As an organization working to prevent and respond to childhood trauma, we are registered against this bill. Living paycheck to paycheck and experiencing the toxic stress related to poverty is an adverse childhood experience (ACEs) that can produce additional physical and mental harm on children. However, [research shows](https://www.sciencedirect.com/science/article/pii/S0145213421003318) that supports like SNAP and Medicaid can buffer some of these negative effects.

As a reminder, because I think we often forget it when we are talking about programs like Medicaid and SNAP, we are primarily talking about kids. Kids make up over half of Iowa’s Medicaid program and nearly 70 percent of SNAP recipients are in households with kids. Changes made to eligibility and enrollment processes are going to disproportionately impact kids.

The “savings” [projected for FY 26](https://www.legis.iowa.gov/docs/publications/FN/1371161.pdf) will end up costing us all more. The anticipated savings come from disenrolling Iowans from Medicaid, when people lose their Medicaid coverage and become uninsured, they will still need to get medical care. The only difference is that these costs will now be passed on to everyone else in the form of higher insurance premiums and more uncompensated care. That does nothing to improve anyone’s health and means everyone pays a higher price.

SF 494 does not increase efficiency. It does not make the eligibility or enrollment process more streamlined. And it does not make it easier for eligible Iowans to access the services they need. This proposal will increase the amount of money the state spends on administering the programs. A proposal that requires the state to hire [over 200 FTEs](https://www.legis.iowa.gov/docs/publications/FN/1371161.pdf) to process applications and request additional documentation is not efficient or streamlined.

We have heard that this bill is “not about taking away health care or food” but we only have to look to the bill’s [fiscal note](https://www.legis.iowa.gov/docs/publications/FN/1371161.pdf) to see that this proposal will in fact result in individuals losing their health care and access to food assistance. LSA estimates that 8,600 Iowans will lose their health insurance coverage and 2,800 Iowans will lose their SNAP benefits due to “discrepancies” (notably not due to “fraud” or “abuse”). LSA’s estimate may actually be conservative because if we look to other states who have enacted similar legislation, the number of people who had their health care or food taken away was far higher. In Arkansas, [50,000 people lost their Medicaid coverage](https://arktimes.com/arkansas-blog/2015/08/16/dhs-letters-to-medicaid-beneficiaries-were-vague-confusing-and-poorly-marked-almost-50000-lost-coverage) because they either didn’t get paperwork completed within the 10-day window also required in Iowa’s proposed legislation *or* because their state agency was not able to process the paperwork within the timeframe. Or look at [Pennsylvania](https://www.goerie.com/story/news/local/2015/04/23/pennsylvania-eliminating-asset-test-for/24820705007/). After implementing an asset test, 114,000 households lost their SNAP benefits. Ninety-six percent (**110,000 households**) lost their benefits because they were not able to provide proper documentation for the test. While it might not have been the intent of this legislation to take away food or health care, our state’s own fiscal analysis and the experience of other states demonstrate that SF 494 will take away food and health care away from eligible Iowans.

Medicaid is a critical source of health insurance, helping Iowans get the health care they need to get and stay healthy. Ensuring those who meet the eligibility criteria for these programs can receive them is a shared goal. However, if implemented, this bill would have the reverse effect—causing thousands of Iowans who do, in fact, meet eligibility criteria lose access to these services.