Public Charge Fact Sheet

March 5, 2018

Community Health Centers

California's Community Health Centers provide highquality comprehensive care to 6.5 million people – that's 1 in 6 Californians. For decades, community health centers have provided care to everyone, regardless of their ability to pay, their immigration status, or their individual circumstances.

Overview: Current Public Charge Law

"Public charge" is a term used in immigration law to describe an individual who is likely to become dependent on the government. When determining if a person is likely to become a public charge, the government must look at a variety of factors, including age, health, income, family size, public assistance received, and education level. At the moment, the only public assistance that can be considered when determining if a person will become a public charge is cash assistance and assisted long-term care, such as Temporary Assistance for Needy Families (TANF) and Supplemental Security Income (SSI).

Depending on a person's immigration status, the Department of Homeland Security or U.S. State Department Consular officers abroad can refuse to let someone enter the U.S., re-enter the U.S., or become a lawful permanent resident if they think this person will not be able to support themselves without receiving assistance from the government. Currently, the public charge determination is *NOT* taken into consideration for immigrants who are already in the United States and are applying to become U.S. citizens. Public charge is only considered for those entering or reentering into the U.S. or those already here looking to apply for lawful permanent residency (i.e. applying for a green card). In general, people who are undocumented cannot apply to become a legal permanent resident.

Public charge does not apply to: Refugees, asylees, survivors of domestic violence, and victims of trafficking or other serious crimes, special immigrant juveniles, temporary protected status (TPS) and certain other groups.

The Problem

The Trump Administration has shown interest in broadening the definition of public charge to include public benefit programs, such as Medicaid, Children's Health Insurance Program (CHIP), and Special Supplemental Nutrition Program for Women, Infants, and Children (WIC).

This change would be devastating to immigrants and immigrant communities, increasing fear and anxiety that could ultimately deter many from accessing public programs for which themselves and their children are legally eligible for, regardless of whether they are directly affected by the policy change or not.

Because of the rumors of public charge and the overall climate of fear, health centers are seeing patients cancel their medical appointments and question whether to enroll into public benefit programs (like Medicaid) for which they are legally eligible, putting their health and the health of their communities at risk.

Changes to the public charge rule to include health coverage programs could increase the number of individuals without insurance because immigrants who have any current or future plans to seek legal permanent residency will be discouraged from utilizing programs like Medicaid and CHIP.

Our Position

CaliforniaHealth+ Advocates believes everyone should have the right to access health care, regardless of their immigration status. California has worked hard to protect our immigrant communities, and changes to the public charge rule could undermine these protections.

For these reasons we **strongly oppose** any change to the public charge rule that would hinder our patients' ability to access health care services.

FOR MORE INFORMATION

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