Evaluation of the Houston Food Bank's Food Prescription (Rx) Program: Program Effectiveness

Clinical Effectiveness

This study used data from 2,028 patients enrolled by sixteen HCPs during May 2018 to March 2021. About half of the enrolled patients (n=1072, 52%) visited any food pantry during the period for which data were available. The average number of visits among patients who did visit a food pantry was 6.

The Food Rx model utilized by HFB demonstrated a clinically meaningful decrease in HbAlc levels among patients that redeemed their Food Rx vouchers (-0.52%) as compared to patients who did not redeem their voucher and received only standard medical care (-0.24%), for a net HbAlc difference of 0.28% (p=.007). Statistically significant reductions in systolic blood pressure (-3.2, p<0.001) and diastolic blood pressure (-2.5, p=0.028) favoring the group participating in Food Rx were also found.



Dosage matters: Among patients who had 1-6 visits to the pantry, 42% experienced a clinically significant decline in HbAlc (>0.50%), while among those that had 7 or more visits, 50% experienced a clinically significant decline in HbAlc. In contrast, only 34% of patients that did not visit a pantry had a clinically significant decline in HbAlc. Magnitude of decline in %Alc, by exposure status

Read the full report here EXPOSED GROUP (>=1 VISIT TO A FOOD PEINTRY) CONTROL GROUP (DID NOT VEST A PAINTRY) 0 0.2 0.4 0.8

Cost Effectiveness

- Results show that use of Food Rx
- Subsequent to clinical effectiveness, we conducted a cost-effectiveness analysis of Food Rx using HbA1c as our health outcome to predict future health gains and averted medical costs.
- Future health gains (quantified as qualityadjusted life years or QALYs) and averted medical costs were estimated. Cost per redemption of Food Rx was estimated to range from \$15-\$30, with a 20% offset, to account for patients' reduced costs of grocery.
- versus control resulted in modest incremental QUALYs indicating that this program reduced disease burden and lengthened and/or improved patients' lives.
- Overall, we conclude that HFB Food Rx is cost-saving and costeffective, as long as the cost per redemption does not exceed \$30, and patients redeem their vouchers no more than 12 times over a 6 month period.

Implications

A voucher-based model where food distribution is managed by an agency outside the healthcare provider, is feasible, clinically-Effective, & cost-Effective.

Top perceived benefits

- Provides healthy food to those at-risk.
 - Improves knowledge of nutrition and healthy eating.

Connects healthcare and social service partnerships to improve health outcomes.

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