Enrollment in Federal Nutrition Programs: A Strategy to Prevent and Treat Obesity

Childhood Obesity Conference

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Access to SNAP in Early Life Improves Health and Economic Self-Sufficiency and Reduces Incidence of Metabolic Syndrome

WIC Participation Decreases Obesity and Improves Health and Developmental Outcomes

WIC provides:
- Nutritious foods
- Nutritional education
- Breast feeding support and pumps

WIC serves:
- Pregnant women
- Children under 5 years of age

Eligibility:
- Residence (citizenship not required)
- Income- 185% of poverty guidelines

Participation in WIC is associated with:
- Decreased infant mortality in AA women
- Improved food security and reduction in poverty
- Reduced caregiver depression/stress
- Decreased low birth weight and improved child development
- Decreased adult obesity and metabolic syndrome

Black, WIC Participation and Attenuation of Stress-Related Child Health Risks and Caregiver Depressive Symptoms, Arch Peds & Adol Med, May 2012
Black, Women, Infants and Children Participation and Infants’ Growth and Health, Pediatrics 2004;114: 169-176
Long-Term Benefits of Supplemental Nutrition Assistance Program Dec 2015
American Academy of Pediatrics Policy Statement: Promoting Food Security for All Children

- Food insecurity is associated with poorer physical, mental health, behavioral, and developmental/academic outcomes

- Recommendations for pediatricians
  - Learn how food insecurity impacts health
  - Two-item screening tool at health maintenance visits
  - Familiarize yourself with community resources
  - Be advocates for increasing access to and funding for government nutrition assistance programs

Promoting Food Security for All Children; PEDIATRICS Volume 136, number 5, December 2015
IMPLEMENTATION OF FOOD INSECURITY SCREENING AND REFERRAL PROGRAM
Connection to Resources Easier with Hunger Free Colorado Statewide Bilingual Hotline

- Screen residents for all federal nutrition programs
- Complete a SNAP or WIC application over the phone
- Connect to food resources: local food pantries, farmer’s markets, Meals on Wheels, soup kitchens, senior centers with meals

www.hungerfreecolorado.org
Silent Epidemic: KPCO Food Insecurity 2011
Results of Screening in Two Pediatric Clinics

Household Food Insecurity Prevalence

- Smoky Hill Clinic
- Westminster Clinic

Household Food Insecurity Prevalence
Lessons Learned in Pediatric Pilot KPCO-2011

- Providers unaware of prevalence/imacts of food insecurity
- Providers unaware of benefits of Federal Nutrition Programs
- Providing hotline card to food insecure members resulted in only a 5% connection to Hunger Free Colorado
- Outreach process increased connection to HFC from 5%-75%

http://healthaffairs.org/blog/2015/07/13/linking-the-clinical-experience-to-community-resources-to-address-hunger-in-colorado/
Expansion of Food Insecurity Screening and Referrals in Kaiser Permanente Colorado

**Screen**
- Fi question screen embedded in clinical visits (Well Child Visits, First Prenatal Visit, Registered Dietitians New Visits, Complex Care Visits, Medicare Total Health Assessment)
- Positive screens: verbal permission for release of information to Hunger Free Colorado (HFC)

**Refer**
- Affirmative responses “trigger” message to Community Navigators (CN)
- CN completes referral form to HFC within EMR
- CN faxes from EMR to HFC

**Outreach**
- HFC contacts family via phone within 3 business days
- Three phone call attempts, then email
- Assists family with SNAP/WIC enrollment/navigation
- Explores needs and provides additional food resources
- Data recorded by HFC staff

Patient level data report sent monthly to KP by Secure File Transfer

Kaiser Permanente Yearly Household Referrals to Hunger Free Co
Expansion of Food Insecurity Screening and Referrals in Colorado

- KPCO is providing grant funding & technical assistance to healthcare systems to increase enrollment in SNAP & WIC in partnership with HFC, State WIC director, Co. Academy of Pediatrics

- Results: medical partners have implemented hunger as a vital sign, captured data in the EMR, developed electronic referrals and developed emergency referrals to food pantries

- Evaluation of food insecurity screening and referral on SNAP and WIC enrollment
Next Steps in Colorado to Promote Food Security for Pregnant Women, Children and Families

- Enroll all Medicaid pregnant women/children from birth-5 years in WIC
- Advocate for simultaneous enrollment in medical, food assistance benefits with state partners
- Evaluate impact of food insecurity screening and referral on food security, diet quality and health and health utilization
- Participate in state coalitions to improve enrollment in federal nutrition programs and affordable healthy food access.
Food Insecurity Screening Algorithm for Pediatric Patients

Preface Questions with:
"I ask all of my patients about access to food. I want to make sure that you know the community resources that are available to you. Many of these resources are free of charge."

Screening for Food Insecurity Using the Hunger Vital Sign*™

Screening Parents or Caregivers of Young Children (0-11 yrs)

“For each statement, please tell me whether the statement was
Often True, Sometimes True, or Never True for your household in the past 12 months.”
“Por cada una de las siguientes declaraciones, por favor indique si la declaración se aplica a su familia frecuentemente, a veces o nunca durante los últimos 12 meses.”

1. “We worried whether our food would run out before we got money to buy more.”
   “Estábamos preocupados de que los alimentos se acabaran antes de que tuviéramos suficiente dinero para comprar más.”

2. “The food we bought just did not last, and we did not have money to get more.”
   “Los alimentos que compramos no duraron mucho, y no teníamos suficiente dinero para comprar más.”

Screening Adolescents (>11 yrs)* (If possible, assess with confidential questions)

“For each statement, please tell me whether the statement was
Often True, Sometimes True, or Never True based on your experiences in the past 12 months.”
“Por cada una de las siguientes declaraciones, por favor indique si la declaración se aplica a su familia frecuentemente, a veces o nunca durante los últimos 12 meses.”

1. “I worried about not having enough to eat.”
   “Me preocupé sobre no tener suficiente que comer.”

2. “I tried not to eat a lot so that our food would last.”
   “Traté de no comer mucho para que nuestra comida dure.”
If Often True or Sometimes True to EITHER STATEMENT

STEP 1: Assess and treat, if indicated
• Growth parameters (underweight, overweight, and short stature)
• Problems with behavior and/or development
• Dental caries
• Iron deficiency
• Child or parent depression or anxiety
• Academic underperformance
• Asthma

STEP 2: Code for Food Insecurity
Z59.4: Lack of adequate food and safe drinking water

STEP 3: Refer to Food Resources
• Sustainable food resources may include:
  - SNAP: formerly Food Stamps
  - WIC: pregnant women & children <5 years old
  - School breakfast/lunch
  - Afterschool meals and snacks
  - Summer meals programs
• Emergency food resources may include:
  - Food pantries
  - Soup kitchens/free dining rooms
• Enroll in all eligible benefits
  (childcare assistance, Medicaid, TANF, etc.)

STEP 4: Follow-Up at Next Visit
Follow-up on referrals to food resources
### Nutritional Resources

<table>
<thead>
<tr>
<th>Federal Nutrition Resources</th>
<th>Local</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supplemental Nutrition Assistance Program (SNAP)</td>
<td>Money provided on a debit card to purchase food. The average benefit is about $127 per month per person. <a href="http://www.fns.usda.gov/snap">www.fns.usda.gov/snap</a></td>
</tr>
<tr>
<td>Women, Infants, and Children (WIC) Program</td>
<td>Nutrition assistance for pregnant women and children until the age of 5 to purchase specific healthy food items. Breastfeeding counseling &amp; breast pumps available <a href="http://www.fns.usda.gov/wic">www.fns.usda.gov/wic</a></td>
</tr>
<tr>
<td>School Meals Programs for Children</td>
<td>Free or reduced price meals for income eligible students of all ages. <a href="http://www.fns.usda.gov/school-meals/school-meals-contacts">www.fns.usda.gov/school-meals/school-meals-contacts</a></td>
</tr>
<tr>
<td>Food Banks</td>
<td><a href="http://www.feedingamerica.org">www.feedingamerica.org</a></td>
</tr>
</tbody>
</table>
Resources

- NOPREN [https://nopren.org/](https://nopren.org/)
Thank you

Sandra.H.Stenmark@KP.org
Translational Challenges and Using Policy to Scale Up Existing Models

I am Melissa Cannon, RD, CDE®
I work at California Food Policy Advocates
As a Nutrition Policy Advocate
ARTICULATING CHALLENGES

www.cfpa.net | @cafoodpolicy
Silos

- WIC Medical Referral Form
- Using health system to do public health work
- Infrastructure
- Knowledge of where to refer
- Health Disparities
- Awareness
- Space
- Time
- Funding
- Stigma
- Confidentiality
- Knowledge of screening
- Provider Education
- Electronic Medical Records
- Lack of Training
- Documentation
- Overburdened Clinical Staff
- Hard to get physicians to change
- Lack of Modernization
- Gaps Between Health Systems
- Community Perception
- Connectivity
- Resources
- Potential for Strain on CBOs
- Not a covered benefit
- Multiple EHRs
- Data Collection
- Lack of Community Data
- Regulation
- Billing
- Leadership Buy-in
- Missing Standardized Measures
- Compliance and Regulations
IDENTIFYING SOLUTIONS
Many families work hard contributing to one of the world’s strongest economies and still struggle to provide for themselves and their families.
Families across the nation struggle with high costs of living and extremely limited access to affordable child care. These factors impair access to healthy foods for our youngest learners.
At the same time, millions of school-age children do not have easy access to the food or other resources they need to achieve at their fullest potential even within the places they study.
SCALING UP THE FEDERAL NUTRITION PROGRAMS –
A TRUE OPPORTUNITY TO SUPPORT FOOD SECURITY

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Policy change is needed
Provide testimony at local hearings and meetings

Join local coalitions and advocacy groups

Lobby local city and county government. Do administrative advocacy with local agencies

Share your stories
At the State Level

- Stay informed, subscribe to e-alerts
- Get your organization to send in LOS
- Get your membership organization to send in LOS
- Call, tweet to, email your state assembly member & senator
- Meet with your state assembly member & senator
- Attend legislative lobby days
- Contribute your personal story – offer to provide testimony at hearings, write op-eds.
State Watch

**CFPA | 2017 STATE LEGISLATIVE AGENDA**

**State Table**

**CFPA | 2016**

Federal Watch

**Child Nutrition**

Learn + Grow + Achieve

**CFPA | 2016**

**State Legislative Agenda**

**CFPA | 2017**

**What's Fresh**

**Action Needed on Safe Water through CalFresh!**

5.27.17 Struggling Californians without safe water need your help! As the State Budget goes into Conference, the time is NOW to tell state leaders to fund a CalFresh initiative to bring relief to those Read more here...

**AB 164 (Arambula) Heads to the Assembly Floor!**

5.26.2017 Thanks to you and a broad coalition of supporters, we are closer to having a strong tool in the toolbox to fight hunger, promote health and mitigate poverty in California. AB 164 moves Read more here...

**SB 782 (Skinner) Moves to the Senate Floor!**

5.25.2017 Progress! CFPA and our partners, NextGen, are grateful for your support of California-grown food in freshly made school meals. Senate Appropriations passed SB 782 with a unanimous, bi-partisan vote Read more here...

**SB 138 (McGuire) Moves to the Senate Floor!**

5.25.2017 Thanks to your support, we are one step closer to hunger free schools in California! SB 138 (McGuire) passed out of Senate Appropriations Committee with a unanimous, bipartisan 7-0 vote today! Read more here...

**Nutrition Action Alerts**

**Nutrition Action Alert: 5.30.17**

Nutrition Action Alert: Safe Water through CalFresh Needs Your Support [link](https://www.cfpa.net)

Get CFPA Nutrition Action Alerts

Email: [Go](https://www.cfpa.net)

**Stay Connected**

Don't make ppl choose b/w food & water!

#FundSafeH2O thru CalFresh: [https://twitter.com/WDEuwKXD](https://twitter.com/WDEuwKXD) @PhilTing...

https://twitter.com/J2w5OeT57 - May 31, 2017

For more tweets [Follow @CAFoodPolicy](https://twitter.com)

Check out CFPA's [YouTube Channel](https://youtube.com)
Two actions & almost 2,000 schools become hunger free

1. Medicaid Direct Certification

One tool could connect 500,000+ at-risk students in California with much-needed school meals.

Students from Medicaid households with eligible incomes are directly certified for healthy school meals.

Direct Certification benefits students, families, and schools. By bringing federal dollars back to California, it can even benefit the state economy.

2. Universal Meals

Who it helps:

- Children
- Families
- Schools

We know it works:

- Low-income children can count on getting healthy meals without any stigma.
- Parents can count on their children getting two nutritious meals each day.
- Schools can count on increased participation and academic achievement.

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NATIONAL

Same as state policy, but different targets

We need to preserve and protect what works
Beyond the Federal Nutrition Programs, Innovative Approaches in the Health Care Space

• Embedding screening into state-level required forms (e.g., CA’s Staying Healthy Assessment).
• Incentivizing screening and referrals (Medicaid performance improvement projects).
• Establishing FI screening as a quality metric/indicator
• State funded pilot projects with the potential to scale to the state level (Medicaid waivers, state budget pilot requests).
• Focusing on impact - Implementing on-site SNAP and WIC enrollment at all Children’s Hospitals and FQHCs.
• SNAP + WIC + Medicaid and multi-program enrollment at one point of entry.
Any questions?
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