

Date of Hearing: April 6, 2022

ASSEMBLY COMMITTEE ON AGRICULTURE
Robert Rivas, Chair
AB 2500 (Arambula) – As Introduced February 17, 2022

SUBJECT: Farm to Hospital Grant Pilot Program

SUMMARY: This bill would establish the Farm to Hospital Grant Pilot Program, which the office would administer, to award competitive grants to eligible applicants to provide hospital patients with meals prepared from California-sourced agricultural products, as specified. Specifically, *this bill*:

- 1) Defines the following:
 - a) California-sourced agricultural products means agricultural products produced in California or harvested in its surface or coastal waters.
 - b) Eligible applicant means the University of California, a research hospital, or a hospital capable of complying with the requirements of this article.
 - c) Food hub means a public-serving aggregation and distribution enterprise or community food hub for California-sourced agricultural products.
 - d) Grant moneys means moneys awarded to an eligible applicant through the pilot program.
 - e) Grantee means an eligible applicant awarded grant moneys through the pilot program.
 - f) Office means the Office of Farm to Fork (OF2F), as specified.
 - g) Pilot program means the Farm to Hospital Grant Pilot Program.
 - h) Research hospital means a hospital that expends at least 10 percent of its operating budget in each fiscal year exclusively on medical research activities not directly related to the provision of services to patients.
 - i) Socially disadvantaged farmer or rancher has the same meaning as defined in Section 512 of the Food and Agriculture code.
 - j) Sustainable agricultural practices has the same meaning as that term in the Sustainable Agriculture Research and Education Act of 1986.
- 2) Establishes the pilot program within OF2F.
- 3) Requires OF2F to administer the pilot program by awarding competitive grants to eligible applicants to provide hospital patients with meals prepared from California-sourced agricultural products and build direct relationships with California farmers and ranchers.
- 4) Requires OF2F, in consultation with the California Department of Public Health (CDPH), to develop grant criteria to evaluate proposals from eligible applicants.
 - a) Requires grant proposal to include the following:
 - i) A proposal narrative.
 - ii) A proposal budget.
 - iii) The scope and estimated number of hospital patients to be served meals, as specified.

- iv) A description of the eligible applicant's existing meal preparation facilities and food procurement practices.
 - v) The proposed use of any grant moneys awarded, including how that use is consistent with this chapter.
 - vi) A plan for direct outreach to farms, ranches, and food hubs and for procurement, either directly or through a food distributor, from farms, ranches, and food hubs.
- 5) Allows grantee to only use grant funds as follows:
- a) Improving or expanding hospital meal preparation facilities or infrastructure for the use, preparation, or storage of California-sourced agricultural products.
 - b) Supporting the planning of menus and patient meals that use seasonal California-sourced agricultural products.
 - c) Purchasing equipment for meal preparation or storage of California-sourced agricultural products.
 - d) Staffing necessary to conduct outreach to farms, plan menus, and procure California-sourced agricultural products.
 - e) Cost-share purchasing of California-sourced agricultural products, as specified.
 - f) Conducting outreach to California farmers, ranchers, or food hubs to procure California-sourced agricultural products or connect farmers, ranchers, or food hubs with food distributors contracted by a hospital.
- 6) Requires OF2F to set the percentage of a grantee's costs of purchasing California-sourced agricultural products that the office will pay using grant moneys through cost-share purchasing.
- a) Provides that in addition to the percentage set pursuant to subdivision (a) for purposes of cost-share purchasing, for each of the following conditions applicable to the entity from which the California-sourced agricultural products are purchased, the office shall set separate cost-share purchasing percentage:
 - i) The farm or ranch employs sustainable agricultural practices.
 - ii) The farm or ranch is owned by a socially disadvantaged farmer or rancher, woman farmer or rancher, or veteran farmer or rancher.
 - iii) The farm or ranch has gross incomes under two hundred fifty thousand dollars (\$250,000).
 - iv) The entity is a food hub that serves a farm or ranch described in paragraph (2) or (3).
 - b) Allows OF2F, when setting percentages, to set a different percentage for each condition.
- 7) Requires OF2F to provide technical assistance and leverage OF2F's relationships with community-based organizations, local and statewide farming organizations, to assist grantees for purposes of identifying and communicating with California farmers, ranchers, and food hubs.
- 8) Requires grantee to collect the following information, as specified:

- a) The hospital patient's mood.
 - b) The hospital patient's duration of hospitalization.
 - c) The hospital patient's blood sugar level.
- 9) Each grantee shall collect the following information:
- a) The grantee's average daily expenditures on food procurement and preparation.
 - b) The grantee's average daily income from meal purchases.
 - c) The grantee's method of outreach to farms and ranches.
 - d) The grantee's procurement agreements with farms, ranches, food hubs, and food distributors.
- 10) Requires, by January 1, 2026, each grantee to submit a report to OF2F and CDPH based on the information collection in 7 and 8 above, in a manner consistent with the federal Health Insurance Portability and Accountability Act (HIPA) of 1996.
- 11) Requires OF2F to submit a report on the Pilot Programs the legislature by January 1, 2027, which included, but is not limited to the following:
- a) The use of grant moneys by grantees.
 - b) The number of patients and meals served through the pilot program.
 - c) The pilot program's impact on patient outcomes.
 - d) Any recommendations for future revisions to the pilot program.
- 12) Allows OF2FF to contract with a private entity for fulfilling the report requirement.
- 13) Repeals the Pilot Program on January 1, 2023.

EXISTING LAW: creates OF2F within the Department of Food and Agriculture (CDFA), and requires the office, to the extent that resources are available, to work with various entities, as prescribed, to increase the amount of agricultural products available to underserved communities and schools in the state.

FISCAL EFFECT: Unknown

COMMENTS: Research suggests that approximately one-third of patients in developed countries have some degree of malnourishment upon entering a hospital, with two-thirds worsening during their hospital stay. This is not only taxing to the patient but also increases costs to the hospital. A key disconnect between the importance of nutrition and the presence of widespread malnutrition is centered on the meals offered in hospitals. Hospitals currently decide what meals to provide based on a number of factors, including food availability, fiscal concerns, and the limits of their meal preparation facilities. Even as the nation faces an epidemic of obesity and food-related diseases such as diabetes and heart disease, many hospitals are forced to offer nutritionally insufficient meals in order to cut costs.

According to the author, taking a different approach, the concept of "farm to fork" recognizes the positive benefits of brining locally grown, fresh, and healthy foods directly to consumers. This

aims to bring this approach to hospitals by fostering relationships between hospitals and California farmers, supporting upgrades to hospital kitchens necessary to receive California agricultural products, and guiding planning of meals around seasonal availability all to the benefit of patient nutrition and recovery.

Supporters state that along with helping California farmers, this bill will also provide an avenue for health insecure patients to consume fresh, healthy, California-grown agricultural products in a hospital setting. Poor diet is one of the leading causes of death in California, and contributes to obesity, heart disease, high blood pressure, and cancer. California-grown procurement and farm-to-fork policy action throughout this Program will result in positive changes in patient health outcomes and provide for lifelong healthy eating habits post-discharge. This bill is a triple win – for patients, farmers, and communities.

OF2F was initially an objective of the Health in All Policies (HiAP) Task Force’s Farm to Fork Implementation Plan, endorsed by the Strategic Growth Council in January of 2012. With HiAP’s help, CDFA collaborated with the California Department of Education and California Department of Public Health to form OF2F. Assembly Bill 2413 permanently established OF2F within CDFA in 2014 when Governor Brown signed. OF2F works to increase access to healthy foods for underserved communities and schools in the state of California. Current programs include Farm to School, Healthy Stores Refrigeration Grant Program and working to reduce food insecurity in California.

The committee may wish to consider the following technical amendments that more accurately define sustainable farming practices:

- 1) On page 3, lines 19-22, ~~(j) “Sustainable agricultural practices” has the same meaning as that term is used in the Sustainable Agriculture Research and Education Act of 1986 (Article 8 (commencing with Section 550) of Chapter 3 of Part 1 of Division 1),~~ and replace with *(j) “Climate smart agricultural practices” includes those practices defined as “climate smart agricultural practices” in the United States Department of Agriculture Natural Resources Conservation Service’s conservation practice standards or by the Department of Food and Agriculture for purposes of the Cannella Environmental Farming Act of 1995 (Article 8.5 (commencing with Section 560) of Chapter 3 of Part 1 of Division 1) or Part 1(commencing with Section 101) of Division 1.*
- 2) On page 5, line 7, strike the word **sustainable** and replace with *climate smart*

Related Legislation:

AB 2413 (Pérez) Chapter 583, Statutes of 2014 established OF2F within CDFA.

ACR 108 (Bonta) Chapter 166, Statutes of 2017 encourage local jurisdictions across California to create “Food as Medicine” programs to address the obesity and diabetes epidemics.

AB 1160 (Rubio) of 2021 would have authorize Medi-Cal managed care plans to provide medically tailored meals to enrollees. Died in Asm. Health

REGISTERED SUPPORT / OPPOSITION:

Support

California Farm Bureau

Opposition

None on file.

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