



Protecting Access to Food, Housing, and Health Care for People Living with HIV

Economic Justice Factsheet

Our vision

We work for a future where women living with HIV face no negative employment or economic consequences related to health status, gender or gender expression, family responsibilities, race or ethnicity, and where we are fully supported and prepared to participate in the workforce in ways we choose.

What is the “social safety net”?

Women living with HIV in the U.S. tend to be disproportionately low-income, for a variety of reasons. Public programs that provide access to essentials like housing, food, and health care (often called the “social safety net”) are critical supports for low-income women living with HIV.

The social safety net refers to a vast array of publicly funded programs and services that aim to ensure people can meet their basic human needs. “Net” is an appropriate metaphor: the social safety net is intended to catch people when they fall on hard times. In the U.S., that safety net is full of holes.

A robust social safety net can reduce food insufficiency and unmet medical needs, advance racial and gender equity, and help lift people out of poverty.

What are Medicaid and SNAP?

Medicaid and the Supplemental Nutrition Assistance Program (SNAP) are two programs that are especially important for people living with HIV. Medicaid is the single largest payer of health care for people with HIV, and it’s estimated that more than 40% of those living with HIV rely on Medicaid. PWN-USA member data consistently show that somewhere between 40-50% of our members--women and people of trans experience living with HIV--depend on SNAP to feed themselves and their families.

Medicaid ensures health care coverage for millions of people with low incomes in the U.S., many of whom otherwise could not afford coverage. It is a state-federal partnership: the federal government sets minimum eligibility and benefits requirements, and each state administers their program flexibly within those guidelines.

SNAP, otherwise known as food stamps, provides food assistance for 42 million people living near or below the poverty line. It is an essential program that helps fight food insecurity; improves health, wellbeing, and academic success; and lifts people out of poverty. SNAP has cruel requirements that make it less effective, such as limiting people to just three months of food assistance in a 3-year period if they cannot find enough work. However, states with high enough poverty rates have the option of waiving the time limit to protect access to food in areas where jobs are difficult to find.

Current State of Play: Destruction of Essential Supports

Severely restrictive income eligibility criteria require people to stay poor to access essential programs needed to get by. Lawmakers in at least 25 states have tried to impose work or drug testing requirements, time limits, enrollment caps, and restrictions based on immigration status to stop essential programs from reaching those who most need them. As a result, more than one quarter of people living in deep poverty (with incomes below 50% of the federal poverty line) are not connected to major federal safety net programs.

The current administration encourages policies that withhold essential benefits, like housing, health care, and food assistance, from people who don’t meet or can’t prove meeting work requirements, which require that otherwise eligible people show that they have worked an arbitrary number of hours. There is little evidence that work requirements increase employment or reduce poverty, but ample evidence that they cause people to lose access to critical supports, which itself makes it harder to work. There are many reasons that people cannot work as much as required, including personal or family challenges (like physical or mental health issues), homelessness, lack of child care or transportation, unstable or reduced work hours, or lack of paid time off. Even those who do meet the work requirement can lose benefits because of the increased paperwork involved in reporting work or claiming exemptions properly.

SNAP and state Medicaid programs have been repeat work requirement offenders. HHS has approved Medicaid work requirements in eight states and seven more have applications pending. Medicaid work requirements increase coverage gaps, reversing progress made under the ACA, and in some states, like Alabama, would be a cruel catch 22. A parent or caretaker who works enough to satisfy the work requirement would automatically earn too much to qualify for Medicaid. SNAP has a work requirement built in, and 17 states do not have a waiver to lessen the impact of the program’s harsh unemployment disqualification policy. Six of those states also refuse to extend eligibility (beyond 3 months) to the 15% of people who would otherwise be disqualified because of the work requirement -- an option allowed under federal law.

Policy recommendations

Restrictions designed to limit access to critical programs are based on a combination of judgment of who is deserving of help and a fundamental (often racist, sexist) misunderstanding of the causes of poverty. Instead of vindictive lifetime bans, funding cuts, work requirements, or drug-testing requirements, people with HIV need policies designed to support us in living with health and dignity.

At the federal level:

- 1. Integrate Puerto Rico and other U.S. territories into SNAP.** Puerto Rico, Northern Mariana Islands and American Samoa all receive nutrition assistance block grants in lieu of SNAP. Unlike SNAP, whose funding responds to need, nutrition assistance block grants available are capped, and the territories must tighten eligibility and benefits when need and inflation outstrip funding. On average, for example, food stamp benefits in Puerto Rico are about 40% smaller than those in the states. We support the Equitable Nutrition Assistance for the Territories Act of 2019, which Senator Sanders and Representative Velazquez introduced to address this problem and bring Puerto Rico and other U.S. territories into SNAP.
- 2. Oppose any cuts to housing, food, or health care programs.** The current administration is waging an unprecedented war on poor people and people of color. They have repeatedly pushed harmful, stigmatizing restrictions to programs like SNAP and Medicaid and proposed budgets that target these programs for drastic cuts. We actively oppose any attempts to cut or restrict funding for programs that provide low-income people living with HIV with assistance in accessing food, health care, or housing.
- 3. Repeal or reject work requirements and drug testing in SNAP and Medicaid.** If Medicaid work requirements went into effect nationwide, between 1.4 and 4 million people are estimated to lose coverage. The federal government should reject any state request that would make it more difficult to remain eligible for programs and rescind administrative proposals that do the same. Congress can and should repeal existing SNAP work requirements and prohibit states from enacting similar barriers to accessing essential health care and food programs like Medicaid and SNAP.
- 4. Eliminate the federal benefits ban for people convicted of drug felonies.** Individuals navigating the aftermath and trauma of incarceration are excluded from federal programs that may support their economic security and successful reentry. The lifetime ban on essential federal benefits, including but not limited to SNAP, should be repealed and states should make use of the option to remove or change the federal lifetime benefits ban for people convicted of drug felonies.

At the state level:

- 1. Eliminate work requirements on Medicaid and other essential programs.**
- 2. Support and use avenues that extend SNAP coverage to more people.** States that meet certain requirements can request waivers to exempt themselves from SNAP work requirements. Eligible states can and should make full use of those waivers.
- 3. Oppose any policy that conditions access to social safety net programs on drug testing:** The current administration has encouraged wider use of drug tests in essential programs, and multiple states have taken them up on the suggestion, proposing conditioning SNAP and Medicaid eligibility on drug tests. The practice of drug testing is racist, classist, a waste of money, and risks keeping people who use drugs from accessing the support and financial stability they need.

Find more information about economic justice for people living with HIV at pwn-usa.org/economic-justice.

Learn more about these programs:

- If you're a person living with HIV who needs help accessing benefits:**
The Well Project: www.thewellproject.org/hiv-information/public-benefits-and-hiv-us
- To learn more about economic justice as a policy priority:**
Positive Women's Network - USA: pwn-usa.org/economic-justice
- To learn more about the social safety net generally:**
Center for Budget and Policy Priorities: www.cbpp.org/research/poverty-and-inequality/impact-of-the-safety-net-state-fact-sheets-data-sources-and
- For updates on safety net programs:** *Center for Law and Social Policy:* www.clasp.org/issues/income-and-work-supports; and *Coalition on Human Needs:* www.chn.org/human-needs-report/
- For updates on Medicaid waivers:** *Kaiser Family Foundation:* www.kff.org/medicaid/issue-brief/medicaid-waiver-tracker-approved-and-pending-section-1115-waivers-by-state/

For more resources related to the social safety net and economic justice, view this factsheet on our website at pwn-usa.org/economic-justice-factsheet.