

# Congress of the United States

Washington, DC 20515

March 26, 2026

The Honorable Robert Aderholt  
Chairman  
Subcommittee on Labor, Health & Human Services,  
Education, and Related Agencies  
House Appropriations Committee  
2358-B Rayburn House Office Building  
Washington, DC 20515

The Honorable Rosa DeLauro  
Ranking Member  
House Appropriations Committee  
1036 Longworth House Office Building  
Washington, DC 20515

Dear Chairman Aderholt & Ranking Member DeLauro:

As you work to complete the FY 2027 Labor, Health and Human Services, Education, and Related Agencies appropriations bill, we write to respectfully request that the subcommittee provide essential resources and timely instructions to better integrate nutrition into our health care system.

Good nutrition is fundamental for restoring and maintaining health. Poor diets are the leading cause of death and disability in the United States,<sup>1</sup> with strong ties to obesity, diabetes, heart disease, stroke, gut health, mental health, cancer, and more. The costs of treating diet-related disease are crushing healthcare systems, federal and state budgets, private employers, and our economy. Healthcare spending for people with chronic diseases, many of which are diet-related, and mental health conditions accounts for 90% of annual U.S. healthcare costs.<sup>2</sup> The combined healthcare spending and lost productivity from suboptimal diets and food insecurity are estimated to exceed **\$1.1 trillion** each year.<sup>3</sup>

We applaud steps the U.S. Department of Health and Human Services has taken on Food is Medicine initiatives. There is demonstrated broad, bipartisan support in Congress for expanding access to nutrition education for medical professionals, and we welcomed the Department's recent announcement about 53 medical schools implementing at least 40 hours of nutrition education.<sup>4</sup>

Further action must be taken to support food is medicine efforts. We have it in our power to save lives, improve nutrition, and lower health care costs by directing more federal resources toward better integrating nutrition into our health care system. As both public and private stakeholders continue to advance food is medicine and related nutrition initiatives, Congress should do its part by making the following targeted investments.

- 1) *Programmatic request for the National Institutes of Health, Office of the Director*  
⇒ **Provide \$25 million for the NIH Office of the Director** to support fundamental research on food is medicine and to launch Food is Medicine Networks or Centers of Excellence.

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<sup>1</sup> *JAMA*. 2018;319(14):1444–1472. doi:10.1001/jama.2018.0158

<sup>2</sup> <https://www.cdc.gov/chronic-disease/data-research/facts-stats/>

<sup>3</sup> <https://www.rockefellerfoundation.org/reports/true-cost-of-food-measuring-what-matters-to-transform-the-u-s-food-system/>

<sup>4</sup> <https://www.hhs.gov/press-room/sec-kennedy-sec-mcmahon-celebrate-med-school-commitments-to-increase-nutrition-training-for-future-doctors.html>

- 2) *Programmatic request for the Office of the Secretary, General Departmental Management*  
 ⇒ **Provide a meaningful funding increase for General Departmental Management** to support the Department’s ongoing Food is Medicine work with at least \$5 million in resources.
- 3) *Report language for the Office of the Secretary, General Departmental Management*  
 ⇒ **Support & Expand Food is Medicine: A Project to Unify and Advance Collective Action**  
 Within the funds provided for General Departmental Management, the Committee encourages the Office of the Assistant Secretary for Health to continue to support and expand the *Food is Medicine: A Project to Unify and Advance Collective Action* initiative and to build on the prior investment in this effort to address nutrition-related chronic disease and improve health outcomes. As Food is Medicine activities expand across the Department and other federal agencies, including the Health Resources and Services Administration and the National Institutes of Health, and as states advance related efforts, the Office is encouraged to serve as a technical assistance and coordination hub to collect, organize, and disseminate best practices related to Food is Medicine interventions. The Committee encourages the Office to expand Department resources, including the Food is Medicine toolkit, and to support knowledge sharing and coordination across the Department and with external experts, practitioners, and state partners implementing Food is Medicine programs. The Committee further expects the Secretary to coordinate with other federal departments with expertise in nutrition, including the U.S. Department of Agriculture, Department of Veterans Affairs, and Indian Health Service, to support dissemination of best practices and strengthen the implementation and evaluation of Food is Medicine interventions. The Committee requests a report within 180 days of enactment on the Department's efforts to coordinate Food is Medicine activities across the Department and with other federal agencies and to disseminate best practices to states and other stakeholders.
- 4) *Programmatic Request for the Health Resources and Services Administration (HRSA)*  
 ⇒ **Support for food is medicine services for people living with HIV**  
 We respectfully request \$3.130 billion to support the vital, bipartisan Ryan White HIV/AIDS (RWHAP) program, which delivers cost-effective, community-centered food is medicine programs, like medically tailored meals and groceries, alongside HIV primary medical care, medications, and support services for people living with HIV/AIDS. One of the first food is medicine programs for people with a serious illness – RWHAP has consistently demonstrated the value of addressing medical nutrition to support individuals to remain in care, adhere to medications and accomplish health and health care goals.
- 5) *Report language for Department of Health and Human Services, Office of the Secretary*  
 ⇒ **Medically Tailored Meals, Groceries, and Produce Prescriptions**  
 The Committee recognizes the importance of Medically Tailored Meals (MTMs), Medically Tailored Groceries (MTGs), and Produce Prescriptions and notes recent progress to expand access. MTMs are customized for patients with severe, complex, or chronic conditions based on therapeutic, evidence-based dietary specifications. Patients are identified and referred in partnership with healthcare personnel and meal plans are assigned based on an assessment of the individual’s nutritional needs by a Registered Dietitian Nutritionist. MTGs consist of nutrient-dense groceries—such as fruits, vegetables, whole grains, and lean proteins—provided to individuals based on a Registered Dietitian Nutritionist (RDN) or other nutrition professional’s assessment of their nutritional needs and tailored using disease-specific, evidence-based guidance as part of a therapeutic diet plan. A Produce Prescription is a medical treatment or

preventative service for eligible patients due to diet-related health risks or conditions, food insecurity, or other documented challenges in access to nutritious foods, and is referred by a healthcare provider or health insurance plan. These prescriptions are fulfilled through food retail or delivery and enable patients to access healthy produce with no added fats, sugars, or salt, at low or no cost to the patient. The Committee directs the Secretary to look across the Department to identify programs and collaborations that could facilitate coverage for MTMs, MTGs, and Produce Prescriptions and further encourages the Department to work with Congress to expand access and coverage of MTMs, MTGs, and Produce Prescriptions.

6) *Programmatic Request for the Health Resources and Services Administration (HRSA)*

⇒ **Food is Medicine for Maternal Health**

The United States continues to experience higher rates of maternal morbidity and mortality relative to other nations. Nutritional insecurity combined with chronic health conditions threatens the health and wellbeing of both mothers and infants. Of the funding provided, the Committee directs HRSA to make at least \$15 million available in grants to community-based health clinics to develop produce prescription and medically tailored meal interventions for maternal populations at risk of poor health outcomes due to nutrition insecurity and other health-related risk factors. These innovative models should serve maternal populations in high-need urban and rural areas and demonstrate improvements in fruit and vegetable intake; household food security; and health outcomes, such as gestational weight gain, overall physical and mental health, and wellbeing for a cohort of pregnant participants, as well as positive birth outcomes.

Thank you for your consideration of our request to better integrate nutrition into our health care programs and system to save lives and reduce health care costs.

Sincerely,



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James P. McGovern  
Member of Congress



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Chellie Pingree  
Member of Congress



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Eleanor Holmes Norton  
Member of Congress



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Vern Buchanan  
Member of Congress



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Emilia Strong Sykes  
Member of Congress



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Dan Goldman  
Member of Congress

*Danny K. Davis*

Danny K. Davis  
Member of Congress

*Nicole Malliotakis*

Nicole Malliotakis  
Member of Congress

*Nanette Diaz Barragan*

Nanette Diaz Barragan  
Member of Congress

*Shri Thanedar*

Shri Thanedar  
Member of Congress

*Stephen F. Lynch*

Stephen F. Lynch  
Member of Congress

*Sara Jacobs*

Sara Jacobs  
Member of Congress

*Robin L. Kelly*

Robin L. Kelly  
Member of Congress

*Ayanna S. Pressley*

Ayanna Pressley  
Member of Congress

*Hillary J. Scholten*

Hillary J. Scholten  
Member of Congress

*Seth Moulton*

SETH MOULTON  
Member of Congress

*Stacey E. Plaskett*

Stacey E. Plaskett  
Member of Congress

*Nancy Pelosi*

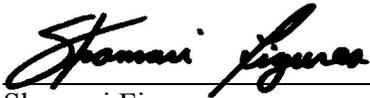
Nancy Pelosi  
Member of Congress

*Donald S. Beyer Jr.*

Donald S. Beyer Jr.  
Member of Congress

*Terri A. Sewell*

Terri A. Sewell  
Member of Congress



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Mark DeSaulnier  
Member of Congress



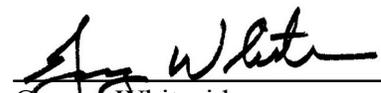
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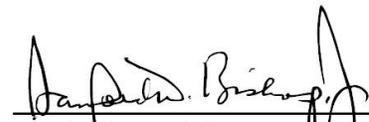
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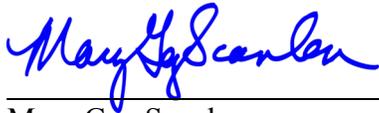
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Member of Congress



Nelliie Pou  
Member of Congress



Jahana Hayes  
Member of Congress



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Mary Gay Scanlon  
Member of Congress



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William R. Keating  
Member of Congress



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James C. Moylan  
Member of Congress



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Julia Brownley  
Member of Congress



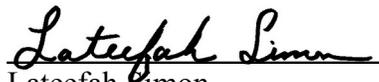
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Gabe Amo  
Member of Congress



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Yassamin Ansari  
Member of Congress



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Lateefah Simon  
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Dwight Evans  
Member of Congress



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Derek T. Tran  
Member of Congress



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Lucy McBath  
Member of Congress



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Laura Friedman  
Member of Congress



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Brad Sherman  
Member of Congress