The Health Equity and Access under the Law (HEAL) for Immigrant Families Act of 2023

National Latina Institute for Reproductive

WHAT DOES THE HEAL FOR IMMIGRANT FAMILIES ACT DO?

The Health Equity & Access under the Law (HEAL) for Immigrant Families Act of 2023 removes political interference and restores coverage so immigrants in the United States (U.S.) can participate in the health insurance programs for which they would be eligible but for their immigration status or length of stay. This bill will allow immigrants and their families to receive the health coverage they need and deserve; creating healthier communities, more equitable health care, and a prosperous economy. Specifically, the bill:

- > Restores enrollment to full-benefit Medicaid and the Children's Health Insurance Program (CHIP) to all federally authorized immigrants who are otherwise eligible. The bill removes the discriminatory legal barriers to health coverage for immigrants imposed by the Personal Responsibility and Work Opportunity and Reconciliation Act (PRWORA). Specifically, the bill eliminates that 1996 law's restrictive five-year waiting period and outdated list of "qualified" immigrants for Medicaid and CHIP eligibility. Through these changes, the bill ensures all individuals granted federally authorized presence, including Deferred Action for Childhood Arrivals (DACA) recipients, are eligible for federally funded health care programs.
- > Removes discriminatory Medicare eligibility requirements regarding length of stay in the U.S. for many lawful permanent residents (LPR). This bill would remove the five-year continuous residence requirement that LPRs who do not qualify for premium-free Part A must satisfy before becoming eligible for any Medicare benefits.
- Codifies access to public and affordable health coverage for Deferred Action for Childhood Arrivals (DACA) recipients, and ensures that those who will gain new forms of immigration relief will not be similarly excluded from the health care programs.
- > Ends the discriminatory exclusion of undocumented immigrants from accessing health insurance coverage on the Affordable Care Act's Health Insurance Exchanges. The bill would end restrictions on Marketplace coverage, premium tax credits, and cost-sharing reductions, and would enable everyone to enroll in the Basic Health Programs. This access would be available for everyone, regardless of their documentation or status, in accordance with existing income eligibility requirements.
- Creates a State plan option to expand Medicaid and CHIP eligibility to immigrants without lawful presence. This bill would remove restrictions that prevent states from electing to provide Medicaid and CHIP coverage to undocumented immigrants who are otherwise eligible.

How can you support the HEAL for Immigrant Families Act?

FOR MORE INFORMATION:

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WHAT IS THE PROBLEM?

or decades, health care and immigration policy in the United States has limited immigrant access to affordable and comprehensive health insurance. Discriminatory policies and rhetoric on immigrants' rights and the health, safety, and well-being of immigrants and their families have contributed to long-term health disparities. Targeted threats on immigrants' access to health care, such as the previous administration's unlawful attempt at expanding the "public charge" rule, and cruel and unnecessary policy barriers preventing access to critical health care services, have instilled fear in immigrant communities when seeking care.

Restrictions on access to essential health care, a basic human right, not only harm immigrants' health, but also interfere with the human right to protect and care for themselves and their families. Barriers such as the five-year waiting period on Medicaid and CHIP enrollment, five-year waiting period on Medicare eligibility for many LPRs, and exclusion of undocumented immigrants from Medicaid, CHIP, and ACA Marketplace eligibility directly result in high insurance rates amongst immigrants and their families. In 2019, 14% of people, or 21.5 million individuals, in the United States aged 15–49 were uninsured; of the nearly 151 million people aged 15–49 in the United States, 14.6 million people — almost one in 10 — are noncitizen immigrants. A person's immigration status and income should not determine their health care coverage or broader access to care.

Legal and policy barriers to federal health programs disproportionately harm Black, Indigenous, Latinx, Asian, Pacific Islander, and Immigrants of Color, and contribute to persistent inequities in the prevention, diagnosis, and treatment of health conditions. Many immigrant communities of color face compounding barriers and discrimination from health care providers and health care systems when accessing care based on sexual orientation, gender identity, pregnancy or related conditions, income, ethnicity, disability, primary language, and immigration status. In 2019, higher proportions of noncitizens of every race and ethnicity were uninsured compared with the proportions among their US-born and naturalized counterparts, and one in five (19%) noncitizens reported having no usual place for routine or preventive care. Black immigrant women often cite cost as a major barrier to health care, with many who are undocumented forgoing doctors' visits altogether due not only to the financial burden, but additionally experiencing consistent racial bias by medical practitioners and racism in health care. The financial burden is often exacerbated for people living with a disability, who are also more likely to live in poverty than those without disabilities.

Now more than ever, the basic human needs and rights of the nation's immigrants must be elevated in policymaking.

Why should you support the HEAL for Immigrant Families Act?

- > Health should not depend on immigration status. Every individual deserves to be healthy and to obtain health care with dignity, regardless of how long they have been in the U.S. or the status they have been granted.
- > Under current law, immigrants must navigate a complicated patchwork of care that often forces them to pay outof-pocket for health care, particularly if a community health center or employersponsored health insurance is not available to them. Equitable health care access should be a reality for immigrant communities.
- > Viruses do not discriminate based on race, ethnicity, or national origin – but people and policies do. The COVID-19 pandemic made it clear that every person should be able to get health care no matter how long they have been in the U.S. or the status they have been granted. This is especially important as we continue to recover from the COVID-19 pandemic and prepare for future pandemics.
- > We need **bold and impactful legislation** that expands access to the basic care that immigrant families need and deserve.