

NATIONAL
HEALTH CARE
for the
HOMELESS
COUNCIL

March 25, 2019

Certification Policy Branch
SNAP Program Development Division
3101 Park Center Drive
Alexandria, Virginia 22302

RE: Proposed Rule: Supplemental Nutrition Assistance Program (SNAP): Requirements for Able-Bodied Adults Without Dependents RIN 0584-AE57

Dear Certification Policy Branch:

Thank you for the opportunity to comment on USDA's Requirements for Able-Bodied Adults Without Dependents (ABAWDs), a proposed rule that will take away food assistance from 755,000 low-income people and limit state flexibility to waive the harsh time limits for SNAP benefits.

The National Health Care for the Homeless Council is a membership organization representing federally qualified health centers and other organizations providing health care to people experiencing homelessness. Our members offer a wide range of services to include comprehensive primary care, mental health and addiction treatment, medical respite care, supportive services in housing, case management, outreach, and health education. As an organization committed to ending homelessness and alleviating its consequences, we firmly believe in the human right to housing, health care and adequate food. We work every day to help our patients access housing, health care, and SNAP benefits so they can meet their basic needs and escape homelessness.

We are strongly opposed to the changes made in this proposed rule because they would negatively impact health status, they perpetuate poverty and the ability to work, and they restrict state flexibility and go against the goals of the SNAP program.

Work requirements undermine efforts to improve health.

As health care providers, we directly see how the SNAP program helps our clients care for themselves, address chronic health conditions, and avoid unnecessary hunger and pain. Our clients face higher rates of chronic health conditions such as diabetes, hypertension, cardiovascular disease, as well as mental health and addiction disorders. These conditions are exacerbated by the experience of homelessness and become even more difficult to manage when patients are unable to maintain a healthy diet. Individuals who are homeless are often only able to access food at soup kitchens, where meals are high in sugar, salt, and starch and often available only once a day. Our work is much more effective when our clients have regular access to healthy food through SNAP. Adding barriers to SNAP only makes people sicker and less able to work.

MANY OF MY PATIENTS DON'T HAVE ACCESS TO HEALTHY FOOD WITHOUT SNAP ASSISTANCE. THIS BENEFIT IS VITAL TO HELPING THEM STAY OUT OF THE EMERGENCY ROOM AND IMPROVE THEIR HEALTH. WITHOUT SNAP, MOST OF MY PATIENTS WILL FIND IT MUCH MORE DIFFICULT TO ACHIEVE SELF-SUFFICIENCY.
PIA VALVASSORI, FAMILY NURSE PRACTITIONER, ORLANDO, FL

Work requirements perpetuate poverty and inhibit the ability to find work.

While the goal of this proposed change is ostensibly to encourage employment, people experiencing homelessness face significant hurdles finding and maintaining work because they lack stable housing and are often experiencing numerous personal crises. Reporting requirements, whether they be to prove an exemption or document work, only serve as an additional burden to those struggling to make ends meet and put food on the table for their families. These additional bureaucratic steps increase the burden on very vulnerable people and their service providers. As health care providers, we worry that our clients will fall deeper into poverty, be less able to engage in care, and miss important appointments because they are looking for food for themselves and their family. If the Administration is interested in boosting employment among low-income people, we instead recommend greater investments in housing, health care, education, child care, and food assistance—not imposing additional barriers to obtaining SNAP.

Work requirements impede state flexibility and contradict the goals of SNAP.

This rule would remove states' ability to use exemptions accumulated prior to the rule's implementation, limit the time states have to use exemptions they receive in the future, and limit states' ability to waive time limits for SNAP benefits. Given the Administration's previously stated respect for state autonomy and flexibility on other issues, this proposed rule is inconsistent with allowing states to make decisions and tailor programs to their unique needs. Further, this proposed rule punishes 755,000 individuals (as reported by the Administration's own calculations) by making it harder to access food, and pushes them further into poverty by taking away healthy food options. Every day, we see how access to food helps people gain and maintain employment—the Administration should continue to allow states to maintain their power to administer the SNAP program in a way that allows greater access to healthy food for families in their respective communities.

WITH SNAP BENEFITS I HAVE THE OPPORTUNITY TO PUT FOOD ON THE TABLE FOR ME AND MY GROWING SON. FOOD STAMPS GIVE US TIME TOGETHER WITH A NUTRITIONAL MEAL.
ART RIOS SR., NATIONAL CONSUMER ADVISORY BOARD CHAIR, PORTLAND, OR

In conclusion, access to food assistance is critical to maintaining health and stability and we see significant improvement in health outcomes when our clients are able to access benefits through SNAP. The proposed rule punishes people for experiencing poverty, undermines the ability to work, pre-empts states' ability to govern programs to best meet local needs, and would yield poor health outcomes. We stand alongside many other organizations in adamant opposition to this proposed rule and strongly urge you to withdraw it from consideration. If you would like to discuss these comments further, please contact Barbara DiPietro, PhD, Senior Director of Policy at 443-703-1346 or bdipietro@nhchc.org.

Sincerely,



G. Robert Watts, CEO