



Changes to SNAP Under HR 1 and the Implications for Food Insecurity

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Last year was tumultuous for the Supplemental Nutrition Assistance Program (SNAP), the nation's largest antihunger program that serves more than 40 million individuals each month—70% of whom are older adults, disabled individuals, or children. Major structural changes previewed in a prior article¹ have now taken effect through the budget reconciliation act of 2025 (HR 1), reshaping SNAP in historic ways with likely generational consequences. These changes raise serious questions about the nation's long-standing commitment to reducing hunger.

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Changes to SNAP Through HR 1

The new law (HR 1; Public Law 119-21) introduces major structural shifts, including large benefit cuts, expanded time limits, and increased financial responsibility for the states. Together, these changes are expected to cause millions of people to lose all or part of their SNAP benefits.

The law reduces SNAP spending by roughly \$187 billion through 2034—a 20% cut and the largest reduction in the program's history. It also requires future Thrifty Food Plan updates to be cost-neutral, preventing SNAP from keeping pace with food costs and updated dietary guidelines. Beginning November 1, 2025, expanded time limits require adults to work at least 80 hours per month or face a 3-month time limit within 3 years. These rules will newly apply to adults aged 55 to 64 years without dependents, parents or caregivers of adolescents aged 14 years or older, and previously exempt groups that includes veterans, people experiencing homelessness, and youth aging out of foster care. For example, a single mother working part-time so she can take care of her 15-year-old adolescent will lose her own eligibility and reduce her household's monthly food assistance from \$546 to \$298.

States must implement these complex changes on a compressed timeline while receiving less federal technical assistance because the Trump administration reduced the workforce of the Food and Nutrition Service, the agency that administers SNAP.² These changes require major system upgrades and increased administrative capacity, heightening the risk for implementation errors and higher administrative costs. The new law also eliminates the long-standing "insufficient jobs" waiver, which allowed states to temporarily exempt certain adults (able-bodied adults without dependents) from strict work requirements. These adults were allowed to receive SNAP longer than the usual 3-month limit if they lived in areas with high unemployment or a lack of available work. The law leaves in place a narrow statewide unemployment threshold of 10%, which is a level no state currently meets, leaving states unable to provide assistance to individuals living in areas with weak labor markets. The Congressional Budget Office estimates that these changes will reduce SNAP participation by 2.4 million people.

The law shifts substantial costs to the states. Beginning in fiscal year 2027, the states must pay 75% of administrative costs, up from 50%. Starting in fiscal year 2028, states will (for the very first time) pay a share of benefits ranging from 5% to 15% based on their payment error rates. States with error rates above 6% could face hundreds of millions in unplanned costs, creating pressure to scale back eligibility or even exit SNAP. For example, North Carolina's error rate was 10.2% in fiscal year 2024 and the state received \$2.9 billion in annual SNAP benefits, which would translate into roughly \$440 million owed. Although this cost sharing begins later, first-year penalties will be based on error

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rates for fiscal years 2025 or 2026, exposing states to penalties for past mistakes or those arising during the rushed rollout of the time limits.

The law also [eliminates an important administrative simplification](#) for most households—a policy that allowed participants in the Low Income Home Energy Assistance Program to automatically qualify for the standard utility allowance, which is a fixed amount for utility costs that increases SNAP benefits. As a result, households without older adults or a disabled household member must now provide documentation of high utility costs to receive the standard utility allowance. In addition, the law eliminated funding for [SNAP Education](#) (SNAP-Ed; the nation's largest federal nutrition education program), which supports SNAP-eligible households in learning how to eat well on a limited budget. The bill also restricts SNAP access for several categories of humanitarian lawfully present immigrants, including refugees and people granted asylum. Undocumented immigrants remain ineligible for SNAP.

Implications for Beneficiaries

Cuts of this scale are very likely to increase food insecurity, which is associated with numerous poor health outcomes such as cardiovascular disease, obesity, type 2 diabetes, hypertension, a higher risk of birth defects, cognitive impairment, and mental illness,^{3,4} and are likely to widen existing disparities.^{5,6} Reduced access to SNAP benefits is also likely to raise health care costs, given that food insecurity conditions related to health and education already cost an estimated [\\$179 billion annually](#), and because SNAP participants typically spend \$1400 less per year on health care than similar nonparticipants.⁷

Loss of SNAP benefits can also [disrupt access to other federal safety net programs](#) (such as free school meals; money for eligible children to buy food during the summer months [SUN Bucks]; the Special Supplemental Nutrition Program for Women, Infants, and Children; and Head Start) because children in SNAP households [automatically qualify](#) or are eligible for streamlined enrollment application processes.⁸

These challenges may be intensified by cuts to Medicaid under HR 1. Nearly [\\$1 trillion](#) in projected Medicaid reductions are expected to increase the number of uninsured individuals in the US by more than [10 million](#) over the next decade. Because most SNAP participants are also [enrolled in Medicaid](#), losing health coverage could also trigger the loss of nutrition assistance for many of the same individuals.

Monitoring the effects of HR 1 will be more difficult because the US Department of Agriculture has [discontinued](#) the Food Security Supplement, eliminating the nation's primary tool for tracking food insecurity. Without these data, policymakers may rely more heavily on program costs or error rates—metrics that could be used to justify further cuts in the future. The loss of this annual, nationally representative dataset removes a key benchmark for assessing state-level and subgroup effects and whether federal administrative changes are alleviating or [exacerbating hardship](#).

Call to Action

Given the sweeping policy changes to SNAP and other major basic needs programs under HR 1, public confusion is high. Health professionals can help mitigate the effects by supporting enrollment among all eligible patients, explaining the time limit requirements, and assisting individuals (particularly those with undiagnosed or undocumented disabilities) in securing exemptions. By helping patients identify qualifying conditions, submit appropriate documentation, or connect to alternative support programs when benefits are lost, clinicians play a critical role in preventing unnecessary interruptions in access to nutrition assistance. Health care professionals can also help fill the gap left by the elimination of SNAP-Ed through stronger nutrition counseling. Recent federal efforts to [integrate nutrition education into health-related training programs](#) are a promising step. Hospitals, for their

part, can strengthen access to healthy foods by adopting procurement practices that improve the nutritional quality of the foods and beverages they offer.

Researchers should explore opportunities to leverage existing data for secondary analyses that monitor and document the effects of these policies. The SNAP food choice restriction waivers, which took effect in a handful of states in [January 2026](#), represent an area for study. Once findings emerge, researchers should prioritize communicating results clearly and promptly to policymakers.

Conclusions

As the full effects of HR 1 unfold, the stakes for the health and well-being of low-income families could not be higher. The sweeping changes to SNAP and other safety net programs risk widening long-standing [inequities](#) in food security. Sustained engagement from clinicians, researchers, and health systems (both to reduce confusion and support enrollment among all who are eligible) along with rigorous analyses that clearly document the effects of the law will be essential in the months and years ahead.

ARTICLE INFORMATION

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