

Nutrition Initiatives During COVID-19: Findings from State Aging and Disability Agencies



Executive Summary

One of the most pressing concerns during COVID-19 for the aging and disabilities networks is to provide access to food and meals. COVID-19 is a disaster situation involving both a public health emergency and an economic crisis, with particularly acute impacts for older adults, people with disabilities, and others with certain health conditions. Consequently, health risks and financial burdens for certain at-risk populations can make access to food challenging. In response, the federal government and state and local agencies have sought to address basic needs, such as food, by providing access to benefits and modifying service delivery systems. Due to changes in federal regulation and law, states are responding with changes in policies and procedures to ensure individuals have access to food. Some of these adjustments may be temporary, due to time-limited authorizations to implement them, while other changes may lead to ongoing alterations to programs.

This issue brief explores the adjustments that states have made to nutrition programs. The brief highlights examples of opportunities available and changes that states have made to ensure older adults and persons with disabilities have access to food during the pandemic. Data and findings are drawn from the ADvancing States 2020 COVID-19 Membership Survey.

Methodology

In the Spring of 2020, ADvancing States, with support from the National Council on Aging's (NCOA) Medicare Improvements for Patients and Providers Act (MIPPA) grant under the Administration for Community Living (ACL), conducted a national survey of its membership to assess the state of benefit enrollment systems during the COVID-19 crisis. Findings from this survey highlight changes, challenges, and opportunities that state agencies have experienced related to benefits access and enrollment.

A web-based survey instrument was used to collect survey responses. The survey was distributed to ADvancing States members in May of 2020 and data collection ended in June of 2020. ADvancing States members include state agencies responsible for a wide range of long-term services and supports (LTSS), including state-funded services, Older Americans Act (OAA) programs, and Medicaid LTSS. As survey questions spanned across several benefit programs, state members were advised that they may need to engage additional state partners on the survey. A total of 55 respondents participated in the survey, representing 45 states. This issue brief highlights examples from state aging and disability agencies.

Remote Access to Benefits and Services

State aging and disability agencies play a critical role in connecting older adults and people with disabilities to food and meals. With the onset of COVID-19, state aging and disability agencies made

adjustments to protect their staff’s health and well-being, while simultaneously responding to the increasing need for food assistance. As shown in figure 1, as of June 2020, 53 percent of survey respondents indicated that 75 percent of their staff were working remotely, and 40 percent reported that 100 percent of their staff were working remotely. At the same time, of 46 respondents, 93 percent reported an increase in demand for services for OAA Title III-C2 Home-Delivered Nutrition Services (see figure 2). Additionally, many individuals and families apply for benefits, like the Supplemental Nutrition Assistance Program (SNAP), through eligibility and enrollment offices, such as county social service offices. However, as of June 2020, of 49 survey participants, 51 percent reported that eligibility and enrollment offices in their state were closed for in-person appointments or visits and operating remotely. With an increase in need for food assistance, and with more staff working remotely, states are implementing existing and new flexibilities to increase access to food for older adults and persons with disabilities.

Figure 1

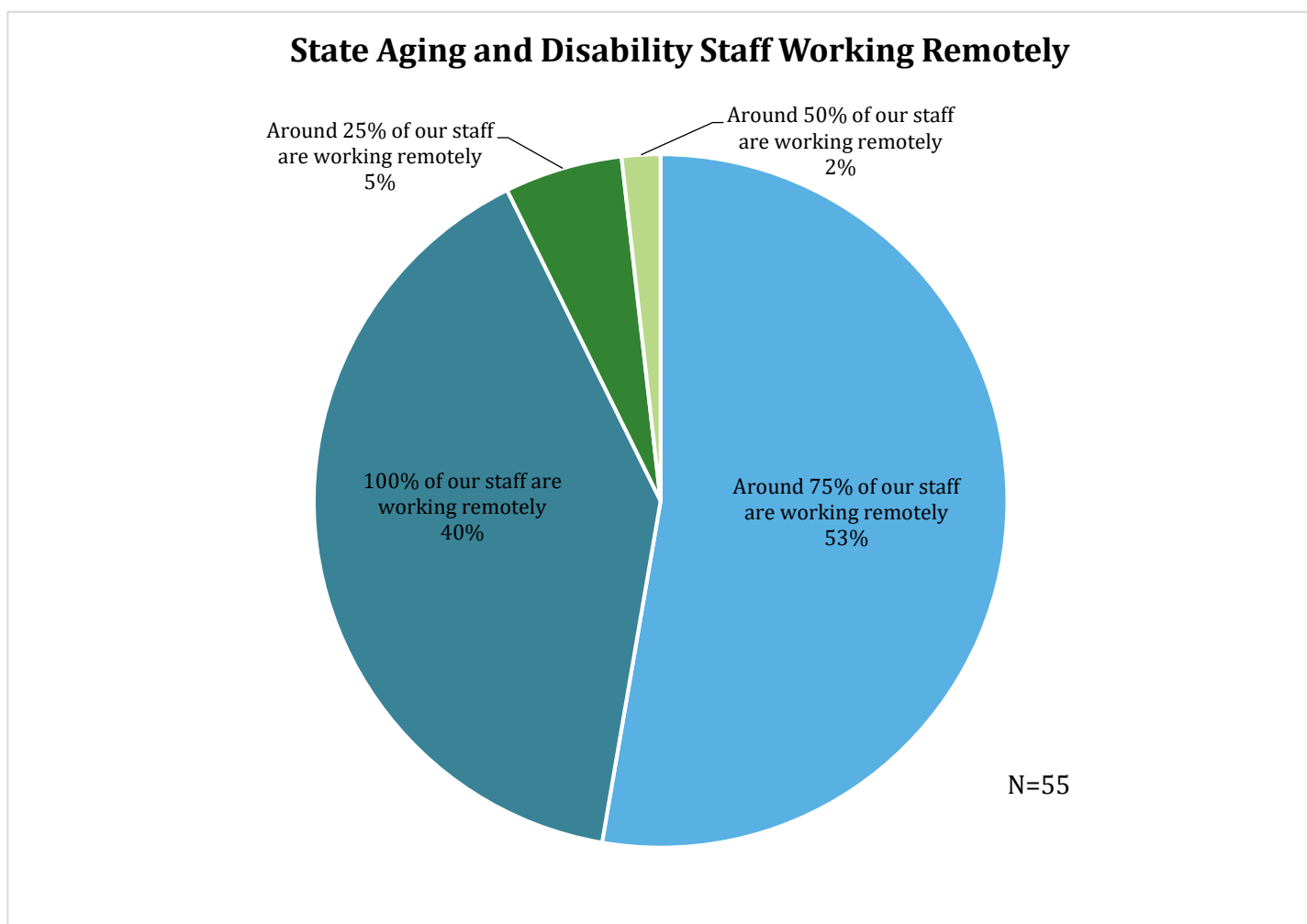
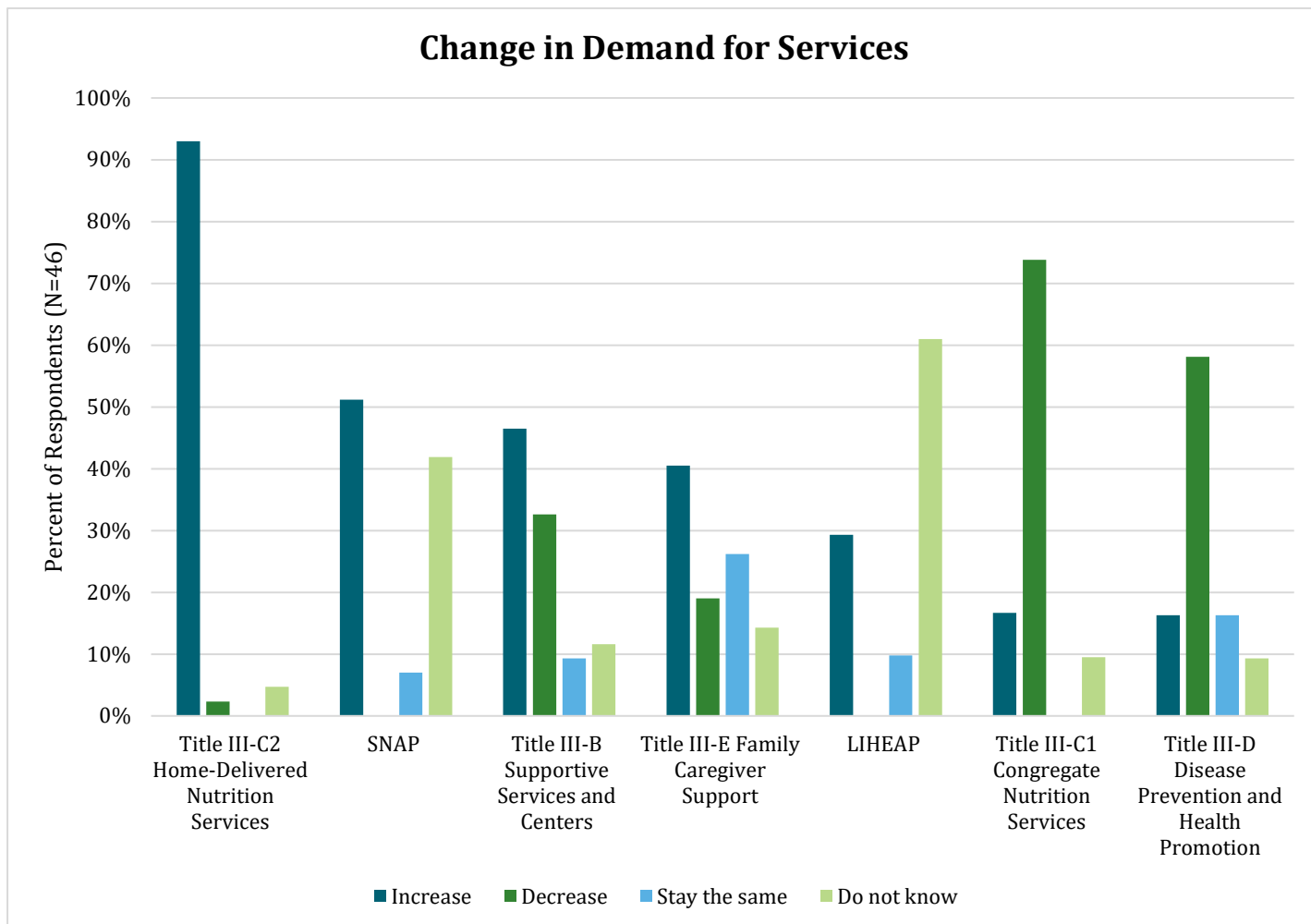


Figure 2



Federal Authorities and COVID-19 Relief Legislation

Older Americans Act Nutrition Services

Certain flexibilities and additional funding are available as a result of COVID-19 relief legislation. The Families First Coronavirus Response Act (FFCRA) includes funding for a wide range of services and supports, and relief for communities, families, and individuals impacted by the COVID-19 pandemic, including additional funding for OAA meals programs.¹ The bill allocates \$160 million of additional funding for OAA home-delivered meals and \$80 million for congregate meals. The bill also appropriates

¹<http://www.advancingstates.org/sites/nasuaad/files/u24453/COVID%20legislative%20updates%20march%2020.pdf>

\$10 million of additional funding for Title VI tribal nutrition services. In addition to the extra funding, the legislation waives the usual state matching requirements for these services.

Additionally, the Coronavirus Aid, Relief, and Economic Security (CARES) Act includes a wide range of funding and policy provisions to respond to the pandemic.² The CARES Act appropriates an additional \$820 million for OAA programs, which includes 480 million for OAA Title III-C Nutrition Services. This legislation also includes a waiver of the state matching requirements for OAA programs. Additionally, the CARES Act includes language that provides significant flexibility for state agencies and Area Agencies on Aging (AAAs) to respond to local needs during the crisis. The bill allows state agencies and AAAs to transfer all of the state's OAA nutrition funding (including both the standard appropriation amount as well as the additional funding allocated for COVID through CARES and FFCRA) between congregate and home-delivered meals programs without prior approval from ACL. The legislation also deems any individual who must stay home due to COVID-19 physical distancing as meeting a nutrition services program's "homebound" definition, which would therefore qualify them for home-delivered meals. For example, one state survey respondent reported that for home-delivered meals, "program eligibility expanded to include individuals with disabilities sheltering in place." The CARES Act also includes authority for ACL to issue a waiver of the USDA nutritional requirements contained within the OAA during the COVID-19 emergency, which has been granted.³

Lastly, Section 310(c) of the OAA, which existed before the COVID pandemic, permits states to use any portion of the funds made available under any and all sections of the Act for disaster relief for older individuals if the state receives a "major disaster declaration" through section 401(a) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act. Every state and territory has been granted such a declaration during the pandemic, which has provided significant flexibility beyond the provisions included in the FFCRA and CARES acts.

ACL provides guidance for the administration of OAA programs as well as resources describing the details of flexibilities of senior nutrition programs to allow states to meet the unique needs of older adults. For more information, visit the *Senior Nutrition Program* section under *Guidance for ACL Programs* on ACL's Coronavirus Disease 2019 (COVID-19) webpage.⁴

²<http://www.advancingstates.org/sites/nasud/files/u24453/Memorandum%20on%20COVID%20Disaster%20Relief%203rd%20Bill%20Final.pdf>

³ https://nutritionandaging.org/wp-content/uploads/2020/04/Nutrition-Requirements-DRI_DGAs-under-Supplemental-Funding-During-COVID-19-Emergency-4.3.20-Updated-4.22.20.pdf

⁴ <https://acl.gov/COVID-19>

These crucial flexibilities are helping state aging and disability agencies meet nutritional needs. As previously mentioned, since the onset of COVID-19, 93 percent of survey respondents reported an increase in demand for Title III-C2 Home-Delivered Nutrition Services. One state indicated that, “T3C2 [Title III-C2] has increased greatly with COVID emergency meals, absorbing funding from other titles,” and another reported that, “CI-funded sites have switched over to HDM [Home-Delivered Meals], so they have seen an increase but it is all reflected in C2.”

Supplemental Nutrition Assistance Program

One tool that many states already had in place pre-pandemic was a statewide web portal (i.e. an online screening tool for one or more benefit programs) that can assist individuals with benefits and/or services screening and enrollment. Of the 56 percent of respondents who reported that their state has a statewide web portal that can assist individuals with benefits and/or services screening and enrollment, 77 percent of those respondents indicated that SNAP is included in their statewide web portal. As in-person interaction is challenging during the pandemic, web portals offer an opportunity for individuals to remotely apply for benefits.

Additionally, the COVID-19 crisis has led to changes in federal regulation and law that are altering flexibilities with benefit programs. Of 36 survey respondents, 47 percent reported that their state has made changes to how state agencies are processing eligibility and enrollment for SNAP. Many of these changes are related to flexibilities from COVID-19 relief legislation. The FFCRA provides temporary new authority and broad flexibility to the U.S. Department of Agriculture (USDA) and states to ensure access to SNAP during the pandemic. Most of these flexibilities are temporary and there must be a federal public health emergency and a state declaration of an emergency or disaster declaration to use them.⁵ With many of the SNAP waivers, states were originally approved through May 2020, and were then required to request extensions for additional months.⁶ The FFCRA allows states the opportunity to: grant waivers that allow for the issuance of emergency allotments (supplements); extend certification periods and adjust reporting requirements; adapt telephonic signature requirements; conduct quality control interviews by phone rather than in-person and extend and waive deadlines for reporting findings, and; waive application and recertification interviews.⁷ For example, one survey

⁵ <https://www.cbpp.org/research/food-assistance/most-states-are-using-new-flexibility-in-snap-to-respond-to-covid-19>

⁶ For more information about state by state SNAP COVID-19 waivers:
<https://www.fns.usda.gov/disaster/pandemic/covid-19/snap-waivers-flexibilities>

⁷ <https://www.cbpp.org/research/food-assistance/most-states-are-using-new-flexibility-in-snap-to-respond-to-covid-19>

respondent reported that their state, “has taken advantage of federal [SNAP] waivers to streamline the application process and reduce or eliminate the need for in-person visits.”

Furthermore, several states have implemented the SNAP online purchasing pilot program for grocery orders and delivery. This pilot program initially launched in 2019 and began in New York.⁸ In response to COVID-19 and to help individuals adhere to physical distancing guidelines, Food and Nutrition Service (FNS) worked with states, retailers, and benefit processors to expand the SNAP online purchasing program. With the onset of COVID-19, this program rapidly expanded across the states, and as of September 18, 2020, 45 states are currently participating in the program.⁹

BenefitsCheckUp®: Resource for Connecting to Nutrition Benefits

The aging and disability networks are supporting individuals with health risks and financial burdens that make access to food challenging during the COVID-19 pandemic. NCOA’s BenefitsCheckUp® is a free self-service tool that assists older adults and persons with disabilities across the country in getting connected to benefit programs, including food and nutrition. This is a tool that can support aging and disability organizations, as well as individuals and families. Users can find out more information about many of the programs discussed in this brief, such as SNAP, home-delivered and congregate meals, the Commodity Supplemental Food Program (CSFP), The Emergency Food Assistance Program (TEFAP), and the Senior Farmers’ Market Nutrition Program (SFMNP).

⁸ <https://www.usda.gov/media/press-releases/2020/05/20/snap-online-purchasing-cover-90-households>

⁹ <https://www.fns.usda.gov/snap/online-purchasing-pilot>

Spotlight on New Jersey: Responding to the Nutrition Needs of Older Adults

As COVID-19 began to rapidly impact older adults' ability to safely access food, the New Jersey Department of Human Services, Division of Aging Services (DoAS) responded to address this need across the state.

Before additional federal support was available, DoAS used state authority to coordinate a two-week supply of shelf-stable meals for its most vulnerable older adults. DoAS worked with its 21 AAAs to gather addresses of those who lived alone or were unable to leave their homes, including those who previously attended congregate meal sites. DoAS contracted with a national food vendor for packaging and delivery to the identified individuals' homes. The packages supplemented nutrition initiatives that the AAAs were already providing, such as grab-and-go hot meals and home-delivered frozen meals. The two-week supply of shelf-stable meals provided critical support to 130,000 older adults before many stores were offering senior hours and pick-up and drop-off options.

Moreover, DoAS recognized that many older adults experience limitations with technology that prohibits them from ordering groceries online. The division partnered with two volunteer organizations to grocery shop for older adults. It added new functionality to its existing statewide web portal, NJSave, and trained AAA information and assistance (I&A) and outreach staff how to enter grocery orders into the system. This information is then sent to the volunteer organizations who identify volunteers to pick up and deliver the groceries for older adults. This service is ongoing.

DoAS also oversees OAA programs. As previously mentioned, the CARES Act and the major disaster declaration allows state agencies and AAAs to transfer all of the state's OAA nutrition funding between congregate and home-delivered meals programs. With this federal flexibility and with the additional flexibilities allowed under New Jersey's major disaster declaration, it was possible for the AAAs to provide home-delivered meals and grab-and-go meals in lieu of congregate meals since the congregate meal sites were mandated to close. In order to meet a tremendous increase in demand, significant staff time was needed for ordering food, meal preparation and delivery as well as to track the funding for reporting purposes. At the local level there was also a need for drivers as many are older adult volunteers who are at higher risk for major complications from COVID-19. The AAAs recruited other county employees and new volunteers for meal delivery.

Finally, in response to COVID-19, adjustments across state agencies were made to programs that impact the health and economic security of older adults. DoAS has consistently communicated and shared information and updates from the New Jersey Department of Human Services and federal partners with the AAAs. For instance, DoAS made sure they were informed when online ordering became available for SNAP recipients in New Jersey. Likewise, the AAAs kept DoAS updated on their experiences providing nutritional services during the pandemic.

Through these various initiatives and communication efforts, the New Jersey Division of Aging Services is supporting older adults with nutrition needs throughout the state.

United States Department of Agriculture Programs

To facilitate access to food for older adults and/or persons with disabilities, 62 percent of 45 survey respondents reported that they are engaging in other nutrition initiatives. In some cases, state aging and disability agencies commented that they are engaged with initiatives through the USDA.

The Emergency Food Assistance Program (TEFAP) is administered by FNS within the USDA. This program helps supplement the diets of low-income Americans, including older adults, by providing them with emergency food assistance at no cost.¹⁰ State distributing agencies generally provide the nutritious foods to food banks, who then distribute the foods to local organizations.¹¹ Under FFCRA and the CARES Act, an additional \$850 million was appropriated for TEFAP.

The Commodity Supplemental Food Program (CSFP) is also administered by FNS. This program works to supplement the diets of persons at least 60 years of age with nutritious USDA foods.¹² The USDA distributes food and administrative funds to participating states and Indian Tribal Organizations (ITOs). The state agencies store CSFP food and then distribute it to public and nonprofit private local agencies who determine eligibility of and distribution methods to eligible older adults.¹³ This program provides a preselected box of healthy food that supplements the diets of eligible older adults.

In the ADvancing States survey, several state aging and disability agencies indicated that they are engaging with TEFAP and CSFP. For example, one state shared that, “Our agency has both TEFAP and CSFP internally, so we connected the AAA partners with our regional food banks that distribute these boxes. The AAAs now have the ability to distribute some of these resources from their own offices as a part of this partnership, in an effort to get clients food faster.” Another state commented that, “We have engaged with partners at Government Support Services for TEFAP...Under the disaster feeding proclamation, anyone over age 60 may receive TEFAP regardless of income...The food is delivered by the USDA directly to our sites and those partners deliver the food with home-delivered meals or create a pick-up site. There is no charge to the SUA [State Unit on Aging] on either end... [The] Commodity Supplemental Food Program (CSFP), run by the Food Bank, serves eligible seniors over 60. Our state is approved for, and currently serving 2,124 people per month. This food box is very specific in meeting dietary qualifications. This greatly helps to offset the pressure on the home-delivered meals program.”

¹⁰ <https://www.fns.usda.gov/tefap/emergency-food-assistance-program>

¹¹ <https://nutritionandaging.org/wp-content/uploads/2020/05/WorkingwithUSDAprogramsCOVID-rev-07.21.2020.pdf>

¹² <https://www.fns.usda.gov/csfp/commodity-supplemental-food-program>

¹³ <https://nutritionandaging.org/wp-content/uploads/2020/05/WorkingwithUSDAprogramsCOVID-rev-07.21.2020.pdf>

Additionally, the Senior Farmers' Market Nutrition Program (SFMNP) is another program administered by FNS. This program provides eligible low-income older adults with locally grown foods.¹⁴ At the state level, SFMNP is administered by an assortment of agencies.¹⁵ This program distributes coupons of \$20 to \$50 to eligible older adults to use at farmers' markets. One state survey respondent indicated that, "Our local county aging units operate the Senior Farmers' Market Nutrition Program and dining centers are often distribution sites for vouchers." Another state noted that for SFMNP, "Coupons are being mailed to eligible applicants to support the health and safety of older adults and Community Action Program workers. Proxy use for coupon pickup and for shopping at farmers markets is being promoted."

Finally, the USDA's Coronavirus Food Assistance Program Farmers to Families Food Box program partners with national, regional, and local distributors to purchase fresh produce, dairy, and meat products to support workforces that have been significantly impacted by the closure of restaurants.¹⁶ Distributors prepare these products into family-sized boxes and the boxes are then delivered to non-profits serving Americans in need. For example, one state agency reported that their commercial distributor "has received a more than \$2M grant from the USDA Coronavirus Food Assistance Program (CFAP) Farmers to Family Box program. The grant will deliver 10lbs boxes of meat to more than 20,000 seniors in our state every 2 months for the next 8 months."

Conclusion

Access to food and meals for older adults and persons with disabilities during COVID-19 is a pressing concern. There are several programs and benefits administered by state aging and disability agencies, as well as other state partner agencies, that are utilizing additional funding and flexibilities to expand and increase access to food for high-risk populations, such as older adults and persons with disabilities. State aging and disability agencies have leveraged federal, state, and local resources and flexibilities to assist their populations with food assistance during the COVID-19 crisis.

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¹⁴ <https://www.fns.usda.gov/sfmnp/senior-farmers-market-nutrition-program>

¹⁵ <https://nutritionandaging.org/wp-content/uploads/2020/05/WorkingwithUSDAprogramsCOVID-rev-07.21.2020.pdf>

¹⁶ <https://www.ams.usda.gov/selling-food-to-usda/farmers-to-families-food-box>