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Maryland Produce Rx Program

From Prescription to Prevention: Transforming Health through Nutrition Access, Community Partnerships, and Innovative Care

Pre-Application Webinar

June 29, 2026

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Background

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How does a produce prescription work?

Patient is diagnosed with a health condition

Healthcare provider determines that fresh produce is an appropriate treatment

Patient is given a prescription for fresh produce

Patient fills the prescription

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Purpose of Produce Rx RFA

Produce prescriptions are an evidence-based tool to provide intensive lifestyle change support for a limited period while connecting community members to long-term food resources, primary care, and other supportive services that promote lasting health improvements. By integrating nutrition into healthcare, this grants lays the groundwork for future reimbursable Food Is Medicine services.

The purpose of this RFA:

- Fund high-quality produce prescription programs
- Support culturally appropriate, community-tailored approaches
- Improve the health of Marylanders living in high-poverty areas (ENOUGH-eligible communities)
- Create lasting impact by connecting community members with local food resources, primary care doctors, and other wraparound services

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RFA Components

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Applicant Mandatory Requirements

- **Produce Prescription Coalition.** Applicants must apply as a Produce Prescription Coalition, defined as two or more organizations operating together to implement a produce prescription program. Each Coalition must designate a Lead Applicant.
  - **Examples of Possible Coalition Members Include But Are Not Limited To:** Community-Based Organizations, Local Health Departments, Hospitals, Food Banks and Pantries, Social Service Providers, Health Systems, Federally Qualified Health Centers (FQHCs), Faith-Based Organizations, Farms and Farming Collectives, Healthcare Providers and Provider Groups, Area Agencies on Aging (AAAs), Universities, Community Coalitions and Resident Leadership Groups, Grocery Stores and Farmers Markets, Schools
- **Service to ENOUGH-Eligible Communities**

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ENOUGH-Eligible Jurisdictions

Per statute, ENOUGH-eligible jurisdictions are communities that meet both of the following eligibility criteria:

- At least one Census tract with a child poverty rate of 30% or higher **AND**
- A public school catchment zone with a school poverty rate of 75% or higher

Further information can be found from the Governor's Office for Children.

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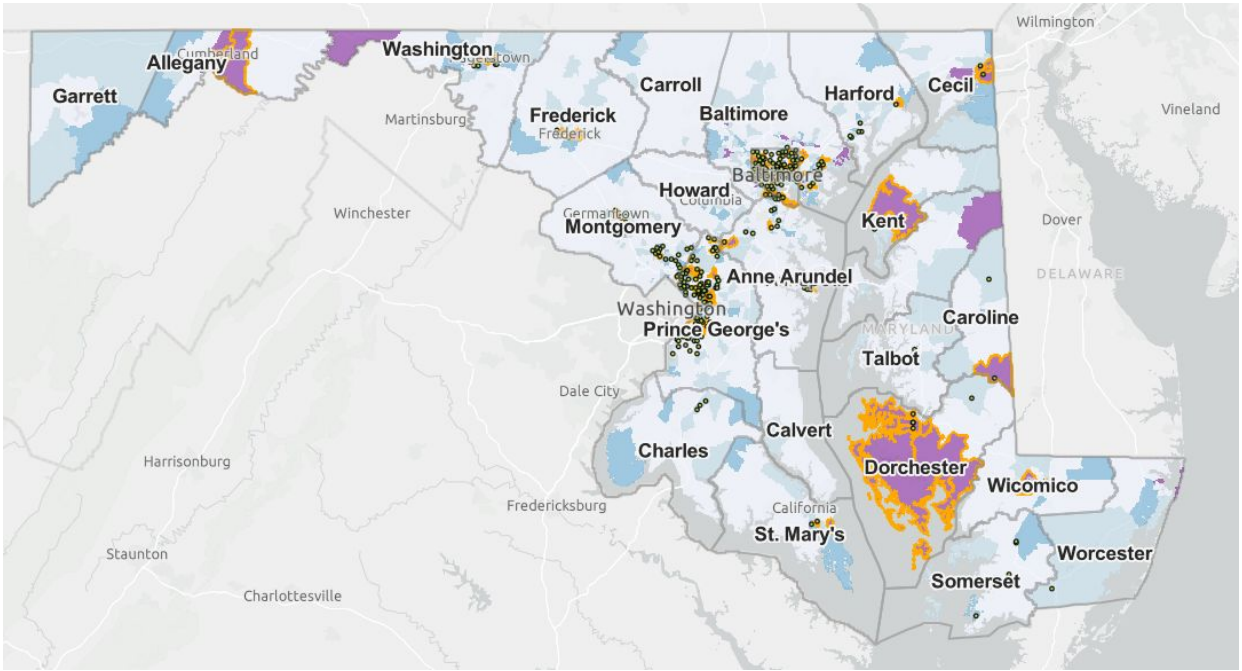
GOC Map Demonstration



Child Poverty Census Tracts (2026)

Percent of Children in Poverty

- > 30%
- 19% - 30%
- 9% - 19%
- 0% - 9%

https://experience.arcgis.com/experience/8b24a4ffb5ee4670af96d7b174c1933b/

Applicant Mandatory Requirements, Continued

- **Eligible Entity Status.** The Lead Applicant must be one of the following:
  - Social Organization: As defined by Section 7-402 of the State Finance and Procurement Article of the Annotated Code of Maryland.
    - Social organizations (excluding government or academic entities) must be non-profit organizations classified by the IRS as tax-exempt under Section 501(c)(3).
  - A Government or Academic Entity: Including local or state government agencies, public colleges, or state universities.

- **Maryland State Standing.** At the time of the award, all members of the Coalition must be:
  - In Good Standing with the Maryland State Department of Assessments and Taxation (SDAT).
  - Tax Compliant, as certified by the Maryland Comptroller's Office, ensuring all state tax payments are current.

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Scope of Work

The produce prescription should serve **at least one** of the following clinical populations within an ENOUGH-eligible area.

- **Adults with a high-risk pregnancy***:* pregnancy with increased risk for complications due to pre-existing conditions such as diabetes, obesity, or hypertension, new pregnancy complications (e.g., preeclampsia), maternal factors (e.g., multiple births), and/or fetal conditions (e.g., birth defects)
- **Adults with hypertension***:* adults who have high blood pressure
- **Other populations***:* Other populations with nutrition-sensitive conditions (diabetes, prediabetes, obesity, other cardiometabolic diseases) can be proposed by the Applicant.

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Scope of Work, Continued

Applicant's proposed projects should:

- Screen and identify patients meeting clinical and nutritional insecurity criteria.
- Prescribe and deliver culturally relevant produce boxes for 6 months.
  - Boxes should prioritize home delivery.
  - Preference given for projects that include Maryland agricultural products.
- Connect patients to primary care and provide or refer to evidence-based wraparound services (nutrition education, kitchen equipment, peer navigators, benefit referrals, and social connection).
- Participate in the program evaluation.

Produce Rx Box Example

Recommended daily intake for an average adult consuming a 2,000-calorie diet:

- 3 servings of vegetables (e.g., 4 cups leafy greens and 1 sweet potato)
- 2 servings of fruit (e.g., 1 apple and 1 banana)

Example produce prescription box for a family:

- One Produce Rx box every 2 weeks
- 8 pounds of fruits and vegetables (approximately 16–32 servings)

Budget

Applicants must complete the two budget forms:

- ***Budget Form 1:*** Price per box
  - Includes a realistic estimate of costs associated with prescribing and delivering boxes
- ***Budget Form 2:*** Capacity-building and Additional Costs
  - Detail all other costs outside of price per box
  - Break down substantial capacity-building costs, budget for wraparound service, and/or budget for navigating patients to primary care

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Goals and Intended Health Outcomes

- This grant opportunity supports Maryland's efforts toward achieving the AHEAD Population Health Accountability Plan (PHAP).
- MDH's Food Is Medicine programming is being evaluated by Dr. Seth Berkowitz, who also serves as lead evaluator for the North Carolina Healthy Opportunities Pilots and is Deputy Scientific Director for the American Heart Association's Health Care by Food initiative.
- The planned measures of the evaluation will include diet quality, nutrition insecurity, and primary care accessibility.
- We anticipate improvements in hypertension management, maternal and neonatal outcomes, fruit and vegetable intake, and routine healthcare utilization.

Application Evaluations

ENOUGH-eligible communities are currently receiving ENOUGH grant funding from the Governor's Office for Children (GOC) to implement anti-poverty programs. In order to build upon this existing capacity-building work in high-poverty communities, funding will be prioritized using a two-tier review process:

- Priority 1 (Highest): Proposals from communities that are currently receiving GOC ENOUGH grant funding.
- Priority 2: Proposals serving ENOUGH-eligible communities that are not currently receiving GOC ENOUGH grant funding.

Application Evaluations, Continued

The Maryland Commission on Health Equity (MCHE) PHIF Subcommittee advised on the development of this RFA and will support the review of applications based on the following criteria:

The Project Narrative should demonstrate:

- A succinct and clear **Summary Statement.**
- A **Produce Prescription Coalition** capable of public health-focused implementation.
- A reasonable and impactful **Target Population & Anticipated Number of Patients**.
- **Strategic Intended Activities** designed for achievement of intended outcomes.
- Meaningful **Community & Stakeholder Involvement**.
- Thoughtful **Barriers and Mitigation Strategies** and reasonable **Capacity Building Requests** that support the **Intended Activities.**
- The **Data Security Plan** demonstrates that patient data will be protected.
- The **Quality Control & Customer Service Resolution Plan** ensures high-quality standards and robust customer service resolution.
- A **Business Plan** focused on future sustainability.
- A reasonable timeline in the submitted **Work Plan** to accomplish all programmatic activities and deliverables.

Application Evaluations, Continued

- **Budget Forms:**
  - Inclusion of reasonable, allowable costs given the time and effort described.
  - Justification of line items that are clearly aligned with the activities set forth in the Project Narrative.
  - Alignment of the budget with the scope of work.

- **The Evaluation Committee will also consider regional balancing to ensure a diverse portfolio of projects.**

Key RFA Information

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Vendor Directory and Listserv

Vendor Directory: Maryland is eager to help organizations and communities connect with service providers that can support Produce Rx efforts. To be listed in the Vendor Directory, please complete this form. The Directory will be posted on the ProduceRx website. MDH encourages communities to consult the Directory for potential coalition partners.

Listserv: Join our Listserv to receive periodic Produce Rx updates to your inbox: Sign up here!

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Things to Remember

- **Section 5: Scope of Work** outlines what the State is looking for in applications.
- **Section 8: Application Format** dictates the application components.
  - Pay attention to page limit and formatting information. Certain components are excluded from the page limit.
  - Mandatory supporting materials must be submitted for an application to be considered complete.

Key Facts

- **Total Available:** $10 million
  - Multiple grants will be awarded
- **Duration of Services:** September 15, 2026 - June 30, 2028*

***Note:** Typo on dates was fixed in slides and RFA.

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Key Dates

- **Letters of Intent due** by July 20
  - Submit to mdh.ProduceRx@maryland.gov
- **Questions due** by August 3 at 2pm EST
  - Submit questions to mdh.ProduceRx@maryland.gov
- **Applications due** by August 17 at 2pm EST
  - Submit to mdh.ProduceRx@maryland.gov

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Questions?

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