Trinity Health Michigan Food is Medicine

ILOS Asset Mapping Outcomes

Background & Methods

Michigan's new In-Lieu of Services (ILOS) opportunity enables Medicaid recipients to access nutrient-dense food as a covered benefit from their healthcare provider. The program reimburses service providers (vendors, community-based organizations, or health systems) to deliver four types of nutrition services to eligible enrollees.

Trinity Health, a contracted ILOS service provider, recognizes the potential barriers faced by smaller community-based organizations (CBOs) contracting with health plans to deliver ILOS services and is piloting a **network model** to strengthen ILOS service delivery in Prosperity Regions 4, 9, or 10.



Network Design



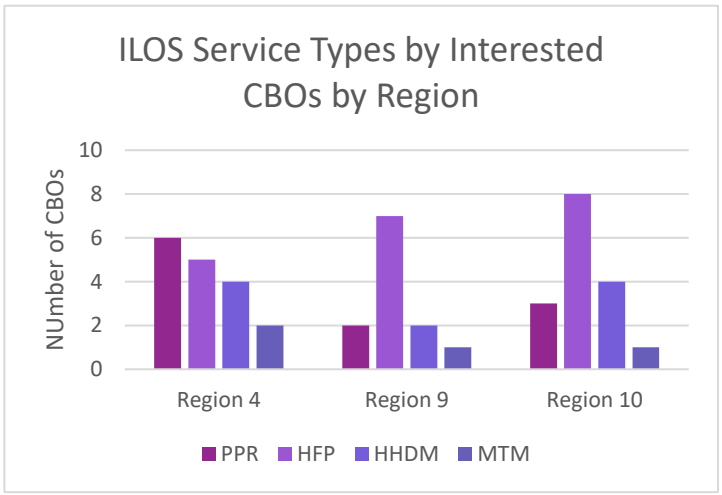
To better understand the landscape of food and nutrition CBOs in Regions 4, 9, and 10, and assess CBO interest in, familiarity with, and current perceived barriers for participating in ILOS, Trinity Health* administered a survey to CBOs operating in those regions. Applicable organizations were identified through hub-and-spoke outreach, leveraging existing Food is Medicine networks for outreach and distribution.

**In collaboration with the Michigan Farmer's Market Association and the Michigan Primary Care Association.*

Asset Mapping Results

The survey collected **35 unique responses** from CBOs operating in regions 4, 9, and 10.

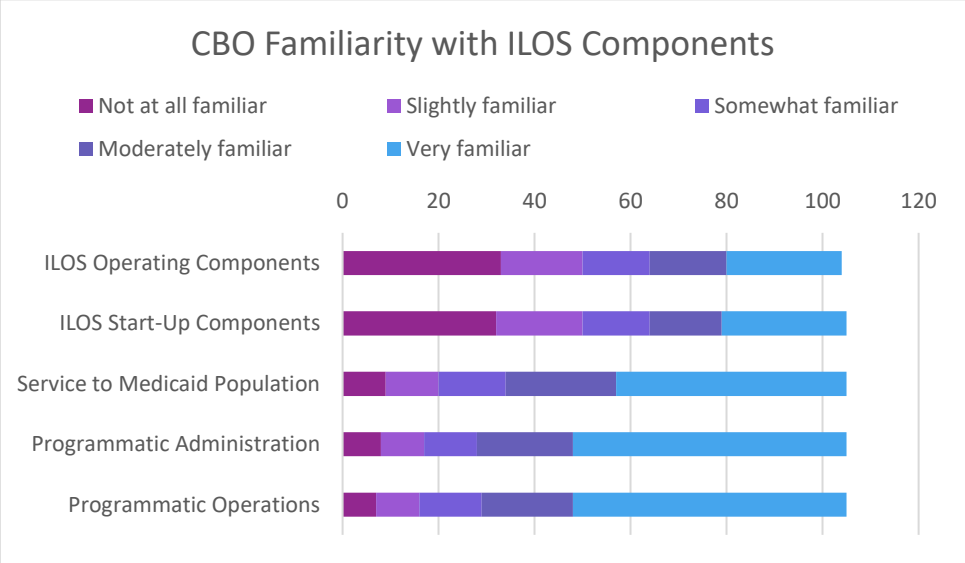
- 29 CBOs responded that they were interested in participating in food and nutrition ILOS services.
- **24 CBOs were interested in joining the TH Network** (90% of those with general interest)
- Of those interested in joining a TH Network, the CBOs served the following Prosperity Regions:
    - Region 4: 12 CBOs
    - Region 9: 8 CBOs
    - Region 10: 11 CBOs



Trinity Health Food is Medicine *integrates social and clinical care by providing locally grown food to patients experiencing nutrition insecurity or managing diet-related chronic conditions. This approach targets key drivers of health disparities while improving outcomes, reducing costs, and enhancing patient experience.*

Familiarity and Perceived Barriers

For ILOS service delivery



CBOs are well equipped for service delivery, not system navigation. Survey responses indicate that CBOs are most familiar with direct service delivery components—such as serving Medicaid populations, participant management, invoicing, and supply chain activities. In contrast, they report the lowest familiarity with ILOS start-up and operating requirements, including contracting, referral management, legal support, and HIPAA compliance. This mismatch suggests that capacity gaps lie primarily in administrative and systems-level functions rather than programmatic expertise.

Contracting and reimbursement are primary barriers. The most frequently cited perceived barriers relate to working with Medicaid Health Plans (MHPs), including contracting, pricing, understanding ILOS rules, and articulating a value proposition. These barriers are structural rather than operational and are consistent with the low familiarity reported for ILOS set-up components.

HIGHEST BARRIERS

- Developing and managing contracts
- Conveying a value-proposition to an MHP
- ILOS rules and policies
- Setting reimbursement pricing
- Access to legal counsel to support contracting

Internal organizational readiness is relatively high. CBOs reported relatively low concern about internal factors such as leadership buy-in, staff capacity, program oversight, evaluation, and billing operations. This indicates that many organizations believe they have the foundational infrastructure needed to deliver ILOS services.

LOWEST BARRIERS

- Leadership buy-in
- Evaluating your food program
- Program oversight and monitoring
- Current staff capacity
- Billing procedures and invoicing

Conclusion

A network model is well positioned to support CBO participation for ILOS. The data suggest that a network-based approach—such as the Trinity Health network pilot—could play a critical role in reducing barriers related to contracting, compliance, and payer engagement. By centralizing and supporting administrative functions, a network model can enable smaller CBOs to participate in ILOS without requiring each organization to independently develop complex reimbursement and legal expertise.



To learn more or get involved, contact: FoodisMedicine@trinity-health.org

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