EXPANDING COVERAGE FOR IMMIGRANTS

THE ISSUE
According to the US Census Bureau’s American Community Survey, nearly 44 million immigrants are residing in our nation. The majority of immigrants work but generally are employed in jobs or industries that offer lower wages and provide limited access to employer sponsored insurance. Due to limited access to employer sponsored coverage and eligibility restrictions for Medicaid and CHIP, non-citizens are three times as likely to be uninsured compared with US-born citizens and are less likely to obtain needed care or preventive services.

CHA believes all persons should have equal access to health care, regardless of immigration status, and therefore supported inclusion of health coverage for both legally resident and non-legally resident immigrants in the Affordable Care Act (ACA). Providing health care access also makes sense from a fiscal standpoint—uninsured immigrants, like uninsured citizens, receive care but in the most expensive setting, the hospital emergency room, adding to hospital uncompensated care costs. Including all immigrants in the health care system would save money in the long term by enabling them to receive timely care in a less costly primary care setting. Lawfully present immigrants also are subject to a five-year waiting period for Medicaid. Keeping the five-year bar on Medicaid for legally present immigrants prevents them from accessing a program more affordable than private health coverage.

MINISTRY TRADITION
The United States Catholic Conference, in their 2003 pastoral letter on immigration Strangers No Longer, the bishops reaffirmed that regardless of legal status, immigrants, like all persons, possess inherent human dignity which should be respected. The social doctrine of the Catholic Church teaches that each person is created in the image of God; that each human life is sacred and possesses inalienable worth; and that health care is essential to promoting and protecting the inherent dignity of every individual. The Catholic health ministry, as stated in our Vision for U.S. Health Care, further reaffirms our call to pay special attention to the needs of the poor and the vulnerable, those most likely to lack access to health care, in our journey towards affordable, accessible health care for all. This commitment is why the ministry has strongly supported health coverage for all immigrants, legal residents and undocumented residents.

CHA’S POSITION AND ACTIVITIES
CHA continues to support legislation to expand health coverage for immigrants, including elimination of the current bar on access to federal health programs for legal immigrants for the first five years of residence in the U.S. This provision was enacted into law in 1997 and has been amended to allow legal immigrant children and pregnant women to be exempt from the five-year waiting period under Medicaid and CHIP at state option.

CHA strongly opposes the Administration’s proposed rule to expand the definition of “public charge” for legal immigrants to include the utilization of health care or other vital assistance
programs. Such an overly broad definition of public charge punishes working families and children by forcing them to choose between access to health care, housing, nutrition and other programs or adjusting their immigration status. It also adversely affects public health by putting vaccinations and treatment out of reach for many legal immigrants, and increases the number of uninsured as well as accompanying uncompensated care costs.

CHA supports comprehensive immigration reform and strongly urges Congress to continue efforts to pass legislation such as the bill approved by the Senate in 2013. Together with our immigration coalition partners, we will urge Congress in particular to ensure:

- An earned path to citizenship for undocumented persons in the United States, and the priority of family reunification within comprehensive reform legislation
- That years spent under any transitional legal status also apply to any waiting period for federal benefits for legal immigrants, such as the five-year moratorium on access to Medicaid benefits
- That no legislative or statutory changes be enacted to expedite removal proceedings for immigrants currently in the US
- Compassionate care of undocumented families in US custody and adequate funding for health care, housing and legal services for unaccompanied children

Additionally, CHA supports the following in Congress:

- The DREAM and Promise Act (HR 6), which provides protections and a pathway to citizenship for young undocumented immigrants (“Dreamers”) as well as temporary protected status (TPS) holders. This bipartisan legislation has passed in the House and CHA urges the Senate to take up HR 6 or similar legislation.
- CHA opposes efforts to restrict the number of asylum seekers allowed into the country. We support legislation (The GRACE Act HR 2146/S 1088 and the No Ban Act HR 2214/S 1123) that would maintain the current annual allowance of at least 95,000 asylum seekers for FY2020 and do away with restrictions on countries of origin.