

# One Year Later

**HOW H.R. 1'S SNAP  
POLICY CHANGES  
ARE REVERBERATING  
ACROSS THE FOOD  
SYSTEM**

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## About the Global Food Institute

Founded in May 2023 at the George Washington University by GW and renowned chef and humanitarian José Andrés, the Global Food Institute works to connect academics, practitioners, and policymakers to drive meaningful change across the food system. The Institute's mission is to change the world through the power of food – advancing research, fostering exchange, and developing the next generation of food leaders to build a healthier, more equitable, and sustainable food future.

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## About the Center for Science in the Public Interest

CSPI envisions thriving communities supported by equitable, sustainable, and science-based solutions advancing nutrition, food safety, and health.

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In July 2025, the passage of H.R. 1, the “One Big Beautiful Bill Act,” set in motion the most consequential changes to the federal food safety net since its inception.<sup>1,2</sup> For the more than 37 million Americans who count on the Supplemental Nutrition Assistance Program (SNAP) to meet their basic food needs, the law’s implications are wide-ranging, from restrictions on eligibility to cuts to monthly benefits.<sup>3</sup> H.R. 1 also carries downstream effects beyond SNAP. It has consequences for participants in the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), federal school meals, Medicaid, and the emergency food system – and raises pointed questions about the administration’s parallel agendas to both reduce federal spending and improve Americans’ diets and health.

This brief, produced by the **Center for Science in the Public Interest** and the **Global Food Institute at the George Washington University**, brings together available information on H.R. 1’s scope, its ripple effects, and the communities most at risk of losing funding and food access as its provisions continue to unfold.





## I A Tale of Two Food Policy Agendas

To understand H.R. 1's impact on SNAP and the broader food safety net, it helps to trace the two distinct – and at times competing – strands of the Trump Administration's approach to food and nutrition. The first, reflected in Project 2025 and H.R. 1, represents an economic agenda focused on reducing federal spending on food assistance, shifting costs to states, and tightening eligibility so fewer people can access programs.<sup>4,1</sup> The second, embodied in the Presidentially-appointed Make America Healthy Again (MAHA) Commission's assessment report and strategy, is a nutrition and public health agenda: reducing chronic disease by limiting ultra-processed foods in federal programs, promoting whole foods, and emphasizing personal responsibility in dietary choices.<sup>5,6</sup>

These two strands sit in significant tension with one another. H.R. 1's substantial cuts to SNAP – the

cornerstone of the federal food safety net – stand in direct contrast to the MAHA Commission's stated goals of improving Americans' diets and health.<sup>7,8</sup> Research consistently shows that SNAP reduces food insecurity – which is itself linked to increased risk of poorer diets among children – and may improve health outcomes among households with low incomes.<sup>9</sup> Yet H.R. 1 made dramatic cuts to SNAP, which have cascading impacts on other food assistance programs. H.R.1 also eliminated SNAP's Nutrition Education program (SNAP-Ed), which is the primary federal vehicle for nutrition and physical activity education among SNAP-eligible households. This runs counter to the MAHA Commission's own strategy, which calls for expanding nutrition education to address childhood chronic disease.<sup>10,11,12</sup>

How the administration's health objectives can be achieved alongside policies that reduce both food access and nutrition education is a question these dual agendas do not resolve. Understanding this tension also helps explain why the administration's MAHA messaging has at times appeared disconnected from the SNAP policies it has simultaneously pursued.<sup>13</sup> The following traces each of the administration's agendas in turn, beginning with the deregulatory one that shaped H.R. 1.

### SNAP drives dietary health.

SNAP is the federal government's most important tool for ensuring food access and nutrition among low-income households—a foundation for the public health outcomes MAHA prioritizes. Research links SNAP participation to higher fruit and vegetable consumption and lower rates of food insecurity, which is itself a driver of chronic disease.<sup>16,17,18,9</sup> Cutting SNAP therefore undermines—rather than advances—MAHA's goal to promote healthy eating.

### THE ECONOMIC AGENDA: H.R. 1

In 2023, the Heritage Foundation published Project 2025, a policy roadmap that called for sweeping changes across nearly every aspect of federal policy, including significant reductions in SNAP's reach and eligibility.<sup>4</sup> When President Trump took office in January 2025, he began implementing policies consistent with those recommendations, and appointed one of Project 2025's architects, Russ Vought, to lead the Office of Management and Budget.<sup>14</sup>

On July 4, 2025, President Trump signed into law H.R. 1, the legislative vehicle for key administrative policy priorities, including several of the SNAP proposals outlined in Project 2025. In scope, H.R. 1 went even further than those proposals and brought about the most substantial changes to SNAP in its fifty years of existence.<sup>1</sup> The bill's key provisions related to SNAP include:<sup>7</sup>

- **Expanding the group of people subject to SNAP's stringent work requirements.** Millions more unemployed and underemployed adults than were already subject to it now must find work or risk losing benefits, including households with children, young adults aging out of foster care, people experiencing homelessness and veterans. It also eliminates states' abilities to lift this requirement during an economic downturn
- **Terminating eligibility for certain legal immigrant populations,** specifically those who entered the U.S. on a humanitarian basis
- **Shifting more financial responsibility for SNAP administration costs to states.** Traditionally these costs were shared equally with the federal government
- **Imposing that states must share the cost of SNAP benefits with the federal government.** This is a major financial burden that states have never before had to carry
- **Imposing an arbitrary cap on future Thrifty Food Plan (TFP) updates.** The US Department of Agriculture (USDA) uses this plan to estimate the cost of a basic healthy diet and determine benefit levels. As a result, by 2034, monthly SNAP benefits are projected to decline by \$15 per person relative to CBO's current-law projections for that year<sup>15</sup>
- **New limits on internet and utility expense deductions** used to calculate household income and SNAP benefit levels
- **Eliminating SNAP-Ed**— the program's nutrition education component, representing nearly 45% of USDA's nutrition education funding

Implementation of H.R. 1 began immediately upon bill passage for certain provisions and will continue through 2027 and 2028.

## THE NUTRITION AGENDA: MAHA

In February 2025, President Trump signed Executive

## Where MAHA has moved.

The Trump Administration has taken several steps related to its food policy priorities, though their impact on improving Americans' diets and health remains to be seen.<sup>19</sup> The FDA has prioritized the phase out of certain synthetic food dyes through voluntary action by industry.<sup>20</sup> The administration released updated Dietary Guidelines for Americans, messaging the importance of eating "real food", although not all of the guidelines were grounded in nutrition science.<sup>21,22</sup> USDA updated stocking requirements for SNAP-authorized retailers, implementing a statute from the 2014 Farm Bill, requiring stores to carry more groceries and perishable food items in four staple food categories.<sup>23</sup> And more than 20 states have received USDA waivers to restrict SNAP purchases of sweetened beverages, candy, and desserts.<sup>i,24</sup> While these restrictions are likely to reduce SNAP dollars spent on targeted products, their impact on consumption and diet quality remains to be seen.<sup>25,26</sup> Researchers and commentators will be carefully assessing whether these steps achieve MAHA's stated goals, but improving Americans' nutrition and health will be difficult if a growing number of households cannot afford enough to eat. CSPI has elaborated on the shortcomings of the MAHA proposals in other publications.<sup>27</sup>

<sup>i</sup>On June 22, 2026, a federal district court ruled in *Aragon v. Rollins* that the USDA exceeded its legal authority by approving state demonstration projects restricting what SNAP participants could purchase. The decision invalidates USDA's waiver approvals in Colorado, Iowa, Nebraska, Tennessee, and West Virginia. While the ruling only directly applies to the five states in the lawsuit, it could have implications for the remaining states with similar approvals. The Trump Administration has not yet said whether it will appeal.

Order 14212, establishing the Make America Healthy Again (MAHA) Commission and tasking it with advising the president on childhood chronic disease.<sup>8</sup> In May 2025, the Commission released the Make Our Children Healthy Again assessment report, identifying four major drivers of childhood chronic disease.<sup>5</sup> Four months later, in September, the Commission followed with a strategy report that included recommendations for food system reform to improve Americans' diets and health.<sup>6</sup> The strategy called for USDA to "prioritize utilization and promotion of whole, healthy foods across its 16 nutrition programs." It did not, however, address how deep cuts to SNAP and SNAP-Ed recently enacted with the passage of H.R. 1 would support or impede advancement of those same goals.

## | The Scope of the Cuts

### A HISTORIC REDUCTION IN FEDERAL FOOD ASSISTANCE

H.R. 1 reduces federal SNAP funding by a historic 20 percent (\$187 billion) over 2025–2034. In the months following its enactment, SNAP participation fell by

## TIMELINE OF KEY H.R. 1 AND MAHA NUTRITION EVENTS

2023

### APRIL 2023

- The Heritage Foundation publishes Project 2025

### JANUARY 2025

- Donald J. Trump is inaugurated as the 47th President of the United States

### FEBRUARY 2025

- President Trump signs an executive order establishing the Make America Healthy Again (MAHA) Commission

### MARCH 2025

- USDA cancels \$1 billion in local food purchasing for schools and food banks, and an additional \$500 million in commodity food purchases for food banks

### APRIL 2025

- The FDA announces plans to phase out synthetic dyes from foods through voluntary industry action

### MAY 2025

- The MAHA Commission releases their assessment report

### JULY 2025

- President Trump signs H.R.1 - "The One Big Beautiful Bill" - into law. States are given a 120-day grace period to implement the new SNAP provisions, including:
  - Restrictions on eligibility for certain legal immigrant populations, specifically those who entered the U.S. on a humanitarian basis
  - Changes to internet and utility deductions
  - Expansion of work requirements with time limits and limitations on state waivers

### SEPTEMBER 2025

- The MAHA Commission releases their strategy report
- USDA terminates future food security data collection and publication of the annual Household Food Security Reports

### OCTOBER 2025

- Implementation of H.R. 1 continues, including the elimination of SNAP-Ed funding and the cap on future TFP updates
- The Department of Health and Human Services (HHS) fires all Center for Disease Control staff that direct the National Health and Nutrition Examination Survey (NHANES)

2025

2025

### NOVEMBER 2025

- USDA approves the first SNAP restriction waivers in 6 states
- The Department of Homeland Security issues a proposed rule to rescind the 2022 Public Charge Ground of Inadmissibility rule, increasing chilling effects for immigrants
- The 120-day grace period ends and implementation of many H.R. 1 SNAP provisions begins

### DECEMBER 2025

- 12 more states receive SNAP restriction waivers, bringing the total to 18

### JANUARY 2026

- HHS and USDA release the 2025–2030 Dietary Guidelines for Americans

### MARCH 2026

- USDA approves 4 more state requests for SNAP purchase restriction waivers, bringing the total to 22
- SNAP participants in 5 states with SNAP waivers sued USDA (Aragon v. Rollins), arguing that USDA did not follow administrative procedures in approving the waivers and that the restrictions would significantly impact their health, finances, and daily lives

### MAY 2026

- USDA releases the final rule updating the staple food stocking standards for SNAP authorized retailers now requiring them to carry a minimum variety of foods in four different staple food categories (fruits and vegetables, grains, dairy, and protein)
- USDA approves another SNAP restriction waiver request, bringing the total to 23 states

### JUNE 2026

- A federal judge ruled in favor of the SNAP plaintiffs in the Aragon v. Rollins lawsuit, invalidating the SNAP purchase restriction waivers in Colorado, Iowa, Nebraska, Tennessee, and West Virginia

### OCTOBER 2026

- SNAP administrative cost share with the federal government begins for states

### OCTOBER 2027

- SNAP benefit cost share based on payment error rates begins for states

2026

2027

State of Illinois  
Department of Human Services  
**Request for Cash Assistance - Medical Assistance -  
Supplemental Nutrition Assistance Program (SNAP)**

Last Name: \_\_\_\_\_ MI: \_\_\_\_\_  
First Name: \_\_\_\_\_ Apartment Number: \_\_\_\_\_  
Maiden Name: \_\_\_\_\_ County: \_\_\_\_\_  
Present Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Are you homeless?  Yes  No  
City: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
Birth Date: \_\_\_\_\_ County: \_\_\_\_\_  
Mailing Address (if different from above): \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Other: \_\_\_\_\_  
City: \_\_\_\_\_ Work: \_\_\_\_\_  
Telephone number(s) Home: \_\_\_\_\_ Work: \_\_\_\_\_  
Daytime phone: \_\_\_\_\_ Best time to call you: \_\_\_\_\_ Date: \_\_\_\_\_  
**Signing here will start your application. You must sign Page 18 before we approve you for any benefits.**

Signature: \_\_\_\_\_

**Approved Representative**  
When you sign to have an approved representative it means you give permission for this person (1) to sign your application for you, (2) to receive official information about this application, and (3) to act for you on all matters with this agency.  
Do you want to name an approved representative?  Yes  No If yes, complete the following:  
Name of approved representative: \_\_\_\_\_ Address: \_\_\_\_\_ ID # if applicable: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Organization Name: \_\_\_\_\_

Signature of applicant: \_\_\_\_\_

**Instructions to person(s) applying for Cash, Medical, and/or SNAP benefits**  
Cash - \$ Medical - \$ SNAP - \$

Put your answers on the application form so that we can read and understand your answers.  
The information on this page (Page 1) is completed with your name, address and signature.  
Provide your date of birth and Social Security Number on this page as long as the time table. Providing your date of birth and Social Security Number on this page as long as the time table.

We Accept EL



10 percent – more than 4 million people – between July 2025 and March 2026.<sup>28</sup> As the following sections detail, the available evidence suggests this decline reflects H.R. 1’s implementation, rather than reduced need.<sup>28,7,29</sup> To understand why requires consideration of three separate forces that, in practice, can be difficult to disentangle using available data.

**1 The first is the economy.** SNAP participation typically falls when the job market improves and household incomes rise.<sup>30</sup> But since H.R. 1’s passage, economic conditions have not meaningfully improved for low-income households. Bureau of Labor Statistics data show national unemployment has held steady at around 4 percent since July 2025, and real average weekly earnings fell 0.4 percent between May 2025 and May 2026, which means that workers’ purchasing power has declined, not improved.<sup>31,32</sup> Comprehensive household income data for 2025–2026 will not be available until later this year, but current indicators suggest that economic conditions alone do not explain the caseload declines already underway.

**2 The second is policy change under H.R. 1.** The law formally removed SNAP eligibility from lawfully present immigrants including refugees, asylees, and other humanitarian-status immigrants.<sup>33</sup> Broader work requirement changes began to take effect November 1, 2025, cutting off unemployed and underemployed adults who cannot meet or document the 80-hour-per-month work threshold.<sup>34</sup> CBO estimates that expanded work requirements will reduce SNAP participation by an average of 2.4 million people per month over the next decade.<sup>35</sup> Beyond H.R. 1, the administration has signaled a broader shift

in immigration policy, including efforts to revisit public charge policies. These changes could discourage eligible immigrants and mixed-status families from participating in programs such as SNAP due to concerns about potential immigration consequences. Researchers have documented this type of “chilling effect,” in which eligible households avoid applying for or withdraw from SNAP because they fear that participation could affect a green card application or draw attention to their own or a family member’s immigration status.<sup>36</sup>

**3 The third, and perhaps most underappreciated, is how changes in administrative burden can drive participation.** This is because by and large, processing applications to participate, and continue enrollment, in SNAP requires mostly manual review of application and re-certification materials to ensure applicants and participants continue to meet the requirements for SNAP eligibility. For example, even a SNAP participant working 25 hours/week may not automatically meet the 20 hours/week SNAP work requirement because state agency staff must verify that individual’s work records to continue SNAP eligibility. The person is required to provide documentation of their work hours, and the state agency staff must take action on the reported information in a timely manner.<sup>37</sup> If the state agency staff fail to update the case record before automated cut-offs occur, the household can still lose eligibility even after submitting everything required.

H.R. 1’s expanded work requirements mean more SNAP participants will have to submit regular employment records, necessitating increased oversight by state agency staff. H.R. 1 also requires that state

Photos: Illinois Department of Human Services (left), jetcityimage - stock.adobe.com (right).

agencies pay an increased share of the administrative costs of SNAP, putting unanticipated strain on state budgets, and potentially limiting states' ability to hire additional staff or other needs to cover the increased workload. Therefore, these circumstances create a higher risk that eligible households may lose benefits due to administrative error and paperwork confusion rather than ineligibility.

Another provision in H.R. 1 compounds this strain on states directly: the law imposes substantial financial penalties on states whose combined over- and underpayment SNAP error rates exceed a set threshold, beginning in FY2028. Whether a state is responsible for covering the additional cost of SNAP benefits in FY2028 depends on its error rate in FY2025 or FY2026. However, if a state with a high error rate reduces its error rate below the acceptable threshold in FY2026, it will avoid the financial penalty.<sup>38,7</sup> Fearing these financial sanctions and in a preemptive effort to reduce errors, some states may already be taking action to increase paperwork verification and SNAP eligibility documentation requirements.

As households face new requests for information, they are likely to call the state help line and spend more time on the site uploading documents – all of which can add strain to state systems. Similarly, case workers must now process more information, further taxing their time and capacity.

Arizona is the starkest example of these dynamics: the state's SNAP participation rates fell by more than half between July 2025 and April 2026, far more than work requirements or eligibility changes alone can explain.<sup>39</sup> Caseload declines are widespread. SNAP participation has dropped in every state, including by 5 percent or more in 38 states, and by 10 percent or more in 13 states.<sup>40</sup> When applications become harder to complete, eligible people may struggle to navigate new documentation requirements. Impacted households lose benefits not because they are ineligible, but because administrative barriers and limited state capacity pushed them out. Researchers documented the same phenomenon following the 1996 Personal Responsibility and Work Opportunity Reconciliation Act: many eligible families stopped participating in food stamps after welfare reform, even when their incomes still qualified them for benefits.<sup>41,42</sup>

Both of the latter two outcomes – removing people who are now formally ineligible under the new rules, and actions that result in benefit loss for people who remain eligible – cut directly against the MAHA

strategy's goals. Removing food assistance for people who need it will exacerbate food insecurity, which is associated with increased risk of chronic disease.<sup>18</sup>

## DEEP CUTS TO NUTRITION EDUCATION

Before H.R. 1 cut its funding, SNAP-Education provided free education, skill-building, and community support to help limited-income families make healthy food choices and lead active lifestyles on a budget — giving participants practical knowledge to stretch their food dollars and cook nutritious meals. Services included:

- **Nutrition & Cooking Classes:** Hands-on workshops teaching healthy meal planning, smart grocery shopping, and food safety.
- **Budgeting Strategies:** Tips to make SNAP benefits and food budgets stretch further at the supermarket.
- **Physical Activity:** Information and motivation for adding safe, low-cost exercise into daily routines.
- **Policy, Systems, and Environmental Changes:** Initiatives to address socioeconomic factors and the built environment to improve access to fresh, healthy foods.

The program showed impressive results: a 2024 multi-state outcome report found that 23 states delivered SNAP-Education programming at more than 17,300 sites, reaching more than 1.2 million people – including at least 900,000 youth through direct education – with documented reductions in food insecurity and improvements in nutrition and physical activity.<sup>43</sup>



SNAP-Ed represented roughly 45 percent of USDA’s nutrition education portfolio, and was subject to evidence-based standards and significant outcome reporting. Eliminating it was at odds with the administration’s MAHA strategy framing of nutrition education as a tool to reduce childhood chronic disease. Even if policymakers had concerns with SNAP-Ed, funds could have been targeted toward the administration’s preferred approach to nutrition education rather than cut off federally funded nutrition education for more than 20 million households.

### RIPPLE EFFECTS ACROSS THE FOOD SAFETY NET

Households who apply for SNAP undergo a robust eligibility and enrollment process.<sup>7</sup> They are required to provide detailed documentation of their income and household circumstances and must participate in an interview with a state worker who determines their eligibility and benefit amount. The state SNAP agency also validates information on the application with third-party data sources.

Because SNAP has a detailed and comprehensive application and renewal process, Congress allows eligibility for SNAP to serve as a proxy for eligibility in certain other means-tested federal assistance programs. This approach, often called streamlined enrollment, enables participation in one program to establish eligibility for another. Streamlined enrollment is required for programs such as WIC, school meals, and Pell Grants, and states may also choose to use it for programs such as the Child Care Development Block Grant and the Low Income Home Energy Assistance Program (LIHEAP).

► **WIC.** WIC is not directly cut under H.R. 1, but families are likely to have a harder time accessing it when they lose SNAP. Because 80.4 percent of WIC participants qualify through adjunctive eligibility – meaning they gain automatic WIC access by virtue of enrollment in TANF, SNAP, or Medicaid – losing SNAP can simultaneously end automatic WIC eligibility.<sup>45</sup> Families who lose that adjunctive eligibility must then navigate a separate income verification process, contributing to delays and, in some cases, loss of access altogether. While no one loses WIC eligibility because of H.R. 1, the burden of proving that eligibility through a separate process is itself a barrier, and one that will fall hardest on families with young children already navigating multiple disruptions and time constraints.



H.R. 1’s \$911 billion in Medicaid cuts compound this further: with an estimated 10 million people projected to lose healthcare coverage by 2034, many will also lose Medicaid-based adjunctive eligibility for WIC. As a result, hundreds of thousands of infants and young children are at risk of losing access to WIC. Research consistently shows that when healthcare costs rise for low-income households, food spending falls.<sup>46,47,48</sup>

► **School Meals.** Student eligibility for free school meals is typically determined through a household application process. Children whose families participate in SNAP have already proven their eligibility through a rigorous process, allowing schools to automatically enroll them in free meals without requiring a redundant application through a process called “direct certification”. Schools located in high-poverty communities or serving large numbers of SNAP families can also qualify to serve all meals free of charge under the Community Eligibility Provision (CEP).<sup>49</sup> In the 2024–2025 school year, 54,234 schools – representing 74 percent of eligible schools and serving 27.2 million children – adopted CEP. CEP is popular with school administrators because it reduces administrative burden and costs for schools and families, streamlines support to students, and facilitates effective cafeteria operations.<sup>50</sup>

When families lose SNAP, children don’t typically lose eligibility for free school meals – but they do lose automatic enrollment. Families must then fill out a



separate application to prove they remain income-eligible, adding a burden that can result in real-world loss of access. It is also the case that as more children lose SNAP benefits, fewer schools will qualify for CEP, increasing schools' administrative burden as schools must process individual applications. Schools that lose CEP eligibility must also reintegrate meal charging into cafeteria operations and may see a loss in revenue to the school meals program – undercutting their capacity to focus on providing students with nutritious meals.

The emergency food system cannot fill the gap left from these losses. SNAP provides roughly nine times the volume of food assistance as the entire Feeding America network, food banks are already reporting surging demand, and USDA separately cut \$500 million in commodity food purchases for food banks in 2025. Emergency food providers such as food banks, pantries, soup kitchens and other community feeding models were designed to provide short-term stopgap food, not a substitute for federal nutrition programs at scale.<sup>53,54,55</sup> Even as many have worked to expand the share of fresh and whole foods they provide to their clients, they cannot replicate the consistent, nutritionally comprehensive support that MAHA's dietary health goals require.

## MEASURING THE DAMAGE – AND ITS LIMITS

Assessment of the downstream effects of H.R. 1's changes to SNAP will be constrained by a serious

data gap. Although USDA continues to publish monthly reports showing the declining number of people participating in SNAP, there is no federal evaluation plan in place to determine whether these changes result in increased rates of food insecurity. In September 2025, USDA announced it would no longer sponsor the Food Security Supplement of the Census Bureau's annual Current Population Survey, ending data collection that had occurred annually since 1995 and supported USDA's Household Food Security report series.<sup>56,57</sup>

The USDA's annual report provided vital information on hunger and food insecurity in the U.S. for nearly 30 years, and was the primary national tool for tracking food insecurity trends with data available at the state level and by a range of demographic groups.<sup>58</sup> The last available report on household food security, published in December 2025 using data from 2024, found that 47.9 million Americans live in food-insecure households. Unfortunately, USDA's decision to discontinue the survey, separate from H.R. 1, will limit our ability to evaluate the impact of H.R. 1 on national rates of food insecurity, and compare with food insecurity trends during other historical economic downturns, like the Great Recession and the COVID-19 Pandemic.<sup>59</sup>

Some critical data will remain available and provide insights. The Official Poverty Measure (OPM) and Supplemental Poverty Measure (SPM) will continue to offer a window into overall household hardship and whether safety net programs are doing their job alleviating poverty.<sup>60,61</sup> The Census Bureau's

## Programs that improve child health.

WIC and school meals are among the federal government's most effective tools for improving diet quality among young children and low-income families. Research links WIC participation to healthier diets, reduced food insecurity, and better birth outcomes.<sup>51</sup> School meal programs are associated with improved nutrition and reduced hunger among children.<sup>52</sup> H.R. 1 does not cut these programs directly, but by reducing SNAP enrollment, it threatens the streamlined enrollment links that connect millions of families to both.

Household Trends and Outlook Pulse Survey (HTOPS) also continues to track food insufficiency, providing a more timely if narrower signal.<sup>62</sup> But none of these are substitutes for food-specific data at scale. The food security survey was the only tool designed to measure hunger and dietary hardship directly using the gold standard survey methods that provide estimates at the national level, by state and region, and broken down by critical sub-population groups, including seniors, children, and people with disabilities.<sup>63</sup> Losing it means losing the ability to identify where harm is most concentrated and who is bearing the greatest burden, allowing us to adjust our powerful and effective food safety net programs to reach those most in need.

Other surveys, including the National Health and Nutrition Examination Survey (NHANES), may capture some impacts on health and well-being through nutrition and health data, but these are not designed to replace the food insecurity survey's scope or frequency.<sup>64</sup> Moreover, NHANES has faced substantial institutional pressure, including staff layoffs, legal challenges, and proposed budget cuts that have raised serious concerns about the program's long-term stability.<sup>65</sup>

State-level surveys, food bank reports, and participation trackers such as CBPP's ongoing SNAP tracker and the Urban Institute's recently expanded Well-Being and Basic Needs Survey will provide critical insights, as will national longitudinal panels such as the Census Bureau's Survey of Income and Program Participation and the University of Michigan's Panel Study of Income Dynamics.<sup>40,66,67,68</sup>

These are valuable but partial: they vary in geographic coverage and methodology, and none are designed to measure food insecurity at the same national scale as the food security survey.

The administration's cancellation of the national food security data represents another tension with MAHA goals. Without the Food Security Supplement data, the federal government's capacity to design, target and evaluate evidence-based interventions to reduce food insecurity – which is paramount to basic health – is compromised.





## Who Bears the Burden

SNAP reaches a diverse population united by economic need. Nearly 39% of SNAP participants are children.<sup>45</sup> In fiscal year 2023, nearly 90 percent of SNAP benefits went to households with incomes at or below the federal poverty line, and the average participant received just \$177 per month – roughly \$6 a day – to cover food costs.<sup>45</sup> The cuts fall disproportionately on people with racialized identities: food insecurity among Black, Latine, and Native households is more than twice as high as that of white households and they are enrolled in SNAP at higher rates than white households, reflecting longstanding disparities in wages, wealth, and access to economic opportunity.<sup>69</sup> As the cuts take effect, the impact will fall hardest on the households and

communities that can least afford it, as well as those that already bear a disproportionate burden of diet-related disease.<sup>70</sup>

### Households in Deep Poverty

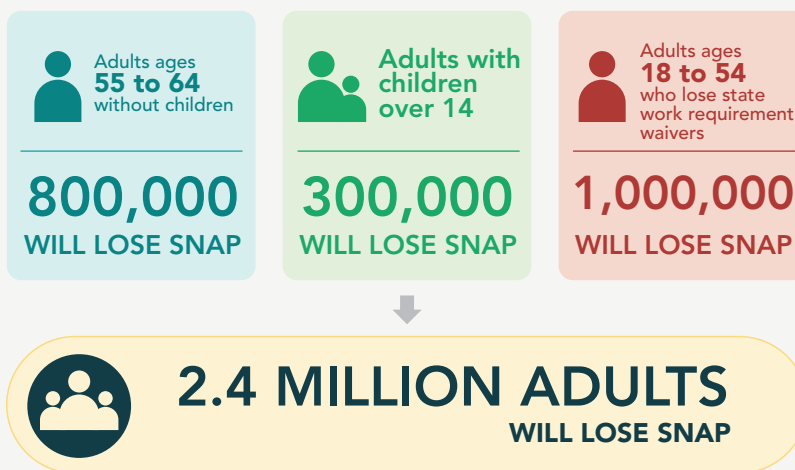
The deepest cuts fall on households with the lowest incomes. For these households, SNAP is not a supplement – it is a primary source of food. More than a third of SNAP households have gross monthly incomes at or below 50 percent of the federal poverty line.<sup>45</sup> For a family of three, that means living on roughly \$1,000 a month before food assistance.<sup>71</sup> These households have the fewest alternative resources to fall back on and face the steepest barriers to meeting H.R. 1’s new documentation and recertification requirements.

### NEARLY 39% OF SNAP PARTICIPANTS ARE CHILDREN



Photo: Aleksey - stock.adobe.com.

## CBO ESTIMATES THAT IN AN AVERAGE MONTH:



### Children and Families

Approximately 16 million children live in households that rely on SNAP to meet their basic food needs, and many will face cascading losses of access to other nutrition programs as a result of H.R. 1's cuts.<sup>30</sup> In the twelve states that break down SNAP participation by age, more than 776,000 children have already lost SNAP since H.R. 1's enactment.<sup>72</sup> And because age-disaggregated data is available for only a subset of states, the national total is likely significantly higher. Children who lose SNAP also risk losing automatic enrollment in WIC and free school meals, forcing families already stretched thin to navigate multiple re-enrollment processes with no guarantee of restored access. H.R. 1 also eliminates a longstanding work requirement exemption for young adults who age out of foster care; they are now subject to the 80-hour monthly documentation burden upon turning 18.

### Adults 55 and Older, Including Parents

Nondisabled adults ages 55 to 64 with no dependent children now face SNAP work requirements for the first time under H.R. 1, which extended the requirement from the previous age ceiling of 54 up to 64. Work requirements also now apply to nondisabled adults who live with children over age 14 – previously individuals with children of any age in the household were exempt from the rule.<sup>73,28</sup> CBO estimates that in an average month, 800,000 adults ages 55 to 64 without children and 300,000 adults with children over 14 will lose SNAP as a

result (along with roughly 1 million adults ages 18 to 54 who lose state work requirement waivers, totaling the 2.4 million figure cited above).<sup>35</sup> Many are working in physically demanding jobs, managing chronic health conditions, or caring for family members – circumstances that can make meeting an 80-hour monthly work requirement difficult to meet. Those who cannot comply and are not able to document an exemption, such as obtaining a medical exemption, will lose benefits entirely.

### Veterans

Roughly 1.2 million veterans rely on SNAP. H.R. 1 eliminated the existing work exemption for veterans, meaning veterans without dependents and under





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age 65 will now be subject to work requirements.<sup>74,73</sup> Veterans with service-connected disabilities may qualify for exemptions, but the burden of documentation to prove it will fall on them.

### People Experiencing Homelessness

H.R. 1 also eliminated the work requirement exemption for people experiencing homelessness.<sup>73</sup> For this population, stable employment is often the result – not the prerequisite – of stable housing and food security. Without the exemption, people experiencing homelessness who are already navigating serious difficulty and instability must now meet work documentation requirements to maintain their access to food assistance.

### Immigrants and Mixed-Status Families

Very few categories of immigrants were eligible for SNAP before H.R. 1. However, the law further restricts lawfully present immigrants' eligibility by targeting immigrants admitted for humanitarian reasons.<sup>75</sup> These include refugees, asylees, and certain trafficking survivors. In families comprised of citizens and non-citizens that fall into these categories, known as "mixed status" families, the loss of benefits for one household member reduces the resources available to all.<sup>76</sup> As immigration enforcement has sharply increased since the second Trump Administration began, fear of immigration consequences may further depress SNAP participation among households that remain technically eligible.<sup>77</sup> CBO estimated that these restrictions will result in about 90,000 people becoming ineligible for SNAP in a given month.<sup>35</sup>

### Rural Communities

Rural communities face elevated rates of food insecurity and SNAP participation compared to metropolitan areas, and the effects of H.R. 1's cuts will be felt acutely there.<sup>78</sup> Limited job prospects, higher barriers to work such as limited transportation and childcare options, make it harder for rural households to access affordable food. Smaller tax bases can make rural state governments less equipped to absorb the new cost-share rules. H.R. 1's work requirements expand the group of adults now subject to work reporting rules with no way to exempt rural high poverty, high unemployment areas where there are insufficient jobs or barriers to work. Now, states can generally only request these waivers if unemployment rates are above 10%, a higher threshold than the previous standard. CBO estimates that this will result in an additional 1 million adults losing access to SNAP.<sup>35</sup>



## | What's Next

H.R. 1's impact on the federal food safety net is both sweeping and still unfolding. The two strands of food policy described at the outset of this brief – the economic agenda that shaped H.R. 1 and the nutrition and health agenda embodied in the MAHA Commission's report and strategy – have yet to be reconciled, and the disconnect between them is widening. The program most essential to food access and diet quality among Americans with low incomes has been cut, and USDA's nutrition education funding that the MAHA Commission's own strategy identified as central to its goals has been drastically cut.

What remains to be seen is how much further the damage extends. H.R. 1's statutory provisions are significant on their own, but implementation is emerging as an equally powerful force multiplier. States facing new financial exposure are making administrative choices that could compound the

harm beyond what the law's text alone would produce – Arizona's 52 percent participation drop being the starkest early example. The law's reach also extends beyond SNAP: cuts will likely trigger reductions in WIC enrollment and school meal eligibility, straining an emergency food system that was never designed to absorb losses at this scale.

The populations bearing the greatest burden of these cuts – children, older adults, veterans, people with disabilities, and communities already facing the highest rates of diet-related disease – are precisely those for whom food and nutrition access matters most. Reducing food insecurity and improving diet quality are not competing goals. But they will be difficult to simultaneously achieve when food assistance for vulnerable households has been cut. If the administration's health objectives are to be realized, the deep contradictions between H.R. 1 and the MAHA agenda will need to be reckoned with.

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