

Building a Smarter Safety Net: Lessons Learned from Connecticut SNAP Work Requirements



Work requirements are a longstanding feature of social safety net programs. Recent federal policies have expanded SNAP work requirements, gradually increasing the maximum age subject to work requirements from 49 to 54. In the Medicaid program, several states have also considered or implemented work requirements. Aimed at promoting self-sufficiency, these policies may inadvertently exclude the most vulnerable beneficiaries. In doing so, they may create a system that is actively working against itself.

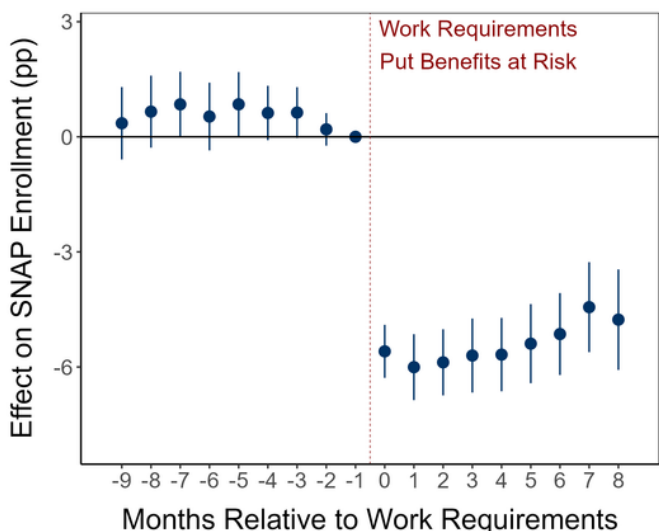
Background and Methodology

In 2016, Connecticut reintroduced SNAP work requirements for Able-Bodied Adults Without Dependents (ABAWDs) for **51%** of all towns in the state. Individuals that did not fulfill these requirements were subject to a 3-month time limit on SNAP. This served as a natural experiment to assess their impact on enrollment. Our study compared trends before and after the policy, between populations subject to and exempt from work requirements, in affected and exempt towns.

Key Findings

ABAWDs in work requirement towns experienced a reduction in SNAP enrollment by **25%**. On average, we find that individuals who lost SNAP coverage due to work requirements lost approximately **\$1,831** in benefits. Furthermore, our findings demonstrate that the policy disproportionately excludes sicker, older, and poorer beneficiaries:

AGE	HEALTH	INCOME
Individuals between 40 to 49 were 370% more likely to lose SNAP, relative to individuals 25-29.	Individuals with 3 or more chronic conditions were 43% more likely to lose SNAP than individuals with no conditions. In particular, individuals with diabetes were 91% more likely than those with no chronic conditions to lose SNAP coverage.	Individuals with no net income were 204% more likely than those with net income above the median to lose SNAP due to work requirements. However, individuals with higher incomes still saw significant decreases (-12.3%) in enrollment, suggesting an additional administrative burden for people who are already working.



Although we see significant decreases in SNAP enrollment, we find no evidence that SNAP work requirements significantly decreased Medicaid enrollment. This suggests that work requirements did not lead to sufficient increases in employment that would transition beneficiaries off of the social safety net altogether. Furthermore, Medicaid may bear the brunt of these lost benefits through increased preventable healthcare costs.

Policy Considerations

- Leverage state resources to reduce reporting burden on beneficiaries:** States can streamline enrollment and renewal processes using existing data. With significant participant overlap across safety net programs, states can design systems that link both eligibility information to ameliorate heavy reporting requirements and prevent unnecessary program turnover.
- Explore carve-outs for the clinically vulnerable:** Individuals with chronic conditions may experience increased challenges to securing and maintaining employment. Robust data linkage may allow for DSS to carve out specific health groups that are most impacted.