnerships and resources, like research maps. Additionally, they looked at the community health needs assessment to identify areas of need • In-house philanthropy team played a huge role in financing this van. The team showed them the gaps and where they wanted to go with the van • Generous gifts helped get this initiative off the grant; it took ~\$200-250k to get this started • Biggest challenge: procurement of goods; finding a food vendor was difficult given the size of the market the van services <ul style="list-style-type: none"> ◦ Developed a relationship with Whole Foods in Marlton, NJ • Minimum of 25 items on board the van per time
<p>How can an organization connect with Melanie to learn more and take this on in their own community?</p>	<p>Reach out to eatwell@virtua.org . This is the email inbox Melanie manages solely for EatWell correspondence.</p>
<p>What are the longer-term strategies to fund this initiative?</p>	<ul style="list-style-type: none"> • Cost is being offset through community benefit dollars. Virtua is working towards more sustainable funding through partnerships through Rowan University and other community-based organizations to pool grant-funding efforts in the community. There are opportunities and strength in collaboration (i.e., hospital, university, and CBO all working together for a common cause) • Virtua is also in the process of considering how to engage with longer-term sponsorships for work in specific communities.
<p>How do you set up the mobile market to accept SNAP from a Single POS? Did you have to register centrally or by each municipality?</p>	<p>Virtua has 1 central registry for commissary and distribution center, which allows them to have 1 central location for SNAP, but this allows them to accept SNAP at the multiple locations their van visits.</p>
<p>Can WIC vouchers be used?</p>	<p>They are actively working on this now. Mobile Farmer's Market is an aggregator of goods, as opposed to a true farmer's market.</p>

<p>Location, days, and times of operation: How do you decide where and when you are going to a location?</p>	<ul style="list-style-type: none"> Information on the schedule can be found here: www.virtua.org/about/eat-well Eat Well partners with Camden’s Housing Authority, and senior citizen housing buildings to bring their service to communities that lack transportation.
<p>Is data being collected and analyzed?</p>	<ul style="list-style-type: none"> They have a Community Health Worker engage with the data. There is no formal data collection process from the mobile market visitors. They do have a newsletter, where they are able to keep in touch with past visitors. Eat Well’s clinical program (Food Farmacy) has the best data collection since the program is linked with patient records/illness.
<p>Does Food Farmacy provide access to a Registered Dietitian Nutritionist?</p>	<p>Yes, our Food Farmacy is staffed by a full-time Registered Dietitian who meets once per month with each patient enrolled.</p>
<p>Is there a cost after 6 months for the Food Farmacy? Also, why are individuals limited to 6 months of free access to this program?</p>	<p>There is no cost to participate with the Food Farmacy. Due to the intensive nature of the program, and the high demand for service, patients are limited to a 6-month service plan at the Food Farmacy. Throughout the course of treatment and beyond, our Food Farmacy team is in contact with the patient’s primary care team to coordinate after care and any additional supports needed</p>
<p>Do you work with local CSA farms?</p>	<p>We do have a relationship with some local South Jersey growers who may also be a CSA provider, but our Eat Well programming is not directly involved with a CSA.</p>
<p>Are individuals who are screened for preventive services connected to care, are those results shared with care providers and for those who may be uninsured /experiencing SDOH are they connected to resources?</p>	<p>Market-side preventative healthcare screenings are for educational purposes only rather than diagnostic. If a visitor to the mobile market receives a screening result that is of concern to our CHWs/Health Educators, they are referred to follow up with their primary care provider, or the nearest urgent care or clinic. Screeners do provide assistance with finding follow up care if requested. Additionally, we use the tool FindHelp to connect consumers to additional SDOH supports as needs are presented.</p>
<p>Do you reconnect with visitors/clients to determine longer term effects on health outcomes? Or is this one of the things you are hoping to see with the expanded fleet of vehicles?</p>	<p>We do follow up with patients of the Food Farmacy and their care team on longer term health outcomes, however, this is not something Eat Well mobile programming alone offers. When we have the opportunity to partner with other prevention services within Virtua, i.e., Mobile Health and Cancer Screening, those programs do the clinical follow-up.</p>
<p>Can you share more about the CHWs working with you?</p>	<p>Virtua has a dedicated team of Community Health Workers as part of our mobile program staffing. Each of our CHWs has completed a certificate program sanctioned by the NJDOH.</p>

Theme 2: Implementing NJ Medicaid food and housing-related services benefit.	
How can individuals sign up for a stakeholder group?	The Housing and Behavioral Health are the two major stakeholder groups. Participants can reach out to Jonathan Tew's email for details.
Are your services for people who are already housed?	No. The services are mostly designed for people who are not housed, and include populations who may be in transition (e.g., nursing facilities, individuals who are incarcerated, and those who are homeless).
According to federal rules, is it possible for Medicaid to use Medicaid funds to provide housing or rental assistance?	It's tough to make a blanket statement – Although, Massachusetts and Arizona did get approval for up to 6 months of rent for their housing services. CMS is still figuring out their rules around rent.
Why didn't Medicaid pursue rent assistance?	This opportunity was not presented during the development of the waiver proposal. COVID was also an unexpected barrier, however, this will be explored in the future.
Is the housing portion of the Medicaid 1115 waiver like the MFP program?	MFP stands for the Money Follows the Person Program. Yes, there are similarities, but the housing services are offered more broadly and will focus more on those who are in transition (nursing home, individuals who are incarcerated, etc.).
Is there a program in place that will enroll members into housing depending on their county? Rent can vary depending on the county.	CMS has approved the six months of rent for other states, not New Jersey. New Jersey may be able to look at this in the future, as our state has received funding for the assistance with transition services.
How often would this be available to families?	Our approval does not have any rules on utilization but will be included in future discussions.
Are individuals able to join existing groups working on housing efforts? Are there priority groups who will have access to these housing services (such as pregnant individuals)?	Yes, we would love to work with existing groups to collaborate. Within their special terms and conditions, FTCs allow our waiver to target broad populations. Stakeholders are currently working on if groups should be prioritized based on FTC requirements.