



KPCA
IMPROVING KENTUCKY'S CAPACITY TO CARE

2026
Annual
Conference

Food as Medicine: Expanding a Kentucky collaboration to improve health outcomes

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of Kentucky**



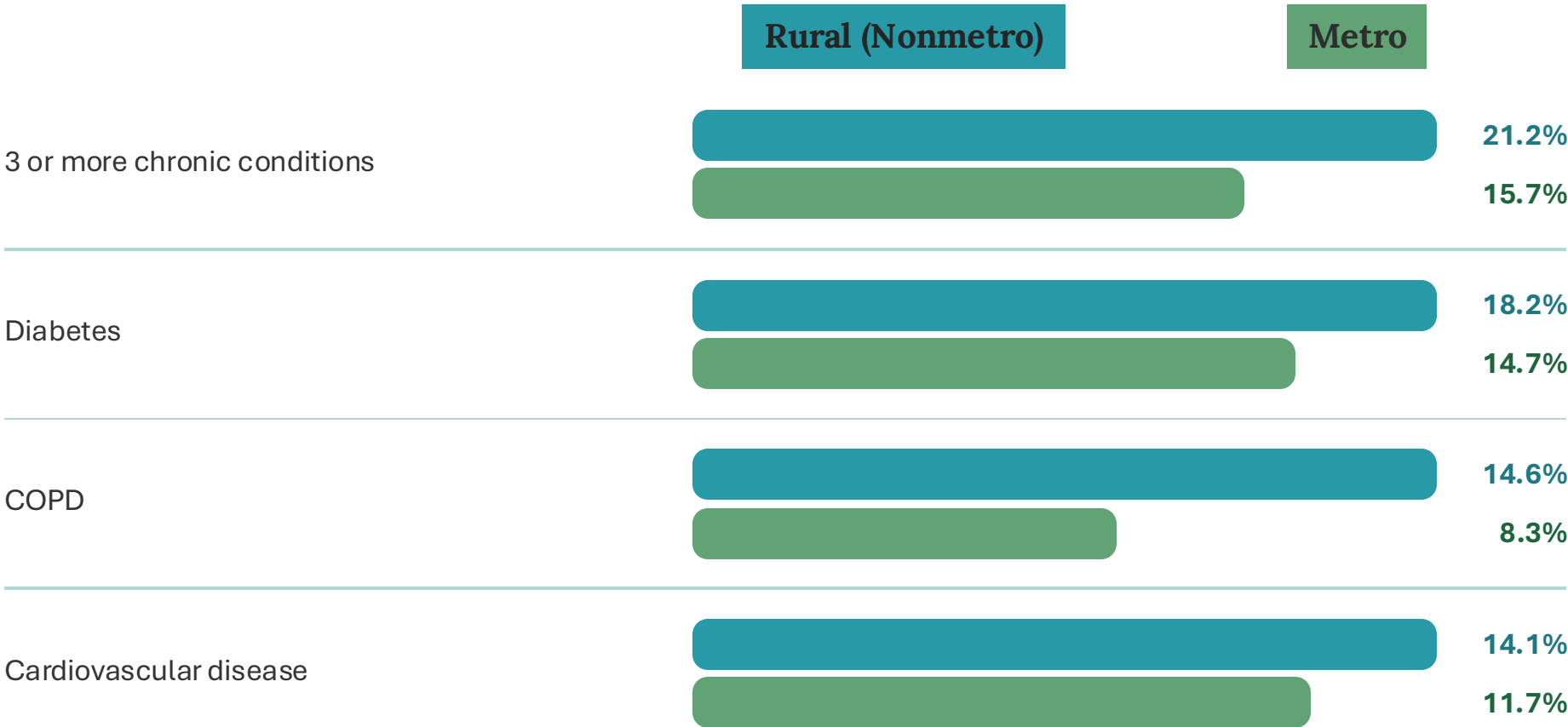
The Challenge in Your Waiting Room

Food insecurity is not a background issue — it is sitting in your exam rooms, driving chronic disease, and straining your clinical capacity.

- As of 2026, more than **837,000 Kentuckians** — 1 in 5 — are experiencing food insecurity, per new Feeding America data.
- 1 in 4 Kentucky children lack the nutrition they need to grow and thrive.
- Affordability, transportation and financial tradeoffs are major drivers of hunger in Kentucky.
- The challenge is growing: Kentucky's food insecurity rate increased from 16.6% to 18.2% in one year, representing roughly 80,000 more Kentuckians experiencing food insecurity.

Food Insecurity Fuels the Chronic Disease Burden

The conditions you treat every day — diabetes, heart disease, obesity — are inseparable from food access. Rural Kentuckians carry a disproportionate share of this burden.



Source: [Summary Rural Health in Kentucky](#)

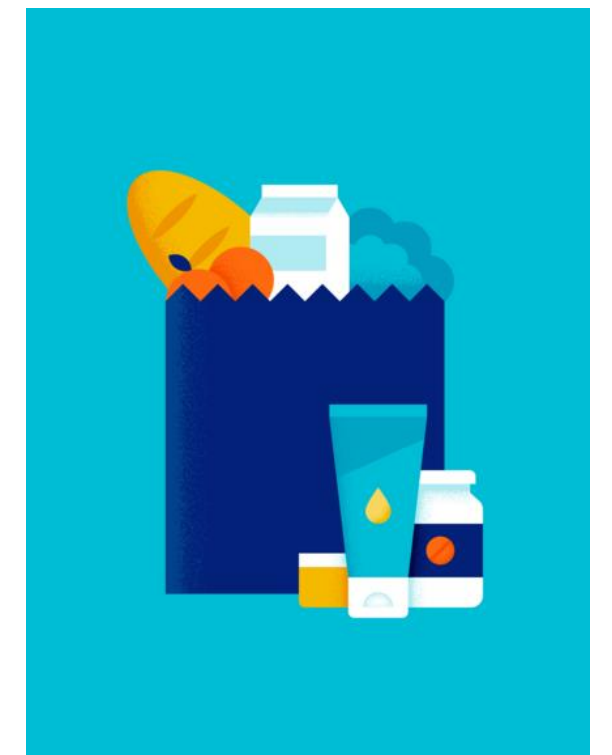
The Food–Disease Connection

- Food insecurity is directly linked to increased risk for obesity, chronic disease, and developmental problems in children
- Rural Kentuckians with 3+ chronic conditions outnumber metro counterparts by **5.5 percentage points** — a gap driven by compounding social determinants
- Rural COPD rates are 76% higher than metro rates — reflecting the compounding effect of poverty, limited healthcare access, and food insecurity

Food Deserts and the Rural Access Gap

Many of your patients cannot access healthy food even when they have resources — geography and infrastructure are the barriers.

- In Kentucky, rural counties including **Wolfe, Magoffin, and Clay** have the highest food insecurity rates due to limited grocery access and higher unemployment
- **31% of food-insecure households** do not use a personal vehicle to grocery shop — making delivery and proximity critical
- Dollar stores are the **fastest-growing food retailers** in rural U.S. communities — predominantly in low-income areas — but often lack fresh produce



2025 Kentucky Medicaid HRSN Screening



Top 5 Need Domains



15,558

Financial



13,461

Education & Employment



11,081

Psychosocial



9,782

Nutrition



7,006

Transportation

Of the 46.4K members screened, 54% had an SDOH need identified.

Kentucky Food Insecurity — What UHC Sees in the Data

UHC's data from Kentucky Medicaid members confirms that nutrition is a top social need — and that screening works.



8th Highest

Kentucky food insecurity rate among U.S. states — 14.7% vs. 12.3% national average



20.7%

Kentucky children experiencing food insecurity — above national average



546,542 SNAP participants

KY population enrolled in SNAP; 40.8% of recipients are under age 18

UHC Kentucky Programs — What We Are Doing Now

UHC Kentucky has built a layered portfolio of nutrition interventions — from screening and referral to meal delivery and health coaching — that providers can connect their patients to.



Screen & Connect

- UHC Community Connector links members screening positive for food insecurity to CBOs
- Partners: Mom's Meals, Instacart, Dare to Care, Salvation Army, Neighborhood Place, St. Vincent De Paul, Catholic Charities



Value-Added Benefits

- Medically tailored meals post-discharge: **998 KY members** in 2025
- Medically tailored meals for diabetic members (2 meals/day, 8 wks + 2 RD calls): **626 KY members** in 2025
- Instacart Fresh Fund: **\$60 grocery credit** for members screening positive



Community Pilots

- Attane Health pilot: **\$145/month grocery credit** + 1-on-1 nutrition coaching for high-risk maternity and chronic condition members
- Targets highest-risk members with personalized, whole-family nutrition support
- UK Health Alliance Food as Medicine: Grocery prescription **program- \$100/month for 3 months** for diabetic population to purchase healthy food items



Member Rewards

- Members in case management earn **\$25 per goal** (up to \$100/year, 4x) for completing care plan goals
- Rewards redeemable for healthy food or OTC products through UCard
- Members can earn rewards for completing preventive care screenings like well child visits and for routine vaccinations and managing diabetes

UHC Community Investments in Kentucky

UHC is not only connecting members to programs — we are investing in the food infrastructure of Kentucky communities.

- **Audubon Catalyst Program:** Members at Audubon Area Community Care Clinic with diabetes are assigned a community health worker, receive eye exams, and get personalized nutrition education
- **Girls Inc. partnership:** Lifestyle education for girls ages 8–12 including nutrition materials, healthy snacks, workshops, and activity tracking devices
- **Fork Farm (Indoor Hydroponic Farming):** donated to God's Pantry Food Bank in London, KY and Ashland, KY — building sustainable local food production
- **Cooking and nutrition classes** (Dare to Care Cooking Matters) for members with diabetes in Jefferson County
- **"Lend a Hand" Food Pantry in Knox County:** UHC donated food-focused supplies and grant funding

Food as medicine in Kentucky

A Food as Medicine initiative combining healthy food access with clinical monitoring to improve diabetes and maternal health outcomes.

THE PROGRAM AT A GLANCE

2025 PILOT	Supporting members with diabetes • 50 members participated in the initial pilot • \$100 per month in healthy food support
2026 EXPANSION	Growing the impact • Expands to 100 maternal health members and 100 members with diabetes • Nutrition counseling plus \$300 in healthy food support
HOW IT WORKS	Nutrition support paired with clinical guidance • Members receive funding for pre-approved healthy foods • Dietitians and community health workers provide nutrition guidance and help navigate resources
MEASUREMENT	Tracking measurable health outcomes • Clinical measures include A1C, blood pressure and BMI • Data evaluates the impact of foods on health outcomes

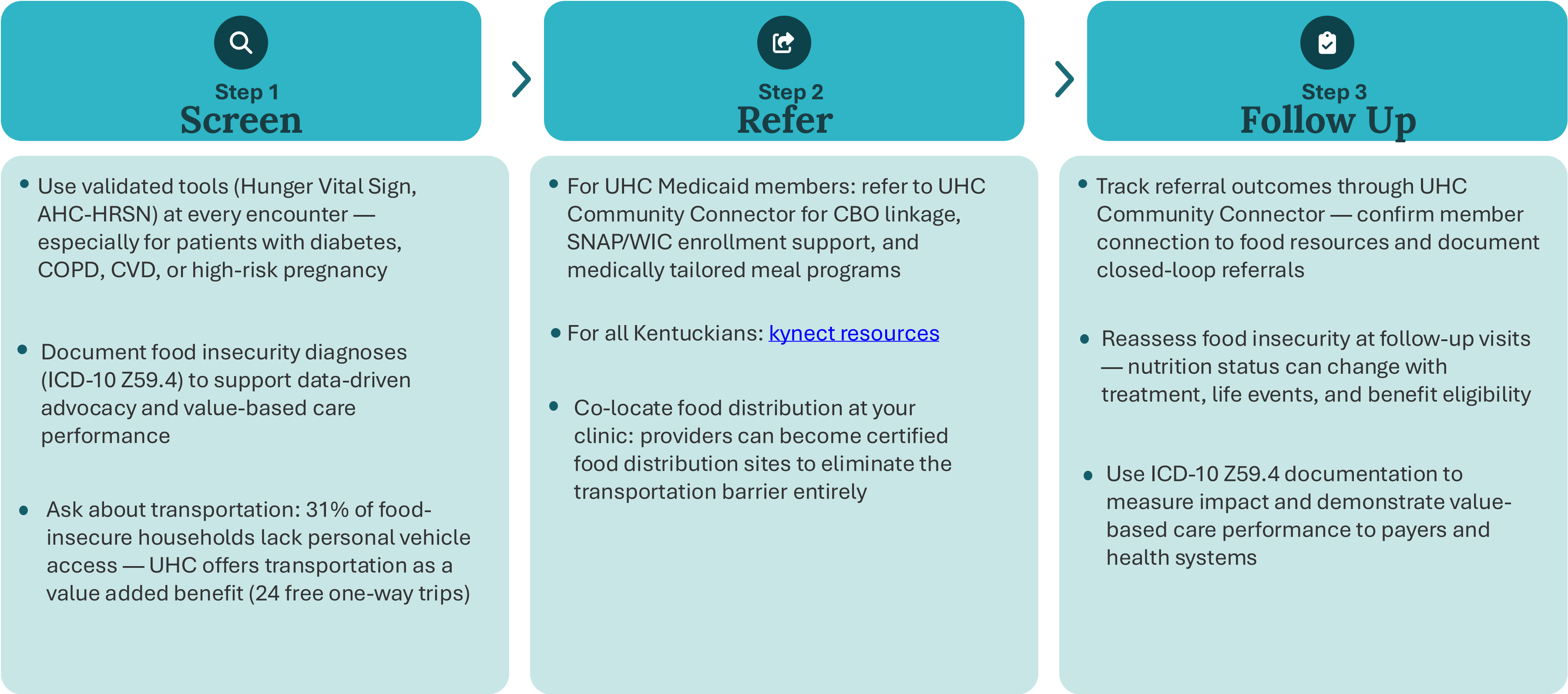


**UnitedHealthcare
Community Plan of
Kentucky is integrating
nutrition access into
care, improving
outcomes for members
with diabetes and
those who are
pregnancy.**

**Food access +
clinical support**

What Providers Can Do — Screening and Referral

You are on the front line. Systematic food insecurity screening and warm referral to UHC programs can change health trajectories for your highest-risk patients.



Lessons Learned

Build evaluation into the program from the beginning. Measure both health outcomes and total program costs to demonstrate whether improved outcomes translate into reduced utilization or other health care savings.

Make the economic case. ROI and cost-effectiveness evidence will be increasingly important given heightened federal scrutiny of Medicaid spending and nutrition-related initiatives.

Pair food with education. Food support should include practical nutrition education or coaching so participants understand how food choices connect to their conditions and treatment goals.

Focus on the right food, not simply more food. Meals and groceries should be nutrient-dense, clinically appropriate, culturally responsive, and accessible to members.

Partner with local experts. Food banks can bring expertise in sourcing, distribution, food preferences, and the logistical challenges of serving rural communities.

Design around access. Successful rural models must consider transportation, delivery reach, food preparation capacity, and whether members have reliable refrigeration or kitchen access.

Leverage providers as trusted clinical partners. Local provider partners can connect screening, referral, patient education, and follow-up, helping integrate food interventions into routine care rather than treating them as stand-alone benefits.



Kentucky Mobile Mammogram Opportunity

- No cost to clinic
- No cost to patient
- Requires five standard parking spaces
- **If your clinic is interested in scheduling a mobile mammography event, please contact Mike Nester (michael.nester@optum.com) to discuss availability and reserve a clinic date when the mobile unit will be in your area.**