The Inclusion of Legal Immigrants in Health Care Reform

Background. One of the flashpoints of the national health care debate is whether Congress should include legal immigrants—lawful permanent residents awaiting citizenship---in any health care plan. Proponents, including the U.S. Conference of Catholic Bishops (USCCB), argue that legal immigrants pay taxes and otherwise contribute to the economy, and therefore should be eligible for coverage. They also argue that the general public health would improve if legal immigrants had access to health care, particularly health in immigrant communities. Opponents say that legal immigrants are not U.S. citizens and that any plan should only include U.S. citizens, and also suggest that the cost of including legal immigrants would be prohibitive.

The issue revolves around whether legal immigrants must continue to wait 5 years before they become eligible for Medicaid, which is current law (the 5-year ban), and whether the 5-year ban should be extended to legal immigrants of higher incomes who otherwise would become eligible for subsidies to buy health insurance. Opponents of inclusion of legal immigrants would like to extend the 5-year ban on legal immigrants being eligible for subsidies to assist them in purchasing health-care coverage. Proponents support repealing the 5-year ban on access to health-care for all legal immigrants, regardless of income level. Earlier this year, legal immigrant pregnant women and children became eligible for the State Children’s Health Insurance Program, otherwise known as SCHIP.

USCCB Position. Since health-care should be a right, the USCCB strongly supports including legal immigrants in any national health care reform program and oppose the imposition of a 5-year ban on legal immigrants above the Medicaid eligibility threshold from receiving subsidies to purchase coverage. USCCB also supports the repeal of the 5-year ban on legal immigrants who qualify for Medicaid, and supports the inclusion of pregnant women and children in health-care reform, regardless of their legal status.

Message to Congress. Please contact your congressperson and Senator with the following message:

“Please support all legal immigrants, regardless of income level, to participate in any new health-care system and oppose any ban that would prevent them for participating for five years. Also please support the inclusion of pregnant women and children, regardless of their legal status.”

For more information, contact the MRS Policy office at 202-541-3260 or go to nilc.org.
TALKING POINTS—LEGAL IMMIGRANTS AND HEALTH CARE

• Legal immigrants work and pay taxes into the system just as U.S. citizens do, and thus should be able to access federal benefits that are a basic human right. In addition, the more persons who pay into the health care system, the more the risk—and the costs—are spread out across the population. Allowing legal immigrant to purchase affordable health care will result in billions of dollars in insurance premiums, helping to pay the cost of health reform in America.

• Legal immigrants are not a burden to the health-care system. According to the non-partisan Kaiser Foundation, non-citizens have less access to health-care and receive less primary health care than U.S. citizens, but they are less likely to use the emergency room. In 2006, 20% of U.S.-citizen adults and 22% of U.S.citizen children had visited the emergency room within the past year. In contrast, 13% if non-citizen adults and 12% of non-citizen children had used emergency room care. According to a July 2009 article in the American Journal of Public Health, immigrants are much less likely than U.S.-born adults to report being in fair or poor health.

• The average cost of covering legal immigrants is less than U.S. citizens. In fact, according to the Immigration Policy Center, the average immigrant uses less than half the dollar amount of health care services than the average native-born U.S. citizen. This is because immigrants are generally younger, and that U.S. citizens make up 78% of the non-elderly uninsured.

• Undocumented pregnant women and children should receive coverage to ensure that newborns are born healthy and children receive regular checkups and vaccinations. Undocumented immigrants have low medical expenses compared to citizens. Only 1.3% of all public medical expenditures in the year 2000 went toward care for undocumented immigrants. Undocumented immigrants also pay federal, state, and local taxes.

• When health care costs are distributed across a broader pool of people, the overall costs for everyone goes down. Inclusion of legal immigrants, who are generally younger and healthier than U.S. citizens, can have an overall positive effect on overall costs because it will encourage more preventive care and add additional payments to the system.

• Including legal immigrants in the health care system not only strengthens the system by adding their payments, but is a critical part of their integration into U.S. society. In addition to working, paying taxes, and learning English, immigrants want to pay their fair share for health care, just like all Americans.