

# Commission on Malnutrition Prevention Among Older Adults

Annual Report  
Year 7

20  
24



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## Introduction: MGL Part 1. Title 2. Chapter 19A Section 42

Pursuant to MGL Ch. 19A, Sec 42, the Commission on Malnutrition Prevention Among Older Adults submits this annual report to the House and Senate Chairs of the Joint Committee on Elder Affairs and Chairs of the Senate and House Committees on Ways and Means.

## 2024 Malnutrition Prevention Committee Members

- **Secretary of Elder Affairs Designee (Chair)** - *Adriene Worthington, Chair*
- **Amy Sheeley, Recording Secretary** - *Amy Sheeley, Recording Secretary*
- **Commissioner of Public Health (Designee)** - *Diana M. Hoek*
- **Commissioner of Transitional Assistance (Designee)** - *Penny McGuire*
- **Commissioner of Agricultural Resources (Designee)** - *Rebecca Davidson*
- **Member of the House of Representatives (Designee)** - *Representative Hannah Kane*
- **Member of the House of Representatives (Designee)** - *Open*
- **Member of the Senate (Designee 1)** - *Mary Giannetti*
- **Member of the Senate (Designee 2)** - *Open*
- **Physician** - *Open*
- **University Researcher** - *Open*
- **Community Based Registered Dietitian or Nutritionist Working with Program Funded by Older Americans Act** - *Margery Gann*
- **Representative of a Hospital Integrated Health System** - *Kris M. Mogensen*
- **Nurse Working in Home Care 1** - *Samuel Eyong*
- **Nurse Working in Home Care 2** - *Open*
- **Registered Dietitian or Nutritionist Working in Long-Term Care** - *Tina Reilly*
- **Registered Dietitian or Nutritionist Representing MA Academy of Nutrition and Dietetics** - *Open*
- **Representative of MA Councils on Aging** - *Tara Hammes*







## 2024 Malnutrition Prevention Commission Meeting Minutes

### Commission on Malnutrition Prevention Among Older Adults

Tuesday, February 27, 2024

2:00PM

The meeting was held virtually on Zoom

In attendance: Adriene Worthington (EOEA), Kerry Shea (Rep. Kane's Office), Penny McGuire (DTA), Samuel Eyong (Home Care Nursing), Kris Mogensen (RDN in Hospital Integrated Health System), Margery Gann (RDN working with OAA program – Ethos), Jennifer Donnelley (MDAR), Diana Hoek (DPH), Mary Gianetti (MA Senate designee)

Absent: Tina Reilly (RDN in Long Term Care), Tara Hammes (MCOA), Pamela Hunt (MCOA), Rebecca Davidson (MDAR)

1. **Call to Order** - The meeting was called to order at 2:05PM by Adriene Worthington

2. **Commission Workgroups** - Data collection

- Diana Hoek with DPH shared initial data from epidemiology team showing the percentage of hospital admissions with malnutrition diagnoses using Malnutrition ICD10-CM codes
  - Data broken down by age, sex, race
  - Has not yet been cleared to share publicly
  - Based on insurance data
    - Malnutrition ICD-10-CM code capture in person by doctor or dentist
- Kris Mogensen with MGB suggested to compare these data with Healthcare Cost and Utilization Project review of ICD-9-CM and ICD-10-CM, a standardized sample of inpatients
  - Characteristics of Hospital Stays Involving Malnutrition, 2013 #210 (ahrq.gov)
  - If numbers are going up, could be due to awareness of Malnutrition ICD codes
  - Is there a MA curve that matches the national one? How well is MA doing with malnutrition awareness across providers?
- SNAP Gap
  - Penny McGuire with DTA shared a view of the SNAP Gap analysis variance report – not public document in it's current state, would have to go through a public record request
    - 60Y+ historically has been ~13% for the gap; Jan24 13.7% or 85K people 60+ in MA are in gap

- We know the overall number is shrinking due to increased access points (DTA Connect creation, other ways to apply besides in-person, getting information on SNAP from MassHealth and other entities has been helpful, simplified SNAP application on MassHealth and Medicare Savings Program applications, Common application including a checkbox for SNAP)
- Can share the needs assessment DTA did for SNAP Ed.
- Data is at community level, is anything readily available at the town level – would help communities know where to focus their efforts
  - Jennifer Donnelly with MDAR shared the Food Bank of Western MA SNAP Gap Map Massachusetts SNAP GAP | Tableau Public
- If we go outside of DTA, maybe FRAC, we can get the information and share, can be drilled down to zip codes, which would be great
- Commissioner has a monthly SNAP caseload report on DTA website Department of Transitional Assistance caseload by zip code reports | Mass.gov
- Restaurant Meals Program is live; 12 participating restaurants and/or food trucks with 9 coming soon
  - Older adults, people with disabilities, people who are homeless

## Educational Outreach

Adriene: Healthcare providers, discharge teams, community health workers mentioned in previous meetings as targets for education. What is a realistic ask of clinical-adjacent Commission members?

- Key interactions for nursing staff is if they were to reach out to resident service providers
- Provider fairs, participation in employee education events
- Beyond mandatory trainings, difficult to get groups of people together
  - Send out small pieces of educational materials in conjunction with National Nutrition Month, Older Americans Month, Malnutrition Awareness Week
  - Include community providers in grand rounds, one recent one was around local food system
- Hospital settings are difficult
  - Discharge planning is nurses; understaffed and always putting out fires, nutrition falls through the cracks
  - For those discharged to home, nurses don't know what resources exist
    - They don't know where to get clinical community linkage at discharge
    - Small bites of information on state website, short handouts RDNs can share with appropriate clinicians
- Basecamp recommended for resource management

- MA Farmer's Markets uses it, all organizations affiliated with Farmer's Markets have access to it
- Great resource for information sharing, could be excellent for clinical providers
- Easy to update materials
- State Nutrition Action Council with DTA uses it – small fee but great way to share resources in real time

## Public Awareness

- Malnutrition screening event “Nutrition Check Up” 5/20/24-5/31/24
- EOEA is rebranding, efforts include public engagement principles (no details yet)
- Sharing EOEA nutrition and meal information with Mass Home Care (MHC)

## 3. National Nutrition Month (NNM)

- Beyond the Table” a focus on farm to fork
- ASAPs including NNM information on menus, at community dining site locations
- Not all are focusing on annual theme
- Commission member agencies
  - DTA - on SNAP Ed site – monthly blog, highlighting information, 4 quick weekly snippets (DTA now on Instagram, X)
  - DPH – People are starting to come back into the WIC offices, will need to ask what is planned
  - MGB – Dietetic interns usually work on things to do for the month, once a week table with info for employees and others in hospital setting
    - Each hospital doing something different (Brigham nutrition and food service are separate, Sodexo does things for NNM in all MGB hospitals except for MGH which is self-operated)

## 4. Malnutrition Screening (Nutrition Check Up)

- MCOA involved in reaching sites that don't have dining programs
- MHC offered to share information about it
  - It was suggested to ASAPs to include at least one dining site in housing in their schedule
- EOEA revising the PowerPoint presentation and reviewing shareable materials
- ASAP nutrition teams informed starting in December (both directors and dietitians) – it's been socialized
  - ASAPs asked to offer at least 6 screening events at community dining sites
  - Shared a document asking for sites in 2019 and for planned sites in 2024, due date Tuesday, 3/19/24
  - Will share all site information with this group, if possible, please attend one event – will be connected with the nutrition team overseeing event of choice
- This year, sending the Malnutrition Screening Tool (MST) to people receiving HDM (88% of 10M meals were HDM in FY23)

- Added space for people to opt-in to discussing results (since anonymous when self-surveyed)
- EOEa will work out a way for data collection to be submitted, similarly to the annual satisfaction survey
- MHC offered to inform home care teams about it, to get people to nudge/help consumers fill it out
- In 2019 Simmons interns helped with the screening – any interest in Hebrew Rehab Dietetic Internship participation?

## 5. Open floor

- EOEa update: HHS has asked departments to create a strategy map to identify its mission and priorities, constituent objectives, internal ops and processes, and what is needed to reach goals
  - Under equitable access to EOEa services, medically tailored meals is a focus since where you live should not determine the quality of EOEa services
  - ASAPs are asked to include cardiac, carbohydrate controlled, renal and lactose-free menus in their offerings.
  - 16% offer all 4, 84% offer 0-3 (many offer 2 of the 4 already)
  - 3-year ramp up
- Tina Reilly from Hebrew Sr Life asked to include: If anyone in group is interested in hosting interns from our program. Looking to increase their exposure to "community nutrition". Hebrew Rehab Dietetic Internship. We could start small, offer a 2-week rotation for interns to choose in their "plan your own".
  - Tina Reilly [TinaReilly@hsl.harvard.edu](mailto:TinaReilly@hsl.harvard.edu)
- MDAR – SFMNP – Jennifer Donnelley
  - Closed out the 2023 season redemption analysis and utilization
  - About half of agencies that participated in the SFMNP asked for the data
    - >75% redemption rate for SFMNP
    - Ethos 84% redemption, and a couple other ASAPs in the 90%+
    - Margery commented on how beneficial this info is for people who work on the coupon distribution and outreach, knowing people are utilizing the coupons
  - Open to accepting new farmers for markets this season
  - \$50 booklet this year due to ARPA funding
    - May have to drop back to \$25 next year if funding is not secured
  - Has been working with USDA on nondiscrimination statement, in the fall during monitoring visits with ASAPs, many said it would be great for a shortened version of the nondiscrimination statement
    - Has more questions she has to answer for them – but communication is ongoing

- Working on increasing food access points across state and focusing on age friendly communities, 51 of the farmers markets are in Age Friendly and 37 of them are in environmental justice communities
  - Goal is to get more places for older adults, WIC families to have space to use their coupons
  - Trying to recruit 18 markets, some used to participate and some never have participated
- July – USDA will be in MA for management evaluation of FMNP
- Waiting for USDA to provide income guidelines for them to print the coupons
- Margery – is there a reason FM coupons can't be used in winter markets?
  - It is a USDA timeline and based on the timing of when the grants have to close out – farmers have to have data in by 11/15 and it goes to Fed from MDAR at end of the year
- DTA
  - HIP received \$25M which is a lot more than in previous years, always a concern with running out of \$
  - MA State SNAP \$6M signed 12/4/23 allows DTA to provide state-funded SNAP for people who are ineligible for federal funding – 2 specific groups are eligible
    - Will share information with us on the details

## 6. Shared resources

- MA State SNAP Supplement
- MA SNAP Restaurant Meals Program
- National Nutrition Month 2024
- MA Food Systems Map – food retail, farmer's markets, HIP locations
- MA Food Systems Map Datasets
- Healthcare Cost and Utilization Project Brief #210 – Characteristics of Hospital Stays Involving Malnutrition, 2013
- Massachusetts SNAP GAP | Tableau Public
- Malnutrition Screening Tool for Nutrition Check Up





## MPC Member Agencies Report and Accomplishments

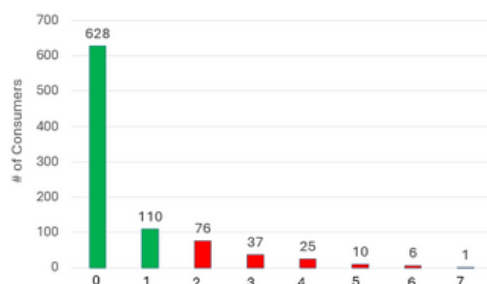
### Executive Office of Elder Affairs (EOEA) Nutrition Program Report

#### Malnutrition Screening Events

During Older American's Month in May, the EOEA Nutrition Program again organized malnutrition awareness events from May 20th – May 31st at over 100 sites. These "Nutrition Check Up" community events were held to educate older adults about the risk of poor nutrition through presentations, the distribution of written materials and giveaways, and nutrition screenings. Screenings were conducted using the two-item MST questionnaire, which assess risk based on weight loss and appetite. Those that screened at high risk were referred to the dietitian at the ASAP nutrition program. Many dietitians made dietary recommendations to individuals during the screenings. Approximately 17% (N=155) of the 893 people screened at congregate site events were found to be at high risk. A sample of home delivered meal clients (N=343) were also screened for malnutrition risk, with 18% (N=61) screening high risk for malnutrition. These findings indicate that malnutrition is significant concern for participants served by the program and must continue to be addressed through program initiatives.

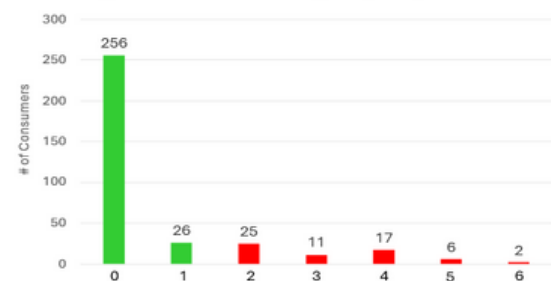
#### Congregate Results (N=893), Over 100 Events

155 scored high risk on MST (2 or higher): 17%



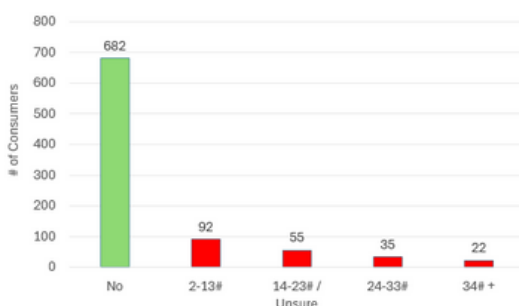
#### HDM Results (N=343)

61 scored high risk on MST 2 or higher (18%)



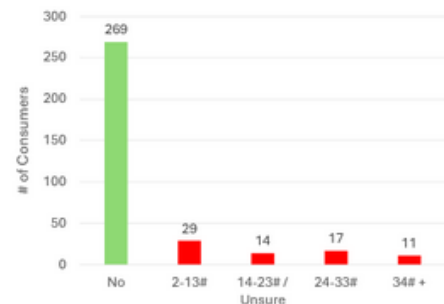
#### Weight Loss Congregate (N=886)

• 204 (23%) with weight loss



#### Weight Loss Score HDM (N=340)

• 71 (21%) with weight loss



# Malnutrition Screening

## APPETITE SCORES

**N=893**  
**CONGREGATE**  
133 (15%)  
Poor Appetite

**N=343**  
**HDM**  
50 (15%)  
Poor Appetite

## Satisfaction Survey Results

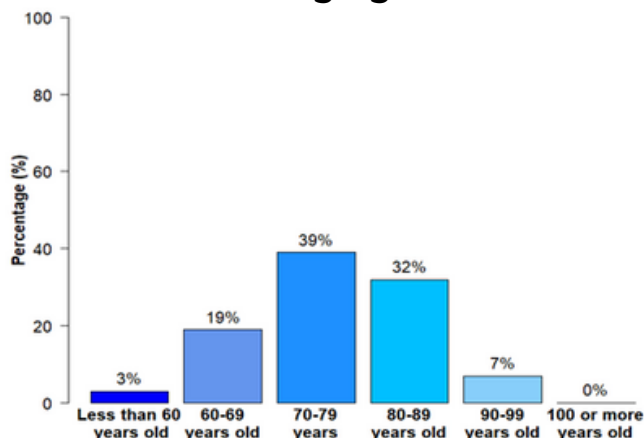
Over 7,200 hundred consumers (5,800 home delivered and 1,400 congregate) completed the FY'24 Satisfaction and Impact survey. New this year, ASAPs submitted data for individual consumers, rather than aggregate, to allow for sub analysis of variables. These results demonstrate that consumers have a high level of satisfaction with the meal service. They also confirm the critical impact of the program on consumers, including being able to live independently, as well as combatting loneliness and food insecurity.

Below is a sample of survey results:

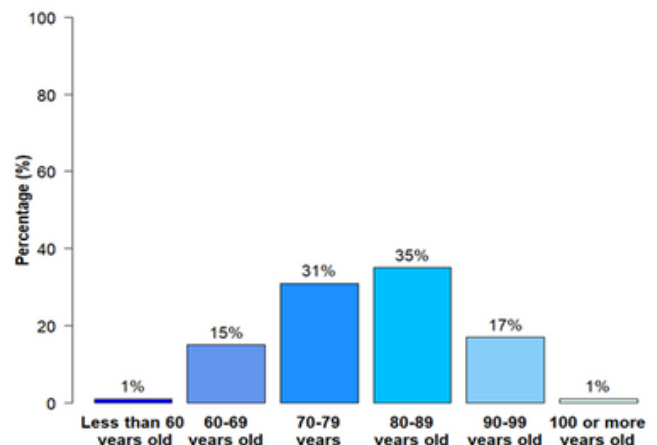
### Demographics: Age

*The majority of both congregate and HDM consumers is 70-90 years with a slightly older population see in the HDM group.*

#### Congregate



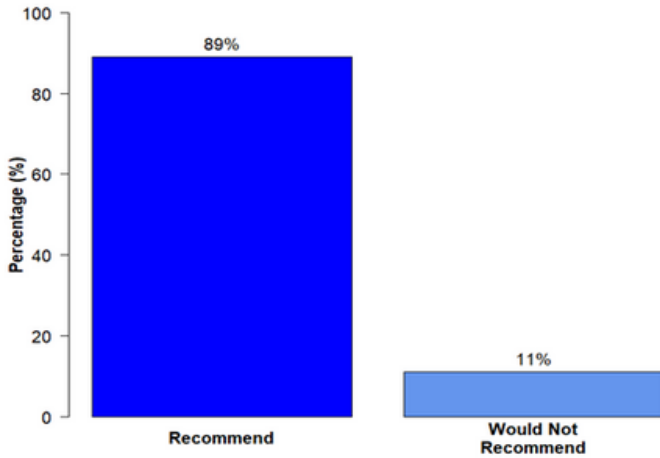
#### HDM



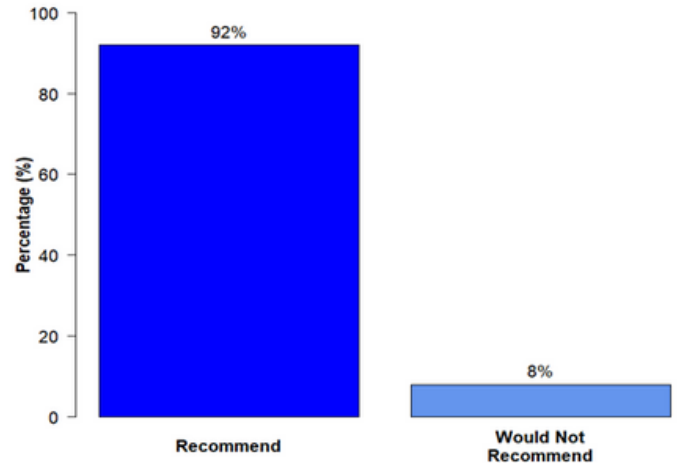
## Demographics: Satisfaction

*The majority of respondents would recommend meals to a friend.*

### Congregate



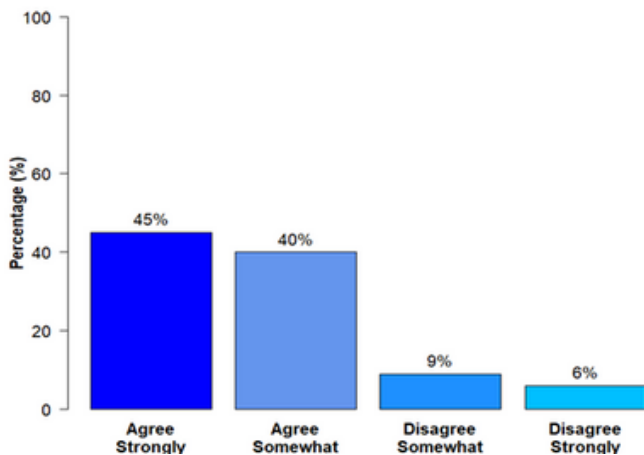
### HDM



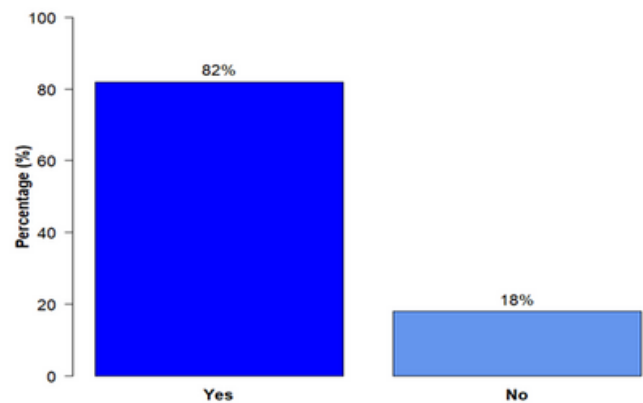
## Living Independently

*The majority of respondents reported that the meals provided at congregate dining sites centers help them to live independently.*

### Congregate



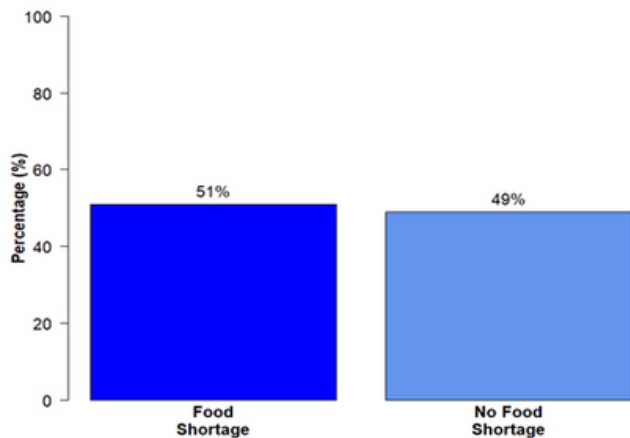
### HDM



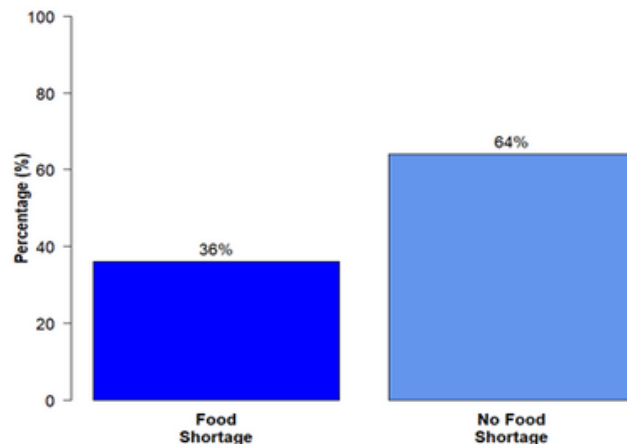
## Addressing Food Insecurity

*The question is "Without the meal, I would not have enough food."*

### Congregate



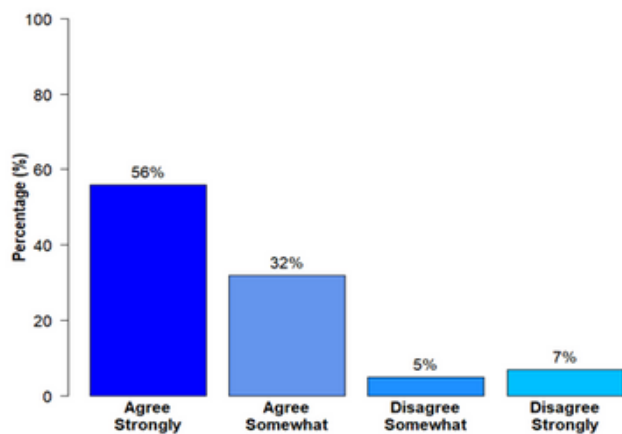
### HDM



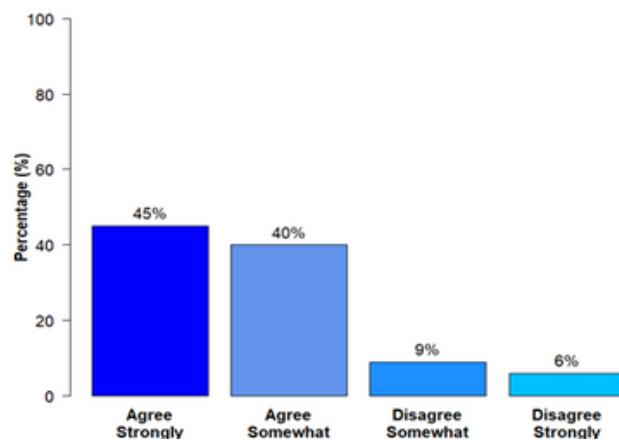
## Reducing Isolation

*Meals help respondent feel less lonely*

### Congregate



### HDM







## DPH Annual Report

DPH worked throughout the year to raise awareness of malnutrition and support efforts to screen and prevent malnutrition.

DPH epidemiologists analyzed data from the All Payer Claims Database for the prevalence of a malnutrition diagnosis. This included all the data insurance companies submitted to the Center for Health Information Analysis (CHIA) for calendar year 2021. Staff presented preliminary data from the epidemiology team at the February meeting showing the percentage of hospital admissions with malnutrition diagnoses using Malnutrition ICD-10-CM codes (E46 – Malnutrition, E44.0, E44.1 Mild and moderate protein malnutrition, and E43 – Severe protein malnutrition). The presentation slides with data broken down by age, sex, and race were shared with Commission members. The percentage of insurance claims with a malnutrition diagnosis was low, representing only 0.85% of overall claims. However, 1.78% of claims for individuals ages 65-79 and 5.15% of claims from individuals ages 80 and above included malnutrition diagnoses.

During Older Americans month, DPH staff attended a Nutrition Check-in Screening Event at the Brookline Senior Center. After the presentation at the event, staff helped to answer questions from attendees. DPH also contributed bookmarks for participants which described symptoms of malnutrition and encouraged older adults to go to their primary care physicians if they had any concerns.

The Department of Public Health (DPH) worked to address food insecurity as a member of the Food Security Work Group (FSWG) a cross-secretariat collaboration involving ten different state agencies across five Secretariats. The Department also convenes an internal Food Access Programs group, an opportunity for colleagues to connect, collaborate and support food-related programs and initiatives, as well as discuss opportunities on how to align work and messaging across the Department and with communities.

The Mass in Motion Municipal Wellness & Leadership Initiative built local capacity to reduce the specific barriers to healthy food access (and physical activity) while programs like the Root Cause Solutions Exchange and the Determination of Need's Community Health Initiative sought to improve conditions to make healthy food more accessible.

Four federal (CDC) chronic disease grants provided an opportunity to support health system screening for Health-Related Social Needs (HRSNs) and link patients with needs to support services in the community. This involved assessing community resources and gaps, as well as tracking HRSN referrals and outcomes.

The DPH WIC Nutrition program served over 204,000 participants during fiscal year 2024 by providing nutrition foods, nutrition education, and referrals to additional services. WIC participants also have access to coupons for produce at Farmers' Markets each year. The most recent data available shows that WIC families spent over \$550,000 at markets during the June to October 2023 season. DPH promoted Farmers' Markets throughout the season via posts on Facebook, Instagram and X.

Additionally, the Growth and Nutrition Program provided multidisciplinary services, including referrals to food resources, to infants and children experiencing growth faltering and delay.



## **Massachusetts Department of Agricultural Resources (MDAR)**

**Overview:** MDAR's mission is to cultivate a robust and equitable agricultural economy, promote a safe and resilient food system, and preserve a healthy environment for Massachusetts farmers, animals, and consumers.

### **Healthy Incentives Program**

DTA and MDAR partnered on the Healthy Incentives Program which provided SNAP recipients with a rebate when they purchased fruits and vegetables at Farmers markets, farm stands, mobile markets, and community supported agriculture programs (CSA). From January through August 2024, over 50% of SNAP participants using HIP were from a household with a recipient age 60+.

### **Senior Farmers Market Nutrition Program**

In 2023, MDAR received an award from USDA to double the Senior Farmers Market Nutrition Program benefit from \$25 to \$50 for the 2023 and 2024 season. MDAR, EOE, and partnering Senior Nutrition Programs distributed over \$1.2 million dollars' worth of Senior Farmers Market Nutrition Program (SFMNP) Coupons to over 24,000 Massachusetts older adults for the purchase of fresh, locally grown, fruits, vegetables, fresh cut herbs, and locally harvested honey at participating locations. Older adult participants in the SFMNP received information on seasonal recipes, how to find farmers' markets, and resources on food assistance when receiving their coupon booklet. To help serve all older adults in the state, nutrition education materials have been translated into Russian, Simplified Chinese, Portuguese, and Spanish. This information is also available online on MDAR's webpage. Additionally, those with technology access can utilize MDAR's [MassGrown](#) site to find up to date listings of certified farmers' markets and farm stands in their area where they may use their coupons. Through the SFMNP homebound program, MDAR, EOE, and partnering Senior Nutrition Programs served over 3,600 homebound older adults who received over \$177,000 worth of local produce.

## **University of Massachusetts Extension Nutrition Education Program**

UMass NEP was provided with \$10,000 in funding by MDAR's Farmers Market Nutrition Program to provide farmers' market educational activities and outreach during the 2024 season. A total of 48 sites were visited across the state by UMass NEP staff to provide nutrition activities and resources for both adults and youth at farmers' markets and mobile markets in low-income communities. Thirty-eight unique recipes were shared as part of food demonstrations this season.

This year UMass NEP partnered with farmers and collaborators in the served communities to create a more inclusive culture at the markets. These efforts couple with the MDAR funding allowed UMass NEP staff to collect recipes, taste test, and nutritionally analyze new, ethnically diverse recipes using locally grown fruits & vegetables. Twelve new recipes were translated and added to the NEP website as part of this endeavor which was made available to program participants.

### **Local Food Purchase Assistance Program (LFPA)**

MDAR received the Local Food Purchase Assistance Program (LFPA) Grant in the spring of 2022. Through a competitive RFR process, MDAR awarded just over \$7.2 million to 16 organizations across the state to fulfill 3 key goals of the project. These goals are: (1) Provide an opportunity for States and Tribal Governments to strengthen their local and regional food system; (2) Help to support local and socially disadvantaged farmers/producers through building and expanding economic opportunities; (3) Establish and broaden partnerships with farmers/producers, the food distribution community, and local food networks, including non-profits, to ensure distribution of fresh and nutritious foods in rural, remote, or underserved communities. Now, just over a year into the program, it is clear to see that the LFPA program is meeting its goals and learning new systems for outreach and collaboration along the way.

The LFPA grant has two key stipulations for recipients: (1) At least 51% of the received funds are to be used for food purchases, with the goal of 40% of food purchases from self-identified socially disadvantaged farmers/producers; and (2) there be no conditions to receive the food. These requirements led to organizations implementing many creative, and effective, procurement and distribution strategies and partnerships. Free CSA boxes, weekly distributions to food pantries, free fridges/markets, mobile markets, meal kits, and cooking classes are just a few of the myriad of ways these 16 organizations are creating new channels for fresh, local produce to reach MA residents in low-income areas across the state.

Since Round 1 ended in May 2024, 390 new farmer connections were made, with 173 of these new purchases being made with socially disadvantaged farmers. These are counted as the number of unique buyer-seller connections that did not exist before this program. Total food purchases came out to \$4,697,197.53 with \$2,055,921.76 (44%) of these purchases going to socially disadvantaged farmers. MDAR and the recipient organizations are continued outreach to create new connections and increase the buyer base beyond the end of the grant. On the distribution side, \$4,685,679.88 worth of local food went to 491 unique distribution locations across the commonwealth, and one site in Rhode Island, in 226 unique zip codes. Of the 492 total distribution locations, 485 are in underserved areas. 99 new partnerships were formed, with all but one of these new partnerships were in underserved areas. Additionally, 18 tribal regions across the commonwealth received produce distributions, including 4 new partnerships with tribal communities.

In May 2023, Massachusetts was awarded additional federal funds through the LFPA Plus program, a continuation of the current work being done under the LFPA grant. MDAR awarded 15 organizations an additional \$7.1 million in funding for local food purchases and distributions. These projects are similar in nature and goals to the original round, though there are different requirements and restrictions for allowable expenses compared to the LFPA program. Projects are currently in process, and data is expected to be collected at project end in May 2025.

### **The Massachusetts Food Trust**

The Massachusetts Food Trust Program brings capital into the Commonwealth's food sector in underserved areas. The Commonwealth of Massachusetts launched this state-funded initiative in 2018 in partnership with MDAR. The program's low interest loans and grants for technical assistance support businesses and projects that would expand access to healthy food through marketing opportunities in underserved areas across the Commonwealth while at the same time supporting our farmers.

In FY24, nearly \$1 million dollars was awarded to 9 retail market owners in low to moderate income communities. The funding impact in FY24 improved fresh food access to 54,000 individuals, created over 160 jobs and 89% of these businesses accept Special Supplemental Nutrition Program for Women, Infants and Children (WIC) and SNAP.





## Urban Agriculture Program

The Massachusetts Urban Agriculture Program (MUAP) provides grant funding to support projects on commercial farming operations to increase the production, processing, and marketing of produce grown and sold in urban centers across the Commonwealth. Funded projects increase access to affordable, fresh food for urban residents, address the challenges of small-scale farming in densely populated centers, and create direct markets in low-moderate income neighborhoods.

The FY24 funding cycle for the MUAP awarded a total of 7 grants to organizations, totaling \$126,979.00. Since the program's inception in 2014, MUAP has supported 103 projects, totaling nearly \$3.5 million dollars. Since the program's inception in 2014, MUAP has supported 110 projects, totaling over \$3.5 million dollars.

## Community Based Dietitian

The Ethos registered dietitian completed **548** individual nutrition assessments with recommendations, and another **128** reassessments. Many of these are targeted to older adults with food allergies and sensitivities, an area that has grown over the past few years. Nutrition education and counseling services are provided, which go beyond advising which home delivered meal type would best meet the consumer's needs. Ethos offers home delivered meals that are free of the major food allergens, but consumers' requests may go beyond these.

In May 2024, the dietitian conducted Malnutrition Screening Tool Workshops for six cafes in collaboration with the Executive Office of Elder Affairs. This included disseminating English and Spanish versions of the Malnutrition Screening Tool (MST), and additionally for the six cafes, a presentation on malnutrition. In total, over 120 consumers were reached. Ethos added a level of interest and excitement to the malnutrition screening by offering healthy raffle prizes that included an assortment of fresh fruit.

- All home delivered meal menus have a written nutrition education message from the dietitian. Menu backs provide twelve messages each year, prioritizing healthcare or wellness-related updates for older adults. The community cafes also received nutrition education programming by the dietitian. Topics throughout the year included Nutrition Myth Busters, Malnutrition for Older Adults, Nutrition Jeopardy and Food Safety Bingo. The goal is to provide science-based nutrition information in an engaging manner.

## Massachusetts Food System Caucus

**Overview:** The Massachusetts Food System Caucus is a group of 157 legislators in the House of Representatives and Senate dedicated to growing and supporting Massachusetts' food system. The co-chairs in 2024 are Senator Comerford, Senator DiDomenico, Senator Tarr, Representative Kane, Representative Donahue, Representative Schmid, Representative Vargas, and Representative Domb. The FSC's priorities are food access and food insecurity, farmland, and economic development.

**Food Security Accomplishments:** The Food System Caucus secured funding for several priorities in the FY25 budget. The budget includes \$15 million for the Healthy Incentives Program (HIP), \$42,360,000 for the Massachusetts Emergency Food Assistance Program (MEFAP), \$5,019,027 for programs to increase the SNAP participation rate, \$10 million for the Food Security Infrastructure Grant program (FSIG), and \$200,000 for the Massachusetts Food Trust. In addition, the FY25 budget allocates \$12,657,217 to the elder nutrition program, \$750,000 of which is for Meals on Wheels.

The economic development bond bill also includes provisions that support the FSC's goals. The bill provides \$21 million to MDAR and the Division of Marine Fisheries to support the farming and fishing industries, allows MDAR to grant special permits for non-agricultural activities on APR land, enables MDAR to buy and sell land, and allows municipalities to issue a special alcohol license for indoor and outdoor agricultural events. These provisions will support the Commonwealth's farmland preservation goals and will provide farms and fisheries with the resources they need to succeed and grow.

The Food System Caucus has advocated against cuts to HIP. Due to a \$10 million deficit for FY25, the Administration announced that on December 1, 2024, all benefits would be cut from \$40, \$60, or \$80 per month to \$20 per month. Farmers, HIP participants, and other advocates have reached out to the FSC and other legislators about the impact of the cut on their businesses and households, and the need to fully fund this critical program. The FSC shares their concerns and has sent letters to House and Senate leadership, as well as Governor Healey, about the need to secure the \$10 million needed to fully fund HIP. The FSC will continue to advocate for HIP and take steps to secure supplemental funding for the program.

Several FSC members are involved in Make Hunger History, an initiative spearheaded by Project Bread to end hunger in Massachusetts. Make Hunger History is a coalition that

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Project Bread to end hunger in Massachusetts. Make Hunger History is a coalition that brings together state and federal legislators, hunger and poverty advocates, nonprofits, and other leaders who are committed to ensuring every family can access affordable, nutritious food. Representative Hannah Kane, Representative Andy Vargas, Senator Jo Comerford, and Senator Sal DiDomenico are on the Steering Committee, which is responsible for providing input on the initiative's goals and strategy for ending hunger. The FSC looks forward to continuing to work with Make Hunger History on shared legislative and policy goals. (<https://www.mafoodsystemcaucus.com/>)



## **Massachusetts Department of Transitional Assistance (DTA)**

The Supplemental Nutrition Assistance Program (SNAP) is a federally funded program that provides critical nutritional support to low-income families by helping them supplement household food budgets and access nutritious food. The Department of Transitional Assistance (DTA) administers SNAP on behalf of the United States Department of Agriculture (USDA). As of the close of the state fiscal year in June 2024, DTA reported a SNAP caseload of 680,677 households, representing 1.1 million individual recipients. Of this total, 256,024 are older adults aged 60 and over. Currently, approximately one in every six Massachusetts residents relies on SNAP benefits to help meet their nutritional needs. DTA employs a variety of approaches to enhance food access, including programs such as the Restaurant Meal Program (RMP), the Healthy Incentives Program (HIP), strategic outreach partnerships with organizations like Councils on Aging and senior centers across the Commonwealth, and nutrition education initiatives to help recipients make healthier food choices.

The Restaurant Meals Program (RMP) is a state-option initiative for state agencies that administer SNAP that Massachusetts chose to adopt, making it one of the few states in the country to offer it. It is designed to provide SNAP recipients with the option to use their benefits at participating restaurants, offering greater flexibility in accessing nutritious meals. Launched as a pilot program last year, RMP aims to support individuals who are elderly, disabled, or homeless, and may face challenges preparing meals at home. It reflects Massachusetts' broader commitment to addressing food insecurity and providing more inclusive solutions to meet diverse needs. This year, a key focus of the program was supporting new vendors as they navigated and settled into the program's rules and requirements. Efforts included providing guidance on compliance and other operational aspects of the program to ensure a smooth transition for both restaurants and participants. In its first year, Massachusetts clients completed a total of 7,489 transactions at approved restaurants, with 931 of those transactions made by older adults. This resulted in approximately \$300,000 in transactions for this group.



The Healthy Incentives Program (HIP) continues to increase access to fruits and vegetables for SNAP recipients. Through HIP, participants receive additional benefits when purchasing eligible fruits, vegetables, and other healthy food items at participating vendors, including farmers' markets and farm stands.

The program aims to improve the overall health and nutrition of low-income households by making nutritious food more affordable. As of June 2024, 165,000 households participated in the HIP, accessing a total of \$18.4 million in incentives in Fiscal Year 2024. Notably, 54% of these households included at least one older adult.

The Department continues to build on the success of its SNAP Outreach Partnership program, working closely with Councils on Aging throughout the Commonwealth to increase and enhance access to SNAP benefits for older adults. In FY24, a total of 30 contracted senior centers assisted 795 senior households with SNAP applications and recertifications. Additionally, the Department partnered with Boston Age Strong, a division of the City of Boston, to further expand outreach efforts and support older residents in accessing vital food assistance in the city. In addition to working with partner organizations, DTA in collaboration with MassHealth successfully implemented the simplified "checkbox application" as a way to address the SNAP gap. The SNAP gap refers to the number of potentially eligible individuals who are enrolled in MassHealth but not receiving SNAP. For FY24, a total of 90,287 applications were received through the checkbox application, with 18% of those applicants being aged 60 and older.

The SNAP Nutrition Education (SNAP-Ed) program in Massachusetts works to improve the dietary habits and overall health of SNAP recipients by providing education on healthy eating, cooking, and budgeting. Our providers offered a range of resources, including workshops, cooking classes, and online materials, all designed to help individuals make informed food choices and adopt healthier lifestyles. A particular focus is placed on reaching older adults, who may face unique challenges related to nutrition, such as limited mobility, dietary restrictions, and fixed incomes. By tailoring educational efforts to the needs of older populations, SNAP-Ed helps ensure that seniors have the tools and knowledge to access and prepare nutritious meals, ultimately supporting their long-term health and well-being. During the last fiscal year, SNAP-Ed providers implemented programming by bringing mobile markets directly into communities, including housing authorities and senior centers. In this way, they reached 7,603 older adults, offering them convenient access to fresh, healthy food, while also sharing valuable nutrition tips to support healthier eating habits.

#### Upcoming Activities – 2025

MPC Meeting will be scheduled for February. This year the group will be recruiting new membership and looking at ways to face budget challenges amidst growing needs of older Americans.