



ATA Policy Priorities for Virtual Foodcare

The ATA and ATA Action define Virtual Foodcare as a model that includes the delivery of personalized dietary interventions and nutritional guidance into the healthcare system via telehealth platforms. It integrates healthy, nutritious food and nutritional support as fundamental components of healthcare, to maintain health, prevent disease, and manage chronic conditions, irrespective of location, via telehealth and virtual care platforms. Virtual Foodcare aims to enhance health outcomes and reduce healthcare costs by making expert nutritional advice and support widely accessible and effective through innovative technology.

Federal Policy Recommendations

Support for the Medical Nutrition Therapy (MNT) Act:

The ATA and ATA Action advocate for passage of the MNT Act, as it expands Medicare coverage for nutrition therapy, which aligns with telehealth capabilities. By broadening the range of covered conditions beyond diabetes and renal disease to include obesity, prediabetes, hypertension and other chronic conditions and allowing more healthcare providers to refer patients for MNT, the Act facilitates effective telehealth delivery. Expansion of access to virtual nutrition care will also work to reduce referral burdens and other barriers to the broader adoption of virtual foodcare. Supporting this Act strengthens the ATA's position in advocating for the integration of telehealth into broader healthcare policies, ensuring comprehensive and accessible care.

Demonstration Projects in Medicare or CMMI:

The ATA and ATA Action support the creation of demonstration projects within Medicare or within the Center for Medicare and Medicaid Innovation (CMMI). These projects would showcase the benefits and feasibility of telehealth-enabled nutrition care, serving as models for broader adoption.

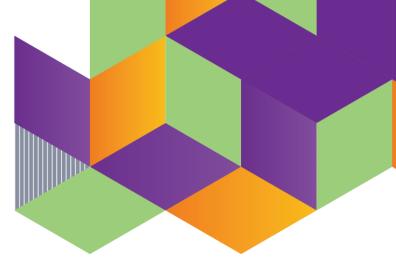
Crossover State-Federal Policy Recommendations

Enhancing Access and Convenience to Anti-Hunger Programs and Clean Food Initiatives:

The ATA and ATA Action support efforts to make permanent the online purchasing pilot, part of the U.S. Department of Agriculture's (USDA) Supplemental Nutrition Assistance Program (SNAP), which has successfully allowed recipients to select and pay for their groceries online, as more and more Americans do, in 50 states and Washington, DC, increasing families' access and convenience to nutritious food.



Additionally, the ATA and ATA Action advocate for improvements to technology and service delivery in the <u>USDA's Food and Nutrition Service</u> program for Women, Infants, and Children (WIC), including eliminating the physical presence requirement and enabling online grocery shopping for WIC beneficiaries, in order to increase access to nutritious foods for WIC participants and positively impact nutrition security. These initiatives would improve accessibility, flexibility, and effectiveness,



ensuring that participants can easily utilize their benefits. Integrating these benefits with Medical Nutrition Therapy (MNT) will empower beneficiaries with personalized, evidence-based dietary guidance to make informed, healthier food choices and maximize the benefits of their nutrition assistance. As appropriate, aligning these benefits with clean food initiatives will help drive better outcomes and improve the overall effectiveness of nutrition support programs across schools, families, and communities. Providing tools and resources for virtual navigation further enhances the effectiveness of these programs, aligning with the ATA's commitment to advancing telehealth, digital health inclusion, and ensuring that all populations, particularly vulnerable communities, have efficient access to nutritional support.

Advocate for the U.S. Preventive Services Task Force to Designate Medical Nutrition Therapy (MNT) as a Preventive Service for All Members:

The ATA and ATA Action support the U.S. Preventive Services Task Force (USPSTF) designating Medical Nutrition Therapy (MNT) as a preventive service for all individuals, not just those with chronic conditions. This change would promote proactive dietary guidance, ensuring coverage across all health plans subject to the Affordable Care Act. This recommendation complements the MNT Act and supports broader access to preventive nutrition services.

Promote Tele-Nutrition Coverage and Oppose In-Person Requirements:

The ATA and ATA Action advocate for the inclusion of nutrition benefits in both commercial and public payer plans, ensuring these services are accessible both in-person and virtually, which is consistent with our long-standing support for coverage parity. As with all aspects of virtual care, the ATA opposes any federal or state government-mandated in-person requirements, emphasizing the need for flexibility to deliver effective care.

Federal and State Advocacy for Digital Health and Nutrition Policies:

The ATA and ATA Action support efforts at both federal and state levels to integrate digital health and nutrition policies into broader healthcare goals. Ensuring these initiatives are effectively implemented across states is crucial for maximizing their impact.

Comprehensive Food Benefits Management:

The ATA and ATA Action support policies that promote comprehensive food benefits management. This includes integrating research data to drive value to patients, providers and payers, fostering collaboration across sectors to ensure that nutrition services are both effective and sustainable.

Support Pharmacy Coordination and Referrals:

The ATA and ATA Action endorse integrating pharmacies and pharmacists into care teams to improve coordination and referrals, particularly to dietitians and other

appropriate healthcare professionals. This will enhance the "food as medicine" approach within healthcare workflows.



The ATA supports incorporating screening for food and nutrition insecurity within pharmacy interactions, ensuring that patients receive comprehensive care that addresses both their medical and nutritional needs.

Evidence-Based Approach and Immediate Action:

The ATA and ATA Action advocate for a balanced approach that supports ongoing research while pushing for the immediate adoption of evidence-based practices in

telehealth and nutrition care. This ensures that patients can benefit from these services without unnecessary delays, while research continues to refine best practices.



The ATA and ATA Action have long supported federal investment in broadband infrastructure and device accessibility, recognizing that stable internet access is essential for effective telehealth delivery. This aligns with our broader advocacy for advancing healthcare equity and ensuring all populations, especially lowincome communities, have access to telehealth services, including virtual nutrition care.

State Policy Recommendations

Support for Interstate Nutritional Care and the Dietitian Licensure Compact:

The ATA and ATA Action advocate for the ability of any licensed medical professional, including dietitians and other appropriate healthcare professionals, to deliver care across state lines. This includes support for the ratification of the Dietitian Licensure Compact, which would facilitate interstate collaboration, remove practice authority barriers, and ensure that dietitians can provide virtual consultations seamlessly across different states. Expanding this ability is crucial in addressing the workforce challenges currently facing the healthcare community, as it opens up much-needed capacity within our system. By enabling more professionals to deliver care across state lines, we can better meet the growing demand for nutritional healthcare and ensure that patients receive consistent, high-quality care, regardless of their location.

Support Medicaid Coverage of Evidence-Based Nutritional Assistance, Medically Tailored Meals Delivered to the Home, Remote Monitoring Devices and Remote Therapeutic Monitoring:

The ATA and ATA Action advocate for state Medicaid agencies to adopt policies that include coverage for medical nutrition therapy, home-delivered meals, expanded access to fresh produce, nutrition education, and nutrition prescription services tailored to beneficiaries' health risks, nutrition-sensitive conditions, and/or demonstrated outcome improvements. This includes advancing remote therapeutic monitoring to include nutrition care services, cost-effective, personalized diagnostics and remote monitoring tools such as continuous glucose monitors. This would enable the meaningful integration of digital tools that track and support patients' nutritional behaviors, dietary patterns, and health outcomes across various conditions—leveraging widely available consumer technologies that have demonstrated significant improvements in patient engagement, adherence, and clinical outcomes. Prioritizing preventive care through these tools supports the nation's overall health system, reducing long-term costs and improving population health outcomes.

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