

3rd Food is Medicine Mini-Summit Recap



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Thanks again to our
wonderful speakers!

FEDERAL AND STATE POLICY

- Federal programs supporting Food As Medicine initiatives
 - Local food and farmers market support programs, e.g., Local Agriculture Market Program grants
 - Gus Schumacher Nutrition Incentive Program funds produce prescription programs and nutrition incentive programs
 - 1115 waivers allow states to propose changes to service delivery in line with Medicaid program goals
- Opportunities with the 89th Texas Legislative Session – HB 26
 - Food As Medicine: HB 26 currently only covers nutrition counseling, PROHIBITS food provision
 - Cottage Food bills to increase sales cap and expand allowable foods
 - Increased funding for TDA young farmer grant program
- Shaping the path ahead:
 - Leverage research demonstrating health impacts and cost savings
 - Utilize MAHA momentum to uplift and shape priorities
 - Underscore opportunities for Food As Medicine programs to support local food systems

What Comes Next?

- Sent **Memo** update to Austin City Council in March on roles, responsibilities, and unmet needs
- Launched dashboard to show progress on all 61 strategies
- City and County are working on launching an Implementation Collaborative, to be the "home" for the work of prioritizing, sequencing, resourcing, and operationalizing Food Plan strategies



Why a Food Plan?

- **Sets clear goals and strategies** to move toward a more equitable, sustainable, resilient food system.
- **Builds on existing plans and initiatives** from the County, City, and community to tackle key food system issues.
- **Centers equity** and the lived expertise of those most impacted by the current food system.

Key Takeaways From Group Discussion

1. Community-Based Access Without Healthcare Barriers

Food should be available where people are, outside of healthcare settings, to ensure equity, while still keeping providers informed of community needs.

2. Culturally Relevant, Client-Centered Food Is Vital but Complex

Tailored meals and client choice promote dignity, but require capacity, local sourcing, and retail engagement to be feasible and equitable.

3. Education Must Go Hand-in-Hand with Access

Nutrition and "Food Is Medicine" education should be integrated, family-focused, and delivered through trusted, community-rooted channels.

4. Policy Drives Access and Innovation

Expanding SNAP/WIC, supporting local farms, defining "Food Is Medicine," and including food provision in Medicaid are key levers for systemic change.

5. Scale Requires Infrastructure and Partnerships

Food hubs, coordinated efforts, diverse workforce, and strong community partnerships are essential for sustainable, scalable impact.



Tentative 4th FIM Mini- Summit scheduled for:



09/19/2025



9:00-11:00am



1836 San Jacinto Blvd

Keep an eye out for a Save the
Date and RSVP Invite!



Thank you for being a part of our summit!
We'd love your input on what you'd like to
see at our next event — scan the QR code
to share your thoughts.



Thank you from UTHealth Houston SPH and the Ascension Seton Foundation!

