

TESTIMONY TO: House Agriculture, Food Resiliency, & Forestry

FROM: Emilie Perry, Food Is Medicine Project Coordinator, Little Rivers Health Care

RE: VT Foodbank FY27 requests

DATE: January 22, 2026

My name is Emilie Perry and I am the Food Is Medicine Project Coordinator for Little Rivers Health Care. I live in Bradford, VT and work with patients at our 4 clinics in Corinth, Bradford, Wells River and Newbury. Thank you for this opportunity to speak to you today. I run our Food Farmacy where we are currently working with over 100 patients that are struggling with both food security and diet responsive chronic conditions such as diabetes, hypertension and cardiovascular disease. These patients need healthy whole foods to address the chronic conditions they are living with.

I want to thank the committee for supporting the request for \$1.5 million for Vermonters Feeding Vermonters in the FY2026 Budget Adjustment Act. I would like to ask the committee to appropriate \$5 million to Vermont Foodbank for FY2027 to support Vermonters Feeding Vermonters, to allow them to support their over 200 Network Partners and for Ready Response efforts so that access to food is a priority and not left out of our state's emergency response plans.

Little Rivers Health Care (LRHC) is a rural federally qualified health center. Our mission is to provide respectful, comprehensive primary health care to all people in our region, regardless of their ability to pay. As a rural health provider, Little Rivers recognizes that food insecurity and limited access to healthy, locally grown food are significant drivers of poor health outcomes. Addressing these challenges is central to our work and our commitment to health equity. We are dedicated to adopting Food Is Medicine into our practice. Food is Medicine encompasses a range of clinically informed nutrition interventions—such as medically tailored meals, medically tailored groceries, and produce prescriptions—designed to address diet-related health conditions. These programs integrate nutrition directly into health care delivery to improve outcomes and reduce health care costs.

The Food Farmacy program that I run at Little Rivers started prior to covid when one of our physicians recognized that many of her patients were facing barriers that prevented them from being able to access enough food to meet their basic dietary needs. Knowing that their health was significantly affected by this she forged a partnership with Willing Hands a gleaning organization out of Norwich, VT and started squeezing in slots to her very busy and demanding work schedule to pick up as much fresh vegetables as she could fit in her car and delivering them to her patients. She saw what her patients needed for their health, and she creatively found a way to do something about it but she also knew that this wasn't a sustainable means to address the needs of her patients and knew that so many other Little River patients were struggling with the same unmet need. This story of a physician who I personally, greatly admire is one that is uplifting, it has led all these years later to the Food Farmacy we now run where we are distributing roughly 1,000 pounds of produce each week as well as shelf stable items and working with over 100 patients to address the chronic conditions they are facing through dietary changes. This story also gives us a glimpse at

some of the many hidden costs that come along with food insecurity and the potential long term cost saving benefits to building a food secure state.

First, I want to say thank you for that clear commitment to the Vermonters Feeding Vermonters. This program is one that truly aligns with my values and identity which have been formed in relation to Vermont as an agricultural state. It is also incredibly important to the many health care organizations like Little Rivers Health Care doing Food Is Medicine work in growing numbers across the state. In establishing the Vermonters Feeding Vermonters program you have taken a stance for food security in our state in a way that honors our agricultural identity and our need to support our farmers so that they can remain economically viable and thrive now and in our future. I know that supporting our local farmers is an essential aspect of food security. Appropriating the additional funds that are needed to support and sustain this program is necessary for it to have the chance to do what it is intended to do. This state investment would create revenue for 200-300 Vermont farms and provide fresh local food for our communities. In addition, it would allow the VT Foodbank to offer grants to Network Partners like Little Rivers Health Care allowing them the ability to purchase from local and smaller-scale farms within our communities. This helps to build lasting relationships and strengthens the collaborative network of all of us doing food security work in our state. We are dedicated to working with our local farmers and grants like these make it possible for us to do so.

Even with full support for 3SquaresVT, there is still a gap in food security for our communities across the state. I see these gaps and the impact they have on the patients I work with every day. I see it in patients who are single mothers and have snap benefits that do not cover the costs of the food they need to feed their children, I see it in patients who are working two jobs and make too much for SNAP benefits but are faced with rising medical expenses and other expenses associated to the chronic conditions they are living with. Individuals are struggling to buy the food they need to address the health conditions that they are experiencing and that in turn is costing them more money in medical bills. In this system it is not only costing our patients it is costing Vermont's healthcare system and investing in these programs through the VT Foodbank will decrease the long-term associated and widespread cost of food insecurity in our state.

Through our partnership with the Foodbank we not only have access to free produce and healthy shelf stable options for purchase, we also have access to essential trainings on subjects such as food safety, we gain access to grant opportunities that we rely on to continue the work we are doing and we become part of the network that they have created and sustain across the state. Little Rivers Health Care is just one of the hundreds of partners whose programming and efforts are dependent on the work that the Foodbank does. Along with SNAP they are the foundation for food security work in our state that so many of us rely on as the first line of defense for the patients, individuals and communities that we are working to serve.

The Food Farmacy uses two measures for enrollment. Our patients are screened for food insecurity using the nationally recognized hunger as a vital sign tool They are then connected to our care coordination team so that they can talk to them about resources that might be

available to them, such as SNAP, WIC or their local food shelves (often supported in great part by the VT Foodbank) which are the state's first line of defense in addressing hunger and food security. They are additionally screened for certain chronic conditions which have been the focus of Food Is Medicine initiatives such as diabetes, hypertension and heart disease. We know the list of diet related health conditions is much more encompassing however and we continue to work towards growing our Food Farmacy so that we can help more people to improve their health through diet. At Little Rivers we are showing upwards of 8 % of people screening positive for food insecurity and 75% of our patients have at least one chronic disease diagnosis. Among the many different aspects of my job, I get to be the boots on the ground delivering food to our patients and working with them to help them improve their diet and in turn their health. I get to see patients every week and greet them with beautiful big boxes of fresh fruits and vegetables, local milk and eggs and other shelf stable items. We have set up in-house food shelves because our front desk staff are inundated with patients coming to appointments who do not have enough food at home for themselves and their families. This work is made possible by VT Foodbank. I am so grateful and blessed to have a profession that I am passionate about and getting to hand out nutritious food to those in need is incredibly rewarding for me, yet being the boots on the ground also means that I see the harsh reality that our patients are facing every day. I have to accept knowing that while we are helping to support them getting the food they need to maintain their health it is not enough. As we work collaboratively with healthcare partners across the state and in NH that are building Food Is Medicine programs, we see an important distinction between Food Access work and Food Is Medicine work. Food Is Medicine is specifically working to address chronic conditions and disease through medically tailored dietary interventions while SNAP and Organizations like the VT Foodbank are leading the way in food access. I'm here today to tell you that every single Food IS Medicine initiative across the state and country needs these organizations to take on food access so that health care organizations like Little Rivers can work with our patients to improve the quality of their diet. Together I know that we can reach our shared goal of food security, we can drastically improve the health of our Vermont communities and we can contribute to the economic viability of our farmers in doing so.

Little Rivers was awarded a sub grant through Bi-State Primary Care Association, which focused on addressing health disparities related to the leading causes of avoidable death in rural areas with diet being one of them. In Vermont the Department of Health has acknowledged and promoted the 3-4-50 model which outlines the 3 behaviors that lead to the 4 major illnesses which leads to 50 percent of deaths in Vermont. Diet is one of those behaviors and half of American adults have one or more preventable chronic diseases, related to poor quality eating patterns. Through this knowledge and through this initial grant funding we have been able to build and grow our Food Farmacy and we are continuing to do so with partnerships through the Vermont Department of Health, Dartmouth College, Center for Advancing Rural Health Equity, Bistate and others.

I am asking that the committee appropriate \$5 million to Vermont Foodbank for FY2027 as they have requested. Allocating funds for these reasons will not only ensure that our neighbors are fed, it will allow Food Is Medicine programs like our Food Farmacy to succeed and achieve the improved clinical measures through diet intervention that we are working

towards. It will allow us to continue to support our farmers. I spent the majority of my earlier professional life working at farms in VT as well as Hawaii and have worked in agricultural education and programing before coming to my job at Little Rivers and it is so important to me that I am able to support the farmers that feed us all in our state as part of the work that I do today. We can not have food security without farm security and the Vermonter Feeding Vermonter program addresses both of those needs.

Thank you sincerely for taking this time to allow me to speak to you all about these issues that matter so much to me and the individuals that I work with. Thank you.

notes

\*3-4-50 model which outlines the 3 behaviors; diet, exercise and tobacco use that lead to the 4 major illnesses: cancer, heart disease and stroke, Type 2 diabetes and lung disease which leads to 50 percent of deaths in Vermont

\*HAYS-where we ask our patients two questions and have them answer whether the statements are never, sometimes or often true 1) "Within the past 12 months we worried whether our food would run out before we got money to buy more" 2) "Within the past 12 months the food we bought just didn't last and we didn't have money to get more" We know that getting enough "food" is not the same as getting enough nutritious food which is what our patients need to support their health so we are working to add a nutritional screener that can more accurately capture that need.