Accountable Food Is Medicine Alliance (AFIM Alliance)

Overview

The Accountable Food Is Medicine Alliance (AFIM Alliance) is a national nonprofit organization dedicated to integrating Accountable Food Is Medicine (AFIM) into healthcare and public health systems. Its mission is to prevent and reverse chronic diseases by making clinically integrated, outcomes-based nutrition interventions a standard part of care. The model is rooted in accountability to patients, providers, farmers, and payers.

Core Functions of the AFIM Alliance

1. Advocacy

The AFIM Alliance functions as a leading national voice in promoting legislative, regulatory, and administrative policies that support the clinical integration of Accountable Food Is Medicine into healthcare systems.

- **Government Engagement**: The Alliance maintains active relationships with federal and state agencies including the Centers for Medicare & Medicaid Services (CMS), the Department of Health and Human Services (HHS), and key Congressional committees. It regularly provides briefings, submits public comments, and convenes stakeholders to shape funding and coverage policy.
- **Barrier Identification and Policy Reform**: By working with its members on the ground, the Alliance identifies legal and regulatory obstacles—such as limits on Medicaid reimbursement or restrictive dietary coverage policies—and develops actionable proposals to eliminate them.
- **Coalition Leadership**: The Alliance brings together public health organizations, healthcare providers, employers, insurers, community-based organizations, and food system stakeholders into unified advocacy campaigns, creating momentum for systemic change.
- **Public Engagement**: Annual conferences in Washington, DC, and high-impact regional events position AFIM programs as a central component of health reform and promote evidence-based models to national leaders.
- **Continuous Campaigns**: Year-round communication and education campaigns keep AFIM on the legislative agenda and build sustained public support for its expansion.

2. Policy Development

The Alliance creates policy frameworks, technical guidance, and legislative strategies to enable state and federal agencies to adopt and fund AFIM programs.

- **Thought Leadership**: The Alliance publishes white papers, implementation guides, and strategic roadmaps covering key policy levers such as Medicaid Section 1115 waivers, CMS Innovation Center pilots, and Medicare Advantage benefit design.
- **Policy Consultation**: Alliance experts serve as nonpartisan advisors to state Medicaid programs, federal agencies, and legislative staff developing rules or laws that affect nutrition security, chronic disease prevention, and healthcare payment reform.
- **Pilot Program Support**: The Alliance partners with payers and providers to support the design, implementation, and evaluation of alternative payment models—such as bundled payments or per-member-per-month nutrition benefits—that align financial incentives with health outcomes.
- **Model Legislation**: The Alliance develops model state and federal legislation that members and allies can adapt to their own jurisdictions to accelerate policy adoption.

3. Research

AFIM Alliance builds and strengthens the evidence base for Food Is Medicine interventions through robust evaluation strategies, impact research, and data transparency.

- **Health Outcomes Research**: The Alliance coordinates and funds longitudinal studies across multiple sites to measure impacts on clinical indicators like A1c, blood pressure, cholesterol, BMI, and medication adherence.
- **Healthcare Utilization & Cost Savings**: Using claims data and EHR integration, the Alliance tracks reductions in ER visits, hospitalizations, and medication costs—translating results into ROI metrics that resonate with payers and policymakers.
- **Best Practices Repository**: A national repository of protocols, implementation toolkits, and case studies helps members replicate successful models and avoid common pitfalls.
- **Data Infrastructure Leadership**: The Alliance supports the development of standardized data collection and outcome reporting methods, enabling benchmarking and continuous quality improvement across programs

4. Education

The Alliance provides foundational and ongoing education for multiple audiences—clinicians, patients, policy leaders, and community members—to support widespread adoption of the AFIM model.

- **Accredited Professional Training**: Through CME-eligible courses and webinars, the Alliance educates physicians, nurses, dietitians, community health workers, and administrators on the integration of food-based interventions into chronic disease care.
- **Patient Empowerment**: Patients enrolled in AFIM programs receive culturally responsive education on nutrition, cooking, label reading, meal planning, and behavior change strategies tailored to their specific clinical needs.
- **Curriculum Development**: The Alliance develops and distributes standardized toolkits, online learning modules, and printed materials that can be adapted for different regions and populations.
- **Community Partnerships**: Collaborations with schools, food pantries, tribal health systems, and community-based organizations expand the reach and relevance of AFIM educational efforts.

5. Member Engagement & Capacity Building

The Alliance strengthens its member organizations' ability to deliver, evaluate, and scale AFIM programs through direct support and peer collaboration.

- **Technical Assistance**: Members receive personalized guidance on everything from data system design and staffing models to payer negotiation and policy engagement.
- **Peer Learning Networks**: Workgroups, learning collaboratives, and site visits facilitate the exchange of best practices among members facing similar challenges and opportunities.
- **Recognition and Visibility**: Members' successes are showcased at conferences, in publications, and on the Alliance's digital platforms—raising visibility with funders, partners, and policymakers.
- **Workforce Development**: The Alliance invests in the AFIM workforce pipeline by training new professionals and supporting continuing education for existing staff—including program managers, educators, produce managers, and CHWs.

Organizational Infrastructure

Funding and Sustainability

- **Diverse Revenue Streams**: The Alliance is supported through a mix of federal and state grants, philanthropic funding, membership dues, and service contracts with health systems, managed care organizations, and employers.
- **Innovative Payment Models**: AFIM programs are designed for financial sustainability through per-member-per-month models, shared savings arrangements, outcome-based bonuses, and bundled payments linked to measurable clinical improvement.
- **Strategic Growth Planning**: The Alliance engages in long-term planning and performance management to ensure operational resilience, program scalability, and the ability to respond to emerging policy and funding landscapes.

Governance and Membership

- **Board of Trustees**: A multidisciplinary board provides strategic oversight and is drawn from across healthcare delivery, insurance, public health, agriculture, academia, and philanthropy.
- **Membership Composition**: Members include health systems, food companies, Medicaid and Medicare Advantage health plans, large employers, universities committed to regenerative agriculture, research institutions, foundations, and community-based organizations and other entities committed to the goals of Accountable Food Is Medicine.
- **Member Benefits**: Members gain access to federal and state advocacy, policy shaping, research collaboration, technical assistance, workforce training, and networking with other innovators at the forefront of healthcare transformation.

What is Accountable Food Is Medicine (AFIM)?

AFIM is a clinically integrated, outcomes-based approach to Food Is Medicine that embeds accountability across stakeholders. It is designed to be a core component of chronic disease care, combining clinical oversight, culturally relevant nutrition education, and access to nutrient-dense, locally grown food.

Key Features:

- **Clinical Integration:** AFIM is prescribed by healthcare providers, integrated with care teams, and linked to value-based payment models such as bundled payments.
- **Stakeholder Accountability:**
  - **To Patients:** Regular tracking of participation and health metrics, with structured graduation or re-enrollment.
  - **To Providers:** Seamless coordination and reporting on patient progress.
  - **To Farmers:** Emphasis on sourcing from local producers, with preference for regenerative agriculture.
  - **To Payers:** Documentation of clinical outcomes (e.g., A1c, blood pressure) and cost savings (e.g., $12,000 annually per patient, as seen in FreshRx Oklahoma).
- **Culturally Relevant and Sustainable:** Educational and food resources are tailored to community needs.
- **Data-Driven:** Standardized outcome tracking across programs ensures transparency and scalability.

Programmatic Model

- **Patient Journey:** Patients are referred by providers, screened for readiness, and enrolled in a 12-month intervention with regular food distribution, education, and health monitoring.
- **Staffing:** Core teams include Program Director, Education Director, Intake Coordinators, Produce Manager, and Community Health Workers.
- **Scalability:** A single team can support 200+ patients annually, with modular capacity to grow.
- **Payment Structure:** Designed for bundled payments, per-member-per-month reimbursement, and outcome-based incentives.