



November 22, 2019

Certification Policy Branch, Program Development Division
Food and Nutrition Service, U.S. Department of Agriculture
3101 Park Center Drive, Room 812
Alexandria, Virginia 22302

RE: Docket No. FNS-2019-0009, Supplemental Nutrition Assistance Program: Standardization of State Heating and Cooling Standard Utility Allowances

On behalf of Meals on Wheels America, the national nonprofit organization representing the network of thousands of community-based senior nutrition programs across the country and the individuals they serve, I am writing to express our opposition to the Food and Nutrition Service's (FNS) proposed rule to cut monthly benefits for the Supplemental Nutrition Assistance Program (SNAP) by standardizing state Standard Utility Allowances (SUAs). This rule would harm the health, well-being and financial security of millions of vulnerable individuals, many of them seniors, who depend on SNAP to put food on the table and stretch limited financial resources for other basic living necessities like rent and utilities.

As the older adult population grows rapidly each year, hunger and poverty remain persistent challenges for our nation's seniors. Nearly 9.5 million adults age 60 and older face the threat of hunger – among those, 5.5 million, or 7.7 percent, were *food insecure* or *very low food secure* – and 7 million, or 10 percent, live in poverty.^{1, 2} SNAP is the largest federal nutrition program and thus plays a key role in addressing the unique health and social needs of low income, older adults. For decades, this program has provided monthly benefits to households with seniors – about 5 million in 2017 – to use toward purchasing food they would otherwise be unable to afford, and the trend in recent years is that the number of households with seniors who need nutrition assistance is increasing.³ Additionally, the program provides nutritional support to family members and caregivers of older adults who may be struggling to meet their own basic needs while also providing vital care to seniors in their homes and communities.

The changes proposed in this rule would cut SNAP benefits for an estimated 3.4 million (19%) participating households – or about 7.2 million individuals. As a result, overall monthly SNAP benefits will be reduced by \$4.5 billion over five years, with the average household expected to see a benefit reduction of \$31 per month. Participants age 60 and older would be disproportionately affected, as 20% of households with one or more elderly members will be impacted the rule. Furthermore, this rule will significantly impact households with older adults in colder geographies, where the costs of heating and other utilities are greater. The rule, as proposed, would immediately and negatively harm the health, nutrition and economic security of millions of seniors and their family members on whom they depend for care and financial assistance.

Recognizing that households need resources to pay for basic living necessities beyond food purchases alone, the existing eligibility process for SNAP takes into account the utility expenses of each SNAP household, and states are able to adjust benefits based on a state-specific SUA

calculated by the state and approved by the U.S. Department of Agriculture (USDA). This current policy allows variances in SUAs to accommodate for differences in utility costs and rates, and allows states flexibility in how they calculate those costs. The proposed rule, however, would standardize and cap SUA calculations across the country, thereby rescinding states' flexibility to meet the specific needs of their residents.

We are concerned that this rulemaking disregards Congressional intent. Both the U.S. House of Representatives and Senate overwhelmingly rejected proposals to reduce SNAP benefits and limit eligibility in their review of the Farm Bill last year. The bipartisan Agricultural Improvement Act of 2018 was passed with wide margins in both chambers, and it reauthorized SNAP without controversial provisions that weaken states' flexibility to administer SNAP in ways that best meet the needs of states. Additionally, Congress rejected a proposal to revise state SUA calculations included earlier this year in the President's Fiscal Year (FY) 2019 budget proposal. Contrary to the proposed rule's stated goal of modernizing the SUA calculation methodology for SNAP benefits and improving program integrity and equity, the reality is that this rule will actually result in increased administrative and healthcare expenditures.

SNAP is a critical program that provides access to food not just for millions of participating seniors, but also for low-income children, adults and families who need adequate nutrition through all stages of life to help pave the way for healthy aging. Connecting those individuals who are experiencing food insecurity, poverty or any other form of economic instability to SNAP is necessary for safeguarding an individual's health, wellness and quality of life during times of need and as he or she ages. Research shows that SNAP participation is associated with improved food security, dietary intake and health with lasting effects.^{4, 5, 6} SNAP also contributes to the health and independence of seniors, a particularly important factor for the more than 4 million elderly participants (82%) who live alone.³ Among older adults, SNAP participation has been associated with improved medication adherence, as well as decreased rates of hospitalization and institutionalization, which in turn saves significantly in terms of reduced healthcare costs.^{7, 8} ⁹ Not only does SNAP provide seniors and their families the means for reliable and consistent nutrient intake, which has a direct effect on health status of participants, but the receipt of their monthly benefits also alleviates the burden of choosing between purchasing groceries or being able to afford rent, medication, heat and other monthly expenses.

At this time, we should be supporting and investing in programs, like SNAP, that promote better health outcomes and financial security for our nation's most vulnerable seniors. Instead, this rule seeks to further restrict access to food assistance, which serves as a lifeline for many. We believe this rule will unquestionably contribute to the widespread food and financial insecurity experienced by millions of seniors and their families. Accordingly, we strongly oppose it and urge that it be withdrawn from consideration at this time.

Sincerely,



Ellie Hollander
President and CEO

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- ¹ Ziliak & Gunderson, *The State of Senior Hunger in America 2017*, May 2019, <https://www.feedingamerica.org/research/senior-hunger-research/senior>
- ² Administration for Community Living, Aging Integrated Database (AGID), Data Source: *US Census Bureau American Community Survey (ACS), Demographic Data 2017*, <https://agid.acl.gov/>
- ³ U.S. Department of Agriculture (USDA), *Characteristics of Supplemental Nutrition Assistance Program Households: Fiscal Year 2017*, February 2019, <https://fns-prod.azureedge.net/sites/default/files/ops/Characteristics2017.pdf>
- ⁴ 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, <https://www.ncbi.nlm.nih.gov/pubmed/25644357>
- ⁵ 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, <https://www.ncbi.nlm.nih.gov/pubmed/25973830>
- ⁶ Berkowitz et al., "Supplemental Nutrition Assistance Program (SNAP) Participation and Health Care Expenditures Among Low-Income Adults," *JAMA Internal Medicine* 177(11), 2017, <https://www.ncbi.nlm.nih.gov/pubmed/28973507>
- ⁷ Srinivasan & Pooler, "Cost-Related Medication Nonadherence for Older Adults Participating in SNAP, 2013-2015," *American Journal of Public Health* 108(2), 2018, <https://www.ncbi.nlm.nih.gov/pubmed/29267062>
- ⁸ 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, <https://www.ncbi.nlm.nih.gov/pubmed/28683219>
- ⁹ Szanton et al., "Food assistance is associated with decreased nursing home admissions for Maryland's dually eligible older adults," *BMC Geriatrics* 17(1), 2017, <https://www.ncbi.nlm.nih.gov/pubmed/28738897>