Proposed Modifications to Public Charge Policies Stand to Undermine Access to Health Care and Other Needed Services for the Nation’s Most Vulnerable Children

Children’s Health Fund Strongly Urges Withdrawal of the Proposal

For over 30 years, Children’s Health Fund has been on the front lines delivering health care to vulnerable children and advocating in support of programs and policies to ensure that all children have access to comprehensive, high-quality health care. Having fought hard to achieve historic levels of coverage and access for the nation’s most underserved children, our goal has yet to be realized and progress made now appears to be slipping from our grasp.

The U.S. Department of Homeland Security recently proposed changes to the public charge rule; policies that set parameters for utilization of public benefits programs by immigrant persons. The new rule discriminates much more severely against children and families by broadening the definition of public charge to include reliance on public assistance required to meet even basic human needs. Previously, applicants were only at risk of being deemed a public charge if they received cash welfare or aid for long-term health care. Now, the proposed changes have put immigrant families on notice that they are soon to be subject to scrutiny and potential sanction from eligibility of green cards and visas for availing themselves of programs like Medicaid – the nation’s largest insurer of children – and SNAP (food stamps.)

These proposed changes are ill-conceived and pose an extraordinary threat to the health, development, and well-being of some of the nation’s most vulnerable children. According to a report released on October 23, 2018, from the California Health Care Foundation, it is estimated that 4.8 million children live in families with at least one noncitizen adult, and need medical attention. Of these, 700,000 to 1.7 million could be disenrolled from CHIP or Medicaid if the rule is passed. These are alarming numbers.

Children’s Health Fund believes that regardless of immigration status, all children should have a right to health and healthcare, but access remains a huge barrier. Immigrant children comprise the largest remaining cohort of children lacking insurance coverage. By creating a chilling effect that deters parents from seeking, enrolling and maintaining critical participation of children in programs that support their health and well-being for fear of exposing the child or other family members to sanction, the proposed changes threaten to undermine hard-won accomplishments in promoting children's health. With this proposal, those who are most vulnerable will, unconscionably, be forced to face additional burdens and challenges.

Children’s Health Fund strongly urges withdrawal of the proposed changes in public charge policy and recommends that the proposed changes not be instituted.

Children’s Health Fund Executive Vice President and Chief Medical Officer Elizabeth Goodman, MD, MBA states, “Investing in all of America’s children has to be one of our foremost priorities. Through our National Network, Children’s Health Fund has a unique vantage point to observe the pivotal impact of policies that erode health access and diminish participation in programs that can lift children up and help them succeed in life. Children in immigrant families are one of the most vulnerable pediatric populations in the United States. Proposed changes to public charge policies would further undermine their already tenuous access to the medical and nutrition resources they need for healthy development.
and to reach their full potential. These children are our children. We should be strengthening access to such resources, not putting up barriers to care.”