



COALITION ON HUMAN NEEDS

The Human Needs Report

September 30, 2019

IN THIS EDITION:

Budget & Appropriations:	<u>Congress Avoids a Shutdown while FY20 Bills Move in the Senate</u>
Immigration:	<u>Border Security Funding Up in the Air, as is Deferred Medical Status</u>
Health:	<u>Advocate Oppose Repeal of Medicaid Access Monitoring Rule</u>
Poverty:	<u>New Census Bureau Data Show Fewer Americans with Health Care Coverage, Tremendous Disparities in Poverty Rates Based on Race and Age</u>
Food & Nutrition:	<u>Advocates Respond to Proposal to Take SNAP Away from Millions</u>

Subscribe to our blog, [Voices for Human Needs](#), and follow the Coalition on Human Needs on [Facebook](#) and [Twitter](#) for the latest information. Visit our [Events and Trainings page](#) for upcoming conferences, briefings, and meetings and our [job announcements page](#) for employment opportunities.

Congress Avoids a Shutdown while FY20 Bills Move in the Senate

With only a few days to spare, the Senate on Sept. 26 passed ([81-16](#)) a stopgap spending bill, known as a Continuing Resolution or CR, to avoid a government shutdown, and President Trump signed the bill on September 27. The House had passed ([301-123](#)) the CR on Sept. 19; three Democrats opposed it and 76 Republicans supported it. The measure (H.R. 4378) will keep the government funded through from Oct. 1 – the start of the new fiscal year – through Nov. 21.

Most government agencies and programs will see flat FY19 funding levels during this time; a few so-called ‘anomalies,’ or adjustments to funding levels, were included for select programs. One such anomaly was included for the 2020 Census, which needs additional funding at the beginning of the fiscal year to stay on target for the mandated decennial count. According to CQ, the CR would allow the Census Bureau to be apportioned money “up to the rate for operations necessary to maintain the

schedule and deliver the required data.” Sen. Brian Schatz (D-HI) was joined by 24 other senators in instead [urging appropriators](#) to include full-year funding for the Census Bureau (\$8.175 billion, including \$7.5 billion for the 2020 Census) up front as part of the CR. The CR also includes a package of health care-related extensions of programs funding community health centers, continued authority for the Temporary Assistance for Needy Families program, and an extension of the enhanced Medicaid funds for Puerto Rico and other U.S. territories through November 21.

In addition to the CR to keep the government temporarily funded, Senate appropriators have spent much of the past few weeks working on their chamber’s versions of FY20 spending bills to fund the government for the rest of the fiscal year. On Sept. 12, the Senate Appropriations Committee approved the topline spending levels for each of its subcommittees, known as [302\(b\) allocations](#). These funding levels were opposed by Democrats on the Committee, who objected to inadequate funding for Labor-HHS-Education programs (see below), and too much money for the border wall and anti-immigrant enforcement. The 302(b) allocations were approved in Committee with a party-line vote, in contrast to previous years’ bipartisanship. Since then, the Senate Appropriations Committee has passed 10 of the 12 FY20 bills to date, though none has reached the Senate floor.

One bill that has made it through the full Senate Appropriations Committee is the Transportation-Housing and Urban Development spending bill. According to the National Low Income Housing Coalition (NLIHC), the Senate appropriations bill provides modest funding increases for affordable housing programs. Overall, the bill provides HUD programs with more than \$11.9 billion above President Trump’s FY20 request and \$2.3 billion above FY19 enacted levels. The bill fails, however, to include legislative language approved in the House version that would halt cruel proposals from the president to evict mixed-status families from assisted housing and to roll back LGBT protections. For additional details on the Senate spending bill, see NLIHC’s [full analysis](#) and [updated budget chart](#).

The Senate Appropriations Committee also passed its Agriculture spending bill. According to [Committee Democrats](#), the bill provides full funding for the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and provides \$245 million for the Commodity Supplemental Food Program, which provides seniors with healthy and nutritious home-delivered food. The President’s budget proposed to eliminate this program.

One bill that has not yet made it through the Committee is the Labor, Health and Human Services, and Education (“Labor-H”) bill. Advocates expressed concern that the Senate Appropriations Committee’s 302(b) allocations for some areas – including those covered by the Labor-H bill – are too low and would cause harm to human needs programs. According to the [Center on Budget and Policy Priorities](#), the Senate appropriations bill funding these departments would be cut 1.4 percent below its inflation-adjusted 2019 level, a cut of \$2.7 billion. The Department of Homeland Security, on the other hand, would receive an inflation-adjusted funding increase of 4.3 percent, or \$2.1 billion.

The House of Representatives has already passed 10 of the 12 required FY20 spending bills, but these were passed before a bipartisan budget deal was agreed to by both the House and Senate; the topline

spending levels in the budget deal were lower than the spending levels in many of the House bills. For more information on the House version of spending bills, see the [July 1 Human Needs Report](#).

[Return to Top](#)

Border Security Funding Up in the Air, as is Deferred Medical Status

Funding decisions for the Department of Homeland Security, including the border wall and other controversial measures such as additional detention beds and other immigration enforcement activities, appear to have been punted well into November.

On September 27, President Trump signed a stopgap spending measure enacted by Congress that keeps government running through Nov. 21 (see related article in this *Human Needs Report* for more information).

The House and Senate also passed a joint resolution that would overturn President Trump's emergency declaration at the southern border, a declaration that, for now, has allowed him to divert other government spending to build his wall. But the votes – [236-174](#) in the House and [54-41](#) in the Senate, with 11 Republicans in each chamber joining all Democrats in each chamber – did not represent the two-thirds majorities that would be needed to override an anticipated presidential veto. President Trump vetoed a similar resolution back in March.

Meanwhile, on Friday, Sept. 20, the [Washington Post reported](#) that the Trump Administration plans – once again – to divert billions of dollars in military funding to pay for border wall construction next year, a way to circumvent congressional opposition to the measure.

The Trump Administration is striving to complete nearly 500 miles of new barriers by the 2020 elections. But, the *Post* reported, that construction goal will require a total of \$18.4 billion in funding through 2020, far more than the Administration has publicly disclosed. The *Post* obtained documents that show the cost of building the wall works out to \$36 million per mile. And the newspaper said the Administration plans once again to divert \$3.6 billion from military funding to pay for the wall – equal to the amount it already has planned to divert. Some of that money currently is slotted to pay for child care centers and schools on military bases; other dollars were intended to pay for needed maintenance.

The diversion, which is sure to again be challenged in court, is intended as a work-around to [action taken earlier this summer](#) by the House Appropriations Committee. That committee passed a bill that provides no funding whatsoever for new border barriers, additional Border Patrol agents or new Border Patrol checkpoints. It also prohibits the use of funds for the detention or removal of DACA recipients and certain ICE and CBP raids and other immigration enforcement activities.

Meanwhile, earlier this month, two Trump Administration officials appeared before the Civil Rights and Civil Liberties subcommittee of the House Judiciary Committee to explain the Administration's decision,

since reversed, sort of, to deny requests for seriously ill immigrants – including children – who are receiving lifesaving medical treatment in the United States to be allowed to remain here for treatment.

[According to the Washington Post](#), two DHS officials, Timothy S. Robbins, acting executive associate director of enforcement and removal operations, and Daniel Renaud, associate director, field operations directorate, would not answer the following questions:

- Who came up with the policy?
- What was the reason for the policy?
- Did it come from the White House?
- What section of DHS issued the directive?
- Is there even an official policy in writing somewhere?
- Did anyone think to calculate the potential loss of life?

The two Trump Administration officials said they could not answer the questions because of pending litigation (a Boston-based human rights group has sued the Administration).

But the stonewalling led an exasperated Rep. Jamie B. Raskin (D-MD), who chairs the subcommittee, to tell the *Post*, “The only thing saving us from the utter depravity of the Trump Administration is its rank incompetence. I was flabbergasted by the performance of these government officials who could not tell Congress who is behind this policy, why it was adopted, where it came from, when it goes into effect or even what it is.”

Back in August, immigrant families with very sick children [began receiving letters](#) from the federal government informing them that their application to stay in the U.S. under medical deferred action had been denied, and they had 33 days to leave the country, meaning their children would have to forgo additional medical treatment.

After news of the letters broke the [Trump Administration backtracked](#), saying the families would be allowed to remain in the U.S. However, the Administration has been unable to state what will happen with future applications for medical deferred status, and has broadly hinted that few applications will be approved.

[Return to Top](#)

Advocates Oppose Repeal of Medicaid Access Monitoring Rule

The Trump Administration recently [proposed a rule](#) that would rescind an important Obama Administration Medicaid regulation. The Medicaid Access Monitoring Rule ensures providers are paid sufficiently under Medicaid to ensure that enough participate in the program to give beneficiaries access to covered services. Advocates believe that a rescission of the Access Monitoring Rule with no meaningful replacement could have a negative impact on access to care and a disproportionate impact

on people of color, who make up approximately 60 percent of Medicaid enrollees and who are already less likely to have access to a usual source of care. Access to needed services is essential for children and adults who are enrolled in Medicaid. The Georgetown University Center for Children and Families [noted](#) that by repealing the Access Rule, this proposed rule would harm more than 2.5 million Medicaid children whose providers are paid on a fee-for-service basis. CHN joined a sign-on comment circulated by [Families USA](#) urging the Centers for Medicare and Medicaid Services to withdraw its proposed rule.

[Return to Top](#)

New Census Bureau Data Show Fewer Americans with Health Care Coverage, Tremendous Disparities in Poverty Rates Based on Race and Age

For the first time since implementation of the Affordable Care Act (ACA), the number of uninsured Americans is on the rise. That's the headline that emerged earlier this month when annual U.S. Census Bureau statistics were released. The statistics showed that 27.5 million Americans, or 8.5 percent of the population, did not have health insurance in 2018, an increase of 1.9 million people over 2017.

Experts attributed the decline to the Trump Administration's relentless attacks on the ACA, which range from cutting the budgets for promoting the ACA and helping people enroll in marketplaces, to attempts to scale back Medicaid coverage.

Medicaid coverage dropped by nearly 2 million people from 2017 to 2018. Those losing Medicaid did not shift to private insurance; there were 429,000 fewer private insurance enrollees in 2018 than in 2017.

The Census Bureau actually released two broad sets of numbers in September. National statistics released in early September reported on poverty and income levels, as well as the number of people with health care coverage. On Thursday, Sept. 26, the Census Bureau released state and local data derived from the American Community Survey (ACS).

The newest data released last week show a poverty rate of 13.1 percent in 2018, down from 13.4 percent over the previous year. While the downward trend is good news, the data continue to show troubling disparities. Income inequality rose nationwide. More than 30 percent of all people in the U.S. have incomes less than twice the federal poverty line (just under \$40,000 a year for a family of 3). In 24 states and Puerto Rico, at least 30 percent of people had incomes this modest – above poverty, but on the edge.

Poverty is declining for communities of color as well, but African Americans, Latinx, and American Indians and Alaska Natives remain disproportionately poor. "The racial poverty gap is an old story in our nation," said Deborah Weinstein, Executive Director of the Coalition on Human Needs, a national advocacy group focused on reducing poverty. "The new data continue to show stubbornly high poverty rates for all African Americans, Latinx, and American Indians. But poverty is far worse for our youngest

children, during their crucial developmental years. Failing to help families with young children to raise their children out of poverty threatens our future.”

You can read CHN’s statement in response to the newest numbers [here](#), and see CHN’s table showing total poverty, under 200 percent of poverty, and child poverty with certain race/ethnicity details, for 50 states plus the District of Columbia and Puerto Rico [here](#). CHN also summarized a number of CHN members’ responses to the national data [here](#). And CHN’s poverty resource page is [here](#). Finally, [click here](#) to view CHN’s “First Look at Poverty and Health Insurance: Fewer Americans Have Health Insurance – And Millions Are Not Sharing in Economic Growth.”

As always, the national Census Bureau data showed that race plays a disproportionate impact on who is poor and who is not. Among non-Hispanic Whites, the national poverty rate in 2018 was 8.1 percent; among Blacks, it was 20.8 percent; and among Hispanics (any race) it was 17.6 percent. The poverty rate for non-Hispanic Whites declined from 8.5 percent in 2017 to 8.1 percent in 2018 while the poverty rate for Blacks, Asians and Hispanics did not change significantly from the previous year. And children remain disproportionately poor: 16.2 percent of children under the age of 18 lived in poverty in 2018, down 1.2 percentage points from 2017. 8.9 percent of non-Hispanic White children live in poverty, compared with 29.5 percent of Black and 23.7 percent of Hispanic (any race) children.

The good news, however, is that programs such as Social Security, low-income tax credits, SNAP/food stamps and housing assistance helped lift millions out of poverty. The Supplemental Poverty Measure data show that Social Security continues to be the most important anti-poverty program, moving 27.3 million Americans out of poverty. SNAP/food stamps moved 3.1 million out of poverty, housing assistance, 3 million people, and SSI, 2.9 million people.

The bad news, however, is that the Trump Administration is trying to cut SNAP, housing aid, and other programs that help move people out of poverty.

[Return to Top](#)

Advocates Respond to Proposal to Take SNAP Away from Millions

More than 75,000 comments were submitted in response to a proposed rule that would take SNAP/food stamps away from 3 million people and jeopardize more than 500,000 children’s access to free school meals. The [rule](#), proposed by the Trump Administration’s Department of Agriculture, would roll back states’ ability to tailor their SNAP income and asset limits to help more low-income households. According to the [Food Research & Action Center \(FRAC\)](#), the option, known as “broad-based categorical eligibility,” allows states to screen families with gross incomes slightly above 130 percent of the poverty line to determine if their net incomes would make them eligible for SNAP benefits. Categorical eligibility has been a success for more than 20 years, and more than 40 states have adopted it to streamline the process for participating in federal nutrition programs and to make SNAP more responsive to the needs of low-income families.

Congress has repeatedly rejected proposals to roll back the option, including most recently in the bipartisan 2018 Farm Bill. Advocates see the proposed rule as an attempt to sidestep Congress and attack struggling Americans. SNAP advocates expect the number of comments submitted will climb significantly as additional comments submitted before the Sept. 23 deadline are processed. CHN created a portal to make the process of submitting comments easier; through CHN's portal, 8,513 comments were submitted. CHN also submitted [comments](#) opposing the rule. The U.S. Department of Agriculture is obliged to take into account comments submitted, although they do not have to make the changes recommended. If there are lawsuits against the proposal, courts often pay attention to the comments. For more information about the proposed rule, see [this piece](#) from FRAC.

[Return to Top](#)

We appreciate your input. Give us your thoughts on our *Human Needs Report* at limbery@chn.org.
