HB 2481 and SB 1616

Proposed New Documentation Requirements for Medicaid and SNAP

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The Missouri General Assembly is considering legislation that would create unnecessary complications in Medicaid and SNAP. The House of Representatives passed HB 2481, while SB 1616 passed out of the Senate General Laws Committee. These proposals would create costly administrative burdens for the State and cause citizens and eligible lawfully present immigrants to lose access to health care and nutrition assistance. The proposed changes also increase the likelihood of agency errors, fiscal sanctions, and additional state costs. This paper focuses on key Medicaid and SNAP provisions of HB 2481,[1] but SB 1616 includes nearly identical requirements.[2]

Background

Under current law and policies, Medicaid applicants must attest under penalty of perjury that they meet the citizenship or immigration status requirements when completing their application for benefits. If they are found to meet all other Medicaid requirements but there is a delay in documenting the citizenship and or immigration status documentation/verification requirements, applicants are allowed a "reasonable opportunity period" to meet them. Medicaid law and regulations require states to use data matching directly with the Social Security Administration and provide explicit instructions for an alternative mechanism that may be used.[3] Medicaid uses SAVE (the Systematic Alien Verification for Entitlements Program operated by the United States Department of Homeland Security) to verify eligibility for immigrant applicants (e.g., to verify the immigration status of non-citizens based on information they provide to the State agency).[4]

SNAP currently allows individuals to attest to their citizenship and similarly relies on SAVE to verify eligibility for immigrant applicants. In practice, both SNAP and Medicaid already verify Social Security numbers through data matches with SSA.[5] Using Social Security numbers for

[1] The consequences of many provisions extend beyond Medicaid and SNAP, as they would apply to any state or local agency who provides public benefits. "Public benefits" is defined broadly in the statute as "any grant, contract, or loan provided by an agency of state or local government; or any retirement, welfare, health, disability, housing, or food assistance benefit under which payments, assistance, credits, or reduced rates or fees are provided."

[2] This paper does not discuss the "Healthy SNAP" provisions in HB 2481 but focuses only on the new documentation provisions of that legislation.

[3] 42 C.F.R. § 435.956(a)(1)(i).

[4] Immigrants provide documentation numbers and that information is used for data checks with SAVE. Naturalized and derived citizens can have their status verified by SAVE, but that would require them to provide an "A" number, which is not often readily available to long-time citizens.

[5] While SAVE is being modified to include Social Security numbers of U.S. citizens, reports from other efforts to verify citizenship via the new SAVE data suggest that it is prone to errors, whereas the SSA match has proved effective. *See e.g.*, Jennifer Fifield and Zach Despart, *Not Ready for Prime Time: A Federal Tool to Check Voter Citizenship Keeps Making Mistakes*, Pro Publica and the Texas Tribune, Feb 13, 2026, at:

people who attest to being citizens, Medicaid matches with the Social Security Administration (SSA) first, and SSA can substantiate citizenship for the vast majority of people. Recent CMS guidance focuses on how states can use SAVE to verify the immigration status of qualified *non-citizens* and citizens *with naturalized or derived citizenship* (not for all citizens or citizens in general).[6]

Changes to Citizenship Documentation (Verification): HB 2481 requires any agency that administers public benefits to verify that the applicant or enrollee of that public benefit is a United States citizen, United States national, or an eligible alien for such public benefit through SAVE "and any other verification system"[7] at the time of application, at each eligibility redetermination, and whenever information is received indicating a change in circumstances affecting eligibility related to citizenship or immigration status. (§208.009.12).

- **Impact:** This provision would create unnecessary work for the State and cause eligible individuals to lose Medicaid and SNAP benefits.
- States already successfully use data matching with the Social Security Administration to verify citizenship. Running *citizens* through SAVE substitutes an unproven technology for one that is already working.
- DSS does not have capacity to verify citizenship or immigration status of every applicant or recipient through SAVE. It has requested funding of $15,349,288 for eligibility verification services related to H.R. 1 implementation, which includes system changes to automate the verification process with SAVE.[8] Without funding to implement these necessary system changes, a manual process will be required resulting in a need for additional staff, which also requires additional funding.[9]
- This provision would violate federal law, which prohibits states from subjecting certain populations to a citizenship documentation requirement:
    - Most individuals receiving Medicare, disability insurance benefits, or supplemental security income benefits, children in foster care, and children receiving foster care or adoption assistance groups are exempt from the requirement to document citizenship for Medicaid eligibility.[10]
    - Infants born to a mother who is receiving Medicaid or CHIP at the time of birth are not required to provide documentation of citizenship status. Rather, they are

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https://www.propublica.org/article/save-voter-citizenship-tool-mistakes-confusion; Phil Galewitz, *Trump's Hunt for Undocumented Medicaid Enrollees Yields Few Violators*, KFF Health News, March 31, 2026, at: https://kffhealthnews.org/news/article/medicaid-undocumented-enrollees-review-few-violators/.

[6] State Health Official Letter #26-001, April 8, 2026.

[7] It is not clear what is intended by the phrase "and any other verification system." It would appear that running individuals through though SAVE is the minimum requirement but that if the Agency chooses also to use some other verification system, it must verify citizenship and immigration status through that system as well.

[8] Because the costs in that budget request include all necessary eligibility verification service changes to implement H.R. 1, the amount directly related to automation of the verification process with SAVE is unknown.

[9] Committee on Legislative Research, Oversight Division, Fiscal Note, April 8, 2026 at: https://documents.house.mo.gov/billtracking/bills261/fiscal/fispdf/6262H.02P.ORG.pdf p. 5.

[10] 42 U.S.C. 1320b-7(x)(2); 42 C.F.R. § 435.406(a)(iii).

> "deemed to have provided satisfactory documentary evidence of citizenship and shall not be required to provide further documentary evidence on any date that occurs during or after the period in which the individual is eligible for medical assistance."[11]

- The legislation would require individuals to *re-prove their citizenship* at each eligibility reverification. This unnecessary hurdle increases the burden on both caseworkers and recipients. Citizens rarely stop being citizens and those that do, opt for this when they are leaving the U.S.; thus, citizenship verification in Medicaid is currently a "one and done" situation. For eligible non-citizens, LPR status need not be reverified unless there is some reason to think that such status has changed. This provision also violates federal requirements that prohibit states from reverifying immigration statuses, like LPR, that are unlikely to change.[12]
- The current practice of verifying citizenship for Medicaid through the SSA match and using SAVE to verify eligibility of non-citizens is sufficient for proper eligibility determinations.

Documentary Proof of Citizenship and Identity: The bill would make matches through any electronic or data verification system insufficient to prove identity. Instead, every applicant for public benefits would be required to provide *documentary* proof of United States citizenship, United States national status, or alien status to be eligible for public benefits. (§208.009.9).[13]

- **Impact:** This provision would require paper documentation of citizenship and identity, in addition to data verification. This proposal violates Medicaid law by conditioning eligibility on a factor outside program requirements. 42 C.F.R. §435.952(c) (an individual can only be required to provide additional information or documentation if the information cannot be obtained electronically). Additionally, it creates excessive requirements that burden people with low incomes who lack access to driver's licenses and other forms of documentation. Both programs already require personally

[11] 42 U.S.C. 1320b-7(x)(2)(D); see also 42 C.F.R. § 435.406(a)(iii)(E)(1); CMS, Dear State Health Official Letter, SHO No. 09-009 (Aug. 31, 2009), https://downloads.cms.gov/cmsgov/archived-downloads/SMDL/downloads/SHO083109b.pdf ("individuals who are initially eligible for Medicaid or CHIP as deemed newborns . . . will not be required to further document citizenship or identity at any subsequent Medicaid or CHIP eligibility redetermination").

[12] Generally, once citizenship has been verified, states are prohibited from reverifying it. 42 C.F.R. § 435.956(a)(4)(ii). According to CMS, states may not reverify U.S. Citizenship unless the individual reports a change in citizenship or the state has received information indicating a potential change in the individual's U.S. citizenship. CMS Instructions for States, August 20, 2025, n. 1, citing 42.C.F.R. §§ 435.956(a)(4)(ii) and 457.380(b)(1)(i). States may only reverify immigration status at renewal for those statuses that are subject to change, such as noncitizens with Temporary Protected Status (TPS), or if a change is reported. See CMS Final Rule, "Medicaid and Children's Health Insurance Programs: Eligibility Notices, Fair Hearing and Appeal Processes for Medicaid and Other Provisions Related to Eligibility and Enrollment for Medicaid and CHIP" (81 FR 86428) November 30, 2016, available at: https://www.federalregister.gov/documents/2016/11/30/2016-27844/medicaid-and-childrens-health-insuranceprogramseligibility-notices-fair-hearing-and-appeal

[13] This section appears to conflate citizenship and identity.

identifiable information and require all eligible immigrants to have their status verified through the SAVE system. There is no evidence that the current processes do not ensure that only eligible people are approved.

- Requiring *every* Missourian applying for SNAP or Medicaid benefits to provide documentation *even if* electronic sources can verify eligibility creates a tremendous but needless burden on the Family Support Division and would cause eligible Missourians to lose access to medical care and nutrition assistance.
- This revision increases opportunities for improper underpayments. Currently, Family Support Division does not consistently process applicants' submitted documentation due to poor functioning of the Agency's computer system.[14] The bill's "duplicate verification" requirement creates additional opportunities for eligible individuals to be denied benefits. As discussed below, these individuals would only be able to get one "reasonable opportunity period" *regardless* of whether the failure to process documents was their fault or the fault of the State agency.
- One source of identity verification that can be shared across all benefit programs is sufficient. For example, if someone matches successfully through the Social Security Administration for Medicaid, that match should be sufficient for all programs, including SNAP.

Limiting "reasonable opportunity" periods: The legislation would preclude any additional period of eligibility for "temporary benefit" for any applicant who was previously denied public benefits at any time due to failure to verify United States citizenship, United States national status or alien status eligible for such public benefits. (§208.009.7(3)).

- **Impact:** As noted earlier, Medicaid applicants are allowed a "reasonable opportunity period" to meet the citizenship and or immigration status documentation/verification requirements. Federal law places *no limit* on the number of reasonable opportunity periods an individual can have. This often applies when families need to acquire an out-of-state birth certificate. If someone fails to verify that the applicant is a citizen or has an eligible immigration status in one application, that does not preclude them from properly documenting their citizenship or status later. This provision would run afoul of federal requirements and penalize applicants and participants in perpetuity for failing to meet a procedural requirement at a single point in time.[15]

[14] The failure to process submitted documentation is but one reason for Missouri's high rate of "procedural terminations" in the State's Medicaid program (terminations not based on paperwork/administrative problems, rather than *ineligibility* for Medicaid). See e.g., Timothy McBride, Missouri Medicaid update, 2025: Procedural concerns remaining for Medicaid recipients, April 1, 2026 (analyzing CMS data), available at: https://timothymcbride.substack.com/p/missouri-medicaid-update-2025-on. More documentation requirements are sure to increase such procedural terminations.

[15] This change will be even more harmful when incorporating §208.009.9, which requires every applicant to provide documentation of citizenship even if their citizenship has already been verified via SAVE or SSA, which will ensure that many more applicants will fail to verify their citizenship.

- The current policy on reasonable opportunity periods meets program goals and complies with federal requirements.

Legal Status of Non-Applicants: Missouri currently prohibits DSS from inquiring about the legal status of custodial parents or guardians applying for public benefits for their dependent child who is a citizen or lawful permanent resident. The legislation eliminates this prohibition (§208.009.5).

- **Impact**: The legal status of custodial parents who are *not* applying to get benefits for themselves is not relevant to the determination of their children's eligibility for benefits. Asking for the disclosure of this information is against federal policy. Missouri's existing law complies with this federal policy. If passed, this bill would deter ineligible parents from applying for Medicaid and SNAP for their eligible children, including but not limited to "unborn" children under the Show Me Healthy Babies program.
- Continuing current policy on non-applicants meets federal requirements and ensures that only citizens or legally eligible immigrants receive benefits.

Documentary Proof of Relationship: The bill requires individuals applying for benefits with minor children to provide documentary proof of their relationship to the children or proof of financial responsibility for the children. (§208.009.12(1)).

- **Impact:** This violates federal regulations that preclude the State from requiring all parents to provide "documentary proof" of their relationship to their children rather than rely on "ex parte" data sources available to the State agency.[16] All Missouri parents applying for benefits for their children would have to prove that they are their children's parents even though for most the State already has access to the children's birth records.
- This provision would create an unnecessary administrative burden for Family Support Division as well as the families. DSS estimates that it would require an additional 42 FTE staff to process the additional paperwork from this provision.[17]
- Accepting self-attestation of family relationships is appropriate unless there is reason to believe otherwise in a particular case. It is also more appropriate (and lawful) to verify relationships with vital records and other data before requiring documentary evidence.

Reporting to DHS: The bill provides that if any agency that administers public benefits is unable to determine an applicant's or enrollee's lawful presence after a SAVE query or other authorized verification, the agency must immediately suspend approval or continuation of benefits and refer

[16] Under 42 CFR § 435.945(a), the State agency may accept self-attestation for proof of family relationship but doing so is not required. However, if the State chooses not to accept self-attestation for household construction they cannot immediately jump to requiring documentation. Rather, they could only require documentation if the information could not be electronically verified. 42 CFR § 435.952.

[17]Committee on Legislative Research, Oversight Division, Fiscal Note, April 8, 2026 at: https://documents.house.mo.gov/billtracking/bills261/fiscal/fispdf/6262H.02P.ORG.pdf pp. 7-8.

the case to the United States Department of Homeland Security or other appropriate federal agency for investigation and enforcement action. (§208.009.12(3)).

- **Impact:** Lack of a match on SAVE or any other verification system only signals that more research is needed. It does *not* prove ineligibility or lack of acceptable immigration status and is therefore not a reason to report to DHS.[18] It is also not an acceptable reason to terminate benefits, as federal law requires a reasonable opportunity period to provide information.[19]
- This provision would have a chilling effect on participation by individuals who are eligible for Medicaid and/or SNAP and could well violate laws that restrict programs from such reporting.[20] The sharing of health coverage and SNAP data with DHS would likely make immigrant families more reluctant to access health coverage and care as well as SNAP benefits for eligible family members, including citizen children.
- It makes sense for DSS to continue complying with federal requirements regarding "reasonable opportunity periods" and it is inappropriate to report people based on failure to match on SAVE.

New Presumptive Eligibility Policies: The legislation would require the MO HealthNet Division to include a field for citizenship or immigration status on all presumptive eligibility applications. The Division would have to require hospitals, clinics, and other qualified entities authorized to conduct presumptive eligibility determinations to collect and transmit attestations of citizenship or eligible immigration status to the division. No presumptive eligibility application could be approved unless the applicant certifies that the applicant is a United States citizen, United States national, or alien with eligible immigration status for MO HealthNet. (§208.009.13).

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[18] Federal Register: Responsibility of Certain Entities To Notify the Immigration and Naturalization Service of Any Alien Who the Entity "Knows" Is Not Lawfully Present in the United States, at: https://www.federalregister.gov/documents/2000/09/28/00-24894/responsibility-of-certain-entities-to-notify-the-immigration-and-naturalization-service-of-any-alien.

[19] Federal regulations require states to provide a reasonable opportunity period for individuals to prove their citizenship or other immigration status and that states "may not delay, deny, reduce or terminate benefits for an individual whom the agency determines to be otherwise eligible for Medicaid during the reasonable opportunity period." 42 C.F.R. § 435.956.

[20] See e.g., 42 U.S.C. § 1396a(a)(7)(A)(i) requiring state Medicaid plans to provide "safeguards which restrict the use or disclosure of information concerning applications and recipients to purposes directly connected with […] the administration of the plan [.]; 42 C.F.R. Chapter IV, Subchapter C, Part 431, Subpart F ("Safeguarding Information on Applicants and Beneficiaries"), including §§ 435.907(e)(1) (limiting state agency collection of information to only what is necessary to make eligibility determinations or administer the state Medicaid plan), (e)(3) (limits on state collection of SSNs, including the at non-applicants' SSNs be voluntary and "used only to determine an applicant's or beneficiaries' eligibility for Medicaid or other insurance affordability program for a purpose directly connected to the administration of a State Plan"). Similarly, 42 U.S.C. § 1320b-7, which governs the system used by each state to verify income and eligibility for a number of public programs (Medicaid, SNAP, SSI, and more), mandates that states have adequate safeguards in effect "so as to assure that the information exchanged by the State agencies is made available only to the extent necessary to assist in the valid administrative needs of the program receiving such information" and "is adequately protected against unauthorized disclosure for other purposes, as provided in regulations" established by HHS. That system covers protections for SSNs.

- **Impact:** Health centers and hospitals would have to alter their presumptive eligibility determinations to meet the new citizenship/immigration status requirement. The legislation places providers in a difficult position, forcing staff to ask about unrelated and private issues that could harm provider-patient relationships. It would almost certainly deter eligible individuals from pursuing presumptive eligibility and health care itself for fear of adverse consequences related to immigration and deter providers by creating additional red tape.
- The requirement may also negatively affect the Show Me Healthy Babies (SMHB) program. For example, will presumptive eligibility still be granted if a pregnant woman does not certify that they have an eligible immigration status but still meets all eligibility requirements for SMHB?

Changing the Eligibility Determination for "Mixed Households" in SNAP: When determining the eligibility and allotment of households in which some members are not eligible based on immigration status, current Missouri policy counts all of the ineligible household member's income minus a pro rata share of the ineligible member's income (as allowed by federal regulations). The bill requires the DSS to consider the entire income of the ineligible immigrant in determining the eligibility and allotment levels of the remaining members.[21] For example, currently in a 3-member household in which 2 members are eligible for benefits, Missouri would divide the ineligible immigrant's income by 3 and subtract a third of that income when determining eligibility and allocating benefits for the two remaining household members. The pending legislation would require the state to count the entire income of the ineligible immigrant against the remaining household members, thereby adversely affecting their eligibility or reducing their allotment of SNAP benefits. (§208.009.14(1)(2)).

- **Impact:** This revision would cause children and other remaining household members in "mixed" households (those with eligible and ineligible members) to receive fewer benefits than they now receive by counting the entire income of the ineligible individual in determining the rest of the household's income. This would further harm refugees, asylees and others who have just been denied SNAP benefits due to the HR1 changes and would disincentivize work.

Conclusion

This pending legislation would create a host of new bureaucratic requirements in Missouri's SNAP and Medicaid programs and exceed existing federal requirements. The legislation would cause hardship for citizens and other legal residents as well as the Department of Social Services. Missouri is already struggling to keep up with eligibility and renewal processing demands and has experienced application processing delays and long wait times at call centers. Administering these new documentation requirements — along with Medicaid work requirements and conducting

[21] Federal regulations and Missouri policy already require inclusion of the ineligible immigrant's resources.

Medicaid renewals twice as often for some enrollees, as HR 1 requires — will add substantial administrative burden to an already strained state workforce.

Because the legislation would impose new verification requirements on DSS, it also increases the opportunity for errors, the consequences of which are far more severe under HR 1. If eligible individuals in "mixed households" are improperly denied SNAP benefits, these "underpayments" will count against the SNAP payment error rate, with serious fiscal consequences (including increasing the amount of state match Missouri will have to spend in its SNAP program).[22] Medicaid payment errors are determined differently but additional bureaucracy increases the likelihood of errors, which can no longer be waived by the federal government.[23] Most importantly, many eligible individuals, most of whom are *citizens*, will fall through the cracks and be needlessly denied or chilled from receiving SNAP and Medicaid.

[22] HR1 included new "state financial participation" requirements, meaning that states will have to fund a greater share of administrative costs and for the first time, a share of the SNAP benefits themselves. The amount of state match is tied to the State's SNAP error rate, which would surely increase under this legislation. The impact of these changes would extend far beyond SNAP as the entire Missouri budget would be compromised by the unnecessary loss of federal funds and increased need for general revenue.

[23] HR 1 made significant changes to Medicaid's Payment Error Rate Measurement Program (PERM), limiting federal authority to waive financial penalties for Medicaid errors greater than 3 percent and expanding the universe of audits that can be used in this calculation. Missouri has noted a risk of over $1 billion in PERM sanctions even without the new requirements this legislation would impose. See Steph Quinn, *Missouri social services director requests investment to avoid 'bankruptcy territory,"* Missouri Independent, January 28, 2026; Missouri Department of Social Services, Information on Payment Error rate Measurement (PERM) (undated).