

February 8, 2022

Chair Dan Feyen and The Hon. Committee Members
The Senate Economic and Workforce Development Committee
c/o: Tim Lakin, Committee Clerk
State Capitol
PO Box 7882
Madison, WI 53707

Re: SB 902 FoodShare work and FoodShare employment and training requirements and drug testing.

Dear Chair and Members of the Economic and Workforce Development Committee:

I am writing on behalf of Feeding Wisconsin to share our positions on SB 902 – that will be heard in committee on February 8, 2022.

Feeding Wisconsin is the state association of the six regional Feeding America affiliated food banks that provide food to almost 1,000 local food programs in all 72 counties of the state. Together, Feeding Wisconsin's network provided 86 million pounds of food to Wisconsinites in every corner of our state in 2021, an increase of 75% over 2019. Through our food banks and food pantries, we work to ensure that everybody has access to the food and benefits they need to work, learn, play and live healthy lives.

Before the pandemic, food insecurity levels were the lowest they had been in 20 years, yet 515,930 Wisconsinites experienced hunger. COVID-19 increased the need for food resources. Federal and State nutrition programs and food distribution and programs of our network's food banks and pantries helped to mitigate food insecurity rates. Feeding America estimated that in CY2021, 605,650 Wisconsinites or 10.4% experienced food insecurity.¹ And about 40% of those coming through our pantries and mobile distribution lines have never relied on the emergency food network before.²

We oppose SB 902 which would remove the state's ability to suspend the work requirement and require drug testing for FoodShare applicants.

FoodShare is the Wisconsin name for the Supplemental Nutrition Assistance Program (SNAP, formerly food stamps), a federal nutrition assistance program that provides individuals and families living with low and no incomes with a modest monthly benefit (about \$268 per month per household at a time where there emergency allotments due to the Public Health Emergency Order³) to buy food at supermarkets, farmers markets, convenience stores, and retail stores that sell groceries. These benefits are delivered on an EBT card and are strictly monitored by the state that administers the program, the federal government that authorizes the program, and the major banks that facilitate the benefit delivery.

FoodShare recipients are comprised of approximately 39% children. 45% of assistance groups or households have at least one member that is elderly, blind or disabled. We know that in large part, those who are able to work, do work, oftentimes low wage jobs. We also know that FoodShare recipients do not represent a population more likely to use drugs.

¹ <https://www.feedingamerica.org/about-us/press-room/local-food-insecurity-projections>

² https://feedingwi.org/data_research/covidpulsesurvey.php

³ <https://www.dhs.wisconsin.gov/foodshare/ataglance202112.pdf>

FoodShare Work Requirements

This bill will require the Wisconsin Department of Health Services to end the suspension of the Able-Bodied Adults Without Dependents (ABAWD) work requirements—a three month time limit for childless adults who are working fewer than 80 hours per month. DHS currently has federal approval to exempt able-bodied adults without dependents (ABAWDs) FoodShare members from the work requirement time limits for federal fiscal year 2022 (October 1, 2021-September 30, 2022).⁴

While we know that for those who can work, a good paying job with enough hours is the best path to ending hunger, FoodShare is not a jobs program. It is a nutrition program that supports people, providing them with a voucher for food to supplement their income to meet basic adequate nutrition. We also know that mandating work requirements, especially as we are still recovering from the pandemic, does not address the real challenges that many of our neighbors face when trying to engage with the labor and training market, such as access to affordable, quality childcare and transportation.

For the ABWADs who are out of work, many are often dealing with some of the hardest circumstances in life, such as chronic homelessness, undiagnosed medical conditions, or mental disorders. These circumstances make them extremely hard to reach with services.

While the economy may be recovering now, this legislation would eliminate the Governor's authority to respond to tough economic times and would eliminate any ability to temper the effects of a new recession or economic downturn in any part of the state. We need to ensure that when the next crisis hits and many people suddenly find themselves out of work, not working enough hours, or living in a community where good jobs are no longer available, that FoodShare is available to provide the nutrition individuals need to get back on their feet and lead a healthy and productive lives.

Drug Testing Requirement for FoodShare eligibility

This bill will also make drug testing a requirement for FoodShare eligibility. Currently, Wisconsin already tests people with past felony drug convictions as a condition to receive FoodShare benefits, and so this provision is redundant and ineffective in addressing the need for treatment of those addicted to drugs. The proposal to drug test FoodShare applicants creates unnecessary barriers for individuals and state and county administrators in the application process.

Drug testing is expensive. Current estimates of the cost of drug-testing programs range from \$92,500 to \$20 million.⁵ The cost does not include additional administrative costs for worker time, increased ABAWD visits to the welfare offices, scheduling, collecting, and processing drug screens and tests. A reduction in caseloads that states expect to occur upon implementation of drug-testing does not necessarily produce a net savings for states.⁶

When Governor Walker's proposed drug testing of SNAP applicants and recipients, his administration estimated that a small fraction of the program's applicants, about 220, or 0.3 percent, of the 67,400 ABAWDs at that time, would actually test positive. Given the average current benefit amount of \$263, with these estimated 220 individuals no longer receiving benefits, that would be a benefit savings of \$44,660. The math just doesn't make sense.

Drug testing is inaccurate because urine screens cannot distinguish between the use of illegal drugs and

⁴ <https://www.dhs.wisconsin.gov/dms/memos/ops/21-21.pdf>

⁵ U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation. (2011). *Drug testing welfare recipients: Recent proposals and continuing controversies*. Retrieved from <http://aspe.hhs.gov/hsp/11/DrugTesting/ib.pdf>

⁶ *Ibid.*

the legitimate use of certain prescriptions and over-the-counter medications.⁷

Drug testing is difficult to implement because it requires additional staff time to administer the tests, and to monitor compliance and eligibility.¹¹ It also requires modifying facilities to accommodate the testing, and modifying computer programs to include drug testing in the eligibility process, all of which increase costs to the states, which are not included in the standard price of the drug test.⁸

Drug testing increases government inefficiency because drug testing requirements complicate application forms and procedures and lengthen the eligibility process in public offices where case backlogs already exist.

Drug testing is currently illegal under federal law. Drug testing as a requirement for SNAP is only permissible when a state opts to allow those with certain drug felony convictions to receive SNAP benefits, in which case the state may impose certain restrictions, such as a drug test, upon those applicants. Currently, Wisconsin already tests people with past felony drug convictions as a condition to receive FoodShare benefits. Drug testing other FoodShare applicants is not allowed under federal law and is, therefore, illegal. This is because federal law does not permit states, except under the limited circumstance noted above, to add a requirement to the eligibility screening for SNAP benefits.⁹

Drug testing prevents eligible families from seeking public assistance because they are deterred by the stigma of taking a drug test. In states where TANF applicants are required to pay for their own drug tests, the cost could be prohibitive and many people may not apply for benefits simply because they cannot afford it.¹³ In many states, the real result of drug testing is that individuals drop out of the program not because of a positive drug test, but due to failure to take the test in the first place. In Utah, 25% of individuals did not take a drug test. The lack of transportation, funds to pay for a test, notification issues (e.g. failure to receive notice and reach transient populations) and personal objections to a drug test all contributed to citizens losing for assistance.

Finally, these proposals perpetuate a negative stereotype of the people who utilize our services, a vast majority of whom are working hard trying to get back on their feet. If you have ever come to one of our food pantry distributions or seen one of our FoodShare outreach specialists helping someone apply for benefits, you would see that those seeking food and benefits for food are hardworking and resilient, and just trying to get some help to weather the hard times in their lives. As many individuals are getting back in the workforce and stabilizing their lives after the hardship brought on by the pandemic, this is no time to push for policy that creates additional barriers to allowing individuals to access the food they need.

Thank you for your time and careful consideration of our position on SB 902. Please do not hesitate to contact me at sdorfman@feedingwi.org or 608-960-4517 if you have any questions.

Sincerely,



Stephanie Jung Dorfman
Executive Director
Feeding Wisconsin

⁷ U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation. (2011). *Drug testing welfare recipients: Recent proposals and continuing controversies*. Retrieved from <http://aspe.hhs.gov/hsp/11/DrugTesting/ib.pdf>

⁸ *Ibid.*

⁹ Food and Nutrition Act of 2008, 7 U.S.C § 2014(b) (2008); Food and Nutrition Service, USDA Certification of Eligible Households, 7 C.F.R. §273.2(a) (2011)