

Food is Medicine: Choosing the Right MTM Partner

MTM Vendor Evaluation Parameters & Scoring		
Domain	What MCOs should evaluate	Suggested Rubric
Clinical Fit & RD Oversight	Condition-specific protocols, RD/RDN review, clinical oversight, nutrition assessment, reassessment, and alignment with care plans.	20%
Medical Nutrition Integrity	High-quality meals, medically appropriate ingredients, fresh/culturally relevant options, safety, consistency, and nutrition accuracy.	20%
Outcomes, ROI & Utilization Impact	Referral status, enrollment, delivery confirmation, adherence, member feedback, utilization, readmissions, ED/IP use, and ROI reporting.	20%
Operational Readiness & Access	Intake, eligibility, referral workflows, production capacity, delivery reliability, rural reach, launch support, and scalability.	15%
Payment & Policy Alignment	Ability to support PMPM, bundled, episode-based, ILOS, HRSN, supplemental benefit, pilot, shared savings, or VBC models.	15%
Member Experience & Equity	Taste, dignity, cultural fit, language access, household context, personalization, satisfaction, and adherence.	10%

MTM Vendor Evaluation Questions	
Clinical Fit & RD Oversight	What conditions, comorbidities, and acuity levels do you have the strongest experience serving? How are RDs/RDNs involved in assessment, meal tailoring, counseling, reassessment, and care-plan alignment? How do you determine whether a member is clinically appropriate for MTMs versus another nutrition intervention? How do you adapt clinical protocols across markets while accounting for state-specific benefit rules?
Medical Nutrition Integrity	How do you define “medically tailored” in your model, and how is that different from simply providing healthy meals? How are meals designed, prepared, modified, and reviewed for clinical appropriateness? What is your approach to fresh versus frozen meals, in-house production versus outsourcing, ingredient quality, food safety, and nutritional consistency? How do you incorporate condition-specific, culturally relevant, allergy-sensitive, and texture-modified menus?
Outcomes, ROI & Utilization Impact	What outcomes do you measure beyond meals delivered? How do you define and measure adherence? How do you evaluate impact on utilization, readmissions, total cost of care, malnutrition risk, satisfaction, and member-reported outcomes? How do you estimate ROI, and how does that ROI vary by condition, risk profile, demographics, geography, and length of intervention?
Operational Readiness & Access	How does your end-to-end operating workflow function from referral through eligibility, authorization, enrollment, delivery, renewal, missed delivery resolution, and disenrollment? How do you define your service area, and how do you support high-risk, hard-to-reach, rural, disabled, dual-eligible, postpartum, post-discharge, or medically complex members? How do you manage service interruptions, failed outreach, and changes in member status?
Payment & Policy Alignment	What payment models are you equipped to support, including PMPM, per-episode, bundled, ILOS, HRSN, supplemental benefit, shared-savings, pilot, or value-based arrangements? How do you support documentation, encounter reporting, eligibility validation, authorization requirements, and claims-based outcome measurement? How do you help plans translate policy flexibility into an operational program model?
Member Experience, Equity & Adherence	How do you measure adherence, meal utilization, satisfaction, engagement, continuation, and disenrollment reasons? How do you support dignity, trust, cultural fit, language access, allergies, household context, texture needs, and treatment adherence? How do you identify and address barriers when members are not engaging with or consuming the meals as intended?