

COMMITTEE ON LEGISLATIVE RESEARCH  
OVERSIGHT DIVISION

**FISCAL NOTE**

L.R. No.: 4711H.02P  
 Bill No.: Perfected HCS for HB 2355  
 Subject: Medicaid/MO HealthNet; Department of Social Services; Food  
 Type: Original  
 Date: March 26, 2026

Bill Summary: This proposal creates provisions relating to a MO HealthNet waiver for nutrition services.

**FISCAL SUMMARY**

**ESTIMATED NET EFFECT ON GENERAL REVENUE FUND**

FUND AFFECTED	FY 2027	FY 2028	FY 2029
General Revenue	(\$413,110)	(Could exceed \$3,202,402)*	(Could exceed \$3,408,706)*
<b>Total Estimated Net Effect on General Revenue</b>	<b>(\$413,110)</b>	<b>(Could exceed \$3,202,402)</b>	<b>(Could exceed \$3,408,706)</b>

\*The DSS fiscal impact to implement this legislation is dependent on the range of population served, type of services provided and any potential savings.

**ESTIMATED NET EFFECT ON OTHER STATE FUNDS**

FUND AFFECTED	FY 2027	FY 2028	FY 2029
<b>Total Estimated Net Effect on <u>Other</u> State Funds</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

Numbers within parentheses: () indicate costs or losses.

**ESTIMATED NET EFFECT ON FEDERAL FUNDS**

FUND AFFECTED	FY 2027	FY 2028	FY 2029
Federal Funds	\$0	\$0	\$0
<b>Total Estimated Net Effect on <u>All</u> Federal Funds</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

\* Revenue gain and costs are estimated at \$260,000 in FY27, \$12 million in FY28 and ongoing and net to zero.

**ESTIMATED NET EFFECT ON FULL TIME EQUIVALENT (FTE)**

FUND AFFECTED	FY 2027	FY 2028	FY 2029
General Revenue	1 FTE	1 FTE	1 FTE
<b>Total Estimated Net Effect on FTE</b>	<b>1 FTE</b>	<b>1 FTE</b>	<b>1 FTE</b>

- Estimated Net Effect (expenditures or reduced revenues) expected to exceed \$250,000 in any of the three fiscal years after implementation of the act or at full implementation of the act.
- Estimated Net Effect (savings or increased revenues) expected to exceed \$250,000 in any of the three fiscal years after implementation of the act or at full implementation of the act.

**ESTIMATED NET EFFECT ON LOCAL FUNDS**

FUND AFFECTED	FY 2027	FY 2028	FY 2029
<b>Local Government</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## FISCAL ANALYSIS

### ASSUMPTION

#### §208.270 - "Food Is Medicine Act" as Amended by House Amendment 1

Officials from the **Department of Social Services (DSS), MO HealthNet Division (MHD)** state this legislation amends Chapter 208 by adding one new section relating to a MO HealthNet waiver for nutrition services. This legislation creates section 208.270 known as the "Food is Medicine Act". The Department of Social Services shall apply to the Centers for Medicare and Medicaid Services of the federal Department of Health and Human Services for a Section 1115 demonstration waiver to implement the "Food is Medicine" program for the purpose of providing nutrition supports through the MO HealthNet program.

Food is medicine (FIM) intervention can produce cost-savings in treatment, management, and/or prevention of diet-related chronic conditions and diseases by reducing the need for more intensive healthcare services. Evidence shows that medically tailored meals (MTMs) can lead to a 70% decrease in ED visits; a 52% decrease in inpatient hospital admissions; a 72% decrease in skilled nursing stays; and a 16% decrease in healthcare costs (Center for Health Law and Policy Innovation Harvard Law School. Food as Medicine Coalition, 2024).

Produce prescription programs (PPRs) are intended for individuals with specific nutritional needs and/or food access challenges. PPRs provide the opportunity for individuals with a prescription from their health care provider to purchase fresh, frozen, or canned produce that has no added salt, sugar, or fat using vouchers or restricted debit cards (U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion, 2024). Some access points for PPRs are grocery stores, grocery delivery services, farmers' markets, on-site at health care centers, food banks, food pantries, etc.

The idea of FIM interventions is intended to be used on a spectrum and not necessarily concurrently. MTMs are the highest and most specific intervention, which in turn makes them the costliest, but they are usually intended for individuals with severe chronic diseases or terminal illnesses that have limited ability to cook or grocery shop for themselves and may lack the resources to purchase food needed. These types of meals are usually ready-to-eat meals and snacks made with fresh food items and provide complete or nearly complete nutrition needs. These meals also require a dietician to develop the meal plan.

This bill requires MHD to submit a waiver to utilize FIM in order to provide nutritional supports. The bill is not specific to the exact population that this service would cover. MHD assumes that initially the waiver would focus on the population that would benefit most from this intervention. 1115 waivers also require budget neutrality so it will be important to monitor the medical utilization of the population to analyze the savings. There are currently similar services provided by the Managed Care Organizations within Missouri Medicaid. MHD would likely propose

initiating the waiver in the Fee For Service population based on qualifying criteria that would be developed through a clinical review. A portion of the Fee For Service population also receives Healthy SNAP benefits, so it will be important to understand the interactions and limit the duplication of services in order to properly analyze the overall benefits of FIM.

For the purposes of this fiscal impact, MHD assumes the waiver would be limited to a population of 4,182 however, the benefits could extend to as many as an estimated 356,000 participants depending how the program is designed.

MHD found the average cost of a MTM to be \$9.30 per meal and the average cost of the produce prescription program offered vouchers for \$42 per month.

An initial office visit to obtain nutrition counseling and a prescription for the program at an average cost of \$106.63, would be required for each participant.

As mentioned above, implementation of FIM can result in potential savings. In general, the potential savings would likely occur over a lifetime, based on the available research and is not included in the initial three years of this fiscal impact.

Federal approval of the waiver would be required, for the purpose of this impact, MHD assumes an implementation of the waiver in July 2027.

MHD assumes a consultant will be required in FY27 to develop the clinical criteria and 1115 waiver submission at a one-time cost of \$20,000. MHD also includes a one-time cost of \$500,000 in FY27 to secure a vendor to help coordinate the inclusion of community-based organizations and recruit the community grocer's network to support the purchase of locally grown food. This cost is calculated at a 50/50 match.

Additionally, one FTE (Special Assistant Professional) would be needed to set up and implement the program. This cost would be 100% GR.

MHD estimates a program participation of 4,182 individuals. Each participant would receive an annual produce prescription valued at \$504 (\$42 per month for 12 months), MTMs at an annual rate of \$2,976 (\$9.30 per meal, 10 meals per week for 32 weeks per year) and require an initial office visit costing \$106.63. The total projected cost is calculated as follows:  $4,182 * (\$504 + \$2,976 + \$106.63) = \$14,999,287$ .

The estimated fiscal impact to implement this legislation is shown below and is dependent on the range of population served, type of services provided and any potential savings occurring within that timeframe.

FY27 Total: \$673,110 (GR: \$336,555; FED: \$336,555)

FY28 Total: \$15,178,86 - unknown (GR: \$3,202,403 - unknown; FED: \$11,976,422-unknown)

FY29 Total: \$16,195,333- unknown (GR: \$3,408,706 - unknown; FED: \$12,786,627 - unknown)

**Oversight** does not have information to the contrary and therefore, Oversight will reflect the estimates as provided by the DSS/MHD.

Responses Regarding the Proposed Legislation as a Whole as Amended

Officials from the **Missouri Department of Agriculture** assume the proposal will have no fiscal impact on their organization. **Oversight** does not have any information to the contrary. Therefore, Oversight will reflect a zero impact in the fiscal note for this agency.

Rule Promulgation

Officials from the **Joint Committee on Administrative Rules** assume this proposal is not anticipated to cause a fiscal impact beyond its current appropriation.

In response to a previous version, officials from the **Office of the Secretary of State (SOS)** noted many bills considered by the General Assembly include provisions allowing or requiring agencies to submit rules and regulations to implement the act. The SOS is provided with core funding to handle a certain amount of normal activity resulting from each year's legislative session. The fiscal impact for this fiscal note to the SOS for Administrative Rules is less than \$5,000. The SOS recognizes that this is a small amount and does not expect that additional funding would be required to meet these costs. However, the SOS also recognizes that many such bills may be passed by the General Assembly in a given year and that collectively the costs may be in excess of what the office can sustain with its core budget. Therefore, the SOS reserves the right to request funding for the cost of supporting administrative rules requirements should the need arise based on a review of the finally approved bills signed by the governor.

<u>FISCAL IMPACT – State Government</u>	FY 2027 (10 Mo.)	FY 2028	FY 2029
<b>GENERAL REVENUE</b>			
<u>Cost – DSS/MHD (§208.270) p.4</u>			
Personal service	(\$89,205)	(\$108,116)	(\$109,197)
Fringe benefits	(\$49,491)	(\$59,820)	(\$60,255)
Equipment and expense	(\$14,414)	(\$11,602)	(\$11,893)
<b>Total Costs - DSS/MHD</b>	<b>(\$153,110)</b>	<b>(\$179,538)</b>	<b>(\$181,345)</b>
FTE Change - DSS/MHD	1 FTE	1 FTE	1 FTE
<u>Cost – DSS/MHD (§208.270) FIM program participation p.4</u>	\$0	(Could exceed \$3,022,864)	(Could exceed \$3,227,361)

<u>FISCAL IMPACT – State Government</u>	FY 2027 (10 Mo.)	FY 2028	FY 2029
<u>Cost – DSS/MHD (§208.270) Grocer Network Vendor p.4</u>	(\$250,000)	\$0	\$0
<u>Cost – DSS/MHD (§208.270) 1115 Waiver consultant p.4</u>	(\$10,000)	\$0	\$0
<b>ESTIMATED NET EFFECT ON GENERAL REVENUE</b>	<b><u>(\$413,110)</u></b>	<b>(Could exceed <u>\$3,202,402</u>)</b>	<b>(Could exceed <u>\$3,408,706</u>)</b>
Estimated Net FTE Change on General Revenue	1 FTE	1 FTE	1 FTE
<b>FEDERAL FUNDS</b>			
<u>Revenue Gain – DSS/MHD (§208.270) FIM program participation p.4</u>	\$0	\$11,976,422	\$12,786,627
<u>Revenue Gain – DSS/MHD (§208.270) Grocer network vendor p.4</u>	\$250,000	\$0	\$0
<u>Revenue Gain – DSS/MHD (§208.270) 1115 Waiver consultant p.4</u>	\$10,000	\$0	\$0
<u>Cost – DSS/MHD (§208.270) FIM program participation p.4</u>	\$0	(Could exceed \$11,976,422)	(Could exceed \$12,786,627)
<u>Cost – DSS/MHD (§208.270) Grocer Network Vendor p.4</u>	(\$250,000)	\$0	\$0
<u>Cost – DSS/MHD (§208.270) 1115 Waiver consultant p.4</u>	(\$10,000)	\$0	\$0
<b>ESTIMATED NET EFFECT ON FEDERAL FUNDS</b>	<b><u>\$0</u></b>	<b><u>\$0</u></b>	<b><u>\$0</u></b>

<u>FISCAL IMPACT – Local Government</u>	FY 2027 (10 Mo.)	FY 2028	FY 2029
	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>

FISCAL IMPACT – Small Business

No direct fiscal impact on small businesses would be expected as a result of this proposal.

FISCAL DESCRIPTION

This bill creates provisions relating to a MO HealthNet waiver for nutrition services.

This legislation is not federally mandated, would not duplicate any other program and would not require additional capital improvements. However, it would require additional rental space.

SOURCES OF INFORMATION

Department of Social Services  
Joint Committee on Administrative Rules  
Missouri Department of Agriculture  
Office of the Secretary of State



Julie Morff  
Director  
March 26, 2026



Jessica Harris  
Assistant Director  
March 26, 2026