

Debra B. Whitman, Chair

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Program Design Branch, Program Development Division Food and Nutrition Service, U.S. Department of Agriculture 3101 Park Center Drive Alexandria, VA 22302

RE: FNS Docket No. FNS–2018–0037, Revision of Categorical Eligibility in the Supplemental Nutrition Assistance Program

The undersigned members of the Leadership Council of Aging Organizations (LCAO) write to express our opposition to the Food and Nutrition Service's (FNS) proposed rule to revise eligibility requirements for the Supplemental Nutrition Assistance Program (SNAP) through changes to broad-based categorical eligibility (BBCE) and urge FNS to withdraw the proposal. More than three million individuals, a significant portion of whom are ages 60 and older, would lose SNAP benefits as a result of this rule, threatening the health and well-being of seniors across the country who rely on the program to put food on the table in times of need and stretch limited financial resources.

LCAO is a coalition of 69 national nonprofit organizations concerned with the well-being of America's older population and committed to representing their interests in the policy-making arena. LCAO serves as a source of information about issues affecting older adults and provides leadership and vision as America works to meet the challenges and opportunities presented by our aging society. Our organizations have expertise in health care, economic security, nutrition and food security, housing and other issues facing older adults and people with disabilities.

With approximately 12,000 individuals turning 60 every day, older adults are a rapidly growing population with unique health, social and financial needs. Low-income older adults may struggle to maintain a basic standard of living as they age and are particularly vulnerable to the negative impacts of food insecurity and poverty. In 2017, 5.5 million seniors (7.7 percent) were *food insecure* – over two million of which were *very low food secure* – putting many at increased risk for a myriad of negative health outcomes.ⁱ But for the nearly five million seniors who participate in the program, SNAP helps make ends meet and improves health and quality of life by providing a modest level of monthly benefits to use toward purchasing groceries. These benefits are particularly important for older participants who live alone, accounting for 82 percent of all participating households with elderly individuals.ⁱⁱ

601 E Street, NW ♦ Washington, DC 20049 (202) 434-3055 – Direct Line ♦ (202) 434-3720 – Reception Line ♦ (202) 434-6613 - Fax Email: LCAO@aarp.org ♦ Website: www.LCAO.org Among the 1.7 million households, and 3.1 million participants, projected to lose SNAP benefits in Fiscal Year 2020 under this proposed rule, households with seniors will be disproportionately affected. According to the U.S. Department of Agriculture's (USDA) own estimates, 13.2 percent of households with older adults— about 660,000 individuals—will no longer be eligible to access nutrition support through SNAP. We are concerned about this large number of participants set to lose benefits given the strong and mounting evidence that SNAP participation is linked to improved food security and nutritional intake and lower healthcare utilization and expenditures.^{iii,iv,v} Older adults participating in SNAP have been found to have improved adherence to medication as well as decreased rates of hospitalization and nursing home admissions.^{vi,vii,viii} In addition to providing resources to procure nutritious food that promotes healthy aging, SNAP benefits provide critical financial flexibility for seniors who may otherwise be forced to choose between purchasing groceries instead of medication, rent, heat or other basic necessities.

We are also concerned about the rule's impact on older adults' capacity to navigate the bureaucratic procedures for program enrollment certification and recertification. BBCE is used widely by states to streamline enrollment for SNAP with other social programs for people with low incomes, such as TANF, as a way to reduce paperwork and other administrative burdens. Aligning eligibility requirements for various programs for enrollment and recertification purposes is not only helpful for state and local agencies, but also helps increase participation among eligible seniors, who can be difficult to reach and target for enrollment and/or challenged by certain enrollment mechanisms. Currently, SNAP participation rates among eligible seniors across the country are relatively low due in part to the barriers that exist in complex administrative processes and paperwork requirements. By limiting the type of cash and non-cash TANF benefits that confer categorical eligibility to be "ongoing and substantial," this rule would create additional administrative burdens for states and obstacles for older adults, leading to increased agency administrative costs and likely resulting in decreased program participation.

The proposed rule would severely limit eligibility for SNAP and disqualify millions from receiving their monthly benefits. The policy would exacerbate the current challenges of food insecurity and poverty throughout the country, and even more acutely among the older adult population. Instead of taking on initiatives to intentionally decrease SNAP participation, efforts should be made to increase enrollment among eligible seniors and their households. For this reason, we strongly oppose the proposed rule and urge FNS to withdraw it from further consideration.

Sincerely,

AARP AFSCME Aging Life Care Association Alliance for Retired Americans American Association of Service Coordinators American Society on Aging Association for Gerontology in Human Development - HBCU Caring with Grace, LLC Center for Medicare Advocacy International Association for Indigenous Aging Justice in Aging LeadingAge Meals on Wheels America Medicare Rights Center National Adult Day Services Association (NADSA) National Adult Protective Services Association National Asian Pacific Center on Aging (NAPCA) National Association of Area Agencies on Aging National Association of Nutrition and Aging Services Programs (NANASP) National Association of RSVP Directors National Association of Social Workers (NASW) National Committee to Preserve Social Security and Medicare National Consumer Voice for Quality Long-Term Care National Council on Aging PHI SEIU The Gerontological Society of America The Jewish Federations of North America Volunteers of America Women's Institute for a Secure Retirement

ⁱ Ziliak & Gunderson, The State of Senior Hunger in America 2017, May 2019, <u>https://www.feedingamerica.org/research/senior-hunger-research/senior</u>

ⁱⁱ U.S. Department of Agriculture (USDA), *Characteristics of Supplemental Nutrition Assistance Program Households: Fiscal Year 2017*, February 2019, <u>https://fns-prod.azureedge.net/sites/default/files/ops/Characteristics2017.pdf</u>

^{III} Mabli & Ohls, "Supplemental Nutrition Assistance Program participation is associated with an increase in household food security in a national evaluation," *Journal of Nutrition* 145(2), 2015, <u>https://www.ncbi.nlm.nih.gov/pubmed/25644357</u>

^{iv} Nguyen et al., "The Supplemental Nutrition Assistance Program, Food Insecurity, Dietary Quality, and Obesity Among U.S. Adults," *American Journal of Public Health* 105(7), 2015, <u>https://www.ncbi.nlm.nih.gov/pubmed/25973830</u>

^v Berkowitz et al., "Supplemental Nutrition Assistance Program (SNAP) Participation and Health Care Expenditures Among Low-Income Adults," JAMA Internal Medicine 177(11), 2017, <u>https://www.ncbi.nlm.nih.gov/pubmed/28973507</u>

^{vi} Srinivasan & Pooler, "Cost-Related Medication Nonadherence for Older Adults Participating in SNAP, 2013-2015," American Journal of Public Health 108(2), 2018, <u>https://www.ncbi.nlm.nih.gov/pubmed/29267062</u>

^{vii} Samuel et al., "Does the Supplemental Nutrition Assistance Program Affect Hospital Utilization Among Older Adults? The Case of Maryland," *Population Health Management 21*(2), 2018, <u>https://www.ncbi.nlm.nih.gov/pubmed/28683219</u>

viii Szanton et al., "Food assistance is associated with decreased nursing home admissions for Maryland's dually eligible older adults," BMC Geriatrics 17(1), 2017, <u>https://www.ncbi.nlm.nih.gov/pubmed/28738897</u>