Dear Sir or Madam:

The United States Conference of Catholic Bishops (USCCB), Catholic Charities USA (CCUSA), the National Council of the United States Society of St. Vincent de Paul (SVdP USA), and the Catholic Health Association of the United States (CHA) appreciate the opportunity to provide comments to the United States Department of Agriculture Food and Nutrition Service’s above-referenced notice of proposed rulemaking. Brief descriptions of each group are provided at the end of this document.

The proposed rule changes the methodology for calculating the Standard Utility Allowance (SUA) for the Supplemental Nutrition Assistance Program (SNAP). The SUA is part of the excess shelter deduction that is used to determine the net income of households applying for SNAP. This amount is then used to determine eligibility for the program and the household’s exact benefit amount. We write to urge you to withdraw the proposed rule because it threatens the financial and physical well-being of low-income families and individuals, fails to justify adequately its proposed Heating and Cooling SUA (HCSUA) rates, and undermines SNAP’s statutory purpose, congressional intent, and state flexibility.

The Catholic Church has a rich tradition of social teaching that affirms the right to adequate nutrition as universal and inviolable. “Every man has the right to life, to bodily integrity, and to the means which are suitable for the proper development of life; these are primarily food, clothing, shelter, rest, medical care, and finally the necessary social services.”1 Our society has a corresponding duty to ensure that this right is met and the inherent dignity of the human person is respected. “Therefore, there must be made available to all men everything necessary for leading a life truly human, such as food, clothing, and shelter.”2 The Catholic Bishops in the United States have echoed this message: “Welfare programs should provide recipients with adequate levels of support. This support should cover basic needs in food, clothing, shelter, health care, and other essentials.”3

In accordance with these teachings, we support SNAP and express deep concern over any changes that reduce nutrition assistance to those in need.

1) The proposed rule threatens the physical well-being of low-income families and individuals.

Hunger is a real problem in our country. Last year, 11.1 percent of households experienced food insecurity.4 Among people over the age of 65, 9.7 percent – 5.1 million people – lived in poverty, while even more senior households faced marginal food security.5 Too many children do not have consistent access to enough food for an active, healthy life with more than 1 in 7 children – 11.2 million – living in food-insecure households.6 SNAP is an effective program to address this reality and the first line of defense against hunger for those struggling to make ends meet. It aims to improve food security by providing consistent, adequate access to enough food to support an active, healthy life.7 Last year alone, SNAP served 40.3 million people.8 In FY 2017, approximately 5 million SNAP recipient households included at least one person age 60 or older and approximately 8.6 million SNAP households included children.9 The Department of Agriculture (USDA) estimates the proposed rule will reduce SNAP funding by approximately $4.5 billion over five years,10 weakening the program and putting even more households at risk of experiencing food insecurity. This change will result in 19 percent of households experiencing a decrease in their benefits and as many as 8,000 households losing benefits. While 16 percent will see a small increase in their benefits11, the rule, as discussed later, fails to explain why it chose a threshold which harms 19 percent of households rather than one which would continue to protect all families and individuals that rely on SNAP to meet their nutrition needs.

The increase in food insecurity as a result of this rule has consequences for individual and community health. Food insecurity has long been identified as one of the major drivers of social determinants of health. Food insecurity among seniors, for example, is linked to poorer diets, chronic conditions such as diabetes, anemia, and poorer quality of life.12 In addition, food insecurity is associated with increased risks of hypertension, coronary heart disease, hepatitis, stroke, cancer, asthma, diabetes, arthritis, chronic obstructive pulmonary disease, and increases in some birth defects. These risks result in higher likelihood of hospitalization and poor overall health.13 As a consequence, the greater demand on health care services increases health care costs for all people while compelling health care providers to direct resources to addressing the negative health outcomes which result when people are food insecure. In addition, participation in SNAP has shown to lead to a population-wide reduction in mortality by 1-2 percent.14 The proposed rule would have the greatest impact on

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6 Coleman-Jensen et al., supra note 4, at 6-9.
7 Id. at 1.
11 Id. at 1-2.
households that include people who are elderly or have a disability.\textsuperscript{15} Given the medical vulnerability of these individuals, it is especially concerning that they would be disproportionately impacted by the proposed rule.

\textbf{2) The proposed rule threatens the financial well-being of low-income families and individuals.}

The proposed rule makes it more difficult for families and individuals to afford both food and utility payments. SNAP benefit amounts are based on not only the gross income of a household, but also their net income – acknowledging that a family or individual likely has other necessary expenses. If a family spends money on utilities, that money is not available to be spent on food. The proposed changes to how standard utility allowances are calculated will have real effects on household budgets, forcing trade-offs between food, utilities, and other basic necessities.

SNAP benefits are already insufficient for many individuals and families who rely on them. Approximately 20 to 30 percent of recipient households cannot afford to purchase the Thrifty Food Plan, the official USDA food plan on which the maximum SNAP benefit amount is based.\textsuperscript{16} SNAP recipients report that they fall short $10 to $20 per household member each week as they try to buy enough food to meet their needs. Similarly, researchers estimate that SNAP benefits would need to be at least $11 higher per person per week for a family to afford a nutritious meal plan.\textsuperscript{17} The average cost of a low-income meal across the United States is $2.36, 27 percent higher than the SNAP per meal maximum benefit of $1.86.\textsuperscript{18} Changes to SUA amounts will only exacerbate this strain for those whose benefit amounts are reduced.

Similarly, utility costs, especially heating and cooling, are already unaffordable for many households. Making full and on-time payments for housing or utilities throughout the year is unattainable for 14 to 16 percent of the U.S. population.\textsuperscript{19} This reality is more common for low income families. Households with income under 200 percent of the federal poverty level are more likely to have energy costs that exceed 10 percent of their income, which is defined as a high energy burden.\textsuperscript{20} This reality can largely be attributed to the housing situations of low-income households. These households are more likely to live in older or poorer quality housing with inadequate insulation, requiring more energy to heat and cool. They are also more likely to have inefficient or defective household appliances, or insufficient heating or cooling capacity.\textsuperscript{21} Furthermore, limited budgets make for limited housing choices, making it difficult for families to avoid options that are energy inefficient.\textsuperscript{22} While home improvements may lessen energy burdens, many low-income households rent their homes and

\textsuperscript{15} USDA, FNS, Regulatory Impact Analysis, supra note 10, at 28-29.
\textsuperscript{18} The national cost of a meal is averaged across counties, weighted by the number of SNAP participants in each country in 2015. The per meal maximum benefit amount considers the maximum benefit available to households of varying sizes; Elaine Waxman, et al., The Urban Institute, How Far Do SNAP Benefits Fall Short of Covering the Cost of a Meal? 6 (February 2018) https://www.urban.org/sites/default/files/publication/96661/how_far_do_sna_benefits_fall_short_of_covering_the_cost_of_a_meal_2.pdf.
\textsuperscript{22} Ariel Drehobi & Lauren Ross, supra note 21, at 10-11.
landlords have little incentive to make energy-efficient improvements if their tenants are ultimately responsible for the home’s utility costs.23

3) The proposed rule fails to explain the choice of its proposed methodology to set the Heating and Cooling Standard Utility Allowance (HCSUA).

   The proposed rule sets the HCSUA, the SUA used by the most SNAP households, at the 80th percentile of utility costs for low-income households in the State, based on national survey data. No explanation is given for why this methodology is chosen or if it accurately reflects the needs or circumstances of SNAP households. This approach is not proven to be preferable to the methodology currently used by any of the states. While the proposed rule cites the data and recommendations of a 2017 USDA study, *Methods to Standardize State Standard Utility Allowances*, it fails to justify its decision to set the HCSUA at the 80th percentile. In fact, the study specifically states that “further research is needed” to understand the justifications used by states that have SUAs higher than the proposed cap. For example, states may have set their HCSUA to reflect higher utility costs faced by some households.24 The fact that at least 21 states have set their SUA at a level above that of the proposed rule is significant and does deserve further research and analysis. The proposed rule’s choice to set the SUA at the 80th percentile of the survey data appears arbitrary. The Department could just as easily set SUA levels at the 85th, 90th or 99th percentile. The methodology prescribed is a race to the bottom, adopting a SUA below the actual costs of actual utility expenses.

4) The proposed rule undermines the statutory purpose of SNAP, congressional intent, and state flexibility.

   SNAP was created “in order to promote the general welfare, to safeguard the health and well-being of the Nation’s population by raising levels of nutrition among low-income households…. [SNAP] will permit low-income households to obtain a more nutritious diet through normal channels of trade by increasing food purchasing power for all eligible households who apply for participation.”25 Lowering SNAP benefit amounts for large numbers of participants in the name of standardization does not promote SNAP’s statutory purpose. Instead, the proposed rule threatens the general welfare and health of households in need.

   In recent years, Congress has analyzed many reforms to nutrition assistance programs, especially during the debate on the Agriculture Improvement Act of 2018. In this comprehensive legislation, Congress did not choose to enact reforms to SNAP that addressed standard utility allowances set by states. We can infer that Congress did not intend to address this issue in their own efforts to improve the program. The Department’s decision to pursue changes to SNAP benefit amounts through the administrative regulatory process instead of working with Congress is concerning.

   Currently, the USDA provides flexibility to states to set their own SUA based on local experience and expertise. “States may develop their own SUAs in accordance with criteria set forth in 7 CFR 273.9(d)(6)(iii). States are not required to use a particular methodology when developing SUAs under current program rules. States must update SUAs annually, but are not directed to use particular data sources, and can revise their methodology at any time so long as they receive FNS approval.”26 Under the proposed rule, the USDA restricts this flexibility by prescribing the SUA for each state based on a standard methodology. We are concerned that

23 Anne Ray, et al., *supra* note 20, at 611.
the proposed change will reduce subsidiarity and fail to adequately respond to the unique circumstances and needs of SNAP households in each state. The insights and processes of states should be valued and considered, and the principle of subsidiarity must be respected. As Catholic teaching tells us, “experience shows that the denial of subsidiarity, or its limitation in the name of an alleged democratization or equality of all members of society, limits and sometimes even destroys the spirit of freedom and initiative.”

**Conclusion**

While we have deep concerns over the impact and lack of analysis for setting the SUA, we welcome the Department’s proposal to amend the list of allowable utility expenses to include the cost of basic internet service. As stated in the rule, access to internet services is increasingly necessary for school, work and looking for employment.

The current proposed rule will reduce investment in a vital nutrition assistance program which serves those at risk of food insecurity. It is the third action this year that aims to make substantive changes to SNAP that would negatively impact the program and its recipients. In light of our commitment to the right to life and therefore the right to adequate nutrition, we urge you to withdraw the proposed rule and halt similar actions that would harm nutrition assistance. Thank you for the opportunity to share our comments.

Respectfully submitted,

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USCCB Overview

The U.S. Conference of Catholic Bishops (USCCB) is a nonprofit corporation whose members are the active Catholic Bishops of the United States. USCCB advocates and promotes the pastoral teachings of the U.S. Catholic Bishops in diverse areas of the nation’s life. USCCB’s Committee on Domestic Justice and Human Development assists the bishops in advancing the social mission of the Church through policy advocacy, education, and outreach in support of the Church’s anti-poverty efforts. Catholic schools comprise the nation’s largest private K-12 educator, with almost 6,300 schools educating nearly 1.8 million children in the United States today.

CCUSA Overview

CCUSA is a national membership organization representing more than 167 diocesan Catholic Charities member and affiliate agencies. These member agencies operate more than 3,000 service locations across the 50 states and five U.S. territories. The diverse array of social services offered by agencies reached more than 10 million individuals in need last year almost half of whom came in need of food and nutrition assistance.

CCUSA believes that access to food is a fundamental human right and basic need. While Catholic Charities agencies across the country provide critical services to those struggling to make ends meet, federal assistance programs such as the Supplemental Nutrition Assistance Program are crucial to ensuring that all individuals in need have access to adequate food. Federal nutrition programs deliver more than 10 times the amount of food assistance as charitable sources. Catholic Charities agencies across the country provide food assistance to more than 5 million people per year.

SVdP USA Overview

The Society of St. Vincent de Paul is a national network of more than 98,000 volunteers committed to growing in holiness and building a more just world through personal relationships with and service to people in need. In 2017, Vincentians in over 4,400 communities served 5.4 million people with over $3.4 billion in cash, in kind, and volunteer services combined, including over $88 million in food assistance.

CHA Overview

The Catholic Health Association of the United States is the national leadership organization of the Catholic health ministry, constituting the largest not-for-profit provider of health care services in the nation. The Catholic health ministry includes more than 2,200 hospitals, nursing homes, long-term care facilities, health care systems, sponsors, and related organizations serving the full continuum of health care across our nation.