



# The Third Annual Colorado Food is Medicine Summit

## Report from the 2026 event

### OVERVIEW

The third annual Colorado Food is Medicine Summit, **presented by Project Angel Heart and Kaiser Permanente** with **support from Feeding Colorado and The Melvin and Elaine Wolf Foundation, Inc.**, brought together *more than 300 leaders from health care, government, philanthropy, research, and community-based organizations* to advance the integration of nutrition into health care delivery.

Since the inaugural Summit in 2024, which began simply as an effort to see where collaboration could accelerate progress in Food is Medicine, Colorado has moved from conversation to implementation. The state received approval for a Medicaid 1115 Health-Related Social Needs (HRSN) demonstration waiver that includes medically tailored meals and nutrition counseling; launched Food is Medicine Colorado (FIMCO), a statewide coalition; and strengthened cross-sector partnerships that both deliver services and generate research. The Summit itself has become part of that momentum, with other states now launching similar convenings modeled after Colorado's approach.

*As Food is Medicine gains national momentum and bipartisan public support, **the 2026 Summit focused on a defining question: how do we translate momentum into sustainable infrastructure?***

### SUMMARY OF THE DAY

Opening the day, **Greg Berman, MD, MBA**, of **Kaiser Permanente**, reflected on the clinical imperative behind Food is Medicine. Patients with reliable access to medically appropriate food tolerate medical procedures better, manage chronic conditions more effectively, and avoid preventable complications. At Kaiser Permanente, food insecurity remains the most common social need members



**Greg Berman, MD, MBA, Kaiser Permanente and Marti Macchi, DrPH, MPH, M.Ed., provided welcoming remarks for attendees at the 2026 Colorado Food is Medicine Summit.**

request help addressing, reinforcing that nutrition is foundational to care.

**Marti Macchi, DrPH, MPH, M.Ed., President & CEO of Project Angel Heart**, highlighted growing national support for the movement. Research published in *Health Affairs* and by The Rockefeller Foundation demonstrates strong bipartisan agreement that food and nutrition programs should be integrated into health care and covered by insurance. That broad public support, combined with Colorado's policy innovation and partnership model, creates both opportunity and responsibility.

Next, moderated by **Marti Macchi**, the **Food is Medicine: A National Perspective** panel featured **R.J. Briscione (Health Management Associates)**, **Katie Garfield, JD (Center for Health Law and Policy Innovation of Harvard Law School)**, **Devon Klatell (The Rockefeller Foundation)**, and **Pamela Schwartz (Kaiser Permanente)**. Panelists emphasized that Food is Medicine is now firmly established as a national priority, but scaling the work presents challenges, particularly around cost, infrastructure, and care integration.

*A central, guiding question emerged: how do we make the right choice the easy choice for health care systems?*

## SUMMARY CONT.



Moderator John Patton with Food is Medicine Partnerships panelists Lorena Zimmer, Joy Twesigye, Kate Johnston, and Monica Buhlig.

This national framing transitioned into Colorado's on-the-ground experience during the **Food is Medicine Partnerships: A Case Study** panel, moderated by **John Patton (Street Charity)** and featuring **Monica Buhlig (Food Bank of the Rockies)**, **Kate Johnston (Project Angel Heart)**, **Joy Twesigye (Colorado Access)**, and **Lorena Zimmer (Denver Health)**. Panelists described an innovative cross-sector model in which patients are referred from Denver Health to Project Angel Heart for 12 weeks of medically tailored meals, then transitioned to six months of healthy food boxes

from Food Bank of the Rockies, with evaluation support from Colorado Access. *Their discussion underscored that Food is Medicine programs are being built in real time through collaboration, trust, and sustained investment.*

Following a discussion-table networking lunch, afternoon breakout sessions explored key areas of the Food is Medicine field. The **Community Clinical Linkages: Partnering Across Sectors to Address Patient Needs** panel explored how health systems and community-based organizations share data and coordinate referrals and addressed what makes a strong, collaborative partner in this work. Food is Medicine and food access efforts share a common goal of ensuring everyone has the nourishment they need to thrive, and the panel **Where Health and Hunger Intersect: Bridging Food is Medicine and Food Access** examined how these complementary fields can remain distinct in purpose while building intentional bridges between them. In addition to Food is Medicine-specific policies, the **Food is Medicine and Beyond: Policies Shaping Nutrition and Health in Colorado** panel highlighted the broader food and health state landscape, including telehealth expansion, reimbursement for community health workers, and medical nutrition therapy. Panelists emphasized that progress in policy is a marathon, not a sprint,



Lunch discussion groups, facilitated by a leader, provided attendees with an opportunity for in-depth discussions on a topic of shared interest.

and to celebrate the small wins. The **Measuring What Matters: Data-Driven Learning in Food is Medicine** panel discussed a braided data model, including navigating the balance of organization-level needs, patient-level needs and stories, and operational data. The **Creating Healthy Communities Through Nonprofit Engagement** panel emphasized the unique role nonprofits play in filling care gaps while strengthening social health and local economies. And the **Defining Quality and Sustainability in Food is Medicine** panel examined emerging accreditation efforts and the importance of consistent standards to support clinical integration and payer confidence as programs scale.

*Across sessions, a shared theme emerged that Food is Medicine is entering a new phase. The foundational work of building awareness and launching pilot programs has given way to the harder work of integration—aligning financing, policy, data systems, and partnerships to make nutrition an ongoing component of care.*

The 2026 Summit reinforced Colorado’s leadership. With growing federal attention, bipartisan public support, and expanding cross-sector collaboration, there is opportunity and responsibility to demonstrate value, scale thoughtfully, and build

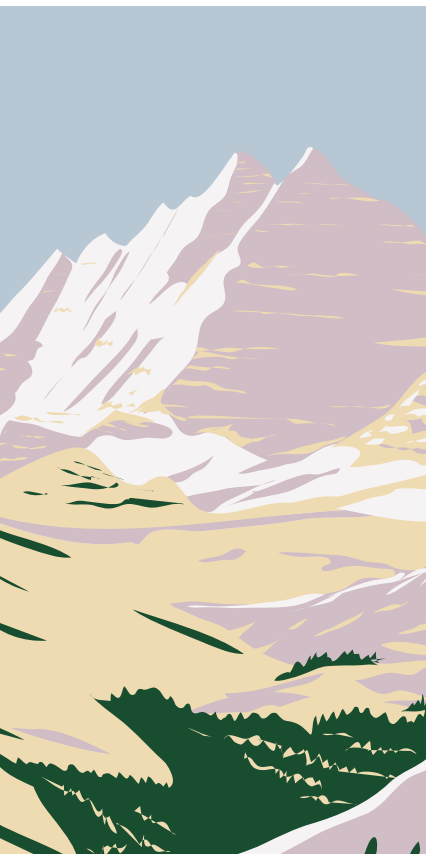


**Moderator Pamela Schwartz and panelists Katie Garfield, Mandy Pullaro, and Matthew Pieper discuss the importance of standards in Food is Medicine programs.**

infrastructure that ensures all Coloradans have access to the nutrition they need to prevent, manage, and treat chronic disease.

The day’s full agenda, along with a comprehensive list of speakers and their biographies can be found here:

<https://www.projectangelheart.org/co-fim-summit/>



## EVALUATION

Participants received a follow-up survey to evaluate their experience. 89% of attendees reported that they had a positive experience and indicated they would be likely to attend future events.

### Comments included:

*“Wow, what a day! There was a variety of knowledgeable, insightful speakers. It was really helpful to hear examples of how organizations in Colorado are partnering to move the Food is Medicine movement forward.”*

*“The expert advice of “just get started” is much needed, especially in such uncertain times. I found a lot of value in the sessions and having the opportunity to make connections with like-minded people and organizations. Thank you!”*

## CONTINUING THE MOMENTUM

**Food is Medicine Colorado (FIMCO)** is a statewide multi-stakeholder coalition working to enhance the role of nutrition in health care and increase access to medically tailored food and nutrition services for individuals living with or at increased risk for severe and chronic illness. FIMCO advocates for the recognition of healthy food as an effective and cost-saving approach to managing health conditions and collaborates with health care providers, insurers, and government agencies to integrate Food is Medicine programs into mainstream care.

You can learn more and apply to join here: [projectangelheart.org/fimco/](https://projectangelheart.org/fimco/)

## Public Will for Food is Medicine

Data shared in The Rockefeller Foundation's May 2025 report, *Public Perception of Food is Medicine in Healthcare*, show that Americans of all demographics and political backgrounds see Food is Medicine programs as an effective and commonsense part of treating chronic illness.

- **More than 4 in 5 Americans** believe health care should offer more food and nutrition programs to treat and manage illnesses.
- **Nearly 9 in 10 patients** would prefer to rely more on healthy eating than on medications to manage conditions.
- **Nearly 4 in 5 Americans** think that Food is Medicine programs should be covered by both public and private insurance—including 85% of Democrats and 78% of Republicans.



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