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Comment Submitted by Steve Coen on behalf of the Kansas Health Foundati

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This is a Comment on the **U.S. Citizenship and Immigration Services (USCIS) Proposed Rule: Inadmissibility on Public Charge Grounds**

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Comment

To Whom It May Concern:

I am writing on behalf of the Kansas Health Foundation 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.

The Kansas Health Foundation (KHF) is a health conversion foundation formed in 1985 from the proceeds of the sale of Wesley Medical Center to a for-profit entity. The mission of KHF is to improve the health of all Kansans, and we work statewide in our efforts to ensure all Kansans can make healthy choices where they live, work and play. Since our establishment, KHF has placed a tremendous focus on the health and well-being of children and low-income families. As a foundation, we strongly believe that investing in nutrition, health promotion and other essential services keeps children learning, parents working and families strong and allows all of us to contribute fully to our communities.

Kansas has a small, but growing immigrant population. As of 2016, 7.1% of Kansans were foreign-born, totaling 205,720 individuals. Of those foreign-born individuals, 14,638 were children under the age of 18. Under longstanding policy, the federal government can deny an individual entry into the U.S. or adjustment to legal permanent resident status (i.e., a green card) if he or she is determined likely to become a public charge. However, allowing officials to now consider the use of certain previously-excluded programs, including Medicaid, the Supplemental Nutrition Assistance Program (SNAP), the Medicare Part D Low-Income Subsidy Program, WIC nutrition assistance for mothers and babies, subsidized health insurance plans on the Healthcare.gov marketplace and the Earned Income Tax Credit (EITC) in public charge determinations is a major departure from existing policies. This change would greatly harm low-income, vulnerable and at-risk Kansans and would stand in the way of the progress KHF has made over the last 30 years in improving health outcomes and making Kansas the healthiest and most vibrant state in which to live and raise a family.

For low-income Kansans, health care and nutrition assistance help their families stay healthy, thrive and contribute to our state. Data tells us that the benefits targeted by the proposed regulation, such as Medicaid and SNAP, increase children's lifelong health and their self-sufficiency in adulthood. By allowing assistance meant to strengthen families to instead be used as evidence against them in immigration decisions, the proposed rule change would lead to broad decreases in participation in Medicaid, SNAP, WIC and Medicare Part D across the state. Decreased participation in these programs would contribute to more uninsured individuals, increased food insecurity, worse health outcomes -- negatively affecting the stability of families and growth and healthy development of children.

The proposed changes not only affect immigrants, but U.S.-born children and family members as well. In Kansas, 211,256 people (7.4% of the state's population) were native-born U.S. citizens who had at least one immigrant parent. Of those, 107,000 are children. Furthermore, 41,000 Kansas children who are enrolled in KanCare have at least one immigrant parent. The proposed regulation will force Kansas parents to weigh the risk of future denial of lawful permanent residency status against the risk of denying their families access to health care and food. Simply put, the proposed public charge rule change would hurt Kansans. It would make it harder for Kansas families and children to go to the doctor, access prescription medication and put food on the table.

The proposed rule will roll back decades of KHF's investments to increase Kansans access to health care, reduce health disparities, reduce food insecurity and improve health outcomes. Moreover, the effects of this rule will be felt by and unduly burden organizations and institutions that work with and provide services to low-income families and children, including hospitals, community health clinics,

schools, social service agencies and food banks.

As the proposed changes on the public charge rule are being considered, we ask you to consider the impacts to access to health care, food insecurity and health outcomes across Kansas and the entire country. We appreciate the ability to submit comments on the proposed rule change and the administrations willingness to listen to our concerns.

If you have any questions or need additional information, please contact us. We stand ready to be a resource to you.

Sincerely,

Steve Coen
President and CEO
Kansas Health Foundation