

BOARD OF DIRECTORS

Brian Allison AFSCME

Mayra Alvarez The Children's Partnership

Nancy "Nan" Brasmer California Alliance for Retired Americans

Cynthia Buiza
California Immigrant Policy Center

Michelle Cabrera Service Employees International Union State Council

Sarah de Guia California Pan-Ethnic Health Network

Lori Easterling
California Teachers Association

Stewart Ferry

National Multiple Sclerosis Society, MS California Action Network

> Aaron Fox Los Angeles LGBT Center

Roma Guy California Women's Agenda

> Kelly Hardy Children Now

Alissa Ko Planned Parenthood Affiliates of California

Kathy Ko Chin Asian and Pacific Islander American Health Forum

Christina Livingston Alliance of Californians for Community Empowerment

> Joseph Tomás Mckellar PICO California

> > Maribel Nunez California Partnership

Gary Passmore Congress of California Seniors

Joshua Pechthalt California Federation of Teachers

> Art Pulaski California Labor Federation

Emily Rusch California Public Interest Research Group

Thomas Saenz Mexican American Legal Defense & Education Fund

Joan Pirkle Smith Americans for Democratic Action

Horace Williams California Black Health Network

Sonya Young California Black Women's Health Project

Anthony Wright Executive Director

Organizations listed for identification purposes

December 10, 2018

Samantha Deshommes

Chief, Regulatory Coordination Division, Office of Policy and Strategy U.S. Citizenship and Immigration Services, Department of Homeland Security 20 Massachusetts Avenue NW Washington, DC 20529-2140

RE: DHS Docket No. USCUS-2010-0012 – Proposed Rule: Inadmissibility on Public Charge Grounds

Dear Chief Deshommes:

Health Access California, the statewide health care consumer advocacy coalition working for quality, affordable health care for all Californians, writes to strongly oppose the recently proposed rule redefining the term "public charge." The proposed changes to public charge will cause irreparable harm to California's immigrant families seeking access to health care, and weakens the trust between immigrant communities and federal and state entities administering health coverage. The proposed rule will discourage lawfully present immigrant Californians from signing up for health coverage or seeking care, which threatens health coverage for tens of thousands of eligible Californians and undermines public health. The proposed public charge rule also threatens to impact all Californians and Americans, weakening the health care system we all rely on, and undermining our economic growth as well.

Over I in 3 Californians are enrolled in Medi-Cal. Among the families that are enrolled in Medi-Cal, over half are families with children.² The proposed rule expands the types of benefits that could be considered in a "public charge" determination to include Medicaid (Medi-Cal in California), with very limited exceptions.³ Under the proposed rule, a child's receipt of Medi-Cal benefits could affect his or her ability to become a permanent resident or get a visa if their parents are not U.S. citizens.⁴ In California, many immigrant families will be discouraged from accessing Medi-Cal or and other public resources they are entitled to, or dis-enroll from Medi-Cal or other public benefits, regardless of whether or not they are directly impacted by the public charge rule change.⁵

Decreased Medi-Cal Enrollment as a Result of Public Charge Will Increase Uninsured Rate, Lead to Poorer Health Outcomes

The proposed rule will absolutely decrease Medi-Cal enrollment in California of those who are legally entitled to enroll in such coverage. Fear, confusion, and the actual consequences to individuals under such a rule change will lead to disenrollment of eligible individuals in

¹ Potentially Chilled Population Data Dashboard. https://www.manatt.com/insights/articles/2018/public-charge-rule-potentially-chilled-population Oct. 11, 2018.

² UCLA Center for Health Policy Research. <u>www.healthpolicy.ucla.edu</u>

 ³ DHS Proposed Rule: What may Change with Public Charge? http://www.healthlaw.org/publications/dhs-rule-what-may-change-public-charge#.W9Oxi2hKjvR
 ⁴⁴ NHELP. http://www.healthlaw.org/publications/browse-all-publications/dhs-rule-what-may-change-public-charge#.W9Oxi2hKjvR

AMELP. http://www.healthlaw.org/publications/browse-all-publications/dhs-rule-what-may-change-public-charge#.W9Oxj2hKjyR
 Manatt Health: Public Charge Proposed Rule: Potentially Chilled Population Data Dashboard. October 11, 2018.
 https://www.manatt.com/insights/articles/2018/public-charge-rule-potentiallychilled-Population

non-citizen families. According to the Kaiser Family Foundation, the proposed rule could lead to Medicaid disenrollment rates ranging from 15% to 35% among Medicaid and CHIP enrollees living in a household with a noncitizen, meaning between 2.1 to 4.9 million Medicaid/CHIP enrollees would dis-enroll nationwide.6 Given California's significant immigrant population, our state healthcare system would be significantly undermined.

California already stands to lose health coverage gains made as a result of the Affordable Care Act because of federal changes to health insurance laws, including the repeal of the ACA's individual mandate penalty. Without additional state action, the number of Californians who would be uninsured could increase to 4.4 million Californians by 2023.7 Combined with federal changes to public charge, this will result in more Californians going uninsured.

Uninsured families have reduced access to care, which contributes to worse health outcomes, reduced prescription drug access, and increased use of emergency care as a result of delayed treatment. It also leads to increases in uncompensated care, resulting in adverse consequences for hospitals, clinics, and providers who manage those costs, leading them to cut back on services and reducing access even for those already insured. It also leads has implications on social determinants of health, with the uninsured having increased rates of poverty and housing instability and reduced productivity and educational attainment. 8

Public Charge Threatens Health System, Financing of Medi-Cal Program In California

One in six of all California children have at least one undocumented parent. This rule change combined with other shifting federal immigration policies are creating confusion and fear at the community level. According to the Urban Institute, the public charge rule could result in the disenrollment of legally residing children, preventing them from accessing the health care they need. 10 This will surely lead to poorer health outcomes and increasing health disparities by race, for more Californians.

In California, this "chilling effect" will not only have devastating consequences for all members of an immigrant family, including children and seniors, regardless of whether some are citizens or not, but will also threaten California's health system as a whole. Over 2.1 million could potentially dis-enroll from Medi-Cal, reducing federal funds that support the health plans and providers in the Medi-Cal program by up to \$1.2 billion dollars.11 Lower enrollment would mean less funding to support our Medi-Cal and health care infrastructure, impacting care for all Californians.

Studies show that when there is a reduction in federal funding for state programs, an economic multiplier effect results in major job losses in the state, and reductions in the income of workers in the healthcare industry, leading to reduced state tax revenue, further affecting the economic growth of the state. In California, an increase in the number of people without health insurance will also affect our state's economic growth, resulting in more jobs lost throughout the state. 12 Federal dollars support both private

⁶ Kaiser Family Foundation: Estimated Impacts of the Proposed Public Charge Rule on Immigrants and Medicaid. https://www.kff.org/disparitiespolicy/issue-brief/estimated-impacts-of-theproposedpublic-charge-rule-on-immigrants-and-medicaid/

⁷ California's Health Coverage Gains Will Erode Without New Action by the State. http://newsroom.ucla.edu/releases/california-health-coverage-gains-

erode-without-state-action

8 Proposed Changes to "Public Charge" Policies for Immigrants: Implications for Health Coverage. https://www.kff.org/disparities-policy/fact-sheet/proposedchanges-to-public-charge-policies-for-immigrants-implications-for-health-coverage/

What's at Stake for the State. https://dornsife.usc.edu/assets/sites/731/docs/whats

¹⁰ Public Charge Rule Could Jeopardize Recent Coverage Gains Among Citizen Children. Urban Institute. https://www.urban.org/sites/default/files/publication/99453/proposed public charge rule could jeopardize recent coverage gains among citizen childre

n.pdf

11 Public Charge Seminar. UCLA Center for Health Policy Research. https://healthpolicy.ucla.edu/newsroom/Documents/2018/public-charge-seminar-slidesnov2018.pdf

12 Lucia, Laurel and Ken Jacobs. California's Projected Economic Losses under ACA Repeal. 2016. http://laborcenter.berkeley.edu/pdf/2016/Californias-

Projected-Economic-Losses-under-ACA-Repeal.pdf

and public employment throughout the healthcare industry. Less federal funding could lead to lower wages, job loss, and a reduction of local healthcare related economic activity generally.

For these reasons, Health Access California strongly opposes the Department of Homeland Security's proposed rule change to "public charge," and any similar efforts to discourage immigrant families and Californians from accessing health care benefits they need. The public charge rule will discourage legally residing immigrant Californians from signing up for health coverage or seeking care, which threatens health coverage for hundreds of thousands of Californians and threatens harm to California's public health.

Sincerely,

Anthony Wright Executive Director