November 16, 2018

Samantha Deshommes
Chief, Regulatory Coordination Division
U.S. Citizenship and Immigration Services
Department of Homeland Security
20 Massachusetts Avenue NW
Washington, DC 20529-2140

RE: Comments on Proposed Regulation – Inadmissibility on Public Charge Grounds
(DHS Docket No. USCIS-2010-0012)

Dear Sir or Madam:

I am writing on behalf of California Community Foundation (CCF) to express our strong opposition to the Department of Homeland Security’s Notice of Proposed Rulemaking (“proposed rule”) on “public charge,” published in the Federal Register on October 10, 2018.

CCF was founded in 1915 and is the third oldest community foundation in the United States. The foundation’s mission is to lead positive systemic change that strengthens Los Angeles (L.A.) communities. We envision a future where the productive capabilities of all Angelenos contribute to the productivity, health and well-being of our region. Our grantmaking priorities are focused on education, health, housing, and immigration for over 10 million people in our county. In 2016-17 CCF made 3,863 grants totaling over $81 million to nonprofits in L.A. County.

CCF is opposed to the proposed change to the public charge regulation because

1) The harms flowing from the proposed rule will ripple across L.A. County and the economy. They will undercut the health and well-being of millions of immigrant families and exacerbate hunger, child poverty, and homelessness among immigrants and U.S. citizen children living in mixed-status families. Immigrant families are interwoven into our social and economic fabric and these negative consequences will reverberate across the communities where they live and work.

L.A. County is home to 3.5 million immigrants which is more than a third of the county population. They are a defining part of our identity, our culture and our economy - contributing nearly $233 billion every year and paid $7.9 billion in state and local taxes in 2014. Immigrants are an integral part of Los Angeles communities and families that help fuel our local economy. Immigrants and their children represent 53 percent of the County’s population, and more than 80 percent have lived in the United States for a decade or more. Additionally, immigrants

represent 43 percent of the County's workforce and more than half are self-employed entrepreneurs. Nearly 800,000 L.A. County residents are eligible to become U.S. citizens. Everyone is enriched by their imagination, entrepreneurship and dedication. They are our neighbors, our coworkers, the proud parents sitting next to us at the PTA meeting. CCF has long been committed to empowering immigrants to integrate into the civic, social and economic life of Los Angeles.

2) The proposed rule shortsightedly views benefits and services as costs whose use should be discouraged, rather than investments whose use should be promoted. As a foundation, we understand that investing in nutrition, health care, and other essential needs keeps children learning, parents working, and families strong, and allows all of us to contribute fully to our communities. For all people working low-wage jobs, health and nutrition assistance helps them and their families stay healthy, thrive, and contribute to society. Multiple studies demonstrate that benefits targeted by the proposed regulation, such as Medicaid and Supplementary Nutrition Assistance Program (SNAP), increase children’s lifelong health and their self-sufficiency in adulthood.2

In L.A. County, over 2.6 million people or 10 percent of the U.S. overall, live in a family that receives means-tested benefits and includes at least one immigrant member, and thus could be affected by the proposed rule. These include benefits tracked in the Census Bureau’s 2014-2016 American Community Survey including Medicaid/Children’s Health Insurance Program (CHIP) and SNAP.

According to data reported in May 2017 to the L.A. County Board of Supervisors there were 561,000 households in the County that experienced food insecurity in 2015, which reflects no significant statistical change since 2011. The CalFresh Program (the state’s version of SNAP) is a first line of defense against food insecurity in L.A. County by providing supplemental benefits for eligible low-income households to purchase nutritious foods at authorized retailers including supermarkets, neighborhood grocery stores, and farmers markets. In May 2017 the County Board of Supervisors passed a resolution to increase investments and enrollment in CalFresh to be able to support hungry families including many who are immigrants or who live in families with immigrants.3

3) The proposed rule will roll back decades of investment by philanthropy to increase immigrant families' access to health and social services, reduce racial and ethnic disparities, improve community health and wellbeing, help families weather temporary financial pressures and illnesses, and facilitate long-term self-sufficiency and upward mobility. These deleterious effects will be felt by foundations that seek to

promote family economic security, businesses that employ immigrants, schools that educate children, and communities where these families live and contribute. Since its founding over 100 years ago CCF has committed to improving lives in L.A. County and the proposed rule represents a threat to all who reside in the County. Each year the foundation makes approximately 7,000 grants totaling over $179 million to eligible nonprofits. Over $81 million (45 percent) of these grants are made to L.A. County nonprofits including schools, clinics, hospitals, food banks, and human services organizations serving low-income and immigrant communities. Local businesses would see decreased revenue because immigrants would use more of their income to pay for basic needs. Hospitals and clinics would see more patients declining coverage enrollment for fear of jeopardizing possible affirmative changes to their immigration status.

4) The proposed rule will put tremendous strain on the organizations and institutions that work with and provide services to immigrants and their children, including hospitals, community centers, social service agencies, and food banks, among others. CCF will be compelled to divert resources to support them as they seek to meet the increased need. Yet our sector will never be in a position to “fill the gap,” since we lack both the scale of resources and the delivery mechanisms deployed by the government.

CCF supports a network of over 50 federally qualified health centers operating over 300 sites. These clinics provide key medical, substance use, and mental health services funded by the Health Resources and Services Administration. L.A. County community clinics serve over 1.6 million patients per year and the majority of patients are covered by Medicaid. Over 450,000 children in the county who are covered by Medicaid or the state version called Medi-Cal access services through these community clinics. Community health centers that see a decline in utilization of services by children with at least one immigrant parent, who also likely relies on the clinics for health services, will be negatively impacted.4

An estimated 158,000 California residents are eligible for Medicaid or subsidies through the health insurance exchange.5 If at least one out of every three L.A. County residents is an immigrant or in an immigrant household this means that over 52,000 people could benefit from health coverage but may be wary of applying for Medi-Cal or Covered California because of the proposed rule.

5) The proposed rule perpetuates the falsehood and the stereotype that immigrants are overly dependent on public benefits. In actuality, immigrants underutilize benefits and

services. One million Latino children, 95 percent of whom are U.S. citizens and a significant portion of whom are children of immigrants, are eligible for Medicaid or CHIP but are not enrolled. If there is a “problem” regarding immigrant families’ utilization of public benefits, it is underuse relative to need, with immigrants excluded from many public benefits supported by their tax payments, and far too many immigrants going without benefits for which they are eligible, due to misinformation and fear. The proposed regulation will make these problems worse.

In L.A. County, 63 percent of noncitizen and 66 percent of naturalized-citizen adults (ages 16 to 64) who received one or more benefits were employed, as compared to 51 percent of U.S.-born recipients. Immigrants contribute more to health coverage—sometimes three times what their U.S. born comparisons pay—than other groups in contradiction to the stereotype that they misuse these systems.

The proposed rule unfairly penalizes hard-working, tax-paying immigrants. Immigrants have high rates of employment but often work in jobs that pay them less and are therefore less likely to provide them with employer sponsored health insurance than their U.S.-born counterparts. Billions in taxes paid by immigrant families help support all government programs. Yet low-income children with foreign-born parents are less likely to receive SNAP or Medicaid than are children with U.S.-born parents.

Immigrant workers contribute 11 percent, or $1.6 trillion, to our nation’s gross domestic product each year. Immigrants in L.A. County contribute nearly $233 billion every year and paid $7.9 billion in state and local taxes in 2014. The passion and talents that immigrants contribute have helped build and define the United States since our very beginning.

CCF strongly opposes the proposed rule’s punitive and cruel provisions that penalize immigrant parents and children for enrolling in services for which they are eligible. Though use of public benefits by children will not factor into an immigrant parent’s public charge determination, the rule will still likely put a chill on children’s enrollment in vital services. In L.A. County alone, 2.6 million people live in households with at

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6 See Georgetown University Health Policy Institute Center for Children and Families and National Council of La Raza, "Latin Childre's Coverage Reaches Historic High, But Too Many Remain Uninsured.


8 In 2017, the labor force participation rate for foreign-born workers was 66 percent, as compared to 62 percent for native-born workers. See U.S. Department of Labor, Bureau of Labor Statistics, "Foreign-Born Workers: Labor Force Characteristics—2017."

9 See Kaiser Family Foundation, "Potential Effects of Public Charge Changes on Health Coverage for Citizen Children."

10 Ibid.

least one legally permanent resident. L.A. County is home to 3.5 million immigrants of which 800,000 may be eligible to naturalize. This regulation will force millions of parents to weigh the risk of future denial of lawful permanent residency status against the risk of denying their families access to safe housing, adequate food and health care. Enacting a regulation that undermines the health and well-being of families runs counter to philanthropic ideals and afoul of core American values. It will also do lasting damage to children that will hurt their future prospects for success.

8) The proposed regulation will have a major “chilling effect” on immigrant families who will face the untenable choice between using vital programs for which they remain eligible and keeping their families together. This will not only create fear among the families of immigrants without a green card, but those of green card holders and naturalized citizens as well. It’s not the first time we’ve seen this happen. Following the 1996 welfare reform law, use of public benefits by individuals who remained eligible under the new restrictions plummeted. One recent study estimates that 875,000 to 2 million citizen children with a non-citizen parent could drop off of Medicaid/CHIP coverage despite remaining eligible, increasing their uninsured rate from 8% to between 14% and 22%. Another estimates that 560,000 more USC children would fall into poverty if mixed status and non-citizen households do not take up SNAP and WIC.

Although the proposed changes target specific government programs, they will have much further reaching effects. Numerous reports indicate that growing fear and uncertainty among immigrant families are already leading to decreased participation in children’s health-insurance and nutrition programs. Recent data released by the Kaiser Family Foundation depict the fear and anxiety already caused by the earlier release of drafts regarding the proposed rule. Families experiencing this toxic stress will be wary of seeking care for their children or themselves.

Our partners with the State health insurance exchange estimate a greater than 10% decrease in participation because of anticipated fears regarding the use of health coverage, even among those who do not qualify for Medicaid but may have immigrant family members about whom they are concerned.

Under this new rule, many in L.A. County will experience hunger, illness, child poverty, and homelessness rise and poor educational outcomes as the stress placed

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12 Food stamp use fell by 53 percent among US-citizen children in families with a noncitizen parent and by 60 percent among refugees – even though the welfare reform law did not restrict the eligibility of either group for the program. See studies summarized in MPI, “Chilling Effects: The Expected Public Charge Rule and Its Impact on Legal Immigrant Families’ Public Benefit Use,” June 2018 at p 15
13 See Kaiser Family Foundation, “Potential Effects of Public Charge Changes on Health Coverage for Citizen Children.”
14 Columbia University, Center on Poverty and Social Policy.
by this rule on immigrants increases. This will negatively impact our children and their social mobility, as well as our local economy.

CCF also opposes the inclusion of the Children’s Health Insurance Program (CHIP) in the proposed rule change. Including CHIP would harm over 300,000 children in L.A. County.

The proposed rule would have significant and negative impact on the foundation’s ability to fulfill its mission. CCF has worked for years to develop effective systems to promote the economic mobility and civic inclusion of immigrants. Access to safety-net programs is an important part of this integration system. The clinics, hospital, nutrition assistance organizations, and county employees that administer these benefits are part of the economic engine of the region.

If the rule is finalized and implemented the nonprofit sector in the region would be severely stressed to be able to find additional or new sources of revenue to cover the increased need generated by children, individuals, and families who withdraw from and are afraid to utilize a broad array of public assistance.

The proposed rule is radical and harmful reshaping of our nation’s legal immigration system that will harm millions of children and families and make it more difficult for communities to successfully integrate into U.S. society.

For these reasons we urge the Department of Homeland Security to discontinue the proposed rule change.

Sincerely,

Antonia Hernandez
President and CEO