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Hundreds of Thousands of Young Children and Postpartum Adults Would Be Turned Away from WIC under House and Senate Funding Levels

By Katie Bergh and Zoë Neuberger

As Congress considers appropriations bills for fiscal year 2024, new data confirm that WIC needs significant additional funding — *well beyond the amounts provided in current House and Senate bills* — to maintain a long-standing, bipartisan commitment to avoid turning away eligible families, and to provide participants with the current science-based food benefit.

Under the House bill, which may come to the floor for a vote this week, we estimate that 650,000 to 750,000 eligible people — primarily toddlers, preschoolers, and postpartum adults — would be turned away from the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC). (This number is in comparison to the average number of people who would be served each month if the program was fully funded.) Another 4.6 million toddlers and preschoolers and pregnant, postpartum, and breastfeeding participants would have their benefits cut significantly. In total, the House bill would cut food assistance for, or take it away altogether from, roughly 5.3 million young children and pregnant, postpartum, and breastfeeding adults.

We estimate that even the Senate's higher funding level would require states to turn away 700,000 to 800,000 postpartum adults and young children, but those who are enrolled in WIC would receive full benefits. Table 1 below provides estimates of the reduction in the number of people WIC would serve in each state under both bills, relative to estimated participation, if the funding gap is not filled.

Time is of the essence. States need more money at the start of the fiscal year, along with an assurance that full-year funding will be adequate, or they may well start taking steps to cut enrollment even before final funding levels are settled for the year.

WIC provides critical nutrition benefits, breastfeeding support, and other vital services to low-income pregnant and postpartum people, infants, and young children under age 5 who are at nutritional risk. In recognition of WIC's positive impacts on health and developmental outcomes, policymakers have adhered to a bipartisan commitment for more than 25 years to provide the program sufficient funding to serve all eligible applicants.

¹ Estimates of the number of people turned away under the House and Senate bills assume full use of WIC's \$150 million contingency fund. If the contingency fund were not used, additional people would be turned away.

To maintain this commitment and provide full benefits, WIC will need \$7.2 to \$7.3 billion next fiscal year, we estimate based on the most recent data. That is \$900 million to \$1 billion above the President's budget request and the amount in the Senate's appropriations bill, and \$1.7 billion to \$1.8 billion above the level provided in the House bill.

The House Republicans' appropriations bill, which passed out of committee on a party-line vote, falls dramatically short of WIC's fiscal year 2024 funding needs. And it would weaken the program's science-based benefits by sharply reducing the fruit and vegetable benefit that was increased two years ago on the recommendation of the National Academies of Sciences, Engineering and Medicine.

The bipartisan bill the Senate Appropriations Committee unanimously advanced in June funds WIC at the level requested in the President's budget, \$6.3 billion. This amount was thought to be sufficient when the Biden Administration put together its budget earlier this year, but recent data have shown that it falls short of the funding that's needed to provide full benefits and to keep people off waiting lists and serve everyone who applies and is eligible. The Senate bill, like the President's budget, maintains the integrity of WIC's food benefits, including the science-based fruit and vegetable benefit.

WIC funding needs have increased because the number of pregnant, postpartum, and breastfeeding adults, infants, and young children participating in the program has risen more than expected when the President's budget was being developed — as have food costs — substantially increasing the cost of serving all eligible applicants and providing participants with the full food benefit.

Congress must provide WIC the resources it needs or the program will be forced to turn away eligible low-income families seeking support. Under a funding shortfall, states would have to serve fewer young children and new parents than they are currently serving and are projected to serve next year (if full funding is made available). To do this, they would put some eligible applicants on waiting lists and would be unable to continue serving some participants when they reached the end of their current eligibility period and needed to recertify to continue receiving benefits. States can also reduce enrollment by scaling back outreach, clinic hours, or enrollment simplification efforts, and eligible people who otherwise would have sought benefits could also be discouraged from applying when they learn about waitlists.

Turning away eligible low-income families would deny them nutrition assistance and other vital services that young children need during critical periods of early brain development, and that pregnant, postpartum, and breastfeeding adults need to support their health. The impacts of food insecurity and hunger on children are well-documented, with even short periods of food insecurity resulting in harm to their mental and physiological development and increased risk of adverse health

outcomes.² WIC participation contributes to lower prevalence of food insecurity, along with healthier births, more nutritious diets, and higher academic achievement for students.³

If, as is likely, Congress enacts a short-term continuing resolution in September because its full-year appropriations bills aren't completed, it will be critical that it include the additional resources WIC needs to continue providing current benefits to all eligible people who seek them — and as much funding certainty for the full fiscal year as is possible to prevent state WIC programs from ramping down enrollment before funding bills are finalized. Even temporary uncertainty about annual funding could drive states to take measures to curtail enrollment in anticipation of a possible shortfall later in the fiscal year. If final full-year funding is inadequate, the longer that state WIC programs wait to take steps to reduce enrollment, the more extreme the measures they will have to take in the remaining months in order to bring annual expenses in line with available funding. Policymakers must act swiftly to resolve this uncertainty and meet WIC's funding needs to avoid jeopardizing eligible families' access to WIC, which could have lasting nutritional and health consequences.

Rising Participation and Food Costs Are Increasing WIC's Funding Needs

Several factors are increasing WIC's future funding needs. First, WIC participation has been rising over the last couple of years, with more rapid growth in this fiscal year. This is a welcome development. Despite WIC's strong long-term impacts, in recent years take-up rates among those eligible have been relatively low: only 50.2 percent program-wide in 2020, and even lower for pregnant people (45.6 percent) and children aged 1 through 4 (40.6 percent). Federal and state policymakers have taken steps to make WIC easier to access and that work is starting to show results.

More rapid participation growth in fiscal year 2023 was not expected when the President's budget was released, but data over the last few months have shown a clear upward trend: participation in the first seven months of fiscal year 2023 was 4.4 percent higher than in the first seven months of fiscal year 2022.

Based on current participation trends, we now estimate that average monthly participation for fiscal year 2023 will be about 6.55 million people. For fiscal year 2024 we estimate it will be 6.76

² Sara Grineski, Danielle Morales, Timothy Collins, and Ricardo Rubio, "Transitional dynamics of household food insecurity impact children's developmental outcomes," *Journal of Developmental Behavioral Pediatrics*, Vol. 39, No. 9, pp. 715-725, 2018, https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6263731/; Rachel Kimbro and Justin Denney, "Transitions Into Food Insecurity Associated with Behavioral Problems and Worse Overall Health Among Children," Health Affairs, Vol. 34, No. 11, pp. 1949-1955, 2015, https://www.healthaffairs.org/action/showCitFormats?doi=10.1377%2Fhlthaff.2015.0626; and Daphne Hernandez and Alison Jacknowitz, "Transient, But Not Persistent, Adult Food Insecurity Influences Toddler Development," *Journal of Nutrition*, Vol. 139, No. 8, pp. 1517-24, 2009, https://pubmed.ncbi.nlm.nih.gov/19535426/.

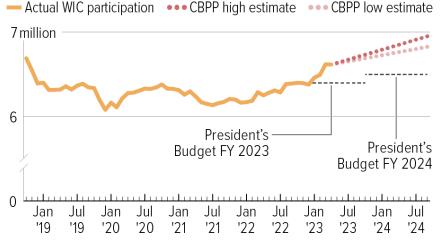
³ Steven Carlson and Zoë Neuberger, "WIC Works: Addressing the Nutrition and Health Needs of Low-Income Families for More Than Four Decades," CBPP, updated January 27, 2021, www.cbpp.org/wicworks.

⁴ Food and Nutrition Service, "National and State Level Estimates of WIC Eligibility and Program Reach in 2020," updated January 9, 2023, https://www.fns.usda.gov/wic/eligibility-and-program-reach-estimates-2020; Lauren Hall, "WIC Coverage Steady in 2020 During COVID, But has Been Falling Longer Term," CBPP, February 6, 2023, https://www.cbpp.org/blog/wic-coverage-steady-in-2020-during-covid-but-has-been-falling-longer-term.

million to 6.84 million, which is above the 6.5 million that the Agriculture Department (USDA) previously forecasted in the President's budget.⁵ (See Figure 1.)

FIGURE 1

WIC Participation Exceeds President's Budget Estimates



Note: WIC = Special Supplemental Nutrition Program for Women, Infants, and Children. FY = fiscal year.

Source: Department of Agriculture WIC administrative data as of July 2023 and FY 2024 President's Budget

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Recent increases are likely due to a combination of policy efforts to modernize the program and reduce participation barriers, such as providing flexibility to offer remote appointments; improving the shopping experience for participants; and enhancing WIC's food packages, including the increase in the fruit and vegetable benefit. Additional funding for outreach and program modernization will soon be available, potentially driving participation and retention up further in coming years.

Food price inflation has also contributed to higher costs of providing benefits and will likely continue to be a factor in the short term. While prices are now leveling off, USDA's forecasts for

⁵ U.S. Department of Agriculture, "2024 USDA Explanatory Notes – Food and Nutrition Service," https://www.usda.gov/sites/default/files/documents/35-2024-FNS.pdf. Our estimates for fiscal year 2023, simplified above, are also a range, from 6.55 to 6.56 million people. Our higher estimates assume participation grows 0.3 percent each month between April 2023 and September 2024, which was the average monthly increase during the 2022 fiscal year; the lower estimates assume participation grows 0.2 percent monthly.

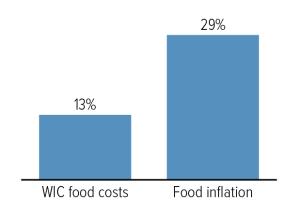
price increases in fiscal year 2023 remain well above typical increases in recent years.⁶ Across all the foods WIC provides, the weighted average increase in fiscal year 2022 was about 10 percent; we estimate it will be about 8 percent in fiscal year 2023.⁷

Food price inflation impacts not only the program's food costs but may also encourage higher rates of participation among eligible families who need additional assistance stretching their grocery budgets. Likewise, the end of SNAP's temporary pandemic-related emergency allotments in most states in March might be making it harder for low-income families to afford groceries and therefore more likely to seek additional assistance through WIC and stay enrolled in the program longer. As WIC participants confront higher food prices and reduced SNAP benefits, they may also be redeeming more of the food benefits WIC provides, further increasing food costs.

Another factor influencing WIC's food costs is an enhanced benefit for fruits and vegetables, first authorized in the American Rescue Plan and since continued with bipartisan support through appropriations laws. The enhanced benefit better aligns with the Dietary Guidelines for Americans and recommendations from the

FIGURE 2

WIC Food Costs Rose Much Less Than Food Inflation From 2009 to 2022



Note: WIC = Special Supplemental Nutrition Program for Women, Infants, and Children

Source: Department of Agriculture WIC administrative data and Consumer Price Index food price data as of July 2023

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National Academies of Sciences, Engineering, and Medicine. In fiscal year 2023, this science-driven (and hardly lavish) WIC benefit is providing \$25 per month to buy fruits and vegetables for child participants, \$44 for pregnant and postpartum participants, and \$49 for breastfeeding participants.⁸

It is important to consider the recent increases in WIC food costs in the context of WIC's long-standing history of very effectively containing food costs. Since 2009, when WIC's current (but pre-enhanced-benefit) structure was set, overall food costs have risen 29 percent, compared to just 13 percent for WIC's per-participant food costs — even with the substantial fruit and vegetable benefit increase. (See Figure 2.)

⁶ USDA, "Summary Findings: Food Price Outlook, 2023 and 2024," last updated July 25, 2023, https://www.ers.usda.gov/data-products/food-price-outlook/summary-findings/#:~:text=In%202023%2C%20all%20food%20prices.of%205.0%20to%207.1%20percent.

⁷ Our estimates assume that WIC food costs (outside of the fruit and vegetable benefit, which is adjusted for inflation separately) will increase by an additional 3 percent in fiscal year 2024.

⁸ Food and Nutrition Service, "Monthly Cash-Value Voucher/Benefit for FY 2023 Fruit and Vegetable Purchases," August 25, 2022, https://www.fns.usda.gov/wic/monthly-cash-value-voucherbenefit-2023-fruit-vegetable.

House Republicans' Bill Would Underfund and Make Harmful Changes to WIC

The two congressional chambers have taken very different approaches to WIC funding for 2024. However, *neither* the House nor Senate proposal would be sufficient to avoid turning eligible people away and to continue to provide the current science-based food benefit, based on current participation and food cost forecasts.

The bill advanced by House Republicans (H.R. 4368) would significantly underfund WIC and includes several harmful policy proposals that would undermine its science-based benefits. The partisan House bill provides \$6 billion in budget authority paired with a \$500 million rescission. This represents a funding level that is \$800 million below the President's budget request (which we now know is itself quite inadequate) and \$185 million below the enacted fiscal year 2023 level.

The House bill would also gut the enhanced fruit and vegetable benefit. Participants would be left with only \$11 to \$15 per month to purchase healthy produce, depending on the participant category, representing a 56 to 70 percent cut compared to current levels. This cut would allow the House's inadequate funding level to cover more participants, but the funding provided is so low that it would still require waiting lists and force eligible children and postpartum people to be turned away. In addition to the 4.6 million children and pregnant, postpartum, and breastfeeding participants who would see their benefits slashed under the House proposal, we estimate that states would be forced to turn away 650,000 to 750,000 eligible applicants or recertifying participants. The House funding level without the benefit cut would result in even deeper enrollment cuts, forcing states to cut average monthly participation by 1.45 million to 1.55 million people, compared to expected participation. Table 1 estimates the effect of this bill in each state.

The House proposal includes two other provisions that would override USDA decision-making about WIC's food packages. The independent, science-driven process that determines WIC-eligible foods is one reason WIC has such well-documented health and nutrition benefits. Nutrition experts — not lawmakers or industry interests — should continue to drive this process.

Bipartisan Senate Bill Also Would Fall Short of WIC's Funding Needs

The bipartisan Senate proposal (S. 2131) rejects the House's harmful policy changes and would maintain both the current fruit and vegetable benefit and the integrity of the WIC food packages. ¹¹ The Senate bill also provides the funding level requested in the President's budget proposal, \$6.3 billion, which is a \$615 million increase over the enacted level for 2023. When the President's budget was released, based on participation and food cost data available at the time, this funding level seemed sufficient to maintain the long-standing no-waitlist commitment and provide the current science-based food benefits.

⁹ H.R.4368, Agriculture, Rural Development, Food and Drug Administration, and Related Agencies Appropriations Act, 2024, https://www.congress.gov/bill/118th-congress/house-bill/4368/text

¹⁰ This estimate assumes that participation will continue to increase in fiscal year 2024. Based on current food cost estimates, the House's funding level would support average monthly participation by about 520,000 fewer people than actually participated in April 2023, the most recent month data are available.

¹¹ S.2131, Agriculture, Rural Development, Food and Drug Administration, and Related Agencies Appropriations Act, 2024, https://www.congress.gov/bill/118th-congress/senate-bill/2131/text.

Before the Senate Appropriations Committee unanimously voted to advance the Senate bill in June, agriculture subcommittee Chair Martin Heinrich committed to "monitoring participation and food costs so that we can provide enough funding to make sure that all eligible families who seek help from WIC can be served and receive the program's current science-based food benefits." As more data have become available, it is now clear that even the Senate's higher funding level is insufficient and would require states to turn away a monthly average of 700,000 to 800,000 people, primarily postpartum people and children, compared to expected participation in fiscal year 2024. (Table 1 includes state-by-state estimates of this bill's effects, as well.)

Policymakers Must Act Swiftly to Avoid Jeopardizing Access to WIC's Vital Benefits

We estimate that WIC will need \$7.2 to \$7.3 billion — \$900 million to \$1 billion above the President's budget request and the level provided by the Senate, and \$1.7 billion to \$1.8 billion above the level provided in the House bill — to continue to serve all eligible families who apply and to maintain the current science-based food benefit.

Any funding level that fails to serve all eligible WIC applicants would be contrary to more than 25 years of precedent. Every year since 1997, policymakers of both parties have provided sufficient funding to ensure that WIC can serve every eligible pregnant or postpartum person, infant, and young child who applies for benefits or must recertify.

Extensive research over more than four decades has shown that WIC participation is linked to significant benefits for health, nutrition, and developmental outcomes. That includes fewer premature births, fewer infant deaths, improved diet quality, lower prevalence of food insecurity, higher rates of childhood immunization, better access to health care, and numerous other benefits.¹⁴ A funding shortfall would mean eligible low-income people would lose out on these benefits.

If Congress fails to pass timely full-year appropriation bills and instead relies on a short-term continuing resolution, it will be critical that policymakers provide WIC with significant additional resources and provide states with as much certainty as possible, as soon as possible, that WIC will have sufficient funding for the entire fiscal year.

Uncertainty about whether WIC would have adequate funding for the entire year poses a challenging dilemma for state officials. The longer that state WIC programs wait to take measures to reduce their monthly caseload, the deeper the cuts would have to be if funding is ultimately insufficient. If deeper cuts are needed, states could have to turn away applicants typically given

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¹² Senate Appropriations Committee, "Chair Heinrich Remarks on Agriculture-Rural Development-FDA Appropriations Bill at Markup," June 22, 2023, https://www.appropriations.senate.gov/news/majority/chair-heinrich-remarks-on-agriculture-rural-development-fda-appropriations-bill-at-markup.

¹³ This estimate assumes that participation will continue to increase in fiscal year 2024. Based on current food cost estimates, the Senate's funding level would support average monthly participation of about 560,000 fewer people than actually participated in April 2023, the most recent month data are available.

¹⁴ Carlson and Neuberger.

higher priority, potentially affecting younger toddlers and those with health conditions.¹⁵ Even temporary uncertainty while a short-term continuing resolution is in place could drive states to limit outreach, reduce clinic hours, leave staff positions vacant, or take other measures to tamp down enrollment and program costs in anticipation of funding falling short for the year.

¹⁵ WIC regulations govern how states would prioritize participants in the event of a funding shortfall. People who are pregnant or breastfeeding, and infants, are the highest priority for participation. See 7 C.F.R. § 246.7(e)(4).

TABLE 1

Estimated Impacts of House and Senate Appropriations Bills

State	People Turned Away Under Senate Bill	People Turned Away Under House Bill	People With Fruit and Vegetable Benefits Cut Under House Bill*	People Harmed Under House Bill**
Alabama	13,000	12,200	79,800	92,000
Alaska	1,600	1,500	10,100	11,700
Arizona	15,600	14,500	95,600	110,100
Arkansas	6,700	6,300	41,200	47,400
California	112,200	104,700	687,900	792,500
Colorado	9,300	8,700	57,300	66,000
Connecticut	5,600	5,200	34,400	39,600
Delaware	2,100	2,000	13,000	15,000
District of Columbia	1,400	1,300	8,600	9,900
Florida	49,200	45,900	301,800	347,700
Georgia	23,000	21,400	140,900	162,300
Hawai'i	3,100	2,900	19,000	21,900
Idaho	3,500	3,200	21,300	24,600
Illinois	18,600	17,400	114,300	131,700
Indiana	18,200	16,900	111,300	128,300
Iowa	6,700	6,300	41,100	47,400
Kansas	5,300	4,900	32,500	37,400
Kentucky	13,000	12,200	79,800	92,000
Louisiana	10,100	9,400	62,000	71,500
Maine	2,000	1,900	12,400	14,300
Maryland	14,200	13,300	87,300	100,600
Massachusetts	13,800	12,900	84,900	97,900
Michigan	24,000	22,400	147,100	169,500
Minnesota	11,900	11,200	73,300	84,400
Mississippi	8,000	7,400	48,800	56,200
Missouri	10,000	9,400	61,500	70,800
Montana	1,700	1,500	10,200	11,700
Nebraska	4,200	3,900	25,900	29,800
Nevada	6,200	5,800	38,200	44,000
New Hampshire	1,600	1,500	10,000	11,500
New Jersey	17,600	16,400	107,800	124,200
New Mexico	3,900	3,600	23,600	27,200
New York	46,400	43,300	284,700	328,000
North Carolina	30,900	28,900	189,700	218,600
North Dakota	1,200	1,100	7,200	8,300
Ohio	19,200	17,900	117,700	135,600
Oklahoma	7,600	7,100	46,800	54,000
Oregon	8,900	8,300	54,500	62,800
Pennsylvania	19,000	17,700	116,300	134,000

TABLE 1
Estimated Impacts of House and Senate Appropriations Bills

State	People Turned Away Under Senate Bill	People Turned Away Under House Bill	People With Fruit and Vegetable Benefits Cut Under House Bill*	People Harmed Under House Bill**
Rhode Island	1,900	1,800	11,900	13,700
South Carolina	10,300	9,600	63,400	73,000
South Dakota	1,600	1,500	10,100	11,600
Tennessee	13,800	12,800	84,400	97,200
Texas	83,700	78,200	513,600	591,800
Utah	4,500	4,200	27,500	31,700
Vermont	1,300	1,300	8,200	9,500
Virginia	14,500	13,500	89,000	102,600
Washington	14,600	13,600	89,400	103,000
West Virginia	4,100	3,800	25,000	28,800
Wisconsin	10,100	9,400	62,000	71,400
Wyoming	800	800	4,900	5,700
Total	750,000	700,000	4,600,000	5,300,000

^{*} The Senate bill leaves this benefit intact.

Source: CBPP analysis based on estimated participation and food costs. The estimates represent the midpoint of the difference between the average monthly number of participants we estimate could be served under the House and Senate bills and CBPP estimates of participation in fiscal year 2024 if adequate funding were available. The nationwide difference is allocated across states based on their share of nationwide participation in fiscal year 2022.

^{** &}quot;People Harmed Under House Bill" represents the total number of people who would be turned away or have their fruit and vegetable benefits cut under the House bill.