As the COVID-19 pandemic continues, a growing population is developing Long COVID, a post-viral illness that can be debilitating. With more than 200 possible symptoms, it can interfere in a person’s ability to work, threatening their economic stability. One in five adults who are infected with COVID develop Long COVID, with greater numbers reported in women; young people; Indigenous and Hispanic/Latinx communities, among others. One study found that two-thirds of respondents with Long COVID who had previously been working had to reduce their hours or couldn’t work at all.

For people with disabilities, public benefit programs are critical to avoiding hunger and hardship given the lack of adequate accommodations in the workplace, the risk of employment discrimination, and other barriers that disabled people can face when accessing employment. As more people experience disability from Long COVID, they may turn to two public programs to make ends meet: cash assistance, under the Temporary Assistance for Needy Families (TANF) block grant; and food assistance, under the Supplemental Nutrition Assistance Program (SNAP, also known as food stamps). However, extreme policy and program restrictions can limit access to assistance when it’s needed most.

This brief recommends actions that federal, state, and local policymakers and administrators can take to ensure these programs better meet the needs of disabled people at a time when the disabled population is skyrocketing.

Specifically, TANF and SNAP have work reporting requirements that pose tremendous barriers to accessing benefits, specifically for disabled people, including people who have Long COVID. While there are exemptions based on disability in these work requirements, proving one’s disability status can be burdensome and complicated, especially for “invisible” disabilities and conditions that may impact people differently from one day to another. Alongside other program and policy hurdles, these obstacles push crucial aid out of reach—causing the most harm to disabled people of color and those with other marginalized identities. Advancing disability equity in TANF and SNAP can mitigate the harm of ableist and racist barriers.

Hurdles to accessing TANF or SNAP for disabled people, especially individuals with Long COVID, may include:

- **Administrative hurdles** such as backlogs in application processing; onerous paperwork requirements; and complex rules for some disabled people in need, like college students.

- **Unrealistic timeframes** to submit or recertify medical documentation, which can come with high costs and delays from medical specialists.

- **Extreme or outdated restrictions**, including inflexible work requirements under TANF and extremely narrow definitions to qualify for Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI).
- **Complexities of navigating more than one benefit program**, especially in states where a work rule exemption hinges on obtaining other disability benefits such as SSI or SSDI;

- **Lack of reasonable workplace accommodations** under the Americans with Disabilities Act, with limited enforcement of employer compliance.

- **Gaps in institutional knowledge and best practices around Long COVID** among the medical community and staff of public benefit programs.

- **Community-level obstacles**, such as difficulties accessing transportation, child care, or paid time off work for appointments needed to obtain medical documentation.

- **Stigma against disabilities and structural discrimination** in health care and public programs, including harms multiplied by racism, sexism, and other forms of prejudice.

- **Individual information gaps and social stigma** about disability and public benefits.

Local, state, and federal policymakers and administering agencies can adopt several recommendations to remove these roadblocks:

**FOR STATE AND LOCAL BENEFIT ADMINISTERING AGENCIES**

1. **Lifting barriers and improving guidelines to meet the health needs** of disabled people, such as by accepting medical documentation from a broader range of health providers and removing recertification requirements for people with lifelong disabilities.

2. **Strengthening accessibility in application technology and intake processes**, such as by making online applications more user-friendly and allowing one application to be shared by many public programs.

3. **Expanding outreach efforts** regarding available public programs, eligibility, and how to apply, especially to people with Long COVID and in marginalized communities.

4. **Increasing funds** for programs like SSI/SSDI Outreach, Access, and Recovery to deploy navigators who help people with benefit applications and recertifications.

5. **Improving training and evaluation** to better serve people with disabilities, such as by providing caseworkers with anti-bias training, and sufficiently equipping them to discern a person’s eligibility for work requirement exemptions.

**FOR FEDERAL AGENCIES**

1. **The U.S. Departments of Health and Human Services (HHS) and Agriculture (USDA) can promote equity in state disability rules**, such as by giving guidance for states to add Long COVID as a qualifying disability for work exemptions; and urging states to acknowledge adjusted “work participation rates” for TANF work requirements.

2. **HHS can improve state and local agency training**, such as by requiring them to provide cultural competency and anti-bias training on disabilities and about Long COVID.

3. **Other federal agencies, including the U.S. Census Bureau**, can strengthen data collection on
Long COVID and people’s ability to work.

**FOR CONGRESS**

1. **Abolish work requirements and time limits** for TANF and SNAP.
2. **End asset caps** on these and other programs, including SSI, SSDI, and Medicaid.
3. **Increase funds for navigators** who assist people with benefit applications and recertifications.
4. **Remove requirements for Continuing Disability Reviews** for people enrolled in SSI.

A significant population are experiencing debilitating post-viral illness that risk their economic security, and this number will only increase as communities continue to face COVID-19. TANF and SNAP are vital in helping people meet their basic needs. People with Long COVID and other disabilities, however, can face immense obstacles securing assistance, posed largely by work reporting requirements; time limit restrictions; and the complexities of securing exemptions to those rules. Racism, sexism, and other systemic biases increase these steep hurdles. To reduce hardship, policymakers and program administrators can adopt the recommendations provided in this brief. Doing so will help disabled people, especially those who have Long COVID, access critical financial supports and ensure greater equity in our nation’s anti-poverty programs.