

# Public Charge & Immigrant Health

## Train the Trainer

### Presentation



## What is Public Charge?

Is it how the government can find out where I am?

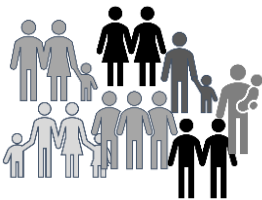
Does it mean that if my children use health care, I will be deported?

What is it?

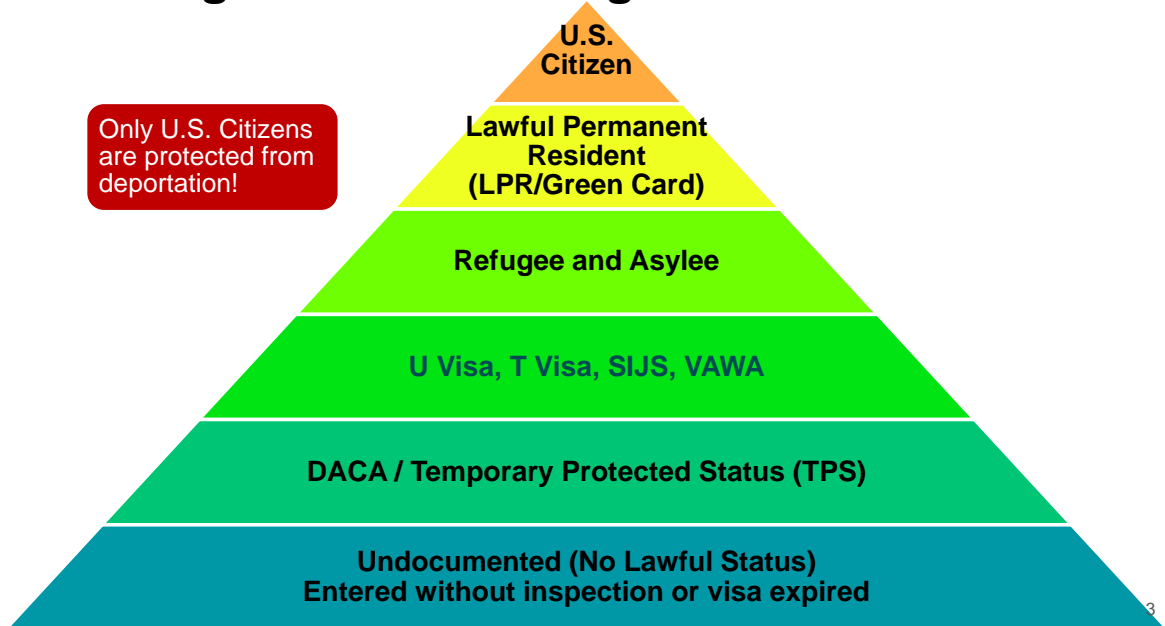
I think it means I should get off of benefits now.

Does it mean that if use public benefits, I won't qualify to become a citizen?

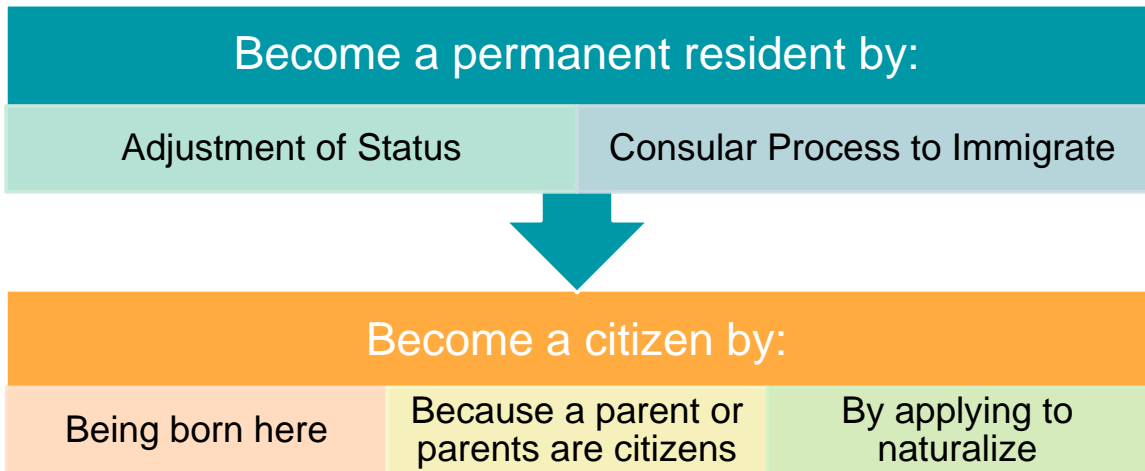
I think it means my family cannot access any benefits.



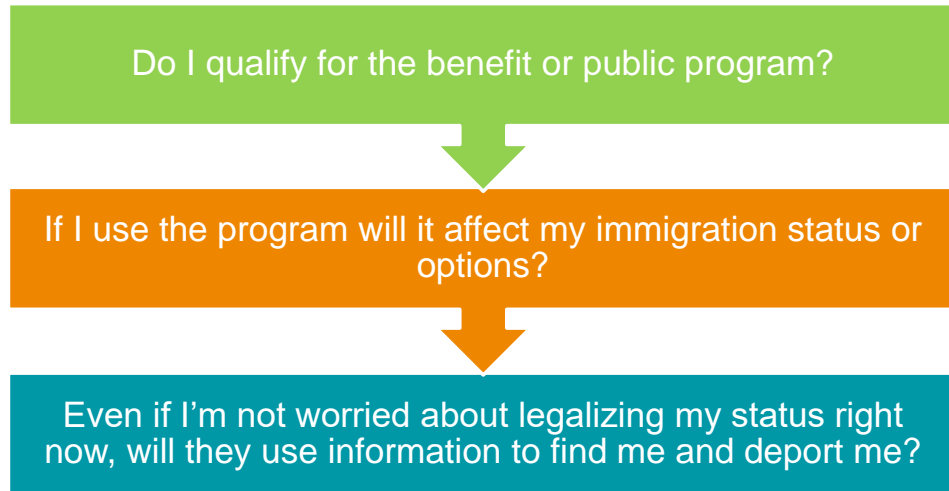
## Accessing Services and Immigration



## Ways to Become a Permanent Resident or U.S. Citizen



## Accessing Services and Immigration



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## Public Charge

A test applied only at certain points along the immigration path:

- When they **apply to enter** the US
- When they **apply to become a lawful permanent resident (LPR)**



There is **no** public charge test when a permanent resident applies for naturalization.

Mainly impacts individuals who will immigrate through a family member

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## Public Charge Exemptions

Many immigrants are not subject to public charge:

- **Refugees and asylees** (and at related adjustment)
- **Special Immigrant Juvenile Status** (and at related adjustment)
- **U** nonimmigrant status (and at related adjustment)
- **VAWA** self-petitioners (and at related adjustment)
- **T** nonimmigrant status (and at related adjustment w/ waiver)
- **DACA** applicants
- **TPS** applicants
- Others (Amerasians; Afghan and Iraqi military translators; certain Cuban and Haitian adjustment applicants; certain Nicaraguans and Central Americans under NACARA; Registry applicants; Soviet and Southeast Asian Lautenberg parolees)
- Most **legal permanent residents**
- **U.S. citizens**

**\*But public charge may apply if getting green card through family!**

## Important Takeaways

- The government's plan to add more benefits to the public charge test has not yet taken effect.
  - ✓ **Nothing has changed!! Only cash assistance and long-term care are considered. You have time to get advice from an immigration attorney.**
- Public charge does not apply to everyone, especially U.S. citizens and most current permanent residents!
  - ✓ **U.S. citizens and most current permanent residents can use public benefits without causing problems for their own immigration case or a family member's immigration case.**
- The new changes only apply to people applying for a green card through a family member or employer, and applying for certain visas.
  - ✓ **This means that not all immigrants need to worry about public charge consequences. Immigrants with concerns should ask for advice from a trusted immigration attorney or DOJ-accredited representative.**

## Important Takeaways

- Most families do not need to stop important services now
  - ✓ **Nothing has changed, families can continue to access services. Families' use of benefits added by the new rule before the rule is implemented will not count against them if they have an immigration case in the future. Many families will not have to get off benefits!**
- Tell folks to get immigration help! Every family needs case-by-case evaluation for what their immigration options and goals are.
  - ✓ **No two immigration cases are the same! An immigration attorney or DOJ-accredited representative can help each family understand if they are affected by public charge and whether they will benefit from disenrolling from public benefits.**
- The public charge changes do not affect eligibility for public benefits – everyone can still apply for the services available to them
  - ✓ **There are still many benefits and services that immigrants and their families can use without fear of consequences!!**

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## Talking to Families about Public Charge

- Remember: DON'T GIVE LEGAL ADVICE!
  - **Legal Advice = telling someone that they can or cannot apply for an immigration option**
  - **Advising clients what is OK for their immigration case requires legal analysis**
  - **Always tell someone to get legal advice if they are uncertain.**
  - **Create a list of good referrals!**

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## Creating Referrals

- National legal directory by zip code of nonprofits providing immigration legal services:  
<https://www.immigrationadvocates.org/nonprofit/legaldirectory/>
- Selected list of immigration legal service providers in CA:  
<http://www.cdss.ca.gov/Benefits-Services/More-Services/Immigration-Services/Immigration-Services-Contractors>
- Contact local partners

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## Talking to Families about Public Charge

- BUT! You can explain a lot of information without giving advice:
  - Whether someone is eligible for public benefits programs
  - Certain groups of immigrants do not have to worry about public charge
  - Generally, U.S. citizens and most permanent residents can use public benefits without immigration consequences
  - Right now, only cash aid and long-term care impacts public charge.  
 No one has to worry about whether to disenroll from other benefits until the rule is officially implemented.

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## Ahmed

Ahmed and his minor children came to the U.S. as refugees in 2010. They want to adjust status to receive a green card. Ahmed wants to apply for public benefits and is worried about public charge.

What can you tell Ahmed?

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## Ahmed

What can you tell Ahmed?

- ✓ **The federal government allows refugees to use public benefits.**
- ✓ **Refugees are not subject to a public charge test when they apply for a refugee-related green card.**
- ! **Ahmed does not need to worry about using public benefits right now. [Watch out! You don't know anything about his immigration case!]**
- ✓ **He should speak with an attorney if he wants more information about applying for a green card!**

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## Maya

Maya is an LPR and she is ready to naturalize! She's worried because she uses CalFresh.

What can you tell Maya?

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## Maya

What can you tell Maya?

- ✓ There is no public charge test to naturalize
- ✓ A person can apply for a fee waiver for a naturalization application if they receive a means-tested benefit.
- ✓ Maya should speak with an attorney or DOJ-accredited representative for more advice about her naturalization case!

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## Maya

Maya is an LPR and she is ready to naturalize! She's worried because she uses CalFresh.

It turns out Maya wants to petition for family members to come to the U.S. through the consulate.

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## Maya

- Information: There is no public charge test to naturalize
- "I am not an immigration lawyer, but I can tell you what benefits you qualify for"
- Don't give advice: ~~Using benefits won't be a problem with immigration~~
- **Why?** Maya's low income could make it harder to bring her family members from abroad.

An immigration representative could assess how long in the future that option might be, and whether she should worry about this. Generally, getting benefits will be more important to the family.

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## Laura

Laura is undocumented. Her children are U.S. citizens. Her children qualify for Medi-Cal and CalFresh.

Laura worries, because of her status, her children should not sign up.

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## Laura

- Information: Your children are eligible
- Information: A family member's use of services does not count against someone in a public charge test
- "You should talk to an immigration lawyer to make a family immigration strategy"
- "Here is a flyer explaining when immigration considers the benefits you use"
- ! Don't give advice: ~~Because you're undocumented, this doesn't affect you~~
- Laura should get screened by an advocate so she knows her rights.

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## Public Charge:

### Key Points:

- 👍 Get benefits your family needs to stay healthy!
- ✗ New changes have not yet gone into effect
- ✓ Nothing to do with eligibility for public benefits
- 👤 Only applies when seeking permanent residence (green card) through a relative
- 🚧 Many immigrants NOT impacted (refugees, U, VAWA, DACA, TPS, etc.)
- ⚠️ There is time to change enrollment- talk to an expert first

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## Carga Pública:

### Puntos Claves:

- 👍 ¡Reciba los beneficios para el bienestar de su familia!
- ✗ Los nuevos cambios aún no han entrado en vigencia
- ✓ No tiene que ver con su elegibilidad para los beneficios públicos
- 👤 Solo afecta personas solicitando la residencia permanente a través de un familiar
- 🚧 Muchos inmigrantes NO son afectados (asilados, U, VAWA, DACA, TPS)
- ⚠️ Hay tiempo para cambiar su inscripción, ¡consulte un experto!

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# Thank You!

**Immigrant Legal Resource Center**  
**Email:** [equinn@ilrc.org](mailto:equinn@ilrc.org)



# The Chilling Effect & Our Health Movement



## THE CHILLING EFFECT



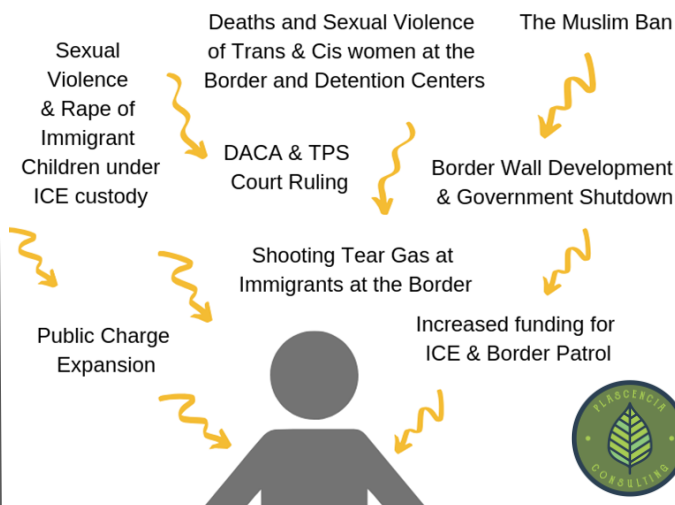
#MOVEMENTMAGIC  
@HECTORPLASCENCIA\_

## OUR HEALTH MOVEMENT



# Increased Anti-Immigrant Policy

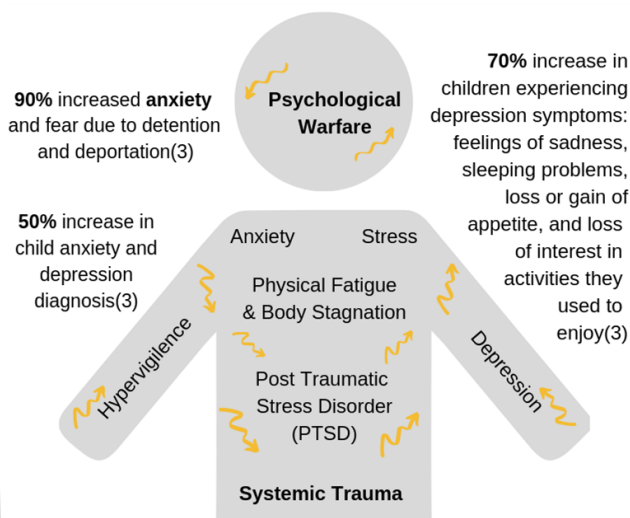
- Policy is a Social Determinant of Health that can lead to systemic trauma.
- Immigrant health is connected to the conditions of their political & social environment<sup>(1)</sup>
- Health care access alone will not heal immigrant people--systems and structural change are at the core of addressing immigrant health outcomes<sup>(2)</sup>



1. Plascencia-Juarez, H., Leyva, A. & Jaimes Pena, M.Y., Waheed, S. (2014). Part1: No Paper, No Healthcare. Undocumented and Uninsured: A Five Part Report on Immigrant Youth and the Struggle to Access HealthCare in California. Retrieved from <https://www.labor.ucla.edu/publication/undocumented-and-uninsured-part-1-no-papers-no-health-care/>  
 2. Plascencia-Juarez, H., Leyva, A. & Jaimes Pena, M.Y., Waheed, S. (2014). Part2: Band-Aid Care. Undocumented and Uninsured: A Five Part Report on Immigrant Youth and the Struggle to Access HealthCare in California. Retrieved from <https://www.labor.ucla.edu/wp-content/uploads/2018/06/UndocumentedandUninsuredPart2.pdf>

# Decline of Personal & Collective Health

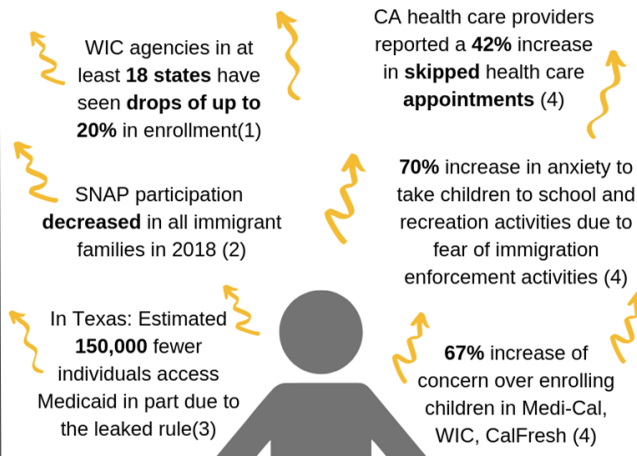
- **Psychological Warfare:** Harmful thoughts leading to harmful feelings and behaviors against self.
- Children have increased mental health issues and behavior changes:
  - difficulty paying attention at school
  - more problems sleeping<sup>(3)</sup>
- Immigrant people absorb and internalize their experiences of exclusion, leaving them ill, frightened, and without access to care<sup>(1)</sup>



1. Plascencia-Juarez, H., Leyva, A. & Jaimes Pena, M.Y., Waheed, S. (2014). Part1: No Paper, No Healthcare. Undocumented and Uninsured: A Five Part Report on Immigrant Youth and the Struggle to Access HealthCare to California. Retrieved from <https://www.labor.ucla.edu/publication/undocumented-and-uninsured-part-1-no-papers-no-health-care/>  
 2. Artiga, S., & Lyons, B. (2018). Family Consequences of Detention/Deportation: Effects on Finances, Health, and Well-Being. Kaiser Family Foundation. Retrieved April 4, 2019, from <https://www.kff.org/disparities-policy/issue-brief/family-consequences-of-detention-deportation-affects-on-finances-health-and-well-being/>  
 3. The Children's Partnership. (2018). California Children in Immigrant Families: The Health Provider Perspective. Retrieved from: <https://www.childrenspartnership.org/wp-content/uploads/2018/03/Provider-Survey-Infographic-.pdf>

# Decline Enrollment & Use of Services

- **Systemic Trauma:** Increases level of mistrust and engagement with institutions<sup>(6)</sup>
- **Anecdotal Reports:**
  - Immigrant families pass on assistance, even if eligible
  - Related to fear of deportation or future ineligibility for citizenship.
- “I don’t know if it’s true or not... I’ve decided not to renew because I am afraid, because I don’t want them to deny me my migration status...”<sup>(5)</sup>



1. Bottemiller Evich, H. (2018, September 3). Immigrants, fearing Trump crackdown, drop out of nutrition programs. Politico. Retrieved April 9, 2019, from <https://www.politico.com/story/2018/09/03/immigrants-nutrition-food-trump-crackdown-806292>

2. Bovell-Ammonn, A. Ettinger de Cuba, S. Coleman, S. Ahmad, N. Black, M.A. Frank, D.A. Ochoa Jr., E. Cutts, D.B. (2019) Trends in Food Insecurity and SNAP Participation among Immigrant Families of U.S.-Born Young Children. Retrieved from <https://www.mdpi.com/2227-9067/9/4/455>

3. Comments submitted by Association of Community Affiliated Plans (ACAP). (Posted: February 5, 2019). Retrieved April 9, 2019, from <https://www.regulations.gov/document?D=USCIS-2010-0012-48337>

4. The Children's Partnership. (2018). California Children in Immigrant Families: The Health Provider Perspective. Retrieved from: <https://www.childrenspartnership.org/wp-content/uploads/2018/03/Provider-Survey-Infographic.pdf>

5. Interview with Holly Straut-Eppsteiner (2019) The National Immigrant Law Center's Document Harm Project. Unpublished.

6. Plascencia-Juarez, H., Leyva, A. & Jaimes Pena, M.Y., Waheed, S. (2014). Part3: Pot[ICE] in my Head. Undocumented and Uninsured: A Five Part Report on Immigrant Youth and the Struggle to Access HealthCare to California. Retrieved from <https://www.labor.ucla.edu/publication/undocumented-and-uninsured-part-1-no-papers-no-health-care/>

## Impact by Race & Ethnicity

Impacts by Race and Ethnicity:<sup>(1)</sup>

- **18.3 million LATINOS** > 33.4% of all LATINOS
- **3.2 million ASIAN** > 17.4% of all ASIAN
- **1.8 million BLACK & AFRICAN** > 4% of all BLACK & AFRICAN
- **2.5 million WHITES** > 1% of all WHITES

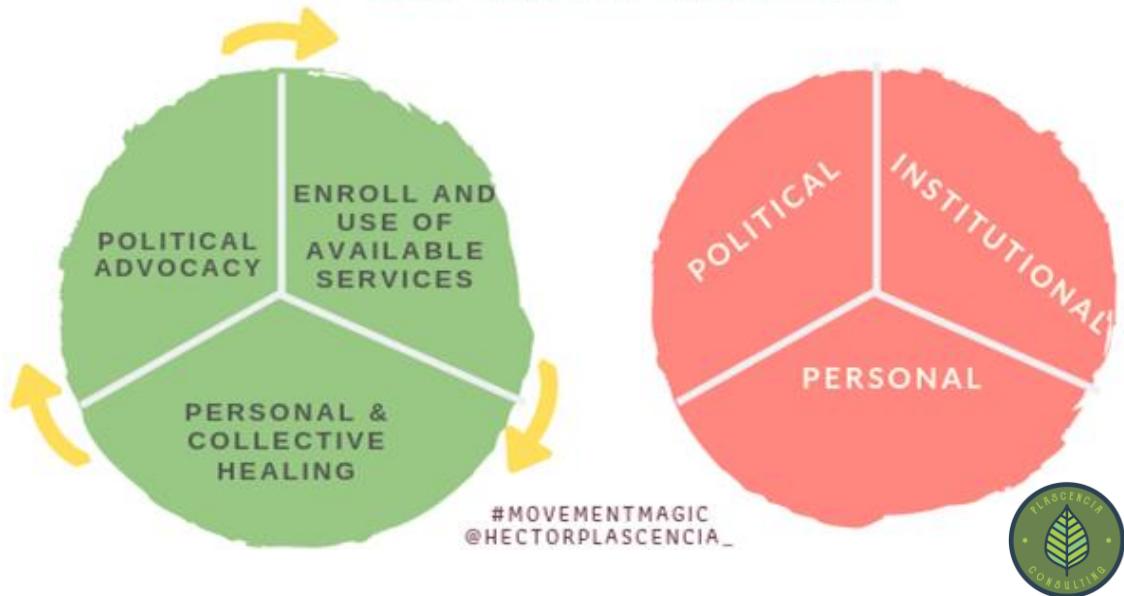


**26 million** people in families with immigrants might be chilled from participating in programs that make their families healthier and stronger<sup>(1)</sup>



1. "Public Charge Proposed Rule: Implications for Non-Citizens and Citizen Family Members Data Dashboard," Manatt Health, October 2018

## OUR HEALTH MOVEMENT



# THANK YOU!

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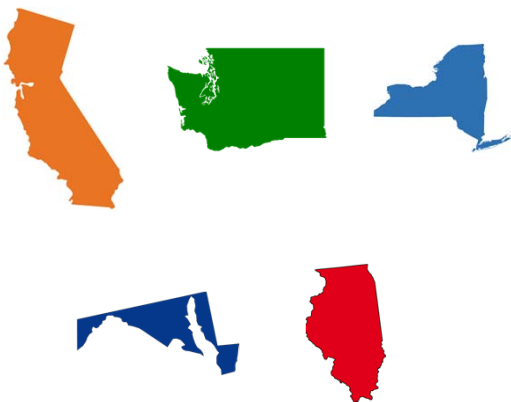
**AAPCHO**  
Association of Asian Pacific Community Health Organizations



## HOW TO TALK ABOUT PUBLIC CHARGE WITH IMMIGRANT COMMUNITIES

ADAM CARBULLIDO, DIRECTOR OF POLICY AND ADVOCACY  
December 12, 2019

### Current Status: Public Charged Rule Blocked



- Five federal courts issued preliminary injunctions, including three nationwide in Washington, Maryland, and New York.
- Recent rulings in the 9<sup>th</sup> and 4<sup>th</sup> Circuit Courts of Appeals put California, Washington, and Maryland injunctions on hold.
- New York's nationwide injunction remains in place.
- **DHS Public Charge Rule remains BLOCKED.**

## Impact on Asian American and Pacific Islander Communities

1.4M

- Asian and Pacific Islander immigrants are in families that use Medicaid or CHIP, including 182K children.

1.1M

- AA noncitizens live in families earning under 125% of poverty and could have had their visas or green cards rejected due to their income

983K

- AAPI children who are U.S.-born live with immigrant parents in families that use Medicaid or CHIP.

\$64M

- Estimated loss of revenue by health centers in AAPCHO member network due to chilling effect.



**31% of the 1.1 million** getting green cards each year are from Asia and Pacific Island nations.<sup>vii</sup>



**40%** of family-based immigrants are from Asia & Pacific Island nations.



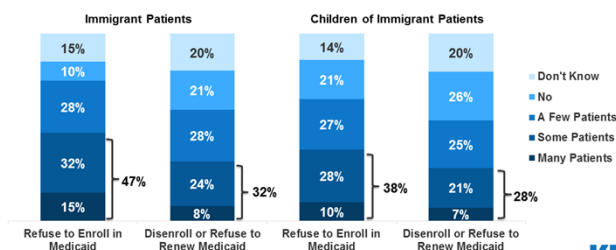
**54%** of employment-based immigrants are from Asia & Pacific Island nations.

*Adapted from joint APIAHF, AAPCHO, AHS factsheet, "Public Charge Proposal is an Attack on AAPI Families."*

## Impact on Community Health Center Patients

### Health Centers Reporting Changes in Medicaid Enrollment among Immigrant Patients and Families

Share of health centers reporting they have noticed the following among immigrant patients and their family members over the past year:



Note: Totals may not sum due to rounding. Health centers reporting Not Applicable excluded.  
Source: 2019 Kaiser Family Foundation/George Washington University Survey of Community Health Centers



- Nearly half of health centers reported that immigrant patients declined to enroll themselves in Medicaid in the past year.
- Nearly one-third reported that immigrant patients disenrolled from or declined to renew Medicaid coverage.
- The patients who are disenrolling or declining to enroll in Medicaid are a broader group of immigrants than those targeted by the public charge rule.
- Fear of public charge extends beyond Medicaid to other health and social service programs, including some that are not included in the public charge rule.

## Impact on Community Health Centers Operations



“Because of what’s going on and the reluctance of people to sign up for Medicaid even when they are fully eligible... they are switching to self-pay. That means that percentage of self-pay is going up. That hits our bottom line. If the [percentage of] self-pay comes up to 50 percent, you know your health center is suffering financially... We’re not making enough to pay our own bills.” - Health Center CEO, MO