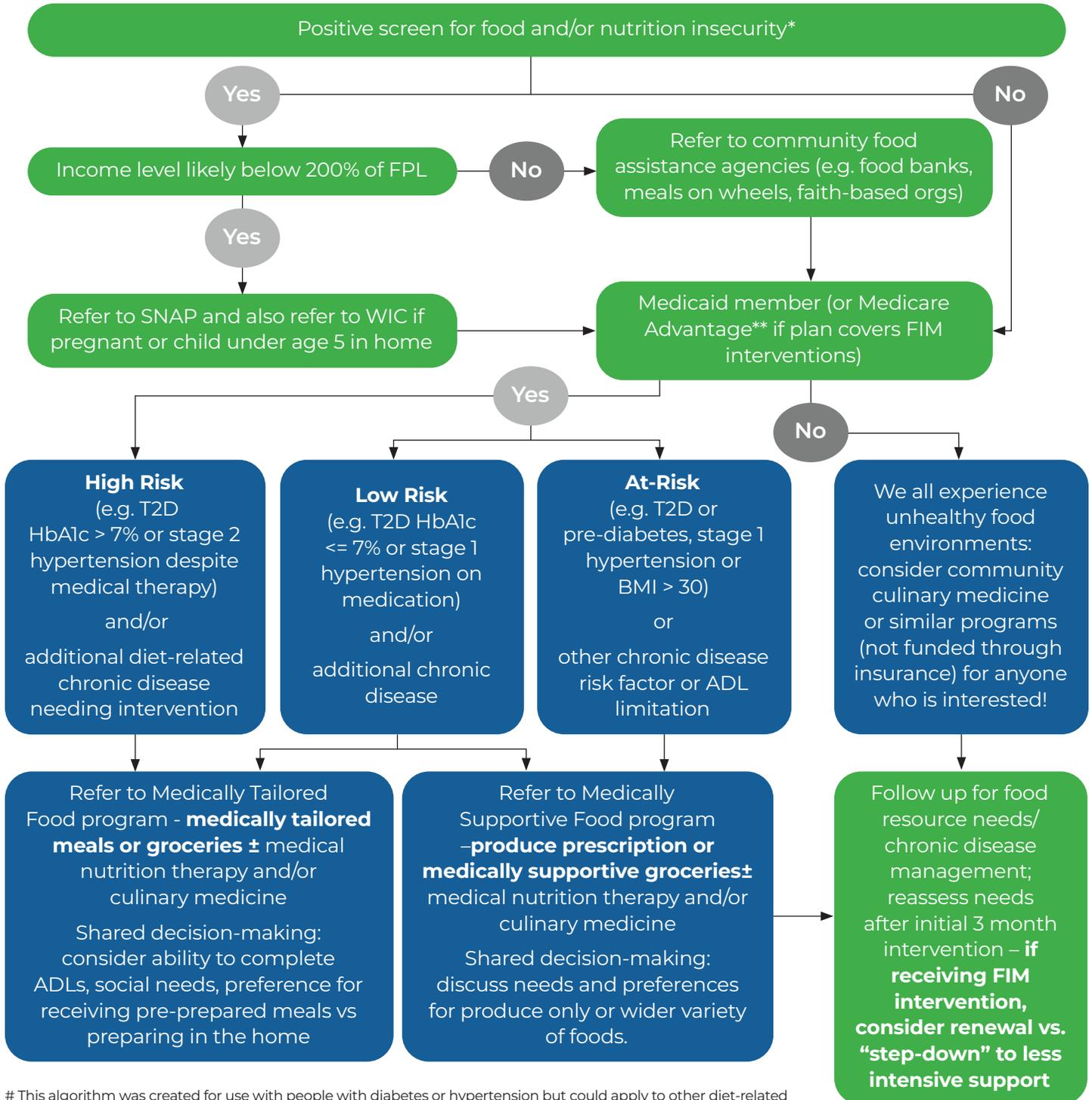


# Assessing for social needs and diet related chronic disease#:

case manager/clinic staff steps in **GREEN** and clinician steps in **BLUE**%



# This algorithm was created for use with people with diabetes or hypertension but could apply to other diet-related diagnoses, for example, perinatal conditions, cancer(s), cardiovascular disorders, chronic kidney disease, asthma/COPD, heart failure, end-stage renal disease, high cholesterol, etc. Clinical judgement and shared decision-making can be used to determine risk category and which FIM program is most appropriate.

% May vary based on individual clinic workflows

\* Nutrition insecurity can be assessed using a one question screener: In the last 12 months, (I/we) worried that the food (I was/we were) able to eat would hurt (my/our) health and well-being. Response options: Never, Rarely, Sometimes, Often, Always, Don't know with Sometimes, Often, Always considered "positive"

\*\*Medicare does not cover FIM, but some Medicare Advantage (MA) plans may offer food benefits not included in traditional Medicare. Sometimes benefits are cash assistance for groceries (i.e., debit cards similar to SNAP electronic benefit transfer [EBT]). For both Medicare and Medicaid, eligibility for FIM varies by plan.

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