



Health Care  Food



April 2025 Newsletter

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Thought leadership drives Health Care by Food

It's been said that evidence-based research is the lifeblood of policy change. The Health Care by Food™ initiative is aggressively applying this approach to address some of the challenges within the U.S. health care system by developing new ways to incorporate healthy food into health care to treat, manage and prevent disease in clinical and cost-effective ways. The initiative was designed to advance innovative approaches to incorporate healthy eating into medical treatments and preventive care; expertise from leaders who possess deep knowledge backed by extensive research and experience; and advocacy to push for policy changes and improvements in health care systems to prioritize nutrition as a covered benefit.

HCXF's thought leadership was demonstrated in two articles published and authored this month by our science team, expert advisors, research grantees and advocacy staff. A Health Care by Food [policy insight](#) published in *Health Affairs* discussed food is medicine (FIM) as a complement to food and nutrition policy programs, and a separate [commentary](#) by HCXF's science team published in the *New England Journal of Medicine Catalyst* that focused on closing the evidence gaps in FIM research with behavioral science and human-centered design along with a cooperative studies model.

These articles and others by Health Care by Food volunteers, research grantees and staff provide a comprehensive framework for understanding the strategic, operational and policy aspects of integrating food into health care, reinforcing HCXF's vision and objective.

Thank you for your continued support and commitment to our shared goals! Together, we are working to make a difference in the lives of many.

With heart,

Lisa



Lisa D. Sanders
National Executive Director
Health Care by Food

HCXF shares food is medicine policy insights in Health Affairs



Health Affairs hosted a virtual briefing for their April 2025 issue with an opening roundtable facilitated by Hilary Seligman and joined by Seth Berkowitz, John Lumpkin and Colin Schwartz. (*American Heart Association*)

Health Care by Food™ volunteers, research grantees and staff co-authored thought-leadership pieces in the April issue of *Health Affairs*, which was dedicated to food is medicine (FIM) and the broader issues of food, medicine and health. *Health Affairs*, a leading peer-reviewed journal of health policy research, published articles highlighting the relationships among food security, nutrition security, income and health; FIM programs; innovative Medicaid initiatives and more.

The issue included a Health Care by Food policy insight about how FIM is complementary to, yet distinct from, other food and nutrition policy programs and interventions. The article, [*What is Food Is Medicine, really? Policy considerations on the road to health care coverage*](#), identified the prerequisites for successfully integrating FIM interventions within the health care system, including a standard definition of FIM, a research base showing clinical and cost effectiveness, and implementation that ensures quality.

The article's lead author, Health Care by Food Senior Policy Advisor Colin Schwartz, MPP, participated in a Health Affairs [virtual briefing](#) about the April issue. Schwartz showed an [infographic](#) to demonstrate that FIM complements food and nutrition programs and policies that, together, comprise a policy ecosystem that addresses distinct needs. "FIM can support improved food and nutrition security, but the main goal is to treat, manage or prevent specific diet-related diseases," Schwartz said. The briefing featured an opening roundtable facilitated by Health Care by Food [science advisor](#) and research grantee Hilary Seligman, MD, MAS. Seligman set the stage for the rest of the briefing by examining systems that sit at the intersection of food, nutrition and health.

Health Care by Food (HCXF) [research grantees](#), Seth Berkowitz, MD, MPH and Dr. Hilary Seligman, along with colleague Dariush Mozaffarian, MD, DrPH, director of the Food is Medicine Institute at Tufts University, also contributed to the *Health Affairs* issue by authoring [A new approach to guide research and policy at the intersection of income, food, nutrition and health](#). The article introduces a conceptual model for understanding the interrelationships among income, food security, nutrition security, diet quality and health, and identifies directions for future research and discusses the policy and program implications of the model. "It's important to note that separating these concepts is not just for academic reasons, rather these have real impact on how to intervene to improve a person's health," Dr. Berkowitz said.

The *Health Affairs* issue also included the commentary [Food for thought: A vision for generative 'Food is Medicine'](#), co-authored by [HCXF science advisor](#), John Lumpkin, MD, MPH, president of the Blue Cross of North Carolina Foundation. The article profiled how community-based organizations (CBOs) and local food systems anchor many FIM programs yet do not have the technical capacity and infrastructure to provide services at scale. Dr. Lumpkin and his co-authors present a generative model for FIM to operate through mutually supportive partnerships so that CBOs have the resources and capacity to source food from local farms. "To advance the development of a generative approach, further assessment needs to be made in establishing sustainable payment rates for services provided by community-based nonprofits," Lumpkin said.

[Podcast: Seth Berkowitz on the Intersection of Income, Food, & Health | Health Affairs](#)

HCXF Research Spotlight: How might in-person versus online grocery shopping vouchers impact produce consumption in hypertensive patients?



(Getty images)

Improved access to fruits and vegetables [have been shown](#) to increase consumption of healthy foods and lower blood pressure in adults with poor cardiometabolic health. To understand the impact of different types of grocery vouchers on food purchasing and consumption behaviors, Health Care by Food research grantee Adrian Hernandez, MD, MHS, executive director of Duke Clinical Research Institution and vice dean of Duke University School of Medicine, led a research team to [evaluate](#) two grocery voucher strategies.

Study participants 50 years of age or older with uncontrolled hypertension were provided with educational resources about healthy food choices for hypertension management and given a \$100 voucher monthly for five months to spend on groceries. Participants were randomly assigned to one of two grocery voucher strategies—either in-person shopping at a local grocery store or online grocery shopping with delivery.

Participants were asked to complete a monthly food and nutrition survey that assessed health behaviors and consumption of major food groups. Primary outcomes included changes over five months in patient-reported consumption of healthy foods, as well as changes in food purchasing patterns. Secondary outcomes included the dollar amount spent on fruits and vegetables through purchasing data over time and the dollar amount of the voucher used each month compared between each group. Exploratory outcomes include changes in blood pressure, body mass index and weight.

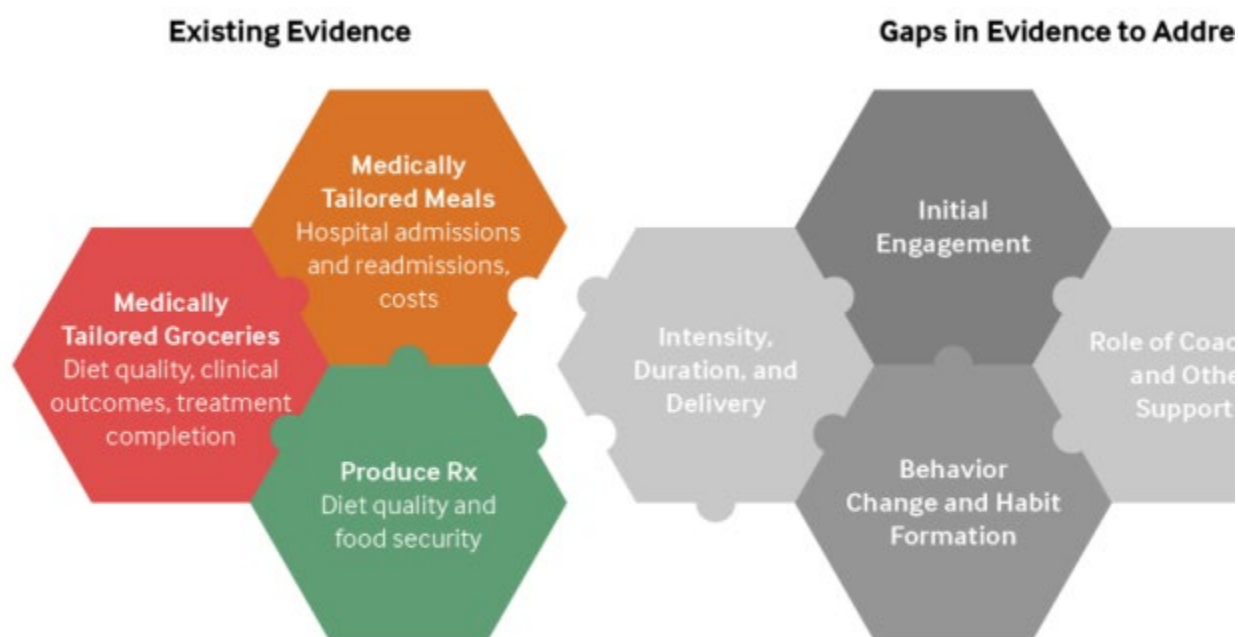
Tom Carton, PhD, co-investigator for the study and chief data and strategy officer at the Louisiana Public Health Institute, emphasized the importance of participant engagement in studies aiming to change daily nutritional behaviors. “For a study like this to have a real and lasting impact, it must be tailored to the real-life needs of the participants,” Carton said. “Participants are already being asked to change a fundamental part of their daily lives and routines, so we have to make that as easy as possible.”

Hernandez’s team will be reporting the results in two distinct manuscripts. One manuscript will feature the primary and secondary outcomes. The second manuscript is a collaboration with another food is medicine pilot that will compare the respective interventions that each research team implemented, focusing on trial designs, technical platforms utilized, intervention delivery

approaches, study measures, participant characteristics and partner engagement. These manuscripts will help future HCXF studies learn which intervention types work best to improve the health of participants.

HCXF strives to systematically increase the effectiveness of FIM research

Gaps in Evidence



Rx = prescription.

Source: American Heart Association Health Care by Food

NEJM Catalyst (catalyst.nejm.org) © Massachusetts Medical Society

Existing food is medicine (FIM) research has significant gaps across the field that reveal a major challenge of suboptimal engagement. In a commentary published in *NEJM Catalyst Innovations in Care Delivery* this month, the Health Care by Food science team detailed the initiative's strategic vision to initially optimize engagement and achieve high rates of behavior change in FIM programs before measuring the long-term health impact and quantify cost-effectiveness, compared with the current standard of care.

"Food is medicine is fundamentally a behavior change intervention because shifting diet—a deeply personal experience—depends heavily on changing behavior," said lead author Kevin Volpp, MD, PhD, founding director of the Center for Health Incentives and Behavioral Economics at the University of Pennsylvania's Perelman School of Medicine and the American Heart Association's HCXF scientific lead. "We focus on the use of human-centered design and behavioral science to develop scalable approaches to improving health through FIM programs."

The paper, [*Laying the groundwork for the AHA Health Care by Food initiative*](#), describes HCXF's emphasis on using both human-centered design and behavioral science to support program engagement, increase retention and adherence, and subsequently improve outcomes. Behavioral science focuses on understanding factors that influence decision-making and has been successfully applied to sustain behavior change across a range of health-related behaviors. Human-centered design works in tandem with the principles of behavioral science, by closely examining the environments in which people live, work, play and make decisions.

Human-centered design (HCD) explores people's explicit and nuanced beliefs, the barriers that prevent them from taking certain actions and the environments in which they live and make decisions and then applies this information to the development of techniques for changing behavior. This process can enhance patient engagement (acceptance, desirability, adoption) and program effectiveness and sustainability.

Although many research teams don't have access to experts in areas such as HCD and behavioral science, HCXF offers its research grantees access to these experts. "We have created a cooperative studies model, based on previous approaches, to provide review and opportunity for improvement of funded studies, with expertise in each of five areas deemed especially important to FIM research," said co-author and the Association's Chief Clinical Science Officer, Mitchell Elkind, MD, MS, FAHA. In addition to ongoing support from human-centered designers and behavioral scientists, HCXF research teams consult with experts in statistics, cost-effectiveness and community engagement and implementation science, all intended to enhance the ability of research teams to conduct rigorous studies.

Food is medicine represents a paradigm shift, in which cost-effective programs that improve access to healthy food and nutrition are incorporated into the health care system to manage specific clinical conditions in a manner similar to medications, procedures and medical devices. In this context, HCXF envisions a future in which food therapy is prescribed and reimbursed as an adjunct to, or in lieu of, traditional drug therapy to manage diet-related conditions.

The future of food is medicine depends on having a health system that seeks to keep people healthy and reduce their reliance on expensive medical care. "We believe that human-centered design can and should be a starting point for system change," said co-author Stacey Chang, MS, principal of New Origin Studio in Austin, Texas. Systems mapping builds on the deep understanding of stakeholder needs, incentives, and goals gleaned via HCD, and frames the ecosystem as an integrated whole that is much more complex and productive than the sum of these individual stakeholders.

Article Appendix: [Shaping the Future of Food Is Medicine with Human-Centered Design](#)

Guidance to increase FIM study engagement



Behavioral Science Webinar Series

Scan to Register



The [Behavioral Science Task Force](#) closely partners with funded studies to provide support and guidance on behavioral science aspects, review study protocols to ensure effective integration of behavioral science and consumer marketing principles and develop a framework to enhance engagement and adherence in FIM interventions. The task force has developed a webinar series designed to support researchers by exploring how behavioral science engagement strategies and marketing approaches can be integrated into FIM research.

To introduce the 12-month series, we invite you to watch the [April webinar](#) featuring Health Care by Food's Behavioral Science task force chairs Dr. Kevin Volpp and Dr. Cait Lamberton who provide an overview of the initiative and the series' goals and areas of focus.

Upcoming Webinars:

We're honored to feature a [dynamic lineup of experts](#) in behavioral science and marketing. Please register for the full series to receive updates and access to all upcoming LIVE webinars: [Webinar Registration - Zoom](#). All webinars in the series will be recorded and made available on our [website](#) following each session.

May webinar:

- Tuesday, May 6, 2025 | 3:30–4:30 pm ET
- Title: Deciding between "Evaluating Programs vs. Mechanisms"
- Speaker: Justin R. Sydnor, PhD
- RSVP: [Webinar Registration - Zoom](#)

May's webinar will examine the important distinction between evaluating programs (whether an intervention works) and evaluating mechanisms (the underlying behavioral processes that explain why it works.) Dr. Sydnor will share relevant examples from behavioral science and offer practical guidance for researchers seeking to apply these approaches in their study designs.

HCXF at the American Academy of Neurology Society Spotlight



Gathered at the American Academy of Neurology's Society Spotlight: Sandi Chapman, UT Southwestern; Fernando Testai, University of Illinois, Chicago; Kevin Volpp, University of Penn; Norrina Allen, Northwestern; Amytis Towfighi, University Southern Cal; Michael Platt, Wharton/UPenn. (American Heart Association)

Earlier this month in San Diego, the American Academy of Neurology held its annual meeting featuring scientific talks, including a Spotlight Society in partnership with the American Heart Association / American Stroke Association, to focus on behavioral economics and decision neuroscience for insights into opportunities to achieve healthy lifestyles. Participants learned how risk assessment, decision making and the stress response can be optimized to maximize overall health and brain health.

Health Care by Food scientific lead, Kevin Volpp, MD, PhD, presented the key elements of food is medicine that can dramatically improve lifestyle health and highlighted ways in which the initiative is using behavioral science to increase enrollment, engagement and effectiveness. Dr. Volpp, director of the Penn Center for Health Incentives and Behavioral Economics (CHIBE) and the Mark V. Pauly Presidential Distinguished Professor, Perelman School of Medicine and the Wharton School, highlighted the importance of being patient-centered and making enrollment and engagement as easy as possible using behavioral science since there is otherwise a risk of low rates of patient engagement and retention even when food is medicine incentives, such as vouchers for free produce or medically tailored groceries, are given to patients. Volpp emphasized that applying behavioral science and human centered design to provide patients with greater agency and choice will help to achieve high rates of engagement.

Philadelphia Heart Ball honors Kevin Volpp



Dr. Kevin Volpp is presented with the Edward S. Cooper, MD Award by Dr. Helene Glassberg, president of the Greater Philadelphia Board of Directors (DSQ Photography)

With nearly 500 guests and \$1.2 million raised to support the mission-critical work of the American Heart Association, this year's Philadelphia Heart Ball celebrated champions of health and hope whose contributions are advancing equitable health.

Honorees included Kevin Volpp, MD, PhD, FAHA, recipient of the 2025 Edward S. Cooper, MD Award — named for a stroke care pioneer and the Association's first Black volunteer president. Volpp serves as scientific lead for the Health Care by Food™ initiative and founding director of the Center for Health Incentives and Behavioral Economics at the University of Pennsylvania's Perelman School of Medicine and a professor at the Wharton School.

Thank you, Kevin, for bringing science to life and making an extraordinary impact—Congratulations!

Additional publications and commentary by HCXF researchers and science advisors

[Using a human-centered design framework and behavioral economic interventions to increase fruit and vegetable purchases in an online grocery store: Study design and methodologies - ScienceDirect.](#) Kevin Volpp, MD, PhD

[Can Prevention Save Money? | JAMA Forum | JAMA Health Forum | JAMA Network](#) April 16
Commentary Mitchell Elkind, MD, MS, FAHA; Kevin Volpp, MD, PhD

[Author Interview: Dr. Kevin G. Volpp on "Food Is Medicine: A Presidential Advisory From the American Heart Association" | AHA Blogs](#)

[Change in Default Prescription Length and Statin Prescribing Behavior | Clinical Pharmacy and Pharmacology | JAMA Internal Medicine | JAMA Network](#) Kevin Volpp, MD, PhD

[Sedentary Behavior and Light-Intensity Physical Activity During Pregnancy and Cardiovascular Health: A Science Advisory From the American Heart Association | Circulation](#) Nour Makarem, PhD,

FAHA

[Role of Technology in Promoting Heart Healthy Behavior Change to Increase Equity in Optimal Cardiovascular Health: A Scientific Statement From the American Heart Association | Circulation](#)

Colleen Spees, PhD, MEd, RDN, LD, FAND, FAHA

Resources:

American College of Lifestyle Medicine

Webinar: [Food As Medicine: Policy, Research, and Reimbursement](#)

Free online course: [Prescribe FIM: Lifestyle Medicine and FIM Essentials](#)
