



MILKEN  
INSTITUTE

JUNE 2025

## SUMMARY BRIEF

# A Blueprint for Employer-Led Food as Health Strategies

As more players enter the food and health-care space, employers are recognizing their opportunity to leverage food to create a happier, healthier workforce. However, they have lacked guidance on how to integrate food into their health and wellness offerings in ways that are rooted in evidence and tailored to their specific employee base. **This summary brief is a response to employers' request for a clear, step-by-step guide on how to implement their food as health strategies.**

From designing a strategy based on their employees' needs and the organization's resources to understanding the most feasible payment pathway to cultivating meaningful partnerships and measuring the impact of their programs, organizations can develop strategies that align with both employee preferences and available resources. This brief caters to organizations at various stages of readiness, from those just starting to explore food as health offerings to those looking to expand or enhance their existing efforts. It also identifies how supportive policies and evidence are critical to supporting these initiatives. **This summary of the full blueprint serves as a roadmap that can guide employers, their partners, and food as health advocates striving to integrate food and health to improve the overall well-being of employees and their wider communities.**

Milken Institute Feeding Change looks forward to engaging with employers and key stakeholders to continue championing food as a strategy to improve the health and well-being of employees. The full blueprint can be found at <https://milkeninstitute.org/content-hub/research-and-reports/reports/blueprint-employer-led-food-health-strategies>.

# Food as Health Strategies Employer Roadmap

## DESIGN

### Understanding the landscape

Physical and  
mental health

Employee  
well-being

Social and financial  
needs

Community health

### Assessing needs and resources

Employee needs



Employer resources

### Weighing strategies

Direct food

Education and  
support

Streamlining  
healthy eating

Monetary funds

## ACTIVATE

### Navigating strategy payment

Health plan

Direct vendor  
partnership

Stipends

### Creating partnerships

Health plan

Lifestyle  
platform

FIM  
delivery  
program

Third party  
admin

Local  
farmers and  
producers

Grocery  
stores

### Engaging employees

Improving trust

Introducing the  
strategy

Educating  
employees about the  
strategy

Reminding to enroll  
or re-enroll

## EVALUATE

### Measuring impact

Strategy  
utilization  
rates

Length  
of strategy  
utilization

Health  
outcomes  
(e.g., A1C)

Experience  
measures

Absenteeism

Productivity

### Scaling beyond pilots

Customizability

Leveraging  
technology

Continuously  
monitoring

# 1. DESIGN

This section introduces key considerations for employers looking to incorporate food as health strategies for their employees. Recognizing that organizations are at different stages of readiness, from initial exploration to active implementation, this section offers questions for employers to consider as they assess priorities and lay the groundwork for developing effective food-related health initiatives.

**1a. Understanding the landscape** provides an overview of how employer priorities can be addressed through food and the ways in which many of these priorities are deeply interconnected.

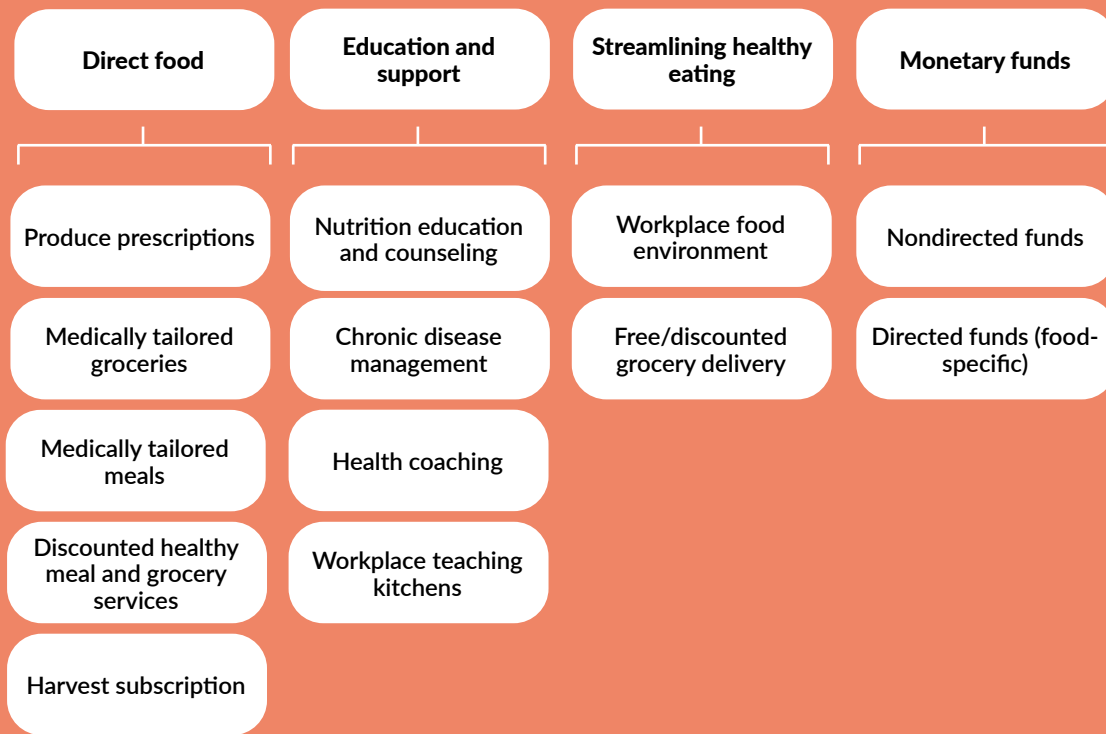
| Physical and mental health  | Employee well-being  | Social and financial needs   | Community health  |
|---|--|--|---|
| <b>Physical and mental health</b> <ul style="list-style-type: none"><li>Chronic diseases and conditions</li><li>Health-care utilization</li><li>Mental health</li></ul> | <b>Employee well-being</b> <ul style="list-style-type: none"><li>Absenteeism</li><li>Productivity</li><li>Morale</li></ul> | <b>Social and financial needs</b> <ul style="list-style-type: none"><li>Food and nutrition security</li><li>Caregiving responsibilities</li><li>Financial security</li></ul> | <b>Community health</b> <ul style="list-style-type: none"><li>Resilience</li><li>Local farms and food businesses</li><li>A sense of community</li></ul> |

**1b. Assessing needs and resources** guides employers in evaluating their existing resources and employee needs to build effective food as health strategies that align with organizational goals.

| Employee needs                      | Employer resources  |
|-------------------------------------|---|
| <b>Understanding employee needs</b> | <b>Demographics</b> <ul style="list-style-type: none"><li>Where are employees geographically located?</li><li>What are the age demographics of employees?</li></ul> <b>Health</b> <ul style="list-style-type: none"><li>What are the most prevalent health conditions employees are facing?</li><li>What health concerns do employees want support to address?</li></ul> <b>Social needs and responsibilities</b> <ul style="list-style-type: none"><li>What are employee caregiving roles?</li><li>What does food access look like among employees?</li></ul> <b>Building from previous successes</b> <ul style="list-style-type: none"><li>Which types of benefits and workplace wellness programs have employees engaged with in the past?</li><li>What feedback has been gathered from employee satisfaction surveys for any previous benefits?</li></ul> |

|                                     |  |
|-------------------------------------|--|
| <b>Assessing employer resources</b> | <p><b>Mission alignment</b></p> <ul style="list-style-type: none"> <li>• In what ways are health and wellness incorporated within the organization's mission?</li> <li>• Is food central to the organization (for example, selling food, manufacturing food, working with food vendors, and so on)?</li> <li>• Is food central to the organization's philanthropic or social impact goals (for example, volunteering with emergency food organizations)?</li> </ul> <p><b>Organizational values</b></p> <ul style="list-style-type: none"> <li>• Who are key organizational decision-makers, and what data or information will they need to understand the value of food as health strategies?</li> <li>• How does the organization want to differentiate itself from other employers?</li> </ul> <p><b>Budget</b></p> <ul style="list-style-type: none"> <li>• What is the allocated budget for employee health and wellness?</li> <li>• How do the budgets and priorities of these strategies correspond to the organization's primary cost drivers?</li> <li>• What are primary value on investment (VOI) considerations, such as culture, benchmarking against other competitive employers, and providing strategies that promote their values?</li> </ul> <p><b>Existing infrastructure</b></p> <ul style="list-style-type: none"> <li>• What is the onsite food environment like?</li> <li>• What kinds of vendor partnerships already exist that could be leveraged for other types of programs?</li> </ul> |
| <b>Defining key priorities</b>      | <p><b>Identifying high-impact areas</b></p> <ul style="list-style-type: none"> <li>• Reflecting on the assets and resources identified in the previous section, which of these priority areas have the potential for the greatest impact?</li> <li>• What are the primary cost drivers, and what priorities are central to the organization's mission?</li> <li>• Where do organizational priorities overlap and intersect?</li> </ul> <p><b>Who is the strategy for?</b></p> <ul style="list-style-type: none"> <li>• Given employee needs and employer resources, does it make more sense to offer broad food as health strategies to as many employees as possible or offer a more personalized food as health strategy to a targeted population?</li> <li>• If an employee population that may have high turnover—such as hourly or seasonal employees—is in the greatest need, how might changing employee benefits improve retention?</li> </ul>   |
| <b>Positioning priorities</b>       | <ul style="list-style-type: none"> <li>• What type of data does the decision-maker need to make an informed decision: statistics on return on investment (ROI) or health outcomes, stories, or a combination of both?</li> <li>• What additional information or education around food as health strategies will be necessary to make the case?</li> <li>• How can food as health strategies be framed to address both an employer's short-term priorities (such as the cost of rising health premiums) and impactful solutions that address health outcomes in the longer term?</li> <li>• Does leadership respond better to launching programs that start small before adding complexity or those that begin fully formed?</li> </ul>   |

**1c. Weighing strategies** builds on the assessment of employers' key priorities to help them map out which solutions may be a better fit than others.



**One size does not fit all**

- Reflecting on the high-impact areas and target populations defined in Section 1b, which strategies or bundles of strategies can address multiple organization priorities?
- How can these strategies help balance short-term impact goals with long-term benefits to employees and the organization?
- Which solutions address the topmost priorities in the most cost-effective way?



## 2. ACTIVATE

This section helps employers build the infrastructure needed to turn their goals into effective strategies by selecting appropriate payment mechanisms, identifying key partnerships, and improving employee engagement for better program uptake.

**2a. Navigating strategy payment** involves exploring various payment options to determine the most effective way to fund food as health strategies while ensuring sustainability and alignment with organizational goals.

Health plan

Direct vendor  
partnership

Stipends

### Selecting payment structures

- Based on the organization's needs assessment in "Assessing needs and resources" (Section 1b), is there more room to offer food as health strategies through the health plan or through direct vendor partnerships? How could these two buckets work together?
- How much capacity does the organization have for associated administrative tasks?
- How customizable a strategy is preferred?
- What kinds of programs and benefits are already offered through these payment structures? How could food complement or add on to existing benefits?
- Revisit who the food as health strategy is for. Does the payment structure align with the primary beneficiary needs?

**2b. Creating partnerships** assesses key partners across health care, data infrastructure, food provision, and delivery to determine which partners are needed to implement and scale food as health strategies effectively, while ensuring alignment with employee needs and organizational goals.

Health plan

Lifestyle  
platform

FIM  
delivery  
program

Third-party  
admin

Local  
farmers and  
producers

Grocery  
stores

### Selecting partners

#### Vendor alignment

- How is the vendor's intervention specific to the target employee population, whether a subset of the population or whole employee base? How is this strategy tailored to the target employee population's needs and goals?
- What kind of data is needed for reporting and outcomes tracking? Does this partner provide those metrics?
- In what ways does the vendor align with or promote the organization's values and work experience?
- Reflecting on organizational capacity, does this partner help fill any gaps in the ability to offer a food as health strategy?

#### Employee experience

- What is the employee experience with this partner's offering?
- What is the geographic reach of the employee base? What is the geographic reach of the partner?

#### Growing existing partnerships

- What types of relationships are already in place or in place with close partners?

**2c. Engaging employees** requires building trust through transparent communication across multiple channels, fostering community, and using sensitive, inclusive language to boost participation.



**Selecting engagement approaches**

- What are the best ways to communicate with employees in general: email, digital workspaces, conveying information for managers to share with their teams?
- What types of benefits offerings have succeeded in the past? What was the engagement strategy for those benefits?
- What types of settings—whether virtual or in-person, large- or small-format—can foster an open dialogue and allow employees an opportunity to ask questions?

# 3. EVALUATE

Employers implementing food as health strategies must establish clear evaluation methods to track impact, particularly in programs focused on prevention and holistic health. While health-focused programs may offer clearer cost savings, many employers are now shifting toward measuring VOI, which includes factors such as improved employee morale, reduced turnover, and increased productivity.

**3a. Measuring impact** and **3b. Scaling beyond pilots** explore ways to track health outcomes, employee engagement, and ROI and set employers up for success to scale and further customize their interventions to meet employee needs.

Strategy  
utilization  
rates

Length  
of strategy  
utilization

Health  
outcomes  
(e.g., A1C)

Experience  
measures

Absenteeism

Productivity

| What are you trying to address?  | Sample metrics and data sources   | Measure |
|--|---|---------|
| <b>Physical and mental health</b>  |   |         |
| <ul style="list-style-type: none"> <li>Diet-related chronic disease</li> <li>Health-care utilization</li> <li>Mental health</li> </ul> | <p><i>Often data that are more readily available in health medical claims information.</i></p> <ul style="list-style-type: none"> <li>Diagnosis codes for chronic illnesses like type 2 diabetes or hypertension</li> <li>Clinical labs for A1C or blood pressure</li> <li>Medical record exchange</li> <li>Emergency room utilization</li> </ul> | ROI     |
| <b>Employee well-being</b>   |   |         |
| <ul style="list-style-type: none"> <li>Absenteeism</li> <li>Productivity</li> <li>Morale</li> </ul>                                    | <p><i>Best collected through anonymous or third-party sources.</i></p> <ul style="list-style-type: none"> <li>Employee satisfaction survey</li> <li>Focus groups</li> <li>Sick day utilization</li> </ul>   | VOI     |
| <b>Social needs</b>  |   |         |
| <ul style="list-style-type: none"> <li>Food and nutrition security</li> <li>Caregiver supports</li> <li>Financial security</li> </ul>  | <p><i>Best collected through anonymous or third-party sources.</i></p> <ul style="list-style-type: none"> <li>Employee engagement survey measures</li> <li>Community-level nutrition security information (US Department of Agriculture sources)</li> </ul>   | VOI     |
| <b>Community health</b>  |   |         |
| <ul style="list-style-type: none"> <li>Resilience</li> <li>Local farms and businesses</li> <li>A sense of community</li> </ul>         | <ul style="list-style-type: none"> <li>Procurement</li> <li>Social impact</li> </ul>  | VOI     |

## 3b. Scaling beyond pilots

Customizability

Leveraging  
technology

Continuously  
monitoring



# POLICY AND EVIDENCE ACTION STEPS

This section outlines four key recommendations for scaling food as health strategies in employer-sponsored programs, emphasizing the need for clear regulatory guidelines and infrastructure. Recommendations include developing standardized definitions for Food Is Medicine (FIM), improving reimbursement policies for food as a medical expense, clarifying fraud and inducement concerns, and building a stronger evidence base to demonstrate the effectiveness of these strategies for employers. These actions aim to address regulatory uncertainties and enhance the adoption of food as health initiatives within the workplace.

| Recommendations   | Action steps   | Key stakeholders   |
|---|--|--|
| <b>1. Develop clear guidance and well-defined terminology for FIM</b>                 | <ul style="list-style-type: none"> <li>Align stakeholders on standardized and evidence-based definitions for FIM.</li> <li>Meet with federal health agency leadership and key decision-makers to formalize definitions of FIM, with specific parameters and recommendations.</li> </ul>  | <ul style="list-style-type: none"> <li>Federal and state health agencies</li> <li>Health-care organizations</li> <li>Employers and business groups</li> <li>Nutrition and food industry leaders</li> <li>Research institutions</li> </ul>  |
| <b>2. Improve flexibility and guidance around food as a qualified medical expense</b> | <ul style="list-style-type: none"> <li>Encourage the IRS to clarify the circumstances under which food must be a qualified medical expense in the Internal Revenue Code, as well as expand on the phrase “normal nutritional needs” as it relates to treating chronic conditions.</li> <li>Advocate for Congress to broaden the definition of “qualified medical expense” in the Internal Revenue Code to include FIM and food as health when used as part of a disease management program.</li> <li>Collaborate with members of Congress to write a letter to the IRS, asking it to reconsider the scope of the Internal Revenue Code to include specific healthy foods.</li> </ul> | <ul style="list-style-type: none"> <li>Federal tax and health agencies</li> <li>Congressional policymakers</li> <li>Employer and business groups</li> <li>Health-care and insurance providers</li> <li>Nutrition and public health organizations</li> <li>Research institutions</li> </ul> |

|   |  |   |
|---|--|---|
| <b>3. Clarify fraud, waste, and abuse obligations</b>   | <ul style="list-style-type: none"> <li>• Encourage the US Department of Health and Human Services Office of Inspector General (HHS OIG) and Centers for Medicare and Medicaid Services (CMS) to support health-care organizations in navigating compliance concerns related to inducement so that they can alleviate their fears in the employer-sponsored space.</li> <li>• Encourage HHS to define FIM as health-care interventions that prevent or manage chronic conditions, distinct from free or discounted food services that could be interpreted as inducement.</li> <li>• As they develop food as health strategies with employers, health-care organizations can reassess compliance across their various lines of business to ensure compliance with various regulatory conditions.</li> </ul> | <ul style="list-style-type: none"> <li>• HHS OIG</li> <li>• CMS</li> <li>• Other federal health oversight agencies</li> <li>• Employer and business groups</li> <li>• Insurance providers</li> </ul>          |
| <b>4. Build a collaborative evidence base focused on employer-led food as health strategies</b> | <ul style="list-style-type: none"> <li>• Future research can focus on measuring ROI and VOI of food-based wellness programs for employee populations of different sizes, age demographics, and geographic reaches. It can also explore how employers can think about food as a proactive rather than reactive way to address employee health, paired with a demonstration of ROI.</li> <li>• Publicly document and share best practices from piloting and proving the advantages of offering food as health strategies for employees.</li> <li>• For further learning, look to multinational or international employers that are offering food as health strategies to their employees.</li> </ul>   | <ul style="list-style-type: none"> <li>• Research institutions</li> <li>• Employer and business groups</li> <li>• Health-care and insurance providers</li> <li>• Federal and state health agencies</li> </ul> |

To read the full report, visit <https://milkeninstitute.org/content-hub/research-and-reports/reports/blueprint-employer-led-food-health-strategies>.