

Paul Nannis: FoodShare bill raises practical concerns for food access and privacy

Posted on Monday, Mar 16, 2026

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As a former public health official and executive director of a community health center, I know that health policy succeeds or fails in the details of implementation. It is not enough to simply debate what a proposal intends to do. We must ask what happens when it reaches a checkout counter or a neighborhood already struggling with limited grocery access. Any policy discussion must balance legitimate public health goals and improved health outcomes with concerns about possible government overreach, personal choice, and the growing number of food deserts currently in our state. That is why the practical effects of AB 180 and its substitute amendment deserve careful review.

FoodShare is a stabilizing part of life for many eligible Wisconsin families. For people living paycheck to paycheck, it is what makes groceries accessible. And in many neighborhoods, access depends not on large supermarkets, but on smaller local retailers, because those are the closest options. Policies that make FoodShare harder to use, or harder for retailers to accept, can have a devastating effect: fewer places to shop nearby, longer trips across town, higher transportation costs, and more time spent trying to make basic needs work. With many communities confronting food access gaps, it is reasonable to worry that poorly designed restrictions could unintentionally expand food deserts.

AB 180 contemplates item-level purchase restrictions based on statutory definitions of products. I understand the sentiment — but whatever one thinks about imposing limitations as a public health strategy, the operational challenge is substantial. Item-level restrictions require a complex system that identifies thousands of products by UPC code and keeps that list current. In the real world, products change constantly. Retailers carry different inventories depending on neighborhood demand, and many smaller stores operate with limited staffing and technology.

Even with best efforts, errors are inevitable when thousands of items must be continuously coded, updated, and enforced. Those errors would not be theoretical; they would result in confusion and disruptions at the register.

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The compliance structure adds another practical concern. When program rules are difficult to interpret quickly at checkout, the results are delays, disputes, and frustration for customers and store employees alike. A system that denies a purchase in front of others is not just inconvenient; it can be stigmatizing. Public health is not improved by creating more moments where families feel singled out for assistance.

The risk is not limited to consumers. If participation becomes too burdensome or too uncertain, some retailers, especially smaller ones, may decide they cannot keep accepting FoodShare. For a neighborhood store, the administrative burden of maintaining item-level coding and the fear of compliance penalties can be enough to tip the balance. If stores withdraw, the families who rely on them lose convenient access. That is the opposite of what we should want in communities already working to improve healthy food options.

There is also a second issue that needs attention because it represents a major change in the bill's scope. The version that passed the Assembly is significantly different than what was introduced, and a substitute amendment opened the door to serious privacy concerns. Because federal law classifies certain Section 17(b) SNAP waivers as "research" pilot programs, the USDA requires states to scientifically prove that restricting specific grocery purchases leads to measurable health improvements. To achieve that, the state would need to track health biomarkers, such as Body Mass Index (BMI) and obesity rates, among the pilot population.

In fact, the substitute amendment explicitly requires the nonprofit contractor managing the system to partner with a technology firm experienced in the state's "Medical Assistance enterprise data warehouse." This infrastructure is designed to work with Medicaid data. In practice, this signals a pathway to cross-referencing

individual SNAP EBT transaction data with private Medicaid health records to evaluate changes in BMI over a two-year pilot.

From a public health perspective, this crosses a line that should concern lawmakers. Low-income Wisconsinites should not be treated as non-consenting test subjects in a government health experiment. When assistance is necessary to keep food on the table, participation is not voluntary. If the state is contemplating a system that merges a person's grocery receipts with their medical records, the public deserves transparency about what data would be collected, how it would be used, who would have access to it, and whether participants would have any meaningful ability to opt out.

Public health policy should be practical, implementable, and respectful of the people it affects. AB 180 raises legitimate questions on all three. If the goal is healthier communities, Wisconsin should focus on approaches that preserve access, reduce stigma, and strengthen neighborhoods, and not risk disrupting food availability while expanding the use of personal data in ways most people would never accept for themselves. Before the Senate votes, lawmakers should slow down and fully examine both the real-world operational consequences and the privacy implications embedded in the substitute amendment.

- Paul Nannis is former city of Milwaukee health commissioner and a current health care consultant.