

## Work Requirements and Safety Net Programs

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## Work Requirements and Safety Net Programs

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**BROOKINGS** 

### **Abstract**

Basic assistance programs such as the Supplemental Nutrition Assistance Program (SNAP, formerly the Food Stamp Program) and Medicaid ensure families have access to food and medical care when they are low-income. Some policymakers at the federal and state levels intend to add new work requirements to SNAP and Medicaid. In this paper, we analyze those who would be impacted by an expansion of work requirements in SNAP and an introduction of work requirements into Medicaid. We characterize the types of individuals who would face work requirements, describe their labor force experience over 24 consecutive months, and identify the reasons why they are not working if they experience a period of unemployment or labor force nonparticipation. We find that the majority of SNAP and Medicaid participants who would be exposed to work requirements are attached to the labor force, but that a substantial share would fail to consistently meet a 20 hours per week—threshold. Among persistent labor force nonparticipants, health issues are the predominant reason given for not working. There may be some subset of SNAP and Medicaid participants who could work, are not working, and might work if they were threatened with the loss of benefits. This paper adds evidence to a growing body of research that shows that this group is very small relative to those who would be sanctioned under the proposed policies who are already working or are legitimately unable to work.

### Introduction

Basic assistance programs such as the Supplemental Nutrition Assistance Program (SNAP, formerly the Food Stamp Program) and Medicaid ensure families have access to food and medical care when they are low-income. These programs lift millions out of poverty while reducing food insecurity and increasing access to medical care. They also support work, and increase health and economic security among families in the short term as well as economic self-sufficiency in the long term.

Today, some policymakers at the federal and state levels intend to add new work requirements in order for beneficiaries to receive SNAP benefits and participate in the Medicaid health insurance program. In general, those exposed to a work requirement would be required to prove that they are working or participating in a training program for at least 20 hours per week each month. Failure to prove that they have met the work requirement or are eligible for an exemption would mean that a program participant would lose food assistance benefits or health insurance for a time, or until they met the standard.

Work requirements are meant to force work-ready individuals to increase their work effort and maintain that work effort every month by threatening to withhold and subsequently withholding food assistance or health coverage if a person is not working a set number of hours. The strategy presumes that the reasons that many low-income individuals are not working or meeting an hourly threshold every month is either due to their own lack of effort or to work disincentives theoretically inherent to means-tested programs. It is clear that some people face barriers to working outside the home and as such, many work requirements exempt people that

receive disability income, people with young dependents, or students; but, accurately exempting all those who are eligible can be challenging and is likely to result in terminating coverage for many people with health conditions or caregiving responsibilities that fall outside of states' narrow definitions. Proponents of work requirements would ideally only like to sanction individuals who are able to work, but choose not to. But in practice strict enforcement of proposed work requirements will sanction many groups, including: those who are unable to work, those who are able to work but who do not find work, those who are working but not consistently above an hourly threshold, and those who are meeting work or exemption requirements but fail to provide proper documentation. Evidence suggests that the vast majority of those exposed to proposed work requirements for SNAP and Medicaid fall into these groups.

In this paper, we analyze those who would be impacted by an expansion of work requirements in SNAP and an introduction of work requirements into Medicaid. Our principal contribution is to characterize the types of individuals who would face work requirements, describe what their work experiences are over a two-year period, and identify the reasons why they are not working if they experience a period of unemployment or labor force nonparticipation. We find that most of those who fail the new work requirements are either those who are in the labor force already but who experience unstable employment, or those who might be eligible for hardship exemptions, such as those with health problems who are not already receiving disability income. The compositional and labor market analyses reported below suggest that the proposed work requirements will put at risk access to food assistance and health care for millions who are working, trying to work, or face barriers to working.

Adding explicit work requirements to assistance programs must be analyzed in the context of program goals and from many angles. Who would be impacted by an expansion of work requirements? What are the administrative costs and challenges of managing the work requirements? How do the requirements interact with the realities of the low-wage work experience? And how would the requirements impact the health and economic benefits to program participation? For example, removing Medicaid coverage may have little positive work-incentive effect for the currently healthy but may undermine public health goals and reduce the labor supply of those who do encounter health problems and have lost their coverage. Removing SNAP benefits from working-age adults may impact resources available not just to them, but also to any seniors and dependents in the household. Finally, tight work requirements can undermine the automatic stabilizer aspect of these programs. Instead of SNAP expanding as the unemployment rate rises, the work requirements would cause the program to contract, resulting in more people losing benefits when work becomes difficult for them to find.

There may be some subset of individuals who could work, are not working, and might work if they were threatened with the loss of benefits. This paper adds evidence to a growing body of research that shows that this group is very small relative to those who would be sanctioned under the proposed policies who are already working or are legitimately unable to work (Bauer and Schanzenbach 2018a, 2018b; Garfield et al. 2018; Goldman et al. 2018).

The goals of safety net programs are to provide insurance protection to those who are experiencing poor economic outcomes and to support those who are trying to improve their situation. Our analysis suggests that work requirements will harm more individuals and families than they would help the small share who might increase their labor supply.

# SNAP, Medicaid, and Incentives to Work

The social safety net is intended to provide insurance against bad outcomes. But, for means-tested benefit programs, economic theory suggests it may reduce the incentive to work because (1) individuals are only eligible for a program when their income remains below a given threshold and (2) participants stand to lose benefits as income increases or reaches the eligibility threshold. In addition, any time someone receives unearned income of sufficient size, it may theoretically reduce the amount of work that an individual wants to supply to the market. In some cases, worries about work disincentives have led to the implementation of time

limits or work requirements for a set of individuals as a condition for program eligibility.

Such work requirements can undermine the insurance value of the programs, though, if people who are not working either cannot work due to individual limitations or are unable to find steady work due to economic fluctuations. Evaluating whether work requirements are an appropriate policy lever—as opposed to addressing work disincentives through other means—thus depends on the goals of the program overall, the characteristics of the target population, the design of the work requirements, the cost of administering the program, the likelihood of erroneously limiting access, and the strength of the incentive effects.

Work requirement policies often have difficulty distinguishing between those who are able to work and those who are unable to work, because both groups can be hard to observe and verify. As a result, strict enforcement of work requirements will sanction those who are unable to work, as well as those who could work but do not obtain employment in response to the requirements. They may also sanction some who are able to work but who are not able to find work, as well as those who are working but fail to provide proper documentation.

In order to evaluate whether a work requirement is in keeping with the purpose of a means-tested program, there are a number of dimensions by which a proposal should be evaluated. One would want to exempt those whom society does not feel should be forced to work, accommodate changes in the business cycle that make work more difficult to find, and have a system of verification and exemption that does not raise barriers to entry or remove program participants who should maintain access. But, one would have to ensure that work requirements do not punish those who cannot obtain a job due to economic conditions in their area, penalize those who are actually working but have temporarily lost hours, limit access to programs for an extended period of time after failing a work requirement, or, compromise the insurance goals of the program in question. These parameters can be quite difficult to meet and they set the criterion by which policymakers can determine whether work requirements are inappropriate for the program in question.

There is an extensive literature on whether work requirements can in fact push people into the labor force, principally studying the impacts of the 1996 Temporary Assistance for Needy Families (TANF) reform (see Blank 2002 and Ziliak 2016 for reviews). The labor supply of the TANF population did in fact rise, but this took place amidst a strong economy and support from the Earned Income Tax Credt (EITC) expansion as well (Schanzenbach 2018). For example, Fang and Keane (2004) find that while work requirements were the most important factor driving the decline in participation in welfare programs, the EITC expansion and macroeconomic

factors were more important in driving the increase in work participation (they find work requirements had a positive impact as well, but the contribution was smaller). Work requirements often come with a variety of supports and involve different enforcement mechanisms and levels of stringency. See Hamilton et al. (2001) for a detailed review as part of the National Evaluation of Welfare-to-Work Strategies. Many of the work requirement programs that have generated positive results also had substantial education and skills training components (Pavetti and Schott 2016). Other studies, such as Meyer and Rosenbaum (2001) and Grogger (2004) suggest a smaller or negligible role for the TANF reforms compared with other factors, especially the EITC expansion.

In this analysis, we focus more on the people who would be impacted by new work requirements and the reasons why they are not working, as opposed to the question of the labor supply response. Given the extent to which the labor market conditions—in particular for potentially impacted populations—are different than those in the 1990s (Black, Schanzenbach, Breitwieser 2017; Butcher and Schanzenbach 2018), it is helpful to consider specifically what types of individuals would be affected by proposed work requirements and why they are not currently working to better understand the possible impacts of expanded work requirements. In this section we describe the SNAP and Medicaid programs, the structure of their work incentives, and evidence of the programs' incentive effects on labor supply.

#### **SNAP**

Since the 1960s SNAP has provided resources to purchase food for millions of low-income households. The goal of the program is to provide beneficiaries with resources to raise their food purchasing power and, as a result, improve their health and nutrition. Households are eligible for SNAP if they meet an asset and income threshold, or if they receive assistance from programs like Supplemental Security Income. SNAP benefit levels are targeted based on a given household's income and expenses.

SNAP currently addresses work disincentives in a variety of ways. Similar to the EITC, SNAP addresses work disincentives through an earnings disregard of 20 percent and a gradual benefit reduction schedule. This means that the size of the earnings disregard increases as income increases and that those with earned income receive larger SNAP benefits than those with no earned income (Wolkomir and Cai 2018). When a person moves from being a labor force nonparticipant to working while on SNAP, total household resources will increase; as a beneficiary's earnings approach the eligibility threshold, total household resources continue to increase. The combination of the earnings disregard and a gradual phase-out schedule—that states have the option to further extend and smooth—ameliorate but do not eliminate work disincentives.

States have had the option to impose work requirements on certain beneficiaries since the 1980s. Most SNAP participants between the ages of 18 and 59 without dependents under 6 are required to register for work, accept a job if one is offered to them, and not reduce their work effort. States are required to operate an employment and training program, and may require some SNAP recipients to participate or suffer sanctions. See Rosenbaum (2013) and Bolen et al. (2018) for a detailed description of SNAP work requirements. After 1996, SNAP work requirements and benefit time limits were imposed on individuals aged 18-49 without dependents under the age of 18, requiring them to register for work and accept a job if one is offered to them. If they work or participate in a training program for at least 20 hours per week, they can maintain access to the program. This population is allowed to receive 3 months of benefits out of 36 months if they do not work or participate in a training program. States are permitted to exempt a share of individuals and apply to the U.S. Department of Agriculture (USDA) for a waiver to the time limit provisions, an essential capacity for SNAP's function as an automatic stabilizer. Studies show that when SNAP payments increase to a local area in response to an economic downturn, they serve as an effective fiscal stimulus to the local area (Blinder and Zandi 2015; Keith-Jennings and Rosenbaum 2015). Among other changes, the proposed work requirements would make these regional waivers more difficult to obtain.

SNAP improves health and economic outcomes in both the near and long terms (see Hoynes and Schanzenbach 2016 for a review), but had a negative effect on employment in the past. During the Food Stamp Program's introduction in the 1960s and 1970s, reductions in employment and hours worked were observed, particularly among female-headed households (Hoynes and Schanzenbach 2012). Whether work requirements could offset this disincentive would depend on their targeting and whether those who are not working could readily increase their labor supply.

#### **MEDICAID**

Since 1965, the Medicaid program has been administered in partnership between federal and state governments to provide medical assistance to eligible individuals. The core goal of the program is to provide health services and to cover health-care costs in order to improve health. Under the Patient Protection and Affordable Care Act (ACA), the eligible population expanded to include low-income adults under the age of 65 who previously did not qualify.

Although some SNAP beneficiaries have been subject to work requirements since the 1980s, Medicaid work requirements are being rolled out for the first time in certain states. The ACA does not allow work requirements to be imposed as a condition for program participation in Medicaid, but states may apply

for a waiver under Section 1115 of the Social Security Act to introduce work requirements if the Department of Health and Human Services determines doing so advances program objectives. Though the Obama administration and the U.S. District Court for the District of Columbia (which rejected Kentucky's proposal for work requirements in Medicaid) did not view work requirements as supporting core program goals, the Trump administration has expressed its conviction that work requirements are allowable (Centers for Medicare

& Medicaid Services 2018; Garfield, Rudowitz, and Damico 2018; Stewart v. Azar).

In the case of Medicaid, there are societal costs to taking health insurance away from an otherwise eligible person due to work requirements. For example, since there are rules requiring hospitals to provide medical care to those experiencing life-threatening emergencies regardless of the individual's ability to pay, those without insurance will in many cases seek and receive treatment in ways that are more

#### BOX 1

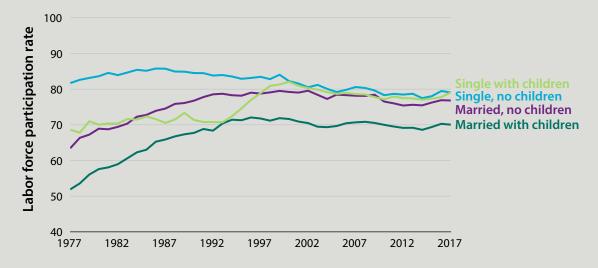
### Trends in Prime-Age Labor Force Participation

For a number of decades labor force participation in the United States rose. This was especially true for prime-age (25–54) workers, whose participation rose from 65 percent in the middle of the 20<sup>th</sup> century to a peak of 84 percent in 1999. This persistent trend obscured an offsetting force: Prime-age men were steadily working less while prime-age women were working more. In 1949 97 percent of prime-age men were in the labor force, but only 36 percent of women were. By 1999 those figures were 92 percent for men and 77 percent for women.

Although women's labor force participation rose in the 1980s and early 1990s, policymakers were concerned about the low labor force participation for single women with children, which remained relatively flat over that period. But for the past 20 years single women who head households with children have participated in the labor market at nearly the same rate as single women without children or married women without children. In fact, for the first time, in 2017 the labor force participation rate of single women with children was higher (79.09 percent) than single women without dependents (79.06 percent.) Married women with children are still more likely to be out of the labor force (box figure 1). More recently, overall labor force participation has declined, in part due to the aging population. Older working-age Americans (55–64) are less likely to work, with a labor force participation rate in 2017 around 72 percent for those aged 55–59 and 57 percent for those aged 60–64, compared to the current 82 percent for those aged 25–54.

These trends provide context for who is not currently working that society might prefer to work. Most prime-age men work, though nearly 10 percent do not. Most unmarried prime-age women with children also work. A much smaller share of older Americans work.

Prime-Age Women's Labor Force Participation, by Marital Status and Presence of Children under Age 18



Source: Current Population Survey Annual Social and Economic Supplement (ASEC) (Bureau of Labor Statistics [BLS] 1977–2017); authors' calculations.

expensive for society (Institute of Medicine 2003). Second, care delivered via insurance may include preventive care, check-ups, and other care that is more efficient than delaying care until a medical problem becomes severe enough to be treated in an emergency room. Thus, denying insurance may not reduce costs for society. Finally, evidence suggests that health insurance is valued by participants at less than its cost, making proposed work requirements less effective at raising employment (Finkelstein, Hendren, and Luttmer 2015).

Evidence of the effect of Medicaid participation on employment for childless adults is decidedly mixed, with population differences and prevailing economic conditions as potential explanations for why studies have shown positive, negative, and no effects on employment (Buchmueller, Ham, and Shore-Sheppard 2016). Nevertheless, in the years since Medicaid expansion through the ACA, the preponderance of evidence suggests that Medicaid receipt has had little or positive effects on labor supply (Baicker et al. 2014; Duggan, Goda, and Jackson 2017; Garthwaite, Gross, and Notowidigdo 2014; Gooptu et al. 2016; Kaestner et al. 2017), with notable exceptions (e.g., Dague, DeLeire, and Leininger 2017).

While there is no research evidence regarding the effect of work requirements in Medicaid, last month, as the first state to implement a plan, Arkansas disenrolled program participants for failing to comply with work requirements. Arkansas terminated coverage for 4,353 citizens for failing to qualify for an exemption or to meet work requirements, while an additional 1,218 reported 20 hours per week of work activities and 2,247 reported an exemption in the month of August (Rudowitz and Musumeci 2018).

For these programs to accomplish their goals, eligible people should not be dissuaded from applying for or improperly prevented from receiving those benefits. Evidence suggests that, under a variety of scenarios, the vast majority of those losing access to Medicaid would not lose access because they failed to meet a work requirement, but because they failed to successfully report their work/training activity or exemption (Garfield, Rudowitz, and Musumeci 2018; Goldman et al. 2018). For example, in Arkansas, the only state currently implementing a work requirement in Medicaid, beneficiaries are required to report through an online portal, Access Arkansas (Arkansas Department of Human Services n.d.), despite a large number of program-eligible Arkansans who lack internet access (Gangopadhyaya et al. 2018).

### Characteristics of Those Who Would Face New Work Requirements

Potential loss of access to SNAP and Medicaid on the basis of a work requirement is a function of whether the person is qualified for and verified as exempt from working and, if not, whether the person works sufficient hours each month to meet the requirement. Those who have a categorical exemption from work requirements—students, for example—are not required to work unless their status changes. Exemptions from work requirements can be applied individually for a variety of reasons, including temporary health problems, or, more broadly, when the unemployment rate for a location

BOX 2

### **Proposed Expansion of Work Requirements**

In April 2018 President Trump issued an executive order requiring that all means-tested programs be reviewed for the presence of current work requirements, the current state of enforcement and exemption, and, for those programs without current work requirements, whether such requirements could be added (White House 2018).

This executive order builds on executive action to implement work requirements in Medicaid for the first time. In letters to governors (Price and Verma 2017) and state Medicaid directors (Neale 2018), the U.S. Department of Health and Human Services (HHS) has offered guidance for states considering submitting a waiver request to apply work requirements for those receiving Medicaid. Since the Centers for Medicare & Medicaid Services offered guidance to the states with regard to Medicaid in 2017, 14 states have submitted work requirement proposals to HHS. HHS has approved four states' plans, though Kentucky's plan was vacated. The state of Arkansas has begun to enforce work requirements (Urban Institute 2018). State proposals vary in terms of the age range and household composition of exposure, who is exempt, and the hours required for work or approved activities.

Additionally, in reauthorizing the Farm Bill, in June 2018 the House voted to expand the scope of who is required to work in order to receive SNAP benefits to include adults 18–59 with dependent children aged 6–18 as well as those aged 50–59 without dependents under the age of 6. As of publication, the conference committee is considering this proposal.

is high. Certain educational or training activities can also qualify for meeting hourly thresholds.

To highlight one difficulty in designing a work requirement policy, consider the group of SNAP and Medicaid participants who usually are not working. Many individuals in this group are not expected to work, including the elderly, disabled, children, students, caregivers, and the infirm. In fact, nearly two thirds of individuals who participate in SNAP are elderly, disabled, or children (USDA 2017a).

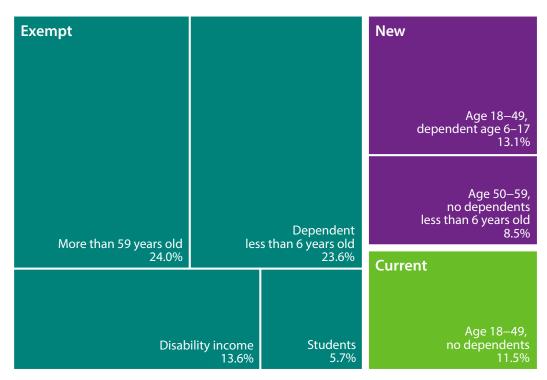
Some of these characteristics are straightforward to observe and verify, such as age, school enrollment, and receipt of disability benefits. Other characteristics are difficult to observe and costly to verify, such as those with temporary medical conditions that make it impossible for them to work, those who have a chronic health condition but do not meet the high standard set for disability benefits (or have not applied for disability benefits), and those who do not have the skills, childcare, or transportation to obtain a job in their local economy at present. Another share of this group might be capable of employment but not willing to work; in that case the work requirements might or might not provide enough incentive for them to get jobs.

Using data from the Current Population Survey Annual Social and Economic Supplement (ASEC), we quantify exposure

to work requirements in 2017 based on broad demographic characteristics. To do so, we separate those who would likely qualify for a categorical exemption from those who would be required to work or who would qualify for a waiver to maintain eligibility. To be clear, while we model who is eligible for a categorical exemption, evidence suggests that not everyone in these groups will successfully navigate the system and obtain the exemption; in fact, estimates suggest that most people who lose coverage under this policy will be eligible for an exemption or already be working. For SNAP we followed the federal guidelines for categorical exemption; for Medicaid we created a composite from among the different plans put forth by the states based on how frequently such groups are exempt.

For SNAP, minors, those who are older than 59 years, students, those receiving disability benefits, and those with a child under the age of 6 are exempt from both current and new, proposed work requirements. The samples are further limited to U.S. citizens and nonactive military. For simplification, we describe those aged 18-49 without dependents as being currently exposed to work requirements and those aged 18-59 with a dependent between the ages of 6 and 17 (inclusive) as well as those between the ages of 50 and 59 with no dependents under the age of 6 as newly required to meet work requirements or to participate in a training program in order to receive SNAP benefits. For the current group, some

FIGURE 1. Exposure to Work Requirements among Adult SNAP Participants, 2017



HAMILTON BROOKINGS may live in places exempt from work requirements or have an unobserved good-cause exemption.

How many adult SNAP participants are—or would be—exposed to work requirements? Figure 1 shows the entire adult population (18 or older) who reported SNAP participation in 2017. Each rectangle represents a share of the total population and whether the individuals in that share were eligible for a categorical exemption to work requirements (teal), were in a population currently exposed to a work requirement (green), or would be newly exposed to work requirements under the House proposal (purple). The shaded rectangles sum to 100 percent, the total adult SNAP participant population.

Under the House bill parameters (described in box 2), combined with current work requirements, one third of all adults who reported receiving SNAP benefits during 2017 would be exposed to work requirements, though a portion of those impacted could apply for exemptions based on verified health- or work-related concerns. Some already face work requirements, but 22 percent of all participants would be newly exposed to work requirements under the House bill (purple).

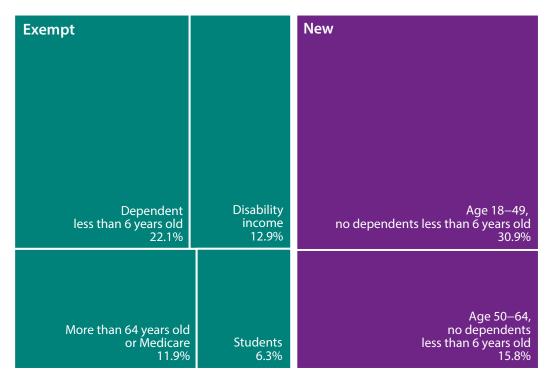
Figure 1 also shows the reasons some participants would be exempt from new requirements. The majority (67 percent)

of adults currently receiving SNAP benefits would still be exempt from work requirements based on age, having a dependent under the age of 6, or having student or disability status. Some would be exempt for multiple reasons; we group them first by age, then by the presence of dependents, and then by student or disability status. For example, while figure 1 shows just 14 percent exempt due to disability, 24 percent of all adult SNAP recipients report receipt of disability benefits.

In 2017, 2.2 million people who reported SNAP benefit receipt were exposed to work requirements during the year based on their demographic characteristics. Under the House proposal and based on 2017 numbers, this would more than double with 2.5 million adults aged 18–49 with dependent children aged 6–17 and 1.6 million adults aged 50–59 who would be exposed to work requirements nationally for the first time.

In any household, there may be others who rely on the benefits, and not just the individual facing work requirements. The solution to concerns for other individuals in the household has typically been to waive work requirements for those who likely cannot work or who reside with those for whom shielding from benefit loss is a priority. Any reduction in SNAP benefits to adults would reduce the total amount of resources available to them to purchase food, including food for children. There are 3.5 million children and 710,000

FIGURE 2. Exposure to Work Requirements among Adult Medicaid Participants, 2017



HAMILTON BROOKINGS seniors in these households that would be exposed to possible benefit loss due to work requirements.

We perform the same exercise to show the share of Medicaid beneficiaries who are targeted by the policy based on potential new rules (figure 2). Minors, seniors (those over the age of 64), students, those receiving disability benefits or Medicare, and those with a child under the age of 6 are those who are generally eligible to be exempt from work requirements based on the plans that states submitted, though there is variation across states. We apply these categories to the entire adult Medicaid population, acknowledging that not every state has submitted a work requirement proposal and that the affected population varies by state plans. A nationwide expansion of these rules would target 22.4 million Americans for a possible loss of Medicaid coverage.

Almost half of all adult Medicaid beneficiaries would be targeted by work requirements if the composite rules were applied nationwide. The largest share of those exempt from work requirements are parents with young children (22 percent) followed by those reporting disability income (13 percent) and Medicare/Medicaid dual enrollees (12 percent). About 6 percent of Medicaid participants are students.

### Volatility in the Low-Wage Labor Market

The decline in labor force participation—especially among prime-age males—has drawn extensive attention in academic and policy circles (e.g., Abraham and Kearney 2018; Council of Economic Advisers [CEA] 2016; Juhn 1992). Some recent academic work has emphasized the fact that participation may be declining in part because an increasing number of labor force participants cycle in and out of the labor force: a pattern with direct relevance to proposed work requirements. The most comprehensive look at the behavior of people cycling through the labor force is Coglianese (2018). He documents that, among men, this group—which he refers to as "in-andouts"—takes short breaks between jobs, returns to the labor force fairly quickly (within six months), and, crucially, is no more likely than a typical worker to take another break out of the labor force. See also Joint Economic Committee (2018) for a discussion of the in-and-out behavior of nonworking primeage men and reasons for their nonemployment.

SNAP or Medicaid participants who are employed but who work in jobs with volatile employment and hours would be at risk of failing work requirements. This group includes those who lose their job; for example, the House bill sanctions participants for months they are not working or in training for

at least 20 hours per week, even if they were recently employed and are searching for a new job. Similarly, those who work in jobs with volatile hours would be sanctioned in the months that their average hours fell below 20 hours per week, whether due to illness, lack of hours offered by the employer, or too few hours worked by the participant if they fail to receive a goodcause waiver.

Low-wage workers in seasonal industries such as tourism would potentially be eligible for SNAP in the months when they are working, but not in the months without employment opportunities. In other words, while benefits are most needed when an individual cannot find adequate work, under proposed work requirements these are the times that benefits would be unavailable. Disenrollment could make it more difficult for an individual to return to work—for example, if a person with chronic health conditions is unable to access needed care while they are between jobs. Any work requirement that banned individuals from participation for a considerable amount of time after failing the requirements would be even more problematic for those facing churn in the labor market.

In a set of analyses, Bauer and Schanzenbach (2018a, 2018b) found that although many SNAP beneficiaries work on average more than 20 hours a week every month, they frequently switch between working more than 20 hours and a different employment status over a longer time horizon. Using the ASEC, those authors found that, over the course of 16 months between 2016 and 2018, about 20 percent of individuals aged 18–59 without a dependent child under age 6 switched between working more than 20 hours a week and working fewer than 20 hours per week, seeking employment, or being out of the labor force.

In this economic analysis we examine labor force status transitions and the reasons given for not working among those targeted for work requirements over 24 consecutive months, January 2013–December 2014, using the first two waves of the Survey of Income and Program Participation (SIPP). By using a dataset that allows us to track workers over time, we identify the share of program participants who are consistently out of the labor force, the share who would consistently meet a work requirement, and the share who would be at risk of losing benefits based on failing to meet a work requirement threshold.

We assume that to comply with a program's work requirement, beneficiaries would have to prove each month that they are working for at least 20 hours per week averaged over the month, which is the typical minimum weekly requirement among the SNAP and Medicaid work requirement proposals. Looking first at SNAP and then at Medicaid, we calculate the share of program participants who would be exposed to benefit loss because they are not working sufficient hours

over the course of 24 consecutive months. Among those who would be exposed to benefit loss and who experienced a gap in employment, we describe the reasons given for not working to help quantify potential waiver eligibility.

We remove from the analysis all those who have a categorical exemption. For SNAP and Medicaid, we exclude those outside the targeted age range, those with children under 6, full- or part-time students, and those reporting disability income. Those receiving Medicare are additionally excluded from the Medicaid analysis. As an instructive example, the labeled group "18–49, no dependents" is additionally exclusive of students and those reporting disability income. Program participants are those who reported receiving SNAP or Medicaid at any point between January 1, 2013, and December 31, 2014.

We categorize each individual in each month into one of four categories: (1) employed and worked more than 20 hours a week on average, (2) employed and worked less than 20 hours a week on average, (3) unemployed and seeking employment, or (4) not in the labor force. If a worker was employed at variable weekly hours but maintained hours above the monthly threshold (80 hours for a four-week month and 120 hours for a five-week month), then we categorize them as "employed and worked more than 20 hours a week for that month." Individuals are considered to have a stable employment status if they do not change categories over two

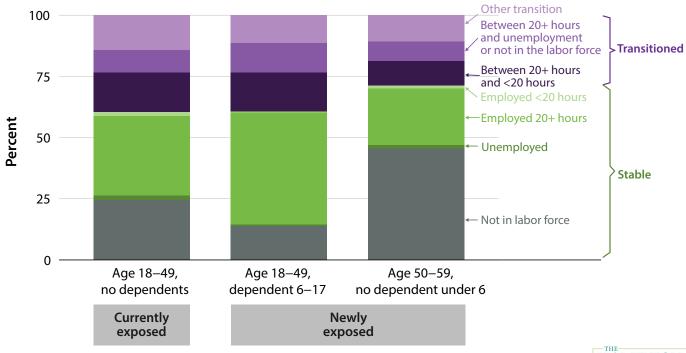
years, and are considered to have made an employment status transition if they switched between any of these categories at least once. There is no employment status transition when a worker changes jobs but works more than 20 hours a week at each job.

### EXPOSURE TO PROPOSED WORK REQUIREMENTS IN SNAP

Among working-age adults, SNAP and Medicaid serve a mix of the unemployed, low-income workers, and those who are not in the labor force (USDA 2017b). Figure 3 describes employment status by those groups who are currently exposed to work requirements and who would be newly subject to work requirements under the House proposal.

During the Great Recession, waivers to work requirements were implemented nationwide. During the time period covered by the SIPP (2013–14), 8 states stopped implementing these waivers fully, and 10 states partially (Silberman 2013).<sup>2</sup> For analytic purposes, we look at employment status transitions among 18 to 49 year-olds without dependents as the demographic group currently exposed to work requirements, regardless of whether they lived in state in which waivers were implemented during 2013 and 2014. Those receiving SNAP benefits who are in the demographic group currently exposed to work requirements—adults aged 18–49 with no dependents—generally participate in the labor market, with just 25 percent consistently not in the labor force (discussed

FIGURE 3.
Employment Status over Two Years, SNAP Participants



Source: Survey of Income and Program Participation (SIPP) (U.S. Census Bureau 2013-14); authors' calculations.

below). While 58 percent worked at least 20 hours per week in at least one month over two years, 25 percent were over the threshold at some point but fell below the 20-hour threshold during at least one month over two years. Very few are always working less than 20 hours a week or always unemployed (less than 2 percent in either case), and 14 percent move across these categories.

Those aged 18–49 who are not subject to the three-month time limit because they have a dependent aged 6–17 but who would face it under the House proposal demonstrate a similar distribution of employment status as those without a dependent, but they are more likely to work. There are fewer individuals who are always out of the labor force (14 percent) and more that consistently work 20 hours a week or more (46 percent).<sup>3</sup> There is also substantial month-to-month churn (16 percent) between working above 20 hours per week and less than 20 hours per week and churn (12 percent) between working above 20 hours per week and being either unemployed or not in the labor force. This highlights the number who are actively in the workforce and meeting the 20-hour threshold in at least one month, but who might fail new work requirements from time to time.

Older SNAP participants (aged 50–59 without dependents under age 6) who would also be newly exposed to work requirements and time limits have a distinct employment status pattern from those aged 18–49. Almost half were permanently out of the labor force in large part due to their health. While 23 percent worked consistently above the threshold of 20 hours a week, nearly as many (18 percent) worked above the threshold at some point but also below the threshold at some point, meaning they would fail the work requirement despite having sometimes met the threshold.

There is a meaningful portion of SNAP participants in the labor force and working, but not all are working above the monthly work requirement threshold consistently. Coglianese's (2018) finding that workers who are in and out of the labor force are not more likely to take another break later on suggests it is unclear how much more consistently work requirements would attach these people to the labor force.

We next examine the reasons given for not working over the two-year period, first for those aged 18–49 with a dependent between the ages of 6 and 17, and second for those 50 to 59 without a dependent under age 6 (figures 4a and 4b). The

Most-Frequent Reason for Not Working for Pay, SNAP Participants Aged 18–49 with Dependents Age 6–17

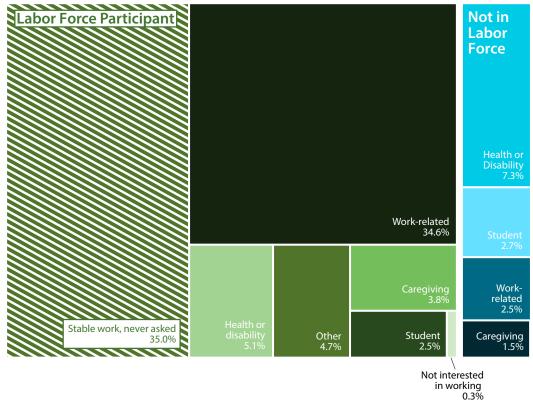
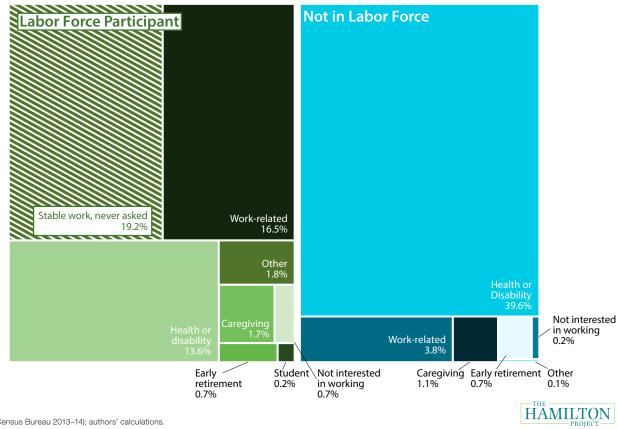




FIGURE 4B.

#### Most-Frequent Reason for Not Working for Pay, SNAP Participants Aged 50–59 with No Dependent under Age 6



Source: SIPP (U.S. Census Bureau 2013-14); authors' calculations

green crosshatch shows the share of the population that did not experience a gap in employment over the two-year period, and thus were never asked why they were not working. Among those who were asked why they were not working for pay during at least one week, we report the reason for not working in months they were not working. Those in solid shades of green were in the labor force but experienced at least one spell of unemployment or labor force nonparticipation. Those in the blue were out of the labor force for the entire twoyear period. Each person is assigned one reason—their most frequent reason—for not working.

Among those aged 18–49 with dependents aged 6–17 who are newly exposed to work requirements (figure 4a), 86 percent were in the labor force at some point over two years but not all worked stably. Among those who did not work for pay for at least one week but were in the labor force, the overwhelming majority gave work-related reasons (68 percent), such as temporary loss of job, temporary loss of hours (e.g., weatherrelated, not getting enough shifts, etc.), or a company shutting down a plant or location. Other large groups include those who are caregivers and those with health concerns. In a program with extensive good-cause waivers, it appears the

bulk of these workers would not lose benefits if waivers were implemented with fidelity; but the administrative burden required to sort those with work-related problems from those who choose to not work could be quite high.

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Among those out of the labor force for the entire two-year period, more than half cite health reasons for being out of the labor force. In total, 0.3 percent of those aged 18-49 who would be newly exposed to work requirements and who were labor force nonparticipants said that they were not interested in working.

Among individuals aged 50-59 (figure 4b), far more are out of the labor force consistently and far fewer have stable work. Overall, health (87 percent) and work-related (8 percent) issues dominate. The prevalence of health problems is striking considering we have already limited the sample to those not receiving disability payments. Fewer than 1 percent were retired or not interested in working.

The share of older SNAP participants listing caregiving as a reason for being not in the labor force is notably smaller than the share of the younger SNAP participant population. Roughly 11 percent of SNAP participants aged 18–49 with a dependent 6–17 that were out of the labor force for the entire 24-month period list caregiving as a reason for not being in the labor force. However, even 11 percent is smaller than many might expect. Many caregivers who are not in the labor force are in two-adult households where the other adult is working. In addition, many are in households with dependents aged 0–5, and those households are exempt from work requirements.

In summary, based on 2013–14 data, 5.5 million adult SNAP participants would be newly exposed to work requirements with 3.8 million who would have failed them at some point in this two-year window. Notable among those who were asked about a spell of not working, 2.1 million report health or disability issues and 1.5 million report work-related issues. Only about 90,000 list a lack of interest or early retirement as their reason for not working.

## EXPOSURE TO PROPOSED WORK REQUIREMENTS IN MEDICAID

We study the work participation of Medicaid beneficiaries in a similar manner. Unlike SNAP, there is no current population of participants who face work requirements across the country to use as a comparison group. As noted above, previous administrations and the courts have not viewed Medicaid work requirements as supporting core program goals; there are substantive doubts about whether work requirements for health insurance are appropriate. Nevertheless, we consider

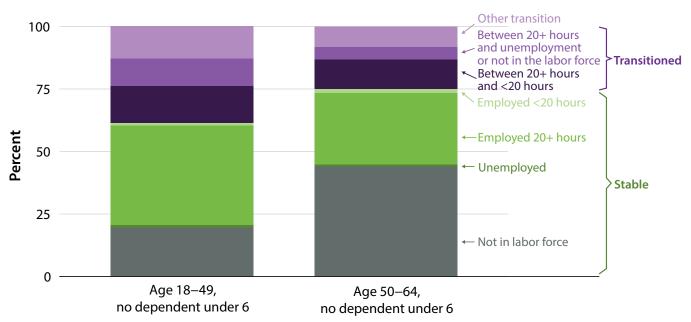
the employment status of Medicaid beneficiaries to illuminate how such requirements would function.

Since Medicaid beneficiaries do not currently face work requirements, we do not separately examine the population aged 18–49 without dependents. It is instructive to differentiate the work status transitions of younger (aged 18–49) and older (aged 50–64) Medicaid beneficiaries, restricted to those who either have a dependent 6–17 or no dependents, i.e. no dependents under the age of 6. We identify employment status transitions and the reasons given for not working among those targeted for work requirements over 24 consecutive months (January 2013–December 2014).

Figure 5 shows that over two years (2013 and 2014), 80 percent of Medicaid beneficiaries aged 18–49 without a dependent child under age 6 were in the labor force at some point. While about 40 percent consistently worked over the 20-hour threshold, 25 percent worked more than 20 hours at some point but would potentially lose benefits for falling below the 20-hour threshold for a month at another point.

The picture is quite different for older Medicaid beneficiaries (50 to 64) who would be exposed to work requirements. Of that population, 44 percent were out of the labor force for all 24 months. About 29 percent worked consistently more than 20 hours a week and about 17 percent worked more than 20 hours at least once but failed to do so every month. The reasons given among working-age adult Medicaid beneficiaries not working for pay suggest that labor market reasons dominate

FIGURE 5.
Employment Status over Two Years, Medicaid Participants



SIPP (U.S. Census Bureau 2013-14); authors' calculations.

#### FIGURE 6A.

### Most-Frequent Reason for Not Working for Pay, Medicaid Participants Aged 18–49 with No Dependents under Age 6

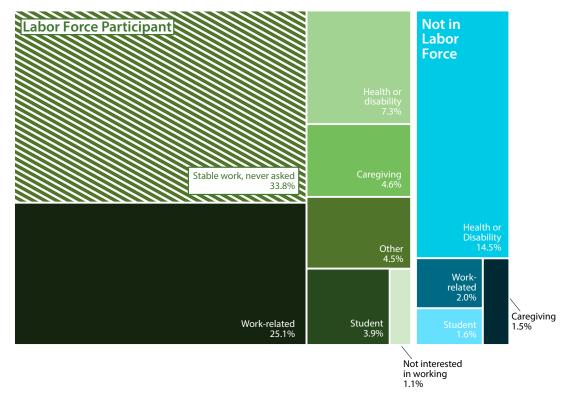
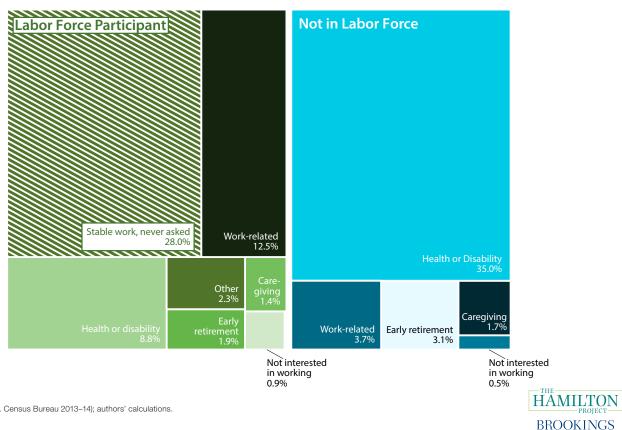


FIGURE 6B.

### Most-Frequent Reason for Not Working for Pay, Medicaid Participants Aged 50–64 with No Dependents under Age 6



Source: SIPP (U.S. Census Bureau 2013-14); authors' calculations.

among labor force participants and health reasons dominate among labor force nonparticipants (figures 6a and 6b). Once again, only a small number of labor force nonparticipants are not interested in work or are retired.

Among older participants of Medicaid (aged 50–64 without a dependent under age 6, the population making up 37 percent of the sample population), 35 percent of those with Medicaid coverage are out of the labor force for health reasons; this group represents 79 percent of those who were not in the labor force for the full two years. It is worth noting that work requirements for this group would necessitate either lax requirements with a very large portion of the population getting waivers, or an administratively burdensome process to determine which individual's health concerns truly limit them from work.

### Work Status in a Snapshot vs. Two Years

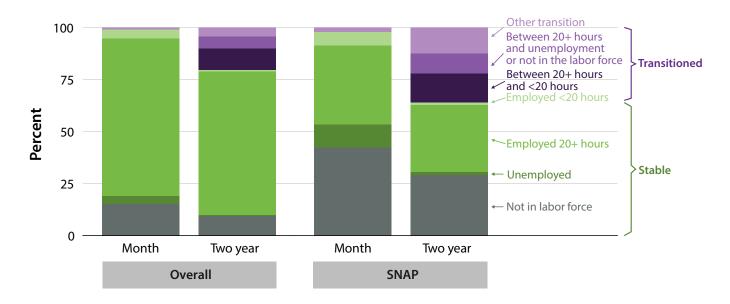
In its report on work requirements, the Council of Economic Advisers (CEA 2018) looked at employment among adult program participants for the month of December 2013 using the SIPP and found that about three in five participants worked fewer than 20 hours per month. The CEA concludes that this level of work—or lack thereof—"suggest[s] that

legislative changes requiring them to work and supporting their transition into the labor market, similar to the approach in TANF, would affect a large share of adult beneficiaries and their children in these non-cash programs" (1–2).

A critical empirical takeaway from the analysis presented herein is that frequent movement between labor status categories over time increases the number of people exposed to losing benefits for failing to consistently meet a work requirement, and decreases the number of people who are entirely out of the labor market. We now examine how the analysis of work experiences differs when we compare a snapshot in time—one month—with analysis that includes transitions across status over two years. When we compare the one month of SIPP data cited in the CEA report (December 2013) against 24 months, we find that fewer program participants are labor force nonparticipants and fewer meet the work requirement threshold.

Figure 7 demonstrates how observed employment status is different in one month versus two years. The first two bars show employment status categories for the full population aged 18–59 without dependents aged 0–5, disability payments, or status as students. The second two bars show employment status categories in one month and two years for SNAP participants aged 18–59 with no dependents aged 0–5, disability payments, or status as students. An "other" transition during a one-month period are those who report

FIGURE 7.
Employment Status in One Month vs. Two Years, SNAP



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being unemployed and a labor force nonparticipant during different weeks within December 2013.

The first feature that jumps out of the data is that far fewer people are out of the labor force than is generally assumed. While a one-month snapshot shows that 20 percent of the overall population is not working (either out of the labor force or unemployed), over the course of two years more than 90 percent of the overall population is employed at some point. Many people are not truly on the sidelines as much as they are cycling in and out of the game. Furthermore, fewer people are solidly in the 20 hours plus—workforce. The share of the overall population that stably works more than 20 hours per week falls from 76 percent in the one-month snapshot to 69 percent over two years.

Looking only at those who participated in SNAP at any point during the two-year period, the one-month snapshot is also different from the two-year, both in terms of the number of participants out of the labor force and the number who would retain benefits under the work requirement proposal. Instead of 42 percent being out of the labor force and roughly 11 percent unemployed in the one-month snapshot—leading to more than half of the group being labeled "not working" in the one-month snapshot—roughly 29 percent are out of the labor force and just 1 percent are persistently unemployed over two years, meaning fewer than one third are not working consistently. Recall that the higher "not working" rate among SNAP beneficiaries is largely driven by those aged 50–59.

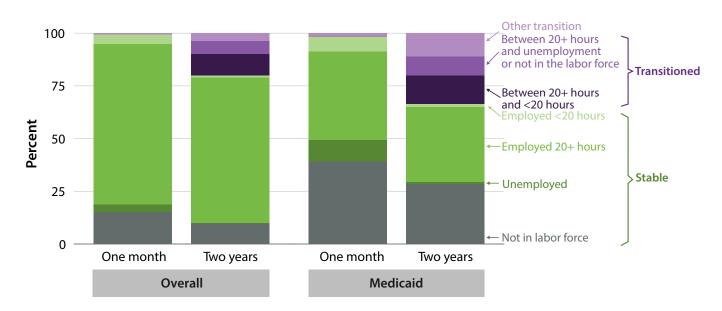
SNAP recipients aged 18–49 without dependents have a "not working" rate of 25 percent over two years, and those with dependents aged 6–17 have a "not working" rate of just 14 percent. Almost a quarter of SNAP participants would fail the work requirements some months and pass them in others, with the majority giving work-related reasons for their change in status.

A similar pattern holds for Medicaid beneficiaries: the monthly snapshot overstates the number of labor force nonparticipants and understates those who would meet a work requirement. There is a 10 percentage point–reduction in the share of those not working over one month (39 percent) versus two years (29 percent). Forty-two percent would meet the work requirement in one month, but only 36 percent do over two years. In addition, in the two-year sample 22 percent of participants work over 20 hours in at least one month in the sample but fail to in other months (figure 8).

### Conclusion

The combination of a strong labor market, work requirements to receive cash benefits through TANF, and work incentives generated by the EITC raised labor force participation rates among single mothers in the mid-1990s (Ziliak 2016), leading some to believe that further participation gains could be obtained by extending only the work requirement component to other programs (Haskins 2018; CEA 2018).

FIGURE 8.
Employment Status in One Month vs. Two Years, Medicaid



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What types of populations will face these new work requirements? How many would fail to meet the requirements? Do program participants appear to already be in the labor force facing work-related constraints on hours or do they choose not to work? And how many would in theory be eligible for waivers relative to those individuals that society would like to push toward work?

A large number of SNAP and Medicaid participants who would face new work requirements cycle in and out of the labor force and would thus lose benefits at certain times. Among those who are in the labor force, spells of unemployment are either due to job-related concerns or health issues. Very few reported that they were not working due to lack of interest.

Among those out of the labor force for the entire two-year period, health concerns are the overriding reason for not working, even after removing those who receive disability benefits from the sample. The older portion of the population newly exposed to work requirements is more likely to be out of the labor force for extended periods of time. Among this group, again, health reasons are the overriding factor in not working. Work requirements for this group might push more onto disability rolls, make the disability adjudication even more consequential, and require a separate health investigation to settle all the necessary waivers. Failure to receive a waiver would result in disenrollment; losing access to these programs would reduce resources available to purchase food and health insurance among otherwise eligible households.

For those who qualify for exemptions, satisfy waiver requirements, or work enough to meet the requirements, there are still significant informational and administrative barriers to compliance. Program participants must understand how the work requirement policy relates to them, obtain and submit documentation, and do so at the frequency prescribed by the state (Wagner and Solomon 2018). Frequent exposure to verification processes, such as the monthly reporting periods prescribed in the Agricultural Act of 2014 (the Farm Bill) and many states' Medicaid proposals, increases the administrative burden on participants and enforcers, the likelihood of error, and cost (Bauer and Schanzenbach 2018b). These continuing roadblocks to participation, with attendant informational and transactional costs, are likely to result in lower take-up among the eligible population and disenrollment (Finkelstein and Notowidigdo 2018).

Looking at snapshots of work experience, such as a single month, inflates both the number of SNAP and Medicaid participants who are out of the labor force and the number of people who work sufficient hours to satisfy work requirements. Over 24 consecutive months the number of SNAP and Medicaid program beneficiaries not working or seeking work as well as those working consistently above 20 hours fall substantially.

There are safety net levers that can be used to pull those out of the labor force into work. Steps such as increasing the EITC might be a very effective way to increase work participation in this group without the same administrative burdens and negative spillovers to vulnerable populations. (See Hoynes, Rothstein, and Ruffini 2017 for a specific proposal along these lines.) That proposal is estimated to increase participation by 600,000 people. Raising the returns to work via the EITC or other measures, creating training or educational opportunities that can increase individuals' human capital, and providing child care or improved treatment and medical care to reduce health barriers to work could make full attachment to the labor force more viable for many individuals.

#### **Endnotes**

- See technical appendix tables 1 and 2 for additional work status transition statistics.
- 2. The states not implementing able-bodied adult without dependents waivers at some point during 2013–14 are: Delaware, Guam, Iowa, Kansas, Nebraska, Oklahoma, Utah, Virginia, and Wyoming. States implementing a partial waiver (partial referring to different parts of the state or only part of the year): Colorado, Minnesota, New Hampshire, New York, North Dakota, Ohio, South Dakota, Texas, Vermont, Wisconsin.
- 3. Those who meet the 20-hour threshold monthly hours variable include both those who meet the threshold every week and those whose hours varied each week but averaged to 20 hours per week each month. The volatility of their hours may suggest they are more likely to fail the work requirement threshold but they did not do so over the two-year window.

#### References

- Abraham, Katharine G., and Melissa S. Kearney. 2018. "Explaining the Decline in the U.S. Employment-to-Population Ratio: A Review of the Evidence." Working Paper 24333, National Bureau of Economic Research, Cambridge, MA.
- Agricultural Act of 2014 (Farm Bill), Pub.L. 113-79 (2014).
- Arkansas Department of Human Services. n.d. "Access Arkansas." (https://access.arkansas.gov.)
- Baicker, Katherine, Amy Finkelstein, Jae Song, and Sarah Taubman. 2014. "The Impact of Medicaid on Labor Market Activity and Program Participation: Evidence from the Oregon Health Insurance Experiment." *American Economic Review* 104 (5): 322–28.
- Bauer, Lauren, and Diane Whitmore Schanzenbach. 2018a, July 27. "Employment Status Changes Put Millions at Risk of Losing SNAP Benefits for Years." Blog. The Hamilton Project, Brookings Institution, Washington, DC.
- ——. 2018b, August 9. "Who Loses SNAP Benefits If Additional Work Requirements Are Imposed? Workers." Blog. The Hamilton Project, Brookings Institution, Washington, DC.
- Black, Sandra E., Diane W. Schanzenbach, and Audrey Breitwieser. 2017. "The Recent Decline in Women's Labor Force Participation." In *Driving Growth through Women's Economic Participation* edited by Diane W. Schanzenbach and Ryan Nunn, 5–17. Washington, DC: The Hamilton Project.
- Blank, Rebecca. 2002. "Evaluating Welfare Reform in the United States." *Journal of Economic Literature* 40 (4): 1105–66.
- Blinder, Alan S., and Mark Zandi. 2015. "The Financial Crisis: Lessons for the Next One." Policy Futures, Center on Budget and Policy Priorities, Washington, DC.
- Bolen, Ed, Lexin Cai, Stacy Dean, Brynne Keith-Jennings, Catlin Nchako, Dottie Rosenbaum, and Elizabeth Wolkomir. 2018. "House Farm Bill Would Increase Food Insecurity and Hardship." Center on Budget and Policy Priorities, Washington, DC.
- Buchmueller, Thomas, John C. Ham, and Lara D. Shore-Sheppard. 2016. "The Medicaid Program." In *Economics of Means-Tested Transfer Programs in the United States*, Vol. I, edited by Robert A. Moffitt, 21–136. Chicago, IL: University of Chicago Press.

- Bureau of Labor Statistics (BLS). 1977–2017. "Current Population Survey Annual Social and Economic Supplement." Bureau of Labor Statistics, U.S. Department of Labor, Washington, DC. Retrieved from IPUMS-CPS, University of Minnesota.
- ——. 2018. "Current Population Survey Annual Social and Economic Supplement." Bureau of Labor Statistics, U.S. Department of Labor, Washington, DC. Retrieved from IPUMS-CPS, University of Minnesota.
- Butcher, Kristin F., and Diane Whitmore Schanzenbach. 2018.

  "Most Workers in Low-Wage Labor Market Work
  Substantial Hours, in Volatile Jobs." Policy Futures, Center
  on Budget and Policy Priorities, Washington, DC.
- The Centers for Medicare & Medicaid Services. 2018. "Remarks by Administrator Seema Verma at the 2018 Medicaid Managed Care Summit." As prepared for delivery: September 27, 2018. The Centers for Medicare & Medicaid Services, Washington, DC.
- Coglianese, John. 2018, February. "The Rise of In-and-Outs:

  Declining Labor Force Participation of Prime Age Men."

  Working Paper, Harvard University, Cambridge, MA.
- Council of Economic Advisers (CEA). 2016. "The Long-Term Decline in Prime-Age Male Labor Force Participation." Council of Economic Advisers, White House, Washington, DC.
- ———. 2018. "Expanding Work Requirements in Non-Cash Welfare Programs." Council of Economic Advisers, White House, Washington, DC.
- Dague, Laura, Thomas DeLeire, and Lindsey Leininger. 2017. "The Effect of Public Insurance Coverage for Childless Adults on Labor Supply." *American Economic Journal: Economic Policy* 9 (2): 124–54.
- Duggan, Mark, Gopi Shah Goda, and Emilie Jackson. 2017. "The Effects of the Affordable Care Act on Health Insurance Coverage and Labor Market Outcomes." Working Paper 23607, National Bureau of Economic Research, Cambridge, MA.
- Fang, Hanming, and Michael P. Keane. 2004. "Assessing the Impact of Welfare Reform on Single Mothers." *Brookings Papers on Economic Activity* (1): 1-95.

- Finkelstein, Amy, Nathaniel Hendren, and Erzo F. P. Luttmer. 2015. "The Value of Medicaid: Interpreting Results from the Oregon Health Insurance Experiment." Working Paper 21308, National Bureau of Economic Research, Cambridge, MA
- Finkelstein, Amy, and Matthew J. Notowidigdo. 2018. "Take-up and Targeting: Experimental Evidence from SNAP." Working Paper 24652, National Bureau of Economic Research, Cambridge, MA.
- Gangopadhyaya, Anuj, Genevieve M. Kenney, Rachel A. Burton, and Jeremy Marks. 2018. "Medicaid Work Requirements in Arkansas: Who Could Be Affected, and What Do We Know about Them?" Urban Institute, Washington, DC.
- Garfield, Rachel, Robin Rudowitz, and Anthony Damico. 2018. "Understanding the Intersection of Medicaid and Work." Henry J. Kaiser Family Foundation, San Francisco, CA.
- Garfield, Rachel, Robin Rudowitz, and MaryBeth Musumeci. 2018.

  "Implications of a Medicaid Work Requirement: National
  Estimates of Potential Coverage Losses." Henry J. Kaiser
  Family Foundation, San Francisco, CA.
- Garfield, Rachel, Robin Rudowitz, MaryBeth Musumeci, and Anthony Damico. 2018. "Implications of Work Requirements in Medicaid: What Does the Data Say?" Henry J. Kaiser Family Foundation, San Francisco, CA.
- Garthwaite, Craig, Tal Gross, and Matthew J. Notowidigdo. 2014. "Public Health Insurance, Labor Supply, and Employment Lock." *Quarterly Journal of Economics* 129 (2): 653–96.
- Goldman, Anna L., Steffie Woolhandler, David U. Himmelstein,
  David H. Bor, and Danny McCormick. 2018. "Analysis of
  Work Requirement Exemptions and Medicaid Spending." *JAMA Internal Medicine* online, September 10.
- Gooptu, Angshuman, Asako S. Moriya, Kosali I. Simon, and Benjamin D. Sommers. 2016. "Medicaid Expansion Did Not Result in Significant Employment Changes or Job Reductions in 2014." *Heath Affairs* 35 (1): 111–18.
- Grogger, Jeffrey. 2004. "Welfare Transitions in the 1990s: The Economy, Welfare Policy, and the EITC." *Journal of Policy Analysis and Management* 23 (4): 671–95.
- Hamilton, Gayle, Stephen Freedman, Lisa Gennetian, Charles Michalopoulos, Johanna Walter, Dianna Adams-Ciardullo, and Anna Gassman-Pines. "National Evaluation of Welfare-to-Work Strategies." 2001. Prepared by MDRC, Washington, DC for the U.S. Department of Health and Human Services and U.S. Department of Education.
- Haskins, Ron. 2018, July 25. "Trump's Work Requirements Have Been Tested Before. They Succeeded." *The Washington Post*.

- Hoynes, Hilary, Jesse Rothstein, and Krista Ruffini. 2017. "Making Work Pay Better through an Expanded Earned Income Tax Credit." Policy Proposal 2017-09, The Hamilton Project, Brookings Institution, Washington, DC.
- Hoynes, Hilary Williamson, and Schanzenbach, Diane Whitmore. 2012. "Work Incentives and the Food Stamp Program." *Journal of Public Economics* 96 (1): 151–62.
- ——. 2016, January. "The Safety Net as an Investment." Working Paper, University of California, Berkeley.
- Institute of Medicine. 2003. "Spending on Health Care for Uninsured Americans: How Much, and Who Pays?"
  In *Hidden Costs, Values Lost: Uninsurance in America*, edited by Institute of Medicine (US) Committee on the Consequences of Uninsurance. Washington, DC: National Academies Press.
- Joint Economic Committee. 2018. "Inactive, Disconnected, and Ailing: A Portrait of Prime-Age Men Out of the Labor Force." SCP Report 2-18, Joint Economic Committee, Washington, DC.
- Juhn, Chinhui. 1992. "Decline of Male Labor Market Participation: The Role of Declining Market Opportunities." *The Quarterly Journal of Economics* 107 (1): 79–121.
- Kaestner, Robert, Bowen Garrett, Jiajia Chen, Anuj Gangopadhyaya, and Caitlyn Fleming. 2017. "Effects of ACA Medicaid Expansions on Health Insurance Coverage and Labor Supply." *Journal of Policy Analysis and Management* 36 (3): 608–42.
- Keith-Jennings, Brynne, and Dottie Rosenbaum. 2015. "SNAP Benefit Boost in 2009 Recovery Act Provided Economic Stimulus and Reduced Hardship." Center on Budget and Policy Priorities, Washington, DC.
- Meyer, Bruce D., and Dan T. Rosenbaum. 2001. "Welfare, The Earned Income Tax Credit, and The Labor Supply of Single Mothers." *The Quarterly Journal of Economics* 116 (3): 1063-1114.
- Neale, Brian. 2018. "RE: Opportunities to Promote Work and Community Engagement among Medicaid Beneficiaries." SMD Letter 18-002, Center for Medicare & Medicaid Services, U.S. Department of Health and Human Services, Washington, DC.
- Patient Protection and Affordable Care Act (ACA), Pub. L. 111-148, 124 Stat. 119 through 124 Stat. 1025 (2010).
- Pavetti, LaDonna, and Liz Schott. 2016. "TANF at 20: "TANF at 20: Time to Create a Program that Supports Work and Helps Families Meet Their Basic Needs." Center on Budget and Policy Priorities, Washington, DC.

- Price, Thomas E., and Seema Verma. 2017. "Letter to the Nation's Governors." U.S. Department of Health and Human Services, Washington, DC.
- Rosenbaum, Dorothy. 2013. "The Relationship between SNAP and Work among Low-Income Households." Center on Budget and Policy Priorities, Washington, DC.
- Rudowitz, Robin, and MaryBeth Musumeci. 2018. "An Early Look at State Data for Medicaid Work Requirements in Arkansas." Henry J. Kaiser Family Foundation, San Francisco, CA.
- Schanzenbach, Diane W. 2018. "Can Benefits and Incentives Promote Work?" *Journal of Policy Analysis and Management* 37 (4): 903-11.
- Silberman, Lizbeth. 2013. "Supplemental Nutirition Assistance Program (SNAP): Able Bodied Adults Without Dependents Waivers for Fiscal Year 2014." Policy Memorandum, Augiust 2. U.S. Department of Agriculture, Food and Nutrition Service. (https://fns-prod.azureedge.net/sites/ default/files/FY\_2014\_ABAWD\_Waiver\_Status.pdf.)
- Stewart v. Azar (Ronnie Maurice Stewart et al. v. Alex M. Azar II et al.). Civil Action No. 18-152 (JEB) (D.D.C. Apr. 10, 2018).
- Urban Institute. 2018, October. "Work Requirements Tracker." Urban Institute, Washington, DC.

- U.S. Census Bureau. 2013–14. "Survey of Income and Program Participation." U.S. Census Bureau, U.S. Department of Commerce, Suitland, MD.
- U.S. Department of Agriculture (USDA). 2017a. "Characteristics of USDA Supplemental Nutrition Assistance Program Households: Fiscal Year 2016 (Summary)." U.S. Department of Agriculture, Washington, DC.
- ——. 2017b. "Supplemental Nutrition Assistance Program (SNAP): Facts About SNAP." U.S. Department of Agriculture, Washington, DC.
- Wagner, Jennifer, and Judith Solomon. 2018. "States' Complex Medicaid Waivers Will Create Costly Bureaucracy and Harm Eligible Beneficiaries." Center on Budget and Policy Priorities, Washington, DC.
- White House. 2018. "Executive Order Reducing Poverty in America by Promoting Opportunity and Economic Mobility." White House, Washington, DC.
- Wolkomir, Elizabeth, and Lexin Cai. 2018. "The Supplemental Nutrition Assistance Program Includes Earnings Incentives." Center on Budget and Policy Priorities, Washington, DC.
- Ziliak, James P. 2016. "Temporary Assistance for Needy Families." In *Economics of Means-Tested Transfer Programs in the United States*, Vol. I, edited by Robert A. Moffitt, 303–93. Chicago, IL: University of Chicago Press.

### Appendix

APPENDIX TABLE 1. Employment Status, SNAP Participants

	Stable (not in labor force)	Stable (unemployed)	Stable (employed 20+ hours)	Stable (employed <20 hours)	Transitioned between 20+ hours and <20 hours	Transitioned between 20+ hours and unemployment or not in labor force	Other transition					
Age 18–49, no dependents												
2013	34.3%	5.5%	33.3%	4.1%	7.9%	4.9%	10.0%					
2014	32.6%	5.5%	37.4%	3.5%	9.1%	7.2%	4.7%					
2013–14	24.6%	1.7%	32.6%	1.7%	16.0%	9.3%	14.1%					
	Age 18–49, dependent 6–17											
2013	20.4%	4.9%	49.9%	2.4%	8.9%	6.0%	7.5%					
2014	21.0%	4.2%	50.2%	2.4%	8.6%	9.9%	3.8%					
2013–14	14.0%	0.7%	45.6%	0.4%	15.9%	12.3%	11.3%					
	Age 50–59, no dependent under 6											
2013	50.4%	4.6%	25.8%	2.6%	5.7%	3.9%	7.0%					
2014	53.3%	3.5%	26.1%	2.5%	5.9%	5.1%	3.6%					
2013–14	45.7%	1.3%	23.0%	1.4%	10.1%	7.9%	10.7%					

Source: SIPP (U.S. Census Bureau 2013-14); authors' calculations.

Note: The sample is limited to U.S. citizens, nonactive military, who reported receiving SNAP benefits at any point between January 2013 and December 2014. Only respondents with 24 months of data were included. Those with children under age 6, full- or part-time students, and those who reported receiving disability benefits were excluded from the sample based on categorical work requirement exclusions. Those who were assigned to "stable" categories were observed as not in the labor force, unemployed, above the 20-hour threshold per week. Those who were stable and employed more than 20 hours a week were assigned either by meeting the threshold every week or because the monthly hours total averaged to above 20 hours per week. Regardless of the number of transitions made, each person who was observed as switching between work statuses was assigned to one group in the following order: first, transitioned between more than all less than 80 hours per month; second, transitioned between more than 80 hours per month and unemployment or labor force nonparticipation; third, other. "Other" includes those who transitioned between unemployment and labor force nonparticipation.



APPENDIX TABLE 2.

#### Employment Status, Medicaid Participants

	Stable (not in labor force)	Stable (unemployed)	Stable (employed 20+ hours)	Stable (employed <20 hours)	Transitioned between 20+ hours and <20 hours	Transitioned between 20+ hours and unemployment or not in labor force	Other transition				
	Age 18–49, no dependent under 6										
2013	27.7%	3.8%	42.6%	3.6%	8.1%	4.1%	10.0%				
2014	26.4%	4.2%	46.1%	3.3%	7.3%	7.6%	5.1%				
2013–14	19.6%	1.1%	39.6%	1.1%	14.8%	10.9%	12.8%				
	Age 50–64, no dependent under 6										
2013	48.4%	3.2%	32.9%	3.8%	5.5%	2.2%	4.0%				
2014	51.2%	2.7%	29.9%	3.5%	5.0%	4.6%	3.1%				
2013–14	44.1%	0.8%	28.5%	1.8%	11.7%	5.0%	8.2%				

Source: SIPP (U.S. Census Bureau 2013-14); authors' calculations.

Note: The sample is limited to U.S. citizens, nonactive military, who reported receiving Medicaid benefits at any point between January 2013 and December 2014. Only respondents with 24 months of data were included. Those with children under age 6, full- or part-time students, those who reported receiving Medicare, and those who reported receiving disability benefits were excluded from the sample based on categorical work requirement exclusions. Those who were stable labor force nonparticipants are contrasted with those who were in the labor force (working or seeking work) at least once during the two-year period. Those who were assigned to "stable" categories were observed as not in the labor force, unemployed, working above the 20-hour threshold, or working below the 20-hour threshold per week. Those who were stable and employed more than 80 hours per week were assigned either by meeting the 20 hours per week threshold every week or because the monthly hours total averaged above 20 hours per week. Regardless of the number of transitions made, each person who was observed as switching between work statuses was assigned to one group in the following order: first, transitioned between more than and less than 80 hours per month; second, transitioned between more than 80 hours per month and unemployment or labor force nonparticipation; third, other. "Other" includes those who transitioned between less than 80 hours per month and unemployment or labor force nonparticipation as well as those who transitioned between unemployment and labor force nonparticipation.



### **Technical Appendix**

#### Box Figure 1. Prime-Age Women's Labor Force Participation, by Marital Status and Presence of Children under Age 18

**Source:** Current Population Survey Annual Social and Economic Supplement (ASEC) (Bureau of Labor Statistics [BLS] 1977–2017); authors' calculations.

**Note:** "Prime-age" indicates ages 25 to 54, inclusive. "Married" is defined by women who have a spouse in the household or not in the household. "Single" is defined as all other women, including divorced and widowed women. "With children" is defined as having at least one child in the household under the age of 18. "No children" is defined as having no children in the household under the age of 18. Population counts calculated using the Annual Social and Economic Supplement weight.

## Figure 1. Exposure to Work Requirements among Adult SNAP Participants, 2017

Source: ASEC (BLS 2018); authors' calculations.

Notes Those who would be exempt from work requirements if the House bill work requirements were passed include those over the age of 59, those with a dependent under the age of 6, full- or part-time students, and those who receive disability benefits. While in some states work requirements are waived for those aged 18–49 with no dependents, state-level differences are not accounted for in identifying those who are currently exposed to work requirements. Population counts calculated using the Annual Social and Economic Supplement weight among U.S. citizens over the age of 18 who reported receiving SNAP benefits at some point during 2017.

## Figure 2. Exposure to Work Requirements among Adult Medicaid Participants, 2017

Source: ASEC (BLS 2018); authors' calculations.

**Note:** States applying for waivers to add work requirements to Medicaid have identified different categorical exemptions and conditions for waivers. For this exercise, we identified the most frequent categorical exemptions and applied those rules nationally. Those who are over the age of 64 or who are dual Medicare enrollees are exempt, those receiving disability income are exempt, those with a dependent under the age of 6 are exempt, and full- or part-time students are exempt.

Population counts are calculated using the Annual Social and Economic Supplement weight among U.S. citizens over the age of 18 who reported receiving Medicaid benefits at some point during 2017.

## Figure 3. Employment Status over Two Years, SNAP Participants

**Source:** Survey of Income and Program Participation (SIPP) (U.S. Census Bureau 2013–14); authors' calculations.

Note: The sample is limited to U.S. citizens, nonactive military, aged 18-59 who reported receiving SNAP benefits at any point between January 2013 and December 2014. Only respondents with 24 months of data were included. Those with children under age 6, full- or part-time students, and those who reported receiving disability benefits were excluded from the sample based on categorical work requirement exclusions. Those who were assigned to "stable" categories were observed as not in the labor force, unemployed, working above the 20-hour threshold, or working below the 20-hour threshold per week. Those who were stable and employed more than 20 hours a week were assigned either by meeting the threshold every week or because the monthly hours total averaged to above 20 hours per week. Regardless of the number of transitions made, each person who was observed as switching between work statuses was assigned to one group in the following order: first, transitioned between more than and less than 80 hours per month; second, transitioned between more than 80 hours per month and unemployment or labor force nonparticipation; third, other. "Other" includes those who transitioned between less than 80 hours per month and unemployment or labor force nonparticipation as well as those who transitioned between unemployment and labor force nonparticipation.

## Figures 4A and 4B. Most Frequent Reason for Not Working for Pay, SNAP Participants

**Source:** SIPP (U.S. Census Bureau 2013–14); authors' calculations.

**Notes** The sample is limited to U.S. citizens, nonactive military, aged 18–59 who reported receiving SNAP benefits at any point between January 2013 and December 2014. Only respondents with 24 months of data were included. Those with

children under age 6, full- or part-time students, and those who reported receiving disability benefits were excluded from the sample based on categorical work requirement exclusions. Figure 4a is further restricted to those between the ages of 18 and 49 with a dependent between the ages of 6 and 17 while figure 4b is limited to those between the ages of 50 and 59 with no dependents under the age of 6. Each person's most frequent response for why they were not working was used to calculate the distribution; ties were assigned in descending order by work-related, health or disability, caregiving, student, early retirement, not interested in working, and other. The "stable work, not asked" group indicates that the respondent was never asked this survey question because they were working for pay every week. "Work-related" includes not being able to find work, being laid off, or working for more than 15 hours for no pay at a family business or farm. "Health or disability" includes being unable to work because of an injury, illness, or chronic health condition or disability. "Caregiving" includes those not working due to pregnancy or recent childbirth, or taking care of children or other persons. Students included in the sample are those who did not report that they were enrolled full- or part-time but reported not working because they were going to school.

## Figure 5. Employment Status over Two Years, Medicaid Participants

**Source:** SIPP (U.S. Census Bureau 2013–14); authors' calculations.

**Note:** The sample is limited to U.S. citizens, nonactive military, aged 18–64 who reported receiving Medicaid benefits at any point between January 2013 and December 2014. Only respondents with 24 months of data were included. Those with children under age 6, full- or part-time students, those who reported receiving Medicare, and those who reported receiving disability benefits were excluded from the sample based on categorical work requirement exclusions. See technical appendix entry for figure 3 with regard to employment status assignment.

## Figures 6A and 6B. Most Frequent Reason for Not Working for Pay, Medicaid Participants

**Source:** SIPP (U.S. Census Bureau 2013–14); authors' calculations.

Note: The sample is limited to U.S. citizens, nonactive military, aged 18–64 who reported receiving Medicaid benefits at any point between January 2013 and December 2014. Only respondents with 24 months of data were included. Those with children under age 6, full- or part-time students, those who reported receiving Medicare, and those who reported receiving disability benefits were excluded from the sample based on categorical work requirement exclusions. Those who were stable labor force nonparticipants are contrasted

with those who were in the labor force (working or seeking work) at least once during the two-year period. Figure 6a is further restricted to those between the ages of 18 and 49 with a dependent between the ages of 6 and 17, whereas figure 6b is limited to those between the ages of 50 and 64 with no dependents under the age of 6. See technical appendix entry for figures 4a and 4b with regard to reason assignment.

## Figure 7. Employment Status in One Month vs. Two Years, SNAP

**Source:** SIPP (U.S. Census Bureau 2013–14); authors' calculations.

Note: The sample is limited to U.S. citizens, nonactive military, aged 18–59. Only respondents with 24 months of data were included. Those currently exposed to work requirements, those with children under age 6, full- or part-time students, and those who reported receiving disability benefits were excluded from the sample. The one-month and two-year samples differ by reported SNAP benefit receipt. In the one-month sample, "other" refers to those who switched between labor force nonparticipation and unemployment during the month of December 2013, the month chosen in the SIPP by CEA for its report on work requirements.

## Figure 8. Employment Status in One Month vs. Two Years, Medicaid

**Source:** SIPP (U.S. Census Bureau 2013–14); authors' calculations.

Note: The sample is limited to U.S. citizens, nonactive military, aged 18–64. Only respondents with 24 months of data were included. Those with children under age 6, full- or part-time students, those who reported receiving Medicare, and those who reported receiving disability benefits were excluded from the sample based on categorical work requirement exclusions. The one-month and two-year samples differ by reported Medicaid benefit receipt. In the one-month sample, "other" refers to those who switched between labor force nonparticipation and unemployment during the month of December 2013.



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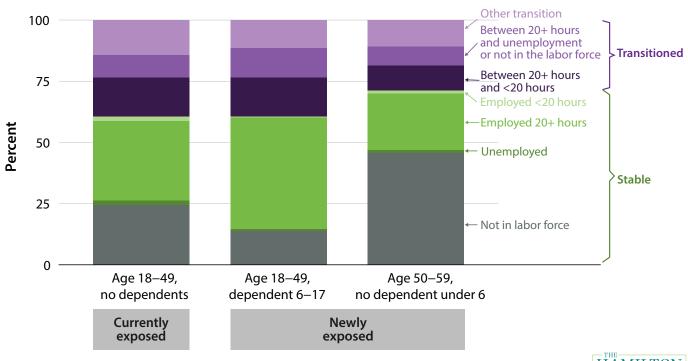
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#### **Abstract**

Basic assistance programs such as the Supplemental Nutrition Assistance Program (SNAP, formerly the Food Stamps Program) and Medicaid ensure families have access to food and medical care when they are low-income. Some policymakers at the federal and state levels intend to add new work requirements to SNAP and Medicaid. In this paper, we analyze those who would be impacted by an expansion of work requirements in SNAP and an introduction of work requirements into Medicaid. We characterize the types of individuals who would face work requirements, describe their labor force experience over 24 consecutive months, and identify the reasons why they are not working if they experience a period of unemployment or labor force nonparticipation. We find that the majority of SNAP and Medicaid participants who would be exposed to work requirements are attached to the labor force, but that a substantial share would fail to consistently meet a 20 hours per week–threshold. Among persistent labor force nonparticipants, health issues are the predominant reason given for not working. There may be some subset of SNAP and Medicaid participants who could work, are not working, and might work if they were threatened with the loss of benefits. This paper adds evidence to a growing body of research that shows that this group is very small relative to those who would be sanctioned under the proposed policies who are already working or are legitimately unable to work.

FIGURE 3.
Employment Status over Two Years, SNAP Participants



Source: Survey of Income and Program Participation (SIPP) (U.S. Census Bureau 2013-14); authors' calculations





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