Evaluation of Alternatives to Improve Elderly Access to SNAP

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May 2020
USDA is an equal opportunity provider, employer, and lender
Acknowledgements

The Evaluation of Alternatives to Improve Elderly Access was conducted under the direction of the U. S. Department of Agriculture, Food and Nutrition Service. The authors thank Andrew Burns, Kameron Burt, Jordan Younes, and Barbara Murphy for their guidance and support. The study would not have been possible without the participation of multiple State and local SNAP agency staff, FNS regional office staff, local community based organization staff and the hundreds of elderly respondents who so graciously gave of their time and shared their perspectives.

We also wish to thank our teams at SPR and Mathematica. At SPR, Melissa Mack provided key project management support, early study design and site visit data collection. Lea Folsom, Leela Hebbar and Sara Miller provided important data and logistical support for the study of elderly perspectives. Caitlin Grey provided support with graphics and final formatting of the report. Hannah Betesh provided editorial review. At Mathematica, Katherine Allison Clark and Liana Washburn conducted site visit data collection and analysis. Clare Wolfendale led the programming effort for the Study of Intervention Effects, and Brenda Li and Katherine Campbell provided programming support. Gretchen Rowe conducted quality assurance reviews.
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Executive Summary

Historically, only about a third of the eligible elderly population (defined as 60 years of age and older) has participated in the Supplemental Nutrition Assistance Program (SNAP), the largest of the domestic nutrition assistance programs administered by the Food and Nutrition Service (FNS) of the U.S. Department of Agriculture (USDA). In response to the low participation levels and unique economic circumstances of elderly households, FNS has implemented specific eligibility criteria for elderly households, and has developed several demonstration projects and opportunities to waive federal regulations that seek to address elderly access to SNAP. FNS awarded a contract to Social Policy Research Associates and Mathematica Policy Research (the research team) to conduct an evaluation to better understand how some of these interventions are implemented and to understand their potential effects. The evaluation focused on how nine States implemented five demonstration projects and waivers (Exhibit ES-1) that are specifically targeted to increase elderly access to the program: Elderly Simplified Application Project (ESAP); Combined Application Project (CAP); Standard Medical Deduction (SMD); Elderly and Disabled Recertification Interview Waiver; and 36-Month Certification Demonstration.

Exhibit ES-1: Study States with Interventions

<table>
<thead>
<tr>
<th>Study States</th>
<th>ESAP</th>
<th>CAP</th>
<th>SMD</th>
<th>Recertification Interview Waiver</th>
<th>36-Month Certification</th>
</tr>
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Key Research Findings

The evaluation combined findings from a qualitative analysis of how the interventions were implemented and how elderly participants experienced SNAP with findings from a quantitative analysis of each intervention’s effects using State administrative data. Evidence from this evaluation suggests that when interventions designed to increase elderly access are implemented with high fidelity and consistency, they generally have positive effects on measures of SNAP participation among the elderly, including SNAP caseloads, new applications, and rates of churning.

Elderly Perspectives on SNAP

The research team gathered data from 267 elderly informants through interviews and focus groups, which revealed that low-income elderly individuals confront numerous challenges in their everyday lives. Many elderly study respondents had recently experienced one or more life crises—often major health crises—that compromised their ability to work and to afford or access food. Increasing access to SNAP is an important strategy to improve health and quality of life for a vulnerable group in great need of assistance.

Combined Application Project

The Combined Application Project (CAP) simplifies the SNAP application and benefits allotment process by allowing the elderly (and people with disabilities) who are applying for Supplemental Security Income (SSI) to simultaneously apply for SNAP, thereby reducing the administrative burden on both SNAP recipients and program staff. CAP implementation is intended to increase elderly access by bringing additional eligible individuals into SNAP and, by lengthening certification periods, reducing churn.

- **Implementation of a CAP was associated with increases in elderly caseloads and new elderly applications.** In general, the findings corroborate previous research showing that adoption of a CAP is associated with an increase in SNAP participation.

- **The largest increases in SNAP caseloads among study States appear to have come from mass enrollment of eligible individuals who already received SSI.** CAP implementation contributed to increases in new elderly applications and subsequent increases in elderly SNAP participation in the three States that focused on enrolling SSI recipients who were eligible but not yet enrolled in SNAP.

- **CAP streamlined processes and created efficiencies for both elderly individuals and SNAP staff.** Elderly CAP recipients valued having a “one-stop” experience where they could receive SNAP benefits together with SSI with no additional effort. Generally, elderly respondents spoke positively of single-entry points that combined enrollment in benefit programs (e.g., Medicaid and SNAP).
**Standard Medical Deduction**

The Standard Medical Deduction (SMD) is a demonstration project that simplifies the SNAP rules for deducting medical expenses for elderly and disabled applicants. The SMD can increase elderly access in three ways: (a) reducing the burdens associated with claiming a medical expense deduction; (b) increasing elderly participants’ SNAP benefit amounts by reducing the net income used to calculate their benefit amount, and (c) bringing new eligible individuals into SNAP by reducing the net income amount used to calculate their eligibility.

- **In the year following implementation of the SMD, elderly SNAP caseload size increased in two of the three States examined (Arkansas and North Dakota), and median benefit amounts increased in Massachusetts relative to what would have been expected in the absence of the intervention.** The lack of increased benefit amounts in the 12 months following implementation in the other States may be the result of implementation challenges, such as insufficient staff training or lack of clarity in communications to elderly participants about the availability of medical deductions.

- **State and local SNAP staff reported that the SMD simplified the medical deduction process for participants while reducing staff burden and errors.** However, they also acknowledged that there was some inconsistency in implementation and that not all caseworkers were equally thorough in probing participants about their medical expenses. This may have stemmed in part from differences in staffing levels and training over time.

- **Elderly SNAP recipient respondents in States with the SMD tended to have more awareness about the option to deduct their medical expenses compared to those in States without the SMD.** Although elderly participants in States with the SMD were not explicitly familiar with how it worked, they were more likely to say they deducted medical expenses. However, even within SMD States, the elderly appeared to need significant assistance to claim the deduction, and many were unsure which medical expenses qualified for the deduction.

**ESAP and its Components**

The Elderly Simplified Application Project (ESAP) allows States the flexibility of choosing from a bundle of options aimed at making it easier to apply for SNAP and to process elderly SNAP applications. These policies include a streamlined elderly SNAP application form; a waiver of the recertification interview; a lengthened certification period; and self-declaration of certain demographic and financial information. Initially, FNS also allowed ESAP States to waive the initial certification interview but reinstated this requirement starting in 2016.

- **States primarily implemented an ESAP (or its components) to simplify administrative processes and reduce administrative costs, most often as part of a larger effort to**
modernize systems or re-engineer business processes. This context may have clouded analyses of the States’ administrative data by capturing the effects of significant administrative disruption and re-organization along with intervention effects.

- **The most common policy change that States adopted under ESAP was the waiver of the recertification interview.** Another common feature was to allow for self-declaration of unearned income, household size, residency, and shelter expenses (unless deemed questionable).

- **Evidence from Alabama suggests that removing required annual reporting requirements contributed to lower churn and higher caseloads, while reinstating this requirement (along with the initial interview) reversed those effects.** Alabama implemented all ESAP components—and did so with a high level of consistency—through the creation of a designated ESAP unit.

**Policy Recommendations**

Based on the key findings, the research team makes four high-level recommendations for SNAP policy changes that FNS might consider to increase access to SNAP among the elderly population.

1. **Change the CAP from a demonstration project to standard policy for all States** so that all eligible SSI recipients can access SNAP benefits through the SSI enrollment process. This project has been in place successfully for many years, and this study and previous research have demonstrated that it increases access for very low-income elderly individuals. Further, it minimizes transaction costs for staff and recipients, creates efficiencies, and streamlines program operations. This change would require legislative action to amend the federal statutes and regulations.

2. **Change the SMD from a demonstration project to standard policy for all States** so that more elderly recipients can deduct their medical expenses in a manner that is more efficient for SNAP staff. By removing the cost neutrality requirement for this policy, local SNAP staff would be able to more fully realize the efficiencies that it creates. Making the SMD standard policy would also likely result in more consistent application and understanding of the policy, which would likely increase the number of elderly recipients who receive the highest medical deduction to which they are entitled. This change would require legislative action to amend the federal statutes and regulations.

3. **Create a stronger ESAP demonstration project** that requires States to implement all the components: a simplified application (with self-declaration for most expenses), an extended certification period (with limited interim reporting), and no recertification interview. As suggested by the Alabama results, a comprehensive version of the ESAP...
showed promise to increase elderly participation, decrease churn, and create administrative efficiencies for States. The current findings indicate that a piecemeal version of the ESAP, or one in which there are still multiple administrative hoops to jump through, is less likely to be effective.

4. **Remove interim reporting requirements for elderly recipients with no earned income.** Generally, the population targeted for longer certification periods is on a fixed income with very little variation, and electronic verification is available for these income streams (mostly through SSA). Elderly recipients should still have the option to report increased expenses (e.g., medical or shelter) to increase their benefits, but an arbitrary check-in point appears to be counterproductive for elderly access and inefficient for SNAP administration.