



New York State Comptroller
THOMAS P. DiNAPOLI



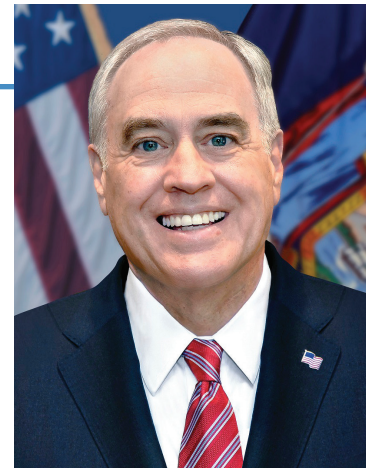
New Yorkers in Need

Food Insecurity and Nutritional
Assistance Programs

March 2023

Message from the Comptroller

Millions of New Yorkers face daily challenges as a result of living at or near the federal poverty level, resulting in painful choices related to basic needs such as shelter, health care, food and transportation. Often, the result is hunger or food insecurity, which is uncertainty or inability to get enough food because of a lack of resources. The consequences can be devastating, from increased incidence of chronic disease and other health effects to reduced academic performance to an inability to succeed at the workplace.



Over time, federal policy actions bolstered by State and philanthropic efforts have contributed to improvements in the rate of food insecurity. Reflecting improving economic conditions and supported by the federal Supplemental Nutrition Assistance Program (SNAP) and other efforts, the rate of food insecurity in New York declined by over 16 percent between 2008-2010 and 2017-2019. And despite the economic disruptions of COVID, federal and State policy actions reduced food insecurity by nearly 5 percent more from 2017-19 to 2019-2021.

While that progress is encouraging, roughly one in ten—or about 800,000—households in New York continue to suffer from food insecurity. More recently, rising food costs have placed additional pressure on household budgets just as pandemic-era relief programs have lapsed.

This report is the second in the “New Yorkers in Need” series. It details recent trends in food insecurity, explains policy interventions by the federal and State governments, and demonstrates a clear need for a continuing commitment to reduce the incidence of food insecurity. While income is a critical factor in determining food insecurity, there are many other challenges that can present barriers to accessing healthy food. Federal and State leaders must make efforts to address these challenges to continue to make progress in reducing food insecurity and improve the lives and productivity of millions of New Yorkers.

Thomas P. DiNapoli
State Comptroller

Executive Summary

The U.S. Department of Agriculture (USDA) defines food insecurity as inability at times to acquire adequate food for one or more household members due to a lack of resources. Research indicates food insecurity can affect health and mental health outcomes, academic performance, and workforce productivity.

During the three-year period of 2019-21, approximately one in ten (or about 800,000) New York households experienced food insecurity, 4.1 percentage points lower than the peak of 14.4 percent recorded in the 2012-2014 period. Food insecurity in New York and nationwide has continued trending downward even through the COVID pandemic due to temporary pandemic relief programs that enhanced income, such as economic impact payments and expansion of the federal Child Tax Credit, and others that increased assistance available through federal nutrition programs. In addition, the State expanded its funding for food programs through initiatives such as the Nourish New York program.

However, food insecurity may once again be on the rise, as pandemic income supports have lapsed and food prices have experienced rapid inflationary increases. Census survey data indicate growing numbers of New Yorkers are reporting they do not have enough food to eat (“food insufficiency”). In the summer of 2021, 7.3 percent of New Yorkers reported food insufficiency; by November 2022, that rate grew to 10.8 percent of New Yorkers. Rates for households with children increased to 13.4 percent.

As of December 2022, nearly 2.9 million New York households were enrolled in the Supplemental Nutrition Assistance Program (SNAP), the nation’s largest domestic food and nutrition program. Federal legislation authorized the issuance of emergency allotments of supplemental SNAP benefits to households not receiving the maximum benefit for the household’s size, but these benefits will cease beginning on March 1, 2023. Increased benefits provided by the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) will cease starting October 2023. Food insecurity could grow further when these allotments end, and when other temporary flexibilities and program expansions that have supported many households during the pandemic expire.

The report makes six recommendations:

- 1. Renew the Federal Child Tax Credit Expansion.** Recipients of the enhanced federal Child Tax Credit reported greater declines in food insecurity than non-recipients, underscoring the interrelatedness of social safety net policies. Federal Child Tax Credit enhancements should be renewed so meaningful reductions in poverty can continue and stress on household budgets is alleviated.
- 2. Implement the White House Strategy on Hunger, Nutrition and Health.** The White House has released a national strategy with a goal of cutting food insecurity in half and virtually eliminating the number of U.S. households experiencing hunger by 2030. The Strategy calls for efforts to improve food access and affordability, facilitate ease of access to benefits, prioritize nutrition, and strengthen federal assistance programs.
- 3. Implement Further Expansions to SNAP and WIC.** Recent Congressional action to create a permanent summer food program for eligible children starting in 2024 is a notable advancement. The federal government should also extend temporary benefits related to SNAP and WIC until inflation's impact on food costs subsides. Furthermore, eligibility levels for SNAP and WIC should be increased to at least 200 percent of the federal poverty level.
- 4. Improve Outreach and Access.** State agencies should ramp up outreach activities to increase participation in SNAP and WIC, and make it easier to apply and recertify.
- 5. Promote State Nutritional Programs.** State programs also provide needed nutritional support to New Yorkers in need. The Nourish New York program was created during the pandemic to connect New York agricultural products with food banks serving those experiencing food insecurity. The Executive Budget for State Fiscal Year (SFY) 2023-24 has proposed a \$50 million appropriation for the program in SFY 2023-24. In recent years, Nourish New York has also received funding from the Hunger Prevention and Nutrition Assistance Program (HPNAP), which generally supports emergency food distribution. The Executive Budget has proposed \$34.5 million for HPNAP in SFY 2023-24. These programs should be continued. The prior legislative addition of \$22 million for HPNAP should also be considered for SFY 2023-24.
- 6. Continue to Pursue Innovative Approaches.** The State and federal government should implement innovative approaches to address factors contributing to food and nutrition insecurity, including expansion of medically tailored meals provided by Medicaid, subsidizing the costs of online food delivery and providing incentives to bring grocery stores and healthy food to food deserts.

Trends in Food Insecurity

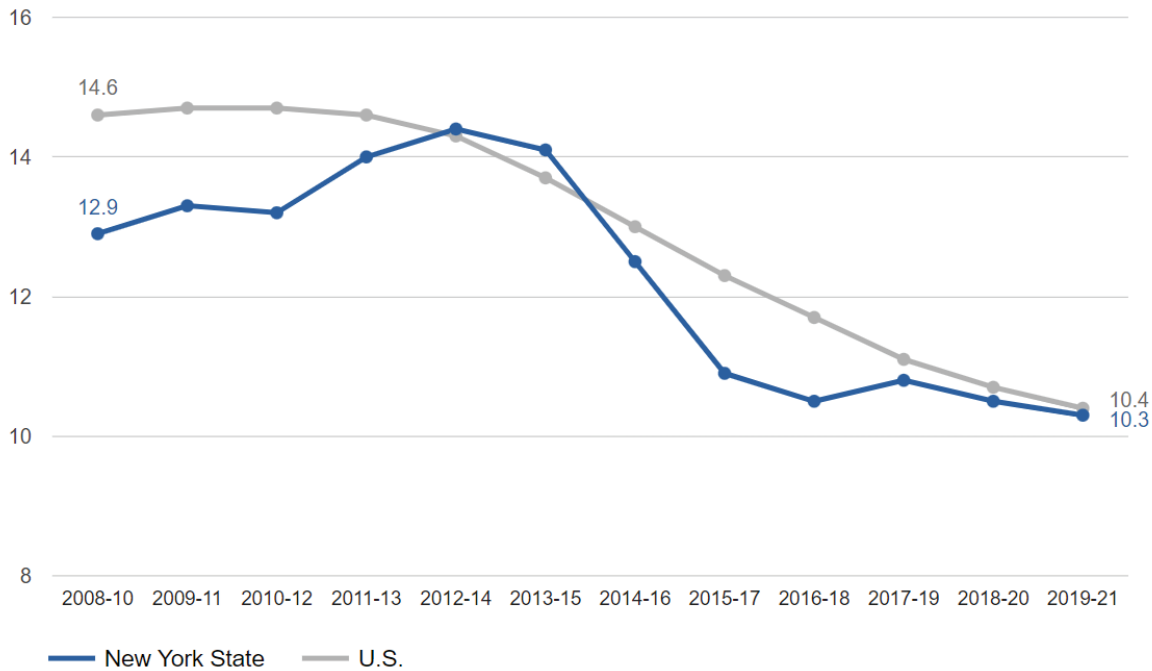
Systematic or chronic lack of access to food is commonly referred to as hunger; however, government definitions center on the concepts of food security and insecurity. The U.S. Department of Agriculture (USDA) defines **food security** as access by household members to enough food for an active, healthy life. It defines **food insecurity** as households unable at times to acquire adequate food for one or more household members because they had insufficient money and other resources for food.¹

The USDA's food security statistics are collected by the U.S. Census Bureau in an annual supplement to the monthly Current Population Survey.² The 2021 Food Security Supplement survey asked one adult respondent per household about experiences and behaviors that indicate food insecurity during calendar year 2021, such as being unable to afford balanced meals, cutting the size of meals, or being hungry because of too little money for food. The food security status of the household was assigned based on the number of food insecure conditions reported.³ The USDA's Economic Research Service (ERS) averages three calendar years of data in order to provide reliable state-level statistics.

In 2019-21, approximately one in ten (or about 800,000) New York households experienced food insecurity.⁴ This rate is 3.0 percentage points (or 22.6 percent) lower than it was 10 years ago and 4.1 percentage points (or 28.5 percent) lower than the peak of 14.4 recorded in the 2012-2014 survey period. Continued economic growth following the Great Recession largely explains the downward trend over this time period.

Since 2014-2016, New York's rates for food insecurity have been consistently lower than national rates, which declined steadily from a high of 14.7 in 2009-11 to 10.4 percent in 2019-21. In the 2019-21 period, New York's rate of food insecurity was 10.3 percent, lower than 21 other states and barely lower than the U.S. average.

FIGURE 1
Rates of Food Insecurity, New York and U.S., 2008-2010–2019-2021



Source: USDA ERS

Food security is strongly associated with income. The USDA’s most recent report (released in September 2022) showed 32.1 percent of households with annual incomes below the official poverty line were food insecure in 2021.⁵ The USDA also reported 2021 national rates of food insecurity were significantly higher than the national average (10.2 percent) for households with children (12.5 percent); households headed by African Americans (19.8 percent) and Hispanics (16.2 percent); women (13.2 percent) and men (12.3 percent) living alone; and households headed by single mothers (24.3 percent) and single fathers (16.2 percent).⁶

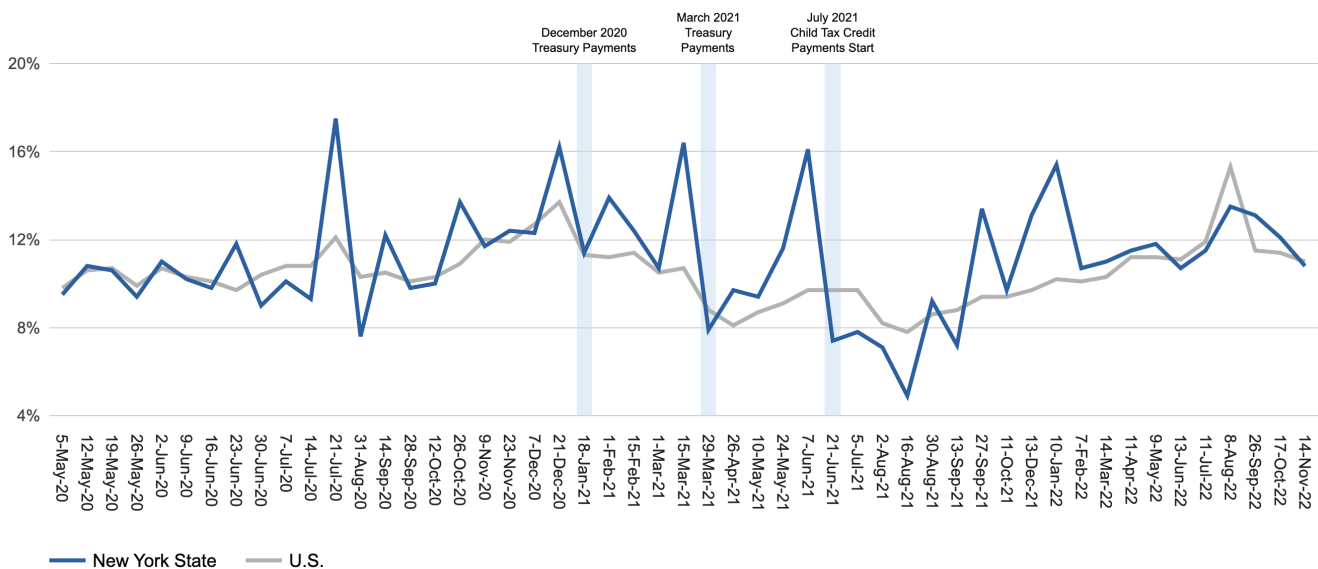
COVID Impact and Response

Even after the onset of the COVID pandemic in early 2020, food insecurity in New York and nationwide continued trending downward. This resulted from a robust federal response to the pandemic, including through three rounds of economic impact payments and temporary expansion of the Child Tax Credit in 2021, and policy changes to federal nutrition programs.

However, food insecurity may once again be on the rise, as pandemic income supports have lapsed and food prices have experienced rapid inflationary increases. More recent data are self-reported by individuals answering the Household Pulse Survey, administered by the U.S. Census Bureau to measure household experiences during the pandemic. The Pulse Survey includes a question about food eaten in the household for the last seven days; respondents may answer that they have sufficient or insufficient food to eat (“food insufficiency”).⁷ In contrast to USDA data on households, Pulse estimates are self-reported by individuals.

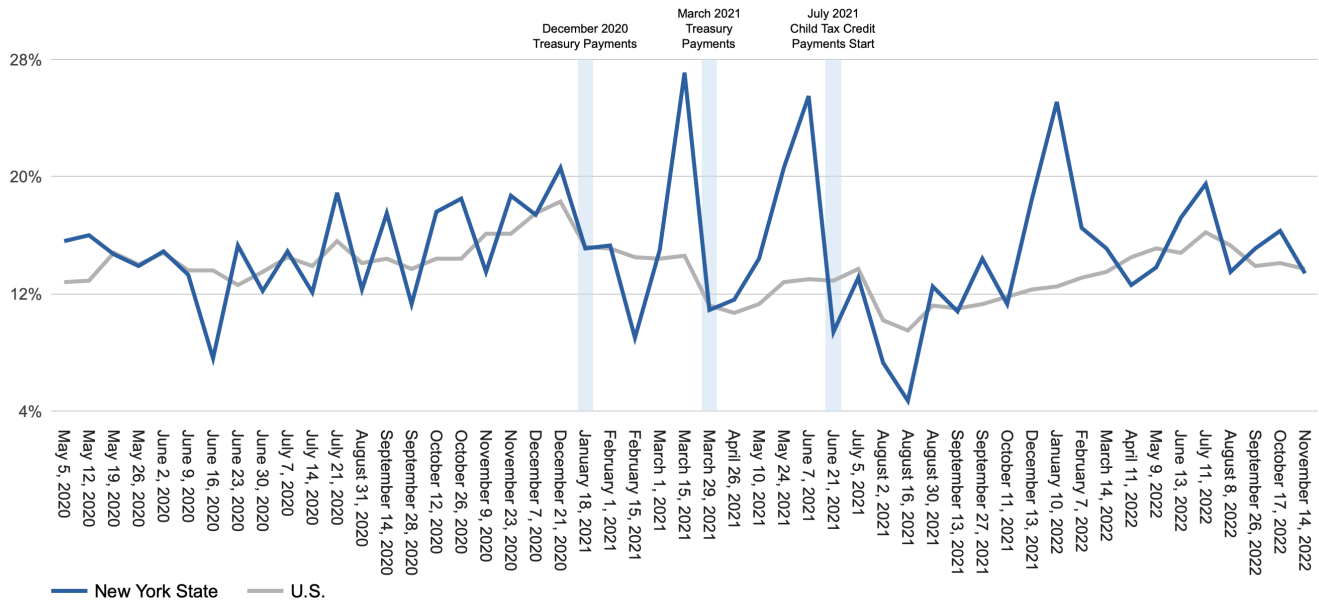
As Figures 2 and 3 indicate, self-reported food insufficiency for New York households has risen since the summer of 2021, from a summer average of 7.3 percent to 10.8 percent by November 2022. Rates for New York households with children are even higher, increasing to 13.4 percent by November 2022.⁸ Nationwide rates are higher: 11 percent for all and 13.7 percent for households with children in November 2022.

FIGURE 2
Share of Adults Reporting Food Insufficiency, New York and U.S., May 2020–November 2022



Source: U.S. Census Bureau, Household Pulse Survey

FIGURE 3
Share of Adults Reporting Food Insecurity, New York and U.S. Households with Children, May 2020–November 2022



Source: U.S. Census Bureau, Household Pulse Survey

In New York, Black and Hispanic or Latino adults were more likely to experience food insecurity over the last two years. The percentage of adult Hispanic or Latino New Yorkers experiencing food insecurity increased from 21.0 percent in 2021 to 22.7 percent in 2022 (through November), while percentages of adult Black New Yorkers who sometimes or often lacked sufficient food increased from 17.2 to 21.9 percent. Percentages of adult White New Yorkers experiencing food insecurity also increased from 2021 to 2022, but only from 5.3 to 6.4 percent. The percentage of all adult New Yorkers experiencing food insecurity increased from 10.5 percent in 2021 to 11.7 percent in 2022.

Economic Impact Payments

The direct relief payments started in March 2020, with payments of up to \$1,200 per adult for eligible individuals and \$500 per qualifying child under age 17 provided by the Coronavirus Aid, Relief, and Economic Security Act (CARES Act). Starting in December 2020, the Tax Relief Act of 2020 authorized additional payments of up to \$600 per adult for eligible individuals and up to \$600 for each qualifying child under age 17. In March 2021, the American Rescue Plan Act provided a third round of payments of up to \$1,400 for eligible individuals or \$2,800 for married couples filing jointly, plus \$1,400 for each qualifying dependent.

Child Tax Credit

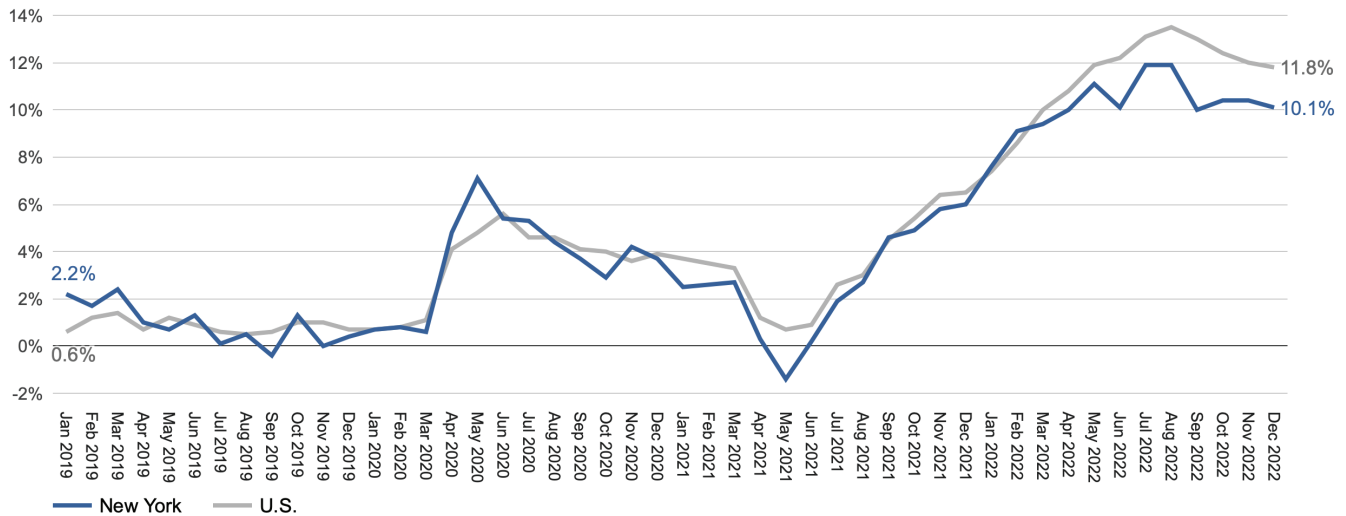
The American Rescue Plan also increased the amount of the federal Child Tax Credit for 2021 from \$2,000 to \$3,600 for qualifying children under age 6, and to \$3,000 for other qualifying children under age 18. Eligible families received the full credit if they earned up to \$150,000 for a married couple or \$112,500 for families with a single parent. In addition, for the first time ever, the American Rescue Plan provided advanced monthly payments of the credit starting in late July through December 2021 that were worth up to one-half of families' estimated full annual credit amount. Families receiving these payments could obtain their remaining federal Child Tax Credit by filling out a tax return in 2022. The credit is not taxable; receiving it does not affect anyone's eligibility for, or lower the amount of, other federal benefits.

Impact of Rising Food Costs

Overall food prices—including the costs of “Food at Home” and “Food away from Home,” presented in Consumer Price Index (CPI) summaries issued by the U.S. Bureau of Labor Statistics—are significantly higher since the spring of 2021, increasing 10.4 percent nationally and 8.6 percent in the New York-Newark-Jersey City area from December 2021 to December 2022, eroding the purchasing power of families.

“Food at Home” prices have risen 11.8 percent nationally and 10.1 percent in the New York-Newark-Jersey City area from December 2021 to December 2022, as shown in Figure 4. In the New York-Newark-Jersey City area, price changes were largest for cereals and bakery products (16.0 percent), other food at home (12.6 percent), fruits and vegetables (11.3 percent), non-alcoholic beverages (9.7 percent) and dairy products (9.4 percent).

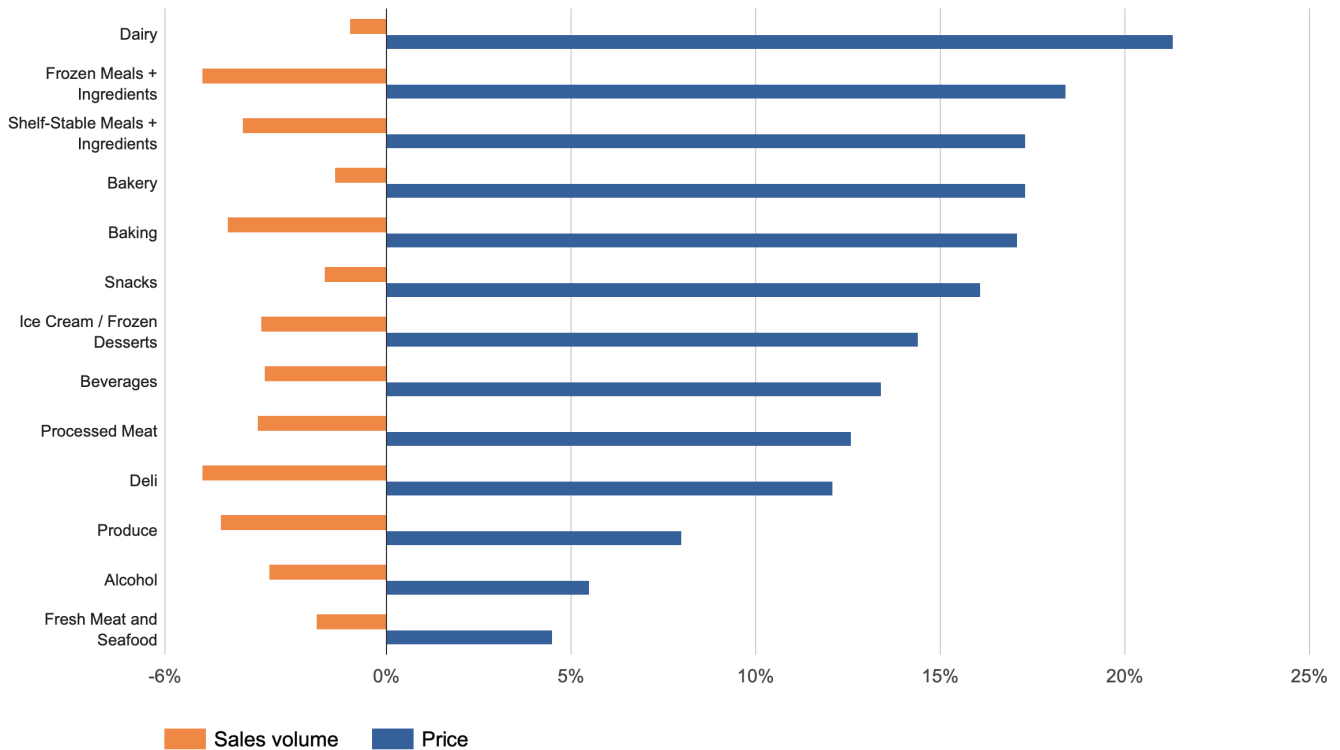
FIGURE 4
Year-Over-Year Increases in Food-at-Home CPI Index, New York Metropolitan Area and U.S., January 2019–December 2022



Source: U.S. Labor Department Bureau of Labor Statistics, Consumer Price Index for All Urban Consumers, unadjusted indexes

As a result of rising food costs, consumers have reduced their consumption of some foods and beverages more than others, according to an October 2022 report on food inflation by Information Resources, Inc. (IRI).⁹ As shown in Figure 5, products with notable decreases in sales volume include frozen meals, deli foods, produce, and baking goods. Despite very high price increases, dairy and bakery items, including essentials like milk and bread, have experienced the least decline in sales volume.

FIGURE 5
Percentage Change in Price and Sales Volume by Food and Beverage Segment, October 2021 – October 2022



Source: IRI®, October 2022 Price Check, Tracking Retail Food and Beverage Inflation, November 1, 2022, available at <https://www.iriworldwide.com/IRI/media/Library/IRI-October-2022-Inflation-Check.pdf>.

High prices are also prompting some households to seek charitable assistance. Survey data published by Long Island Cares, the regional food bank serving Nassau and Suffolk Counties, indicate that approximately 40 percent of respondents worked at least part-time and that more than half of respondents indicated they used food pantries due to the cost of food or inflation. Almost 98 percent of respondents indicated the pantry improved their access to nutritious food.¹⁰

Barriers to Food Access and Nutrition Security

A recent New York Health Foundation survey stated 62 percent of food-insecure individuals reported that transportation is a barrier to obtaining food. These challenges can be acute for those in rural areas or those who are disabled. Almost 40 percent of food-insecure New Yorkers said they had to travel more than 20 minutes each way for food. Reliance on public transportation often limited the number of items that could be brought home.¹¹ In 2019, the USDA's Food Access Research Atlas identified food access concerns in many areas of the State, including in rural counties like Chautauqua, Franklin, Lewis, Steuben and St. Lawrence, but also in or around urban areas.¹² The USDA uses distance from a supermarket or major grocer—half or one mile in an urban region and 10 or 20 miles in a rural area—as a measure for “food deserts” in low-income areas.

Another challenge relates to access to assistance. According to the Urban Institute's 2021 Well-Being and Basic Needs Survey, three in five food-insecure adults who reported not using charitable food services were not aware of resources in their community, and about half of low-income adults surveyed reported feeling uncomfortable seeking assistance if they had a need.¹³

At times, the barrier is not access to food, but access to nutritional food. At times of rising food prices, households may shift their purchases toward more affordable items while simultaneously reducing the nutritional quality of food. Nutrition security is defined as “consistent access, availability, and affordability of foods and beverages that promote well-being and prevent (and if needed, treat) disease.”¹⁴ Nutrition security is less prevalent among traditionally marginalized minority groups, as well as people living in rural and lower-income counties, who are more likely to experience disparities in nutrition quality, food insecurity, and corresponding diet-related diseases such as obesity and type 2 diabetes.¹⁵

The Health Foundation survey underscored the connections between food and health; it found food-insecure New Yorkers are twice as likely to report poor or fair health as their food-secure peers (48 percent compared with 23 percent), 21 percent delay or skip medical care, and 13 percent delay or do not purchase prescription medication.¹⁶ Research shows the impact of hunger and diet-related diseases on overall health, academic achievement, and financial security, as well as societal costs of reduced workforce productivity, weakened national security (one in four young adults cannot qualify for the military due to being overweight or obese), and increasing health care costs.¹⁷ Hungry kids can have problems in school and socially, as they have higher rates of cognitive problems, aggression and anxiety. Food insecurity in adults is correlated with increased rates of mental health problems, diabetes, hypertension, poor sleep and overall poor health.¹⁸

The federal Centers for Medicare & Medicaid Services has authorized state Medicaid programs to test whether coverage of “food is medicine” interventions—including medically tailored meals and groceries, as well as produce prescriptions (fruit and vegetable prescriptions or vouchers provided by medical professionals for people with diet-related diseases or food insecurity)—can effectively treat or prevent diet-related health conditions and reduce food insecurity.¹⁹ As a result, a Department of Health (DOH) pilot program recently allowed eight Medicaid Managed Care plans to offer medically tailored meals as a covered benefit for adults living with severe mental illness in New York City and 13 upstate counties.²⁰ The meals are tailored to the medical needs of the recipients by a Registered Dietitian Nutritionist, and are intended to improve health outcomes, lower cost of care, and increase patient satisfaction, according to DOH.

Nutrition Assistance Programs

Safety net programs to increase food security and help reduce hunger are administered by federal, state and local governments, and supplemented by philanthropic efforts. The State of New York operates several food programs, with disbursements totaling \$163 million in State Fiscal Year (SFY) 2021-22. (See Appendix for details.)

During the pandemic, the State launched two new notable programs: the Restaurant Resiliency Program and the Nourish New York program (Nourish NY). In recognition of the impact of pandemic-related closures on restaurants, the Restaurant Resiliency Program was funded with \$25 million to allow restaurants to work with regional food banks to serve distressed communities. Nourish NY was created in 2020 to re-route surplus agricultural products from New York farmers and dairy manufacturers who lost markets during the pandemic to New Yorkers in need through the State's food banks. In SFYs 2021-22 and 2022-23, at least \$108.1 million has been spent on Nourish NY, including funding provided through the Hunger Prevention and Nutrition Assistance Program (HPNAP), which generally supports emergency food distribution.²¹

The broadest level of support comes from the federal government. The USDA administers 15 federal nutrition assistance programs that serve one in four Americans a year.²² The discussion below focuses on how pandemic-era expansions and flexibilities to federal programs provided critical support to millions of New Yorkers and made meaningful reductions in food insecurity.

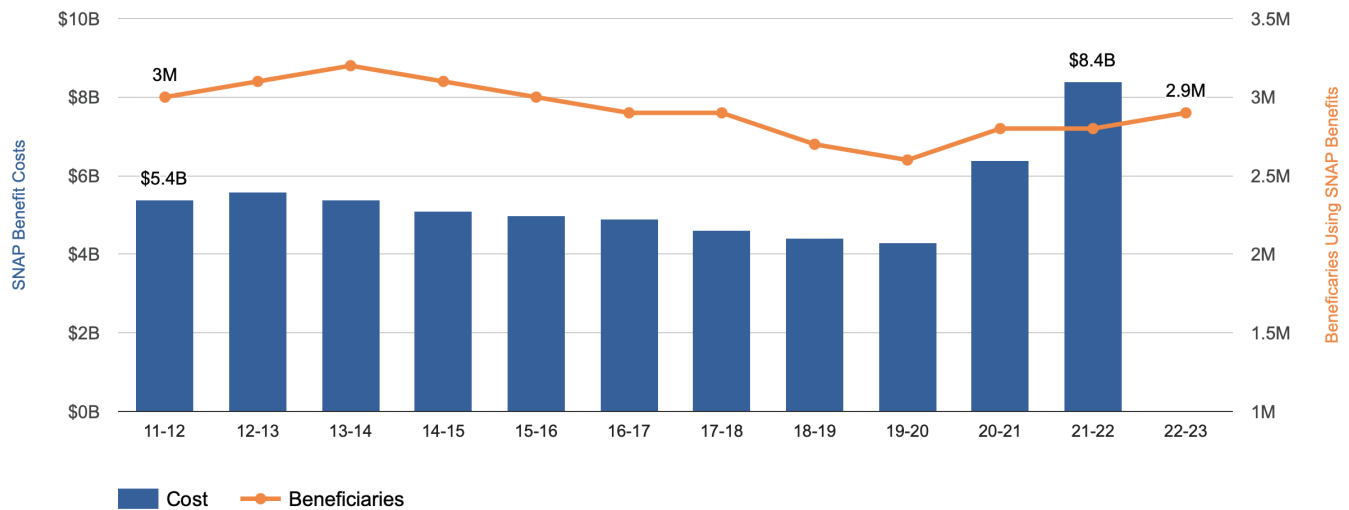
Supplemental Nutrition Assistance Program (SNAP)

SNAP is the nation's largest domestic food and nutrition assistance program for low-income Americans.²³ Research has linked SNAP to improved outcomes not just with respect to food security, but also to health more broadly, thereby resulting in lower health care costs in the long term.²⁴

In most cases, SNAP benefits are intended to supplement a household's food budget, not provide for all required meals in their entirety. Gross monthly income eligibility limits are generally set at 130 percent of the poverty level for households with no elderly or disabled members (for example, \$3,007 for a family of four without earned income).²⁵ In 2019, the last year for which data are available, 89 percent of eligible New Yorkers participated in SNAP; the national SNAP participation rate was 82 percent.²⁶

Until the pandemic, the number of New Yorkers receiving SNAP benefits and the costs of their benefits had been decreasing, as shown in Figure 6. Between SFY 2019-2020 and SFY 2021-22, annual SNAP benefit costs grew from \$4.3 billion to \$8.4 billion. As of December 2022, nearly 2.9 million New York households were enrolled in SNAP.

FIGURE 6
Average Monthly Beneficiaries Using SNAP Benefits and Annual Benefit Costs, New York, SFY 2011-12–SFY 2022-23



Note: The number of beneficiaries for SFY 2022-23 is a 9-month average of usage from April through December 2022. All other beneficiary numbers reflect a 12-month average of usage by State Fiscal Year.

Source: USDA

Much of the recent growth in the State’s SNAP spending reflects federal laws enacted in response to the pandemic that provided temporary increases to SNAP benefits:

- The Families First Coronavirus Response Act (FFCRA), enacted in March 2020, authorized issuance of emergency allotment supplemental benefits to households not receiving the maximum benefit for the household’s size. According to the State Office of Temporary and Disability Assistance (OTDA), New York has issued the supplemental benefits every month since March 2020; however, recent Congressional action ends the emergency allotments after issuance of the February 2023 benefits.²⁷
- The Consolidated Appropriations Act of 2021, enacted in December 2020, funded a 15 percent increase to maximum SNAP benefit amounts for January through June 2021. The increase was extended through September 2021 by the American Rescue Plan Act (ARPA).

Separate from implementation of the federal pandemic response laws, the USDA took action to boost SNAP spending even further.²⁸ The Thrifty Food Plan, the diet used as the basis for the maximum SNAP benefit allotments, was updated, resulting in a 22.8 percent increase in SNAP’s maximum benefit allotments starting in October 2021.²⁹ A further 12.5 percent increase was implemented

on October 1, 2022 to reflect the impact of food inflation from June 2021 to June 2022. As a result, an eligible family of four in the 48 contiguous states and the District of Columbia will receive \$939 per month through September 2023.³⁰

Despite these recent increases, anti-hunger advocates as well as certain elected officials assert SNAP benefits “fall short of the amounts needed for adequate diets.”³¹ Research from the Urban Institute indicates the increase in maximum allotments helped close the gap between maximum SNAP benefits and meal costs for many, but not all, calculating that the new benefit levels continue to fall short in 21 percent of counties nationally (compared to 96 percent prior to the increase).³²

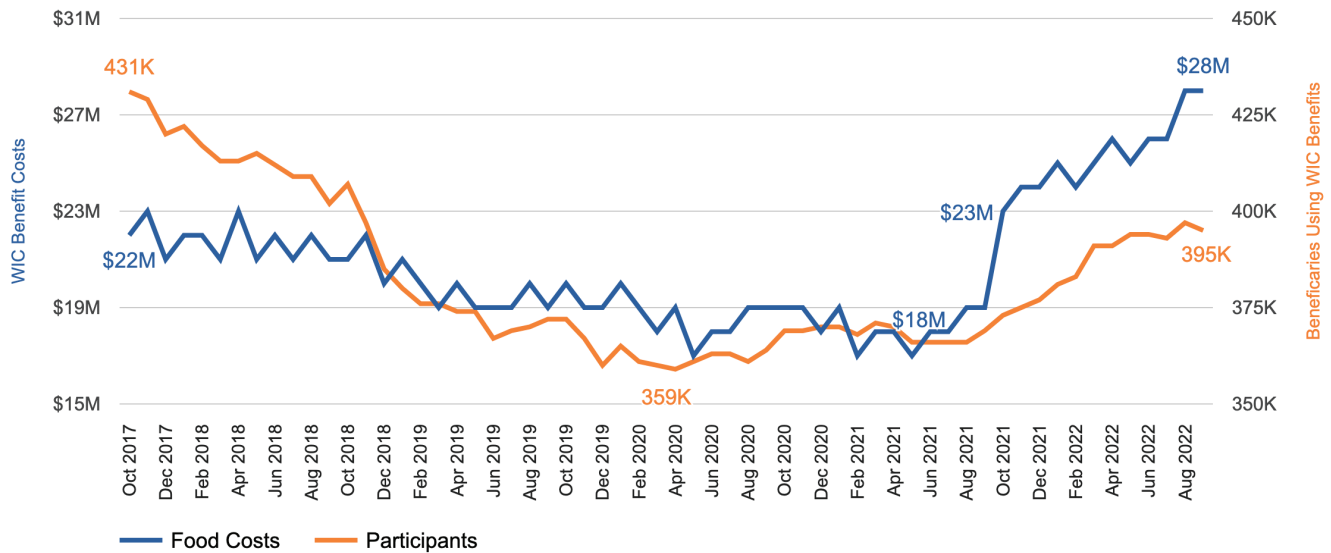
Special Supplemental Nutrition Program for Women, Infants and Children (WIC)

The WIC program, administered at the national and regional levels by the USDA, and at the State level by the New York State Department of Health, is designed to “safeguard the health of low-income pregnant, postpartum, and breastfeeding women, infants, and children up to age 5 who are at nutritional risk by providing nutritious foods to supplement diets, information on healthy eating including breastfeeding promotion and support, and referrals to health care.”³³

Pregnant, postpartum, and breastfeeding women, infants, and children up to age 5 who meet income eligibility (applicants’ gross income must be at or below 185 percent of the federal poverty level or \$51,338 annually for a family of four) and state residency requirements are eligible for WIC.³⁴ Applicants must also be determined to be at “nutrition risk” by a physician, nutritionist, nurse or other health professional, and WIC covers nutritional foods and provides iron-fortified formula for infants.³⁵

Like SNAP, pandemic-related changes and flexibilities have increased WIC program participation and benefit costs.³⁶ In New York, as shown in Figure 7, participation in the WIC program has risen nearly 10 percent since April 2020 to 395,000 women, infants and children in September 2022, while food costs—the amount of money provided to local grocery stores and farmers markets when WIC participants redeem their WIC food package benefits—have been rising sharply since September 2021. According to preliminary figures, average monthly participation in the State’s WIC program increased 5.1 percent to nearly 387,000 New Yorkers in Federal Fiscal Year (FFY) 2022, while federal food costs for the program totaled \$302.1 million, an increase of \$83.1 million or 39.8 percent over FFY 2021.³⁷ In 2019, the last year for which data are available, 59 percent of eligible New Yorkers participated in WIC; the national WIC participation rate was 57.4 percent.³⁸

FIGURE 7
Monthly WIC Benefits and Costs, New York, October 2017 – September 2022



Source: USDA Food and Nutrition Service, WIC Data Tables, Monthly Data – State Level Participation by Category and Program Costs

The increase in WIC food costs starting in October 2021 largely results from Congressional action to increase WIC’s fruit and vegetable benefit, but also reflects the overall increase in WIC participation and higher food prices.³⁹ The American Rescue Plan allowed New York and other states to increase WIC benefits for purchase of fruits and vegetables and subsequent Congressional action provided further increases.⁴⁰ Increased benefits will cease starting October 2023.

Federal Child Nutrition Programs

Typically, the largest USDA child nutrition programs are the National School Lunch Program (NSLP), the School Breakfast Program (SBP), and the Child and Adult Care Food Program (CACFP).⁴¹ In FFYs 2020 and 2021, the pandemic forced the closure of many schools and child and adult care centers, disrupting typical meal provision. In response, federal COVID-19 waivers allowed the USDA to expand the Summer Food Service Program (SFSP) and, starting in July 2021, the NSLP’s and SBP’s Seamless Summer Option (SSO) began to provide free meals to students in all areas, regardless of income, throughout the year.⁴² As a result, meals served by the SFSP and the SSO made up for much of the declines in meals served by other programs, as shown in Figure 8.

FIGURE 8**New York Activity by Selected USDA Child Nutrition Programs, FFY 2017–FFY 2022**
(in millions of meals served and costs)

	2017	2018	2019	2020	2021	2022
Meals	543.7	550.3	562.1	504.5	446.2	550.6
National School Lunch	266.8	272.1	279.0	180.2	46.4	270.1
School Breakfast	128.1	130.8	137.6	103.6	30.8	154.2
Child and Adult Care Food	130.0	128.6	126.9	81.3	75.6	86.6
Summer Food Service	18.9	18.7	18.6	139.4	293.4	39.7
Costs	\$1,293.5	\$1,379.3	\$1,460.8	\$1,405.4	\$1,363.4	\$1,944.5
National School Lunch	\$777.8	\$840.8	\$899.1	\$619.9	\$235.5	\$1,261.1
School Breakfast	\$232.4	\$254.9	\$274.3	\$213.9	\$71.4	\$380.4
Child and Adult Care Food	\$228.2	\$228.3	\$230.8	\$151.7	\$136.5	\$170.7
Summer Food Service	\$55.0	\$55.4	\$56.6	\$419.9	\$920.0	\$132.3

Notes: Data for the NSLP and SBP include meals and the cost of meals served through the SSO. Data are subject to revision.
Source: USDA Food and Nutrition Service, Child Nutrition Tables

In addition, the Pandemic Electronic Benefit Transfer (P-EBT) program was created as an option for states to provide a SNAP-like benefit—when a school is closed five or more consecutive days—to households with children who would have received free or reduced-price school meals if not for the closure.⁴³ Like SNAP, households can use P-EBT benefits to purchase groceries at SNAP-authorized retailers.⁴⁴ From May 2020 through September 2022, OTDA (the State agency with federal approval to operate and administer New York’s plan for issuing P-EBT food benefits) distributed \$3.8 billion in benefits to eligible children.⁴⁵

The success of the P-EBT program was recently recognized with the recently enacted Consolidated Appropriations Act of 2023 (the Act), which created a permanent summer food program starting in 2024 that provides low-income families with grocery benefits of \$40 per eligible child per month, when schools are closed for the summer. The Act also allows families in rural areas to have meals delivered instead of picking them up on-site. However, the Act reduces any summer food benefits issued to households to \$120 per eligible child during the summer of 2023.⁴⁶ Standard summer food benefits for eligible children were \$375 per child in 2021 and \$391 per child in 2022.

Recommendations

Renew the Federal Child Tax Credit Expansion

Thanks in large part to federal policy responses, rates of food insecurity nationwide and in New York largely trended lower during the pandemic—that is, until food costs started rising last year and pandemic-related income supports expired. As cited in the first report of the [New Yorkers in Need series](#), economic impact payments and the enhancements to the federal Child Tax Credit produced significant reductions in poverty. Furthermore, recipients of the enhanced federal Child Tax Credit also reported greater declines in food insecurity than non-recipients, underscoring the interrelatedness of social safety net policies.⁴⁷ Now, as the federal government winds down temporary pandemic-related nutrition benefits, food insecurity may grow. While the expiration of some pandemic relief programs may be appropriate, the federal Child Tax Credit enhancements should be renewed so meaningful reductions in poverty can continue and help alleviate stress on household budgets.

Implement the National Strategy on Hunger, Nutrition, and Health

The White House has released a Strategy on Hunger, Nutrition and Health with a goal of cutting food insecurity in half and virtually eliminating the number of U.S. households experiencing hunger by 2030. Among other things, the Strategy calls for improving food access and affordability by taking steps to boost incomes, increasing funding for nutrition programs for older adults, preventing food loss and waste across the food supply chain, as well as strengthening federal assistance programs, including expanding P-EBT and school meals programs and expanding SNAP eligibility to underserved populations.

The White House Strategy also calls for making changes to facilitate ease of access to benefits, like streamlining application processes; prioritizing nutrition, particularly in health prevention; and increasing historically underserved communities' access to affordable and healthy foods. The Strategy seeks to expand Medicare and Medicaid beneficiaries' access to “food is medicine” interventions and provide universal screening for food insecurity in federal health care programs.⁴⁸ Recognizing the challenges facing people who live in communities without grocery stores or the ability to travel to nearby stores, the White House also plans to work with the National Grocers Association to expand full-service grocery stores into USDA-designated food deserts.⁴⁹

The USDA recently announced plans to make nutritious food more accessible and affordable for consumers by increasing funding for “projects that demonstrate and evaluate the impacts of fresh produce prescriptions to increase fresh fruit and vegetable consumption, improve health, and reduce food insecurity” and by providing low-income seniors with better access to locally grown fruits, vegetables, honey and herbs.⁵⁰ These efforts should be supported.

Implement Further Expansions to SNAP and WIC

Additional steps can be taken to avert a looming “hunger cliff” after temporary pandemic benefits expire. Recent Congressional action to create a permanent summer food program for eligible children starting in 2024 is a notable action in the effort to reduce food insecurity; however, ending SNAP emergency allotments and limiting existing summer food benefits for children, will be counterproductive, particularly if the period of high inflation continues.

The federal government should extend temporary SNAP and WIC nutrition benefits and flexibilities, at least until food inflation subsides. In addition, federal officials should also raise the eligibility levels for SNAP and WIC to at least 200 percent of the federal poverty level. Increasing the SNAP eligibility threshold could provide over 500,000 additional New York households with access to SNAP benefits and improve their continuity of benefits, costing approximately \$2.7 billion in additional annual federal funding. Increasing the WIC eligibility threshold would provide over 10,000 additional New Yorkers with access to WIC benefits and cost approximately \$13 million in additional annual federal funding.

Improve Outreach and Access

The State can also take meaningful action. DOH and OTDA can conduct targeted outreach activities to increase participation in both WIC and SNAP; DOH currently manages a five-year, \$10 million contract for WIC outreach services through September 2026, while OTDA manages a five-year, \$29.1 million contract for nutrition outreach and education through June 2025.

DOH and OTDA should also make it easier to apply and recertify for both programs, and local agencies should ensure timely processing of benefit applications. In New York City, the Human Resources Administration timeliness rate for SNAP applications dropped to 60 percent in City fiscal year 2022, due to high application volume and staffing shortages.⁵¹ According to a recent NY Health Foundation survey of food-insecure New Yorkers, most supported a single, streamlined application for SNAP and WIC, as well as continuation of remote eligibility interviews and recertification for the programs.⁵²

Promote State Nutritional Programs

While SNAP and WIC provide broad support, assistance provided through State programs is also meaningful for New Yorkers in need and should be sustained. Although created as a pandemic relief program in 2020, Nourish NY was codified in November 2021, and has served as a vehicle for purchasing at least 40 million pounds of food.⁵³ The Executive Budget for SFY 2023-24 has proposed a \$50 million appropriation for the program in SFY 2023-24. In recent years, Nourish New York has also received funding from HPNAP, and the Executive Budget has proposed \$34.5 million for HPNAP in SFY 2023-24. These programs should be continued. The prior legislative addition of \$22 million for HPNAP should also be considered for SFY 2023-24.

Continue to Pursue Innovative Approaches

Finally, New York and the federal government should broaden services and supports for food-insecure individuals and families. Examples include:

- Expediting review and potential expansion of a pilot program to provide medically tailored meals in the Medicaid program to reduce food insecurity, improve health outcomes and cut costs;
- Subsidizing the costs of online grocery delivery for lower-income New Yorkers living in communities where grocery stores are not nearby, or for whom transportation or access is a significant barrier; and
- Providing incentives for full-service grocery stores to locate in USDA-designated food deserts in New York.

Appendix: State Nutritional Programs

The State administers several other U.S. food programs, as well as several of its own nutrition initiatives, including those within the State Office for the Aging (SOFA), the State Education Department (SED), the State Health Department (DOH), Empire State Development (ESD) and the State Office of General Services (OGS), as shown in Figure 9. Collectively, state disbursements on these programs totaled \$163 million in State Fiscal Year (SFY) 2021-22; through November 2022, disbursements have totaled \$82 million in SFY 2022-23. Many of these initiatives are intended to extend the benefits provided by federal assistance and to amplify the efforts of private philanthropy.

FIGURE 9
NYS Food Program Disbursements, SFY 2012-13–SFY 2021-22
 (in millions of dollars)

Agency	Program	SFY 2013	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
DOH	Nourish NY as part of the Hunger Prevention and Nutrition Assistance Program	0	0	0	0	0	0	0	0	0	86
SED	School Lunch & Breakfast & Summer Food Program	33	35	33	33	33	33	33	35	39	43
SOFA	Wellness in Nutrition	21	22	27	29	27	26	30	28	25	28
DOH	Nutritional services and education to pregnant women, infants, and children	48	27	26	7	10	10	9	9	9	9
DOH	Nourish NY	0	0	0	0	0	0	0	0	0	0
ESD	Restaurant Resiliency Grants	0	0	0	0	0	0	0	0	0	0
DOH	Hunger Prevention and Nutrition Assistance Program	30	29	30	32	35	19	26	26	62	(5)
Total		133	114	116	101	105	88	98	99	135	162

Notes: The Restaurant Resiliency Program was established in SFY 2022; no disbursements occurred prior to the end of that fiscal year. The negative disbursement amount for the Hunger Prevention and Nutrition Assistance Program reflects transactions moving expenditures to other nutrition services programs and various federal funds.

Source: Office of the State Comptroller

SOFA Title III-C nutrition services include congregate meals, home delivered meals, and nutrition screening, education and counseling. The Wellness in Nutrition program provides home delivered meals, shopping assistance, congregate meals, nutrition counseling and nutrition education, targeting low-income New Yorkers, those living alone and those over age 75. SOFA's Nutrition Services Initiative provides congregate and home-delivered meals to eligible participants who are 60 years old or older. According to SOFA's 2021 annual report, nearly 64,000 older New Yorkers received home-delivered meals and over 196,000 older New Yorkers received meals in a congregate setting.⁵⁴

Nourish NY is intended to re-route surplus agricultural products from New York farmers and dairy manufacturers who lost markets during the pandemic to New Yorkers in need through the State's food banks. In SFYs 2021-22 and 2022-23, at least \$108.1 million has been spent on Nourish NY: \$87.3 million as part of DOH's Hunger Prevention and Nutrition Assistance Program (HPNAP); and \$20.9 million through separate DOH funding for Nourish NY.⁵⁵ In particular, HPNAP helps to fill gaps created by federal programs' failure to adjust benefit levels to reflect New York State's higher costs for housing, utilities and food. HPNAP provides resources to an estimated 2,500 Emergency Food Relief Organizations (EFRO) in New York. These EFROs include 10 regional food banks, as well as food pantries, soup kitchens and emergency shelters.

The Restaurant Resiliency Program provides the State's regional food banks with \$25 million in funding to purchase meals from qualified restaurants and deliver the meals to food pantries, soup kitchens, and shelters. During SFY 2022, the program partnered with 279 restaurants to distribute over 1 million meals to people in need.⁵⁶

Through the Temporary Emergency Feeding Assistance Program (TEFAP), OGS provides federal funding to food banks to cover the storage and distribution of USDA Foods.⁵⁷ In addition, the Governor recently announced that HelloFresh, a German food company that has distributed 1 million meals to New York's veterans, service members and their families, "has committed to funding the program through 2023 to help ensure continued access to fresh and healthy meals to New Yorkers who have served and continue to serve."⁵⁸

Endnotes

- 1 The U.S. Department of Agriculture (USDA) does not use the term “hunger” to describe households with food insecurity, referring instead to “resource-constrained hunger” as “a potential consequence of food insecurity that, because of prolonged, involuntary lack of food, results in discomfort, illness, weakness, or pain that goes beyond the usual uneasy sensation.” Determinations of food security are high food security, marginal food security, low food security, and very low food security. See: USDA Economic Research Service, *Food Security in the U.S. Overview/Measurement*, October 17, 2022, available at <https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-u-s/measurement>.
- 2 The 2021 Food Security Supplement survey included over 30,000 households comprising a representative sample of the U.S. civilian population.
- 3 USDA ERS, Household Food Security in the United States in 2021, September 2022, available at <https://www.ers.usda.gov/publications/pub-details/?pubid=104655>.
- 4 USDA ERS, Food Insecurity Security Data File, downloaded December 6, 2022, <https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-u-s/interactive-charts-and-highlights/>.
- 5 USDA Economic Research Service, *Household Food Security in the United States in 2021*, September 2022, available at <https://www.ers.usda.gov/publications/pub-details/?pubid=104655>.
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- 7 U.S. Census Bureau, Household Pulse Survey Questionnaire, page 21, available at https://www2.census.gov/programs-surveys/demo/technical-documentation/hhp/Phase_36_Household_Pulse_Survey_ENGLISH.pdf. Data from this survey are based on a 20-minute online questionnaire. Sufficient responses include: “Enough of the kinds of food (I/we) wanted to eat” and “Enough, but not always the kinds of food (I/we) wanted to eat.” Insufficient responses include: “Sometimes not enough to eat” and “Often not enough to eat.”
- 8 Percentages and numbers for New York and the U.S. were calculated by averaging the estimated numbers of individuals aged 18 years and older who sometimes or often did not have enough to eat and dividing those numbers by the estimated numbers of individuals responding to the Pulse Survey during each of five, two-week Pulse Survey collection periods for Week 33 (data collected from June 23 through July 5, 2021) through Week 37 (data collected from September 1 through September 13, 2021). Despite using a two-week collection period, the Pulse Survey calls these cycles “weeks” to maintain continuity with earlier phases of the survey.
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- 11 NY Health Foundation, *Food-Insecure New Yorkers Twice as Likely to Have Unsatisfactory Health*, August 16, 2022, available at <https://nyhealthfoundation.org/2022/08/16/food-insecure-new-yorkers-twice-as-likely-to-have-unsatisfactory-health/>.
- 12 USDA ERS, Food Access Research Atlas listings for New York State, accessed December 2022, available at <https://www.ers.usda.gov/data-products/food-access-research-atlas/go-to-the-atlas/>.
- 13 Poonam Gupta, Julia Salas, and Elaine Waxman, “Two Years into the Pandemic, Charitable Food Remains a Key Resources for One in Six Adults,” May 10, 2022, The Urban Institute.
- 14 USDA Food and Nutrition Security webpage, available at <https://www.usda.gov/nutrition-security>.
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- 21 State Department of Agriculture and Markets, *Nourish New York – Supporting New York Farms and Communities*, available at <https://agriculture.ny.gov/NourishNY>.
- 22 USDA Food and Nutrition Service, FNS Nutrition Programs, available at <https://www.fns.usda.gov/programs>.
- 23 USDA ERS, Supplemental Nutrition Assistance Program (SNAP) Overview, available at <https://www.ers.usda.gov/topics/food-nutrition-assistance/supplemental-nutrition-assistance-program-snap/>.

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- 29 The Thrifty Food Plan (TFP) represents the weekly cost of a healthy diet across the categories and amounts of foods and beverages required by federal law to feed a family of four persons consisting of a man and a woman ages 20 through 50, a child ages 6 through 8, and a child 9 through 11 years of age. The TFP is the lowest cost of four food plans developed and maintained by the USDA to specify the types and quantities of foods people could buy and prepare at home to obtain a nutritious diet at four different cost levels. Compared to the TFP, each of the three higher-cost USDA food plans would provide greater allotments for SNAP beneficiaries, allowing for increasing quantities of food and greater food choices. As summarized by the Food Research & Action Center, a national non-profit organization, “the three higher-cost food plans allow for more food choices and variety. As a result, the higher-cost food plans allow for healthy foods that are not the cheapest options in a food group, unlike the TFP (e.g., more fresh fish instead of canned tuna, more berries instead of bananas.” See FRAC Chat, “Thrifty Food Plan 101 (Part 1),” available at <https://frac.org/blog/thrifty-food-plan-101-part-1>.
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- 34 Persons or certain family members participating in SNAP, Medicaid, Temporary Assistance for Needy Families (TANF) or other benefits program automatically meet the WIC income eligibility requirement. See USDA Food and Nutrition Service, Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), WIC Eligibility Requirements, updated April 22, 2022, available at <https://www.fns.usda.gov/wic/wic-eligibility-requirements>.
- 35 Nutritional risks recognized for WIC eligibility include medically-based risks such as anemia, underweight, maternal age, history of pregnancy complications or poor pregnancy outcomes; and diet-based risks such as inadequate consumption of nutrient-dense foods, unsound dietary habits, over-consumption of certain substances such as fats and salts, and excessive caloric intake. WIC foods include infant cereal, iron-fortified adult cereal, vitamin C-rich fruit or vegetable juice, eggs, milk, cheese, peanut butter, dried and canned beans/peas, and canned fish, as well as soy-based beverages, tofu, fruits and vegetables, baby foods, whole wheat bread, and other whole grain options. In addition, WIC provides iron-fortified infant formula for women who do not fully breastfeed. Special infant formulas and medical foods may be provided when prescribed by a physician for a specified medical condition. See USDA Food and Nutrition Service, Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), WIC Eligibility Requirements, updated 04/22/2022, available at <https://www.fns.usda.gov/wic/wic-eligibility-requirements>; and WIC Frequently Asked Questions (FAQs), updated 08/02/2022, available at <https://www.fns.usda.gov/wic/frequently-asked-questions>.
- 36 Pandemic-related changes and flexibilities include remote issuance of benefits to any participant, allowing state and local WIC agencies to conduct certification appointments remotely and—in most states, but not New York—substitutes for the types and amounts of certain WIC-prescribed foods if their availability is limited. A listing of WIC COVID-19 waiver flexibilities is available from the USDA Food and Nutrition Service at <https://www.fns.usda.gov/programs/fns-disaster-assistance/fns-responds-covid-19-wic-covid-19-waivers>.
- 37 USDA, *WIC Data Tables*, available at <https://www.fns.usda.gov/pd/wic-program>.
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- 39 Except for the cash-value voucher for fruits and vegetables, WIC provides quantity-based, rather than dollar-based, benefits (i.e., participants redeem their food instruments at retail food stores for a specified quantity of specific foods), regardless of how much the WIC-allowed item costs, according to the 2015 USDA report, “The WIC Program: Background, Trends, and Economic Issues, 2015 Edition”, available at <https://www.ers.usda.gov/publications/pub-details/?pubid=43927>.
- 40 The American Rescue Plan allowed New York and other states to increase WIC benefits for purchase of fruits and vegetables—normally \$9 per child and \$11 for pregnant, postpartum, and breastfeeding women—to \$35 per child and adult per month, but only from June 2021 through September 2021. Subsequent Congressional action increased the benefit to \$24 for child participants, \$43 for pregnant and postpartum women participants, and \$47 for fully and partially breastfeeding women participants in FFY 2022 and to \$25 for child participants, \$44 for pregnant and postpartum participants, and \$49 for fully and partially breastfeeding participants in FFY 2023. See: USDA Press Release, “USDA to Incentivize Purchase of Fruits and Vegetables under WIC for 4 Months with American Rescue Plan Funding,” April 28, 2021, available at <https://www.usda.gov/media/press-releases/2021/04/28/usda-incentivize-purchasefruits-and-vegetables-under-wic-4-months>.
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- 42 The NSLP’s Seamless Summer Option (SSO) allows schools to provide “summer or school vacation food service,” but not when schools are open during the regular school year. In April 2021, the USDA established a waiver under Congressional authority to allow the SSO to operate when school is open during the regular school year, effective July 1, 2021 through June 30, 2022. The waiver also allows payment for SSO meals and snacks at higher SFSP reimbursement rates. In June 2022, the USDA extended the SSO waiver through September 2022.
- 43 The P-EBT program was initially authorized from March 2020 through September 2020, but was extended through September 2021 and then re-authorized for any school year in which there is a COVID-19 public health emergency declaration. It was also amended to allow operation during summer months and expanded to schools with reduced attendance hours due to the pandemic (expanding the program beyond only closed schools) and to children in SNAP households enrolled in child care facilities affected by pandemic closures and reduced hours. See Congressional Research Service, *USDA Nutrition Assistance Programs: Response to the COVID-19 Pandemic*, updated August 5, 2022, available at <https://crsreports.congress.gov/product/pdf/R/R46681>.
- 44 Ibid.
- 45 According to OTDA, for the 2019-20 school year, when all schools were closed and all children attended remotely from March through June 2020, OTDA issued about \$1.1 billion in P-EBT benefits to approximately 2.5 million school children. For the 2020-21 school year, OTDA issued \$2.0 billion in P-EBT benefits, but could not provide an unduplicated count of children receiving payments. The State’s approved P-EBT plan indicates OTDA expected to distribute benefits to approximately 2.2 million school children. In addition to the payments for school closures and reductions in attendance and hours, OTDA distributed \$715 million in summer P-EBT benefits to almost 2 million children. OTDA has received USDA approval of its P-EBT plans for school age children for the 2021-22 school year and Summer 2022, as well as for children in child care for the 2021-22 school year, and will start issuing child care payments in March 2023 and the other benefits in April, May and early Summer 2023. No decision has been made as of this date regarding a current school year or Summer 2023 program. See USDA Food and Nutrition Service, SNAP Data Tables, Monthly State Level P-EBT Participation & Benefits FY20-22, updated November 10, 2022, available at <https://www.fns.usda.gov/pd/supplemental-nutrition-assistance-program-snap>.
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