



Beyond the Dinner Table: The Impacts of H.R.1's SNAP Cuts



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A Brief History of the Supplemental Nutrition Assistance Program (SNAP)

In response to widespread food insecurity during the Great Depression, the federal government created its first food assistance program in 1939 called the Food Stamp program (U.S. Department of Agriculture, 2026). This program ended in 1943 as employment and food security improved. However, two decades later, after doctors visiting rural communities found that many children were experiencing malnutrition, Congress passed the Food Stamp Act of 1964 (Keith-Jennings et al., 2019). Now known as the Supplemental Nutrition Assistance Program (SNAP), it became a permanent federal food assistance program available to all eligible Americans. In 2025, SNAP supported 1 in 8 Americans, 1 in 6 households, and 1 in 4 children (Congressional District Health Dashboard, 2026). Given SNAP's longstanding role in supporting millions of Americans, changes to its funding and eligibility requirements will have significant consequences for individuals, families, and communities across the country.

H.R.1 Legislation and SNAP Eligibility

The 2025 H.R.1 legislation cut nearly \$1 trillion in federal funding for health and food support programs. SNAP funding was reduced by \$187 billion through 2034, with an estimated 12% of recipients expected to lose eligibility nationally (Rosenbaum et al., 2026). The majority (78%) of SNAP recipients were also covered by Medicaid, another program facing significant cuts, deeply impacting American households who face losing access to both food and health care support (Winger et al., 2025).

"The recent changes to our Medi-Cal benefits and the reduction in our SNAP benefits have had a significant impact on our family. These changes have created additional financial hardship, making it more difficult to provide for our household." – **Parent living in Big Bear, CA**

Before the H.R.1 legislation changes were implemented in the summer of 2026, individuals were eligible for SNAP if they were living at or below 130% of the federal poverty level and met work and immigration requirements.¹ The 2025 H.R.1 legislation added new eligibility criteria by expanding work requirements to adults from age 55 to 64. It also extended work requirements to parents of minor children ages 14 and older, as well as people who are homeless, veterans or former foster youth (Congress, 2025). The new legislation also made legal residents without citizenship ineligible for SNAP, including children of mixed-status families. In addition, SNAP reverification requirements increased from once annually to once every six months. (Table 1)



¹ The federal poverty level for a family of four is about \$43,000 a year (U.S. Department of Health & Human Services, 2026). Prior to H.R.1, lawful permanent residents (also known as green card holders), refugees, and asylees were eligible for SNAP with varying regulations but after H.R.1, only lawful permanent residents are eligible after five years of residency in the United States (Congress, 2025).

H.R. 1 also shifts a greater share of financial responsibility to states. Before H.R. 1, states were responsible for the administrative costs of their SNAP programs, while the federal government covered food benefits (National Association of Counties, 2025). States that cannot absorb these additional costs may face difficult budgetary tradeoffs, potentially reducing access to food assistance and increasing the risks of food insecurity, poverty, and poor health.

Table 1: SNAP Eligibility Requirements Before and After H.R.1

Eligibility Requirements	Pre-H.R.1	Post H.R.1 (Implemented Summer 2026)
Poverty Level	Living at or below 130% of the federal poverty level	Living at or below 130% of the federal poverty level
Work Requirements	▪ Min. 80 hours/month ▪ Cap at 54 y.o. ▪ Parents of dependents are covered up to age 18 ▪ People who are homeless, veterans, former foster youth and the disabled are legally exempt from 80-hour requirement	▪ Min. 80 hours/month ▪ Increase to 65 y.o. ▪ Parents of dependents are covered only up to age 14 ▪ People who are homeless, veterans, former foster youth are no longer exempt from 80-hour requirement
Residency	Legal residents without citizenship are eligible to receive SNAP benefits	Legal residents without citizenship are now ineligible for all SNAP benefits, including children of mixed-status families
Reverification Requirements	Reverification required once every 12 months	Reverification required once every 6 months

Saucedo, M., & Orbach-Mandel, H. (2026). **Timeline of Funding Cuts to Medi-Cal and CalFresh in California.**
[https:// calbudgetcenter.org/resources/timeline-of-funding-cuts-to-medi-cal-and-calfresh-in-california/](https://calbudgetcenter.org/resources/timeline-of-funding-cuts-to-medi-cal-and-calfresh-in-california/)

Cascading Consequences

SNAP plays a critical role in reducing food insecurity and poverty while helping protect the health and economic stability of millions of American households. Changes to SNAP under H.R.1 threaten these protections by reducing access to food assistance and increasing financial hardship among vulnerable households. The cascading consequences of the H.R.1 legislation changes to SNAP will be devastating; the Center for American Progress estimates these changes could lead to 70,000 deaths nationally by 2040 (Ross, 2026). As SNAP assistance declines, food insecurity and poverty are expected to increase, along with the health consequences associated with inadequate access to nutritious food (Winger et al., 2025). Food insecurity occurs when people lack money or resources to access safe and reliable food sources. Food insecurity carries significant health and economic costs with food-insecure adults incurring thousands of dollars more in annual health care costs than food-secure adults (Frank et al., 2024). Together, these effects demonstrate how reductions in SNAP extend beyond access to food, leading to an increase in poverty, worsened health outcomes and additional financial burdens on health care systems, taxpayers, businesses, and communities.



"I am doing everything I can to provide for my daughter, but I worry about whether I can afford enough healthy, nutritious food for her. Losing nearly all of our grocery assistance has made it incredibly difficult to keep up. No working parent should have to choose between paying rent, paying for child care so they can work, keeping health insurance for their child, or putting nutritious meals on the table. I am doing everything I can to become financially stable, but each reduction in assistance has made it harder to get ahead. Instead of moving toward stability, I often feel like I am just trying to survive." – **Parent living in Rancho Cucamonga, CA**

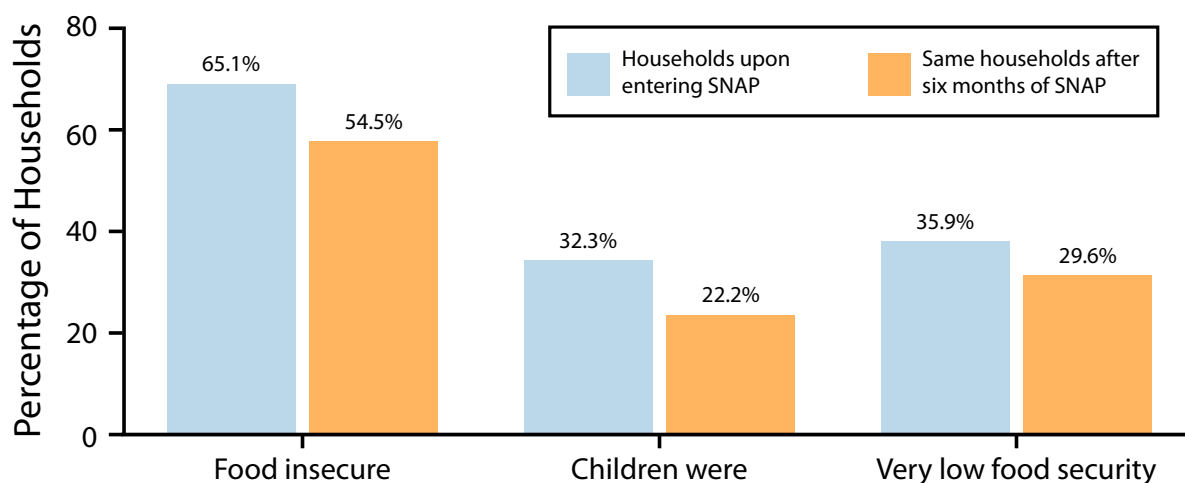
Food Insecurity

More than 50 million people in the United States experience food insecurity, which is associated with higher rates of chronic disease, poorer health, lower medication adherence and increased health care utilization and costs (Winger et al., 2025). Food insecurity is experienced by Americans in every state, but in Arkansas, Kentucky, Louisiana, Texas and Mississippi, nearly 1 in 5 individuals experienced food insecurity in 2024 (Feed the Children, 2024). Even in areas where farming is central to the economy, many rural Americans have trouble accessing and affording food, with 15.4% of rural households experiencing food insecurity compared to the national average of 12% (Plata-Nino, 2025). Reductions in SNAP will exacerbate existing challenges experienced by many Americans by leaving households with fewer resources to purchase adequate food.

Food insecurity also has implications for community safety and economic stability. Increased food insecurity and economic hardship are associated with greater stress and instability, which has unintended consequences and can contribute to violence and adverse health outcomes that extend into food-secure households and communities (Frank et al., 2024). Moreover, county-level research found that a 1% increase in food insecurity was associated with a 12% increase in violent crime (Caughron, 2016). As food insecurity increased, so did violent crime, which illustrates the serious consequences food insecurity can have on communities.

Ultimately, SNAP helps counter the increase and impacts of food insecurity. As shown in Figure 1, after six months of receiving SNAP, the share of households experiencing food insecurity, households with food-insecure children, and very low food security decreased by 7-11% each. These findings are consistent with broader research showing SNAP participation reduces food insecurity by as much as 30%, improving food insecurity across all levels of severity by helping people meet their nutritional needs while strengthening household financial stability which in turns reduces economic stressors (Keith-Jennings et al., 2019). By helping households afford groceries, SNAP also allows limited household income to be used for other basic expenses, including housing, health care, and transportation. As a result, SNAP plays a critical role in preventing food insecurity and protecting households from the broader economic and health consequences associated with food insecurity.

Figure 1: SNAP Impact on Food Security



Keith-Jennings, B., Llobrera, J., & Dean, S. (2019). Links of the Supplemental Nutrition Assistance Program with Food Insecurity, Poverty, and Health: Evidence and Potential. American journal of public health, 109(12), 1636–1640. <https://doi.org/10.2105/AJPH.2019.305325>

Poverty and Economic Stability

In 2024, 35.9 million Americans, or 10.6% of the population, lived in poverty. Poverty was more prevalent in rural areas, where 15.3% lived below the poverty line (Shrider & Bijou, 2025). In Louisiana, Mississippi, and New Mexico, nearly 1 in 5 people lived in poverty (United States Census Bureau, 2024). Poverty affects local and national economies by limiting household spending and increasing public costs associated with poor health and other social consequences (National Academies, 2023). For households with limited incomes, rising costs of basic needs can quickly create impossible choices between food, housing, health care, and transportation. SNAP helps reduce this pressure by allowing families to use more of their limited income toward other essential expenses.



"The rising costs of housing, utilities, and food have put my family under tremendous financial stress. Every month is a struggle to decide which bills can be paid and which necessities have to wait. Losing or having reduced access to programs that help with food would make an already difficult situation even worse." - **Parent living in the San Fernando Valley, CA**

SNAP not only provides food but also supports local economies, particularly in rural communities where small grocery stores and other food retailers depend heavily on SNAP recipients to stay afloat. One independent grocer in Nebraska estimates that 40% of her sales are paid through SNAP and expects she may have to close as SNAP purchasing power disappears from her community (Hardy, 2025). SNAP stimulates local economies because every dollar invested generates between \$1.50 and \$1.80 in economic activity as recipients quickly spend grocery dollars in their communities, supporting grocers, farmers, and other local businesses (Roeder, 2025). SNAP cuts could therefore reduce revenue for local and/or small businesses, lead to the closure of these businesses, and destabilize economies, all while increasing demand on food banks that are already limited and financially strained (Plata-Nino, 2025).

SNAP's role in reducing poverty is well established. A National Academies of Sciences, Engineering, and Medicine expert panel found strong evidence that SNAP plays a critical role in reducing poverty among children and families. In 2016, SNAP helped 7.3 million recipients, including 3.3 million children, raise their income above the poverty line (Keith-Jennings et al., 2019). By supplementing household food budgets, SNAP effectively frees up income for other basic needs and helps lift millions of Americans out of poverty. Reductions in SNAP risk reversing these gains and increasing financial hardship for families already living on limited incomes.



"Food assistance programs help stretch our budget. The cost of groceries continues to rise, and healthy food is often the most expensive. These programs help ensure the children have nutritious meals while allowing me to direct limited income toward rent, utilities, and other essential expenses." - **Parent living in Victorville, CA**

Public Health

Research shows there are strong correlations between increases in food insecurity and poverty and worsened public health outcomes. When people can afford adequate food, they are better able to manage chronic conditions, obtain medical care, and work. Conversely, when individuals cannot afford food and other basic needs, they may delay or forgo necessary medical care, increasing preventable complications and hospitalizations, and long-term health care costs (Winger et al., 2025). By reducing food insecurity, SNAP participation helps improve individual and public health outcomes, while also reducing overall public health care costs (Keith-Jennings et al., 2019). Food insecurity can contribute to an estimated \$53 billion in excess health care costs nationwide (Morse, 2019). Cutting SNAP does not eliminate these costs, it shifts them on to health care systems, communities, and taxpayers.

Decades of research show that SNAP participation is associated with better health outcomes across the lifespan (Appendix Table 2). Among children, SNAP is linked to better reported health, greater ability to afford health care, and improved long-term health and economic outcomes. For adults, SNAP participation is associated with better self-reported health, fewer missed workdays, and less psychological distress, and prenatal food assistance for pregnant women led to fewer low-birth-weight births (Keith-Jennings et al., 2019). By supporting health across the lifespan, SNAP can reduce preventable health care costs, support a productive workforce, and strengthen communities.



H.R.1 Impacts to California's CalFresh

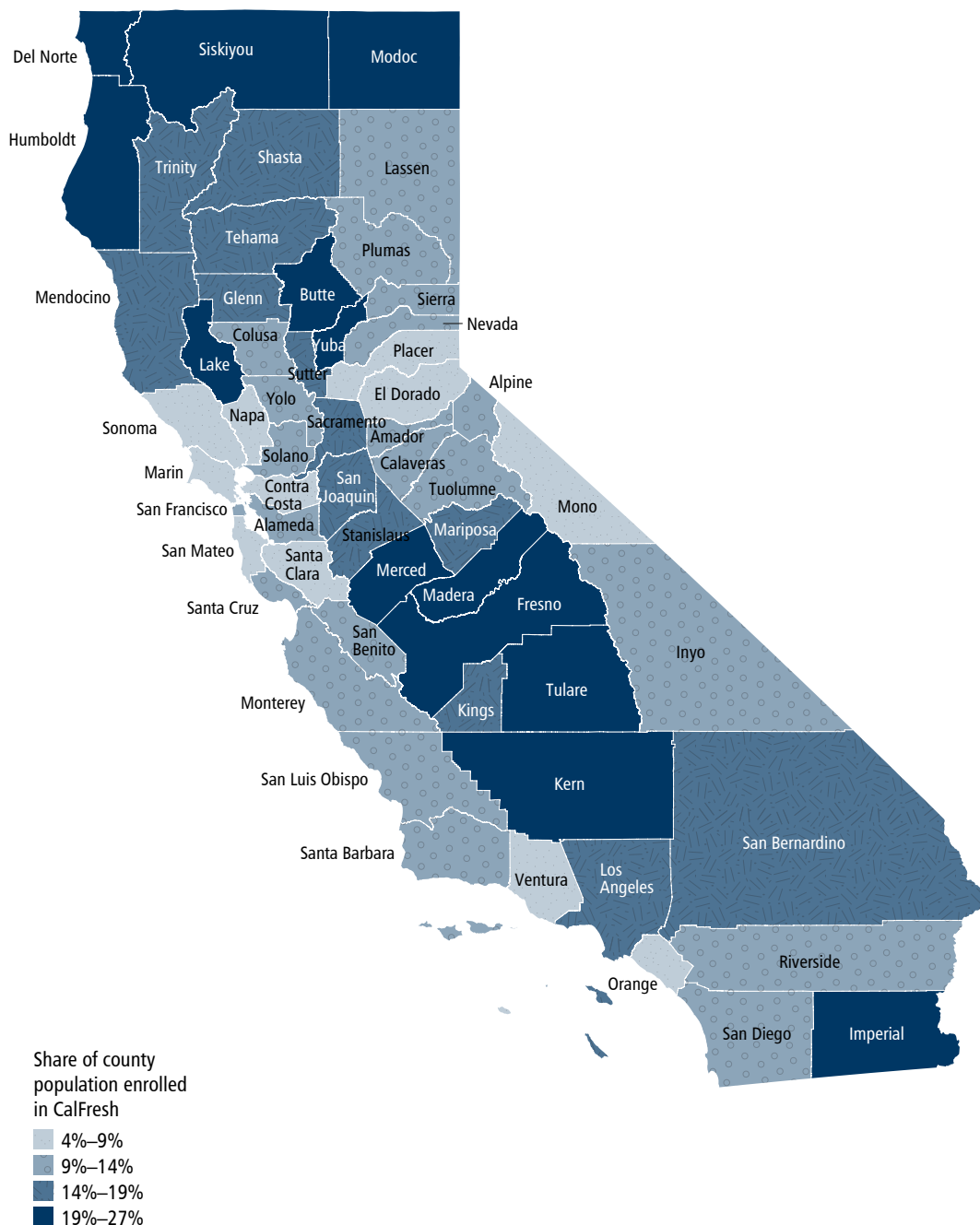
In 2025, the CalFresh Program (California's version of SNAP) provided food support to 5.5 million Californians, roughly 14% of the state's population, including nearly 2 million children (The Impacts of H.R. 1 on California's Safety Net, 2026). As of June 2026, it is estimated 700k Californians will be disenrolled from SNAP through 2029-30 (Gabriel, 2026). Losses in funding due to H.R.1 will put greater pressure on state resources and limit the state's ability to sustain food assistance for Californians. Reductions in food assistance threaten to destabilize California's broader health and economic systems, exacerbating food insecurity, poverty, and poor health outcomes across every county in the state (Saucedo, 2026).



"Recently, our CalFresh benefits were reduced, making it even more difficult to feed everyone in our family. We have already run out of basic necessities, and we are struggling to afford groceries for the rest of the month. Every dollar we receive goes toward keeping my family safe, but it is no longer enough to meet our basic needs." - **Parent living in San Bernardino, CA**

SNAP cuts will result in the loss of billions of federal dollars for CalFresh and are expected to leave more than 3 million households at risk of losing some or all of their food assistance (Saucedo & Orbach-Mandel, 2026). Based on January 2026 CalFresh and state population data, the counties with the highest CalFresh participation rates are Imperial and Tulare counties, with 27% of each county's population participating in CalFresh (Figure 2 & Appendix Table 3). Roughly a quarter of the population in counties such as Fresno, Yuba, Merced, Humboldt, Siskiyou, Butte and Modoc counties use CalFresh. Only one county, San Mateo County, had less than 5% of their population participating in CalFresh (California Department of Social Services, 2026).

Figure 2: Percent of County Population Enrolled in CalFresh



Applegate, Evan. "Percent of County Population Enrolled in CalFresh." Impacts of H.R.1 SNAP Cuts on Americans, Child Care Resource Center Research and Evaluation, 2026.



Impacts on the Early Learning and Child Care System

Despite their integral role in society, early educators and child care providers earn less than a living wage in every state (Bloom, 2025). More than half of center- and home-based child care providers struggle to afford basic needs such as health care and food, and 43% of the early childhood workforce relies on at least one public assistance program, like SNAP (Jarrett, 2025). H.R.1's expanded SNAP work requirements will create additional administrative burdens for providers, particularly those who are self-employed or offer variable schedules in their child care program. Many providers' hours and income fluctuate and are not always reflected in traditional pay stubs, therefore, they may face greater difficulty documenting compliance with eligibility requirements (Bloom, 2025). At the same time, families who lose SNAP assistance may reduce or discontinue child care, lowering enrollment and income for providers already operating on thin margins. Declining enrollment will make it harder to cover operating costs, pay staff, and remain in the child care workforce (Anderson et al., 2026).

H.R.1's SNAP eligibility changes will also affect families and children across the country. Many lawfully permitted immigrants who were previously eligible for SNAP will no longer qualify, creating significant consequences for many families. Losing food assistance reduces families' ability to afford other necessities, forcing parents to make difficult choices about food, housing, transportation, health care, and child care. For families already struggling with the rising cost of living and high child care costs, losing SNAP may make child care unaffordable, forcing parents to reduce work hours, change child care arrangements, or leave the workforce.

Key Takeaways

- **Decades of research demonstrate that SNAP is more than a food assistance program.** SNAP supports household stability, public health, employment, and local economies.
- **Millions of Americans will lose access to SNAP with the H.R.1 legislation changes.** Expanded work and eligibility requirements and \$187 billion in SNAP funding cuts will make it harder for many families, children, older adults and other vulnerable populations to access vital food assistance.
- **SNAP cuts will have consequences far beyond food insecurity.** Reductions in SNAP are expected to increase food insecurity and poverty while contributing to higher health care costs and greater financial strain on families, communities, businesses and taxpayers.
- **The consequences will ripple through local communities and essential systems.** Reduced SNAP spending will weaken local economies, increase pressure on food banks and health care systems, and create additional challenges for rural communities, California's CalFresh system, and the early learning and child care workforce.

"I hope lawmakers continue to invest in food assistance, accessible health care and child care for working families and single parents. These programs are not luxuries, they are lifelines that help families survive difficult times while working toward a better future." - **Parent living in North Hollywood, CA**



Appendix

Table 2: Health Benefits of SNAP Participation Across the Lifespan

Group	Benefits
Children	▪ Children using SNAP report better health than non-recipients, and their households are less likely to have to prioritize paying for some basic needs over others. ▪ Working families with young children who lose at least some of their SNAP benefits have a higher risk of negative health outcomes. ▪ Research has linked receiving SNAP as a young child with increased longevity and positive economic outcomes.
Pregnant Mothers	▪ Research comparing pregnant mothers who received food assistance benefits to those who did not found that mothers who had access during their pregnancy gave birth to fewer low birth weight babies.
Adults	▪ Adults receiving SNAP have more positive self-assessments of their health status, they miss fewer days of work because of illness, make fewer physician office visits, and have a reduced likelihood of demonstrating psychological distress. ▪ Adults who were able to receive food stamps as young children had lower risks as adults of obesity and other conditions related to heart disease and diabetes.

Keith-Jennings, B., Llobrera, J., & Dean, S. (2019). Links of the Supplemental Nutrition Assistance Program With Food Insecurity, Poverty, and Health: Evidence and Potential. *American journal of public health*, 109(12), 1636–1640. <https://doi.org/10.2105/AJPH.2019.305325>

Table 3: Percent of CA County Population Using CalFresh in January 2026

County	CalFresh Recipients	County Population	% of County Pop. Using CalFresh
Alameda	169,881	1,649,473	10%
Alpine	173	1,616	11%
Amador	4,317	41,428	10%
Butte	43,085	207,929	21%
Calaveras	6,284	46,248	14%
Colusa	2,841	21,984	13%
Contra Costa	106,686	1,165,012	9%
Del Norte	6,148	27,107	23%
El Dorado	14,510	192,662	8%
Fresno	243,338	1,016,725	24%
Glenn	4,374	28,494	15%
Humboldt	28,659	134,541	21%
Imperial	48,919	180,202	27%
Inyo	1,962	18,739	10%
Kern	202,717	915,075	22%
Kings	29,454	153,298	19%
Lake	16,029	68,152	24%
Lassen	4,108	30,356	14%
Los Angeles	1,480,406	9,808,667	15%
Madera	33,351	160,940	21%
Marin	15,077	257,969	6%
Mariposa	2,908	17,082	17%

Mendocino	16,115	90,244	18%
Merced	62,319	290,201	21%
Modoc	1,736	8,600	20%
Mono	813	13,148	6%
Monterey	59,619	437,613	14%
Napa	10,610	134,869	8%
Nevada	11,485	102,481	11%
Orange	293,266	3,165,820	9%
Placer	28,895	419,156	7%
Plumas	2,434	19,423	13%
Riverside	329,629	2,478,600	13%
Sacramento	261,681	1,594,006	16%
San Benito	7,007	67,290	10%
San Bernardino	360,328	2,197,104	16%
San Diego	379,947	3,288,774	12%
San Francisco	108,996	830,235	13%
San Joaquin	120,666	797,334	15%
San Luis Obispo	30,179	281,555	11%
San Mateo	33,371	742,340	4%
Santa Barbara	56,987	443,701	13%
Santa Clara	129,112	1,902,047	7%
Santa Cruz	31,642	264,926	12%
Shasta	30,866	181,436	17%
Sierra	320	2,746	12%
Siskiyou	9,026	43,466	21%

Solano	53,098	451,918	12%
Sonoma	42,917	485,040	9%
Stanislaus	91,565	553,990	17%
Statewide	5,315,464	39,000,000	14%
Sutter	16,537	98,857	17%
Tehama	11,714	65,167	18%
Trinity	2,957	15,860	19%
Tulare	127,943	478,693	27%
Tuolumne	6,553	54,498	12%
Ventura	73,308	837,469	9%
Yolo	27,850	220,564	13%
Yuba	18,746	84,507	22%

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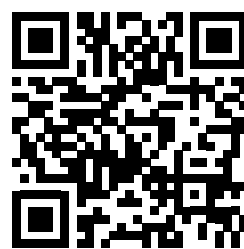
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