



December 10, 2018

L. Francis Cissna, Director
U.S. Citizenship and Immigration Services
Department of Homeland Security
20 Massachusetts Avenue, NW
Washington, D.C. 20529

Re: DHS Docket No. USCIS-2010-0012-0001, Comments in Response to Proposed Rulemaking:
Inadmissibility on Public Charge Grounds

Director Cissna:

On behalf of Vitalyst Health Foundation, thank you for the opportunity to provide comments regarding the proposed rulemaking on Inadmissibility on Public Charge Grounds.¹ After careful consideration, I am writing to express Vitalyst's strong opposition to the proposed changes. Should the rulemaking be implemented, we are highly concerned it will threaten many of the fundamental elements that afford Arizonans the ability to live healthy and productive lives.

As an independent, non-partisan public foundation, our mission is to connect, support and inform efforts to improve the health of individuals and communities in Arizona. Over our 22-year history, Vitalyst has invested more than \$100 million in Arizona and has dedicated itself to supporting key health initiatives ranging from statewide health care policy to the development of community food hubs, community paramedicine programs, and numerous disease-related coalitions. Our success is based around five overarching goals: (1) increasing access to affordable, quality care and insurance coverage; (2) working with municipal leaders to promote healthy community design; (3) building capacity within community-based organizations; (4) promoting health innovations and collaborations, and 5) increasing civic participation for inclusive decision making.

Arizona is home to nearly one million foreign born individuals, the majority of whom have immigrated from our southern neighbor, Mexico. Such diversity is woven into our population, as one of every four children in the state have at least one foreign-born parent.² Our immigrant communities are major contributors to the state's culture and workforce, comprising nearly one-half all workers in the agriculture industry and over one-quarter of all workers in the construction industry.³ Under the proposed rule, lawfully-present immigrants, as well as citizens with noncitizen family members, would be pressured to forego critical public resources they are currently eligible to receive. This phenomenon

¹ 83 Fed. Reg. 51114-51296 (October 10, 2018). Available at: <https://www.federalregister.gov/documents/2018/10/10/2018-21106/inadmissibility-on-public-charge-grounds>, accessed December 7, 2018.

² Migration Policy Institute (2016). State Immigration Data Profiles – Arizona. Available at: <https://www.migrationpolicy.org/data/state-profiles/state/demographics/AZ>

³ American Immigration Council (2015). Fact Sheet – Immigrants in Arizona. Available at: <https://www.americanimmigrationcouncil.org/research/immigrants-in-arizona>

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is commonly referred to as ‘the chilling effect,’ and it would resonate across Arizona’s most vulnerable communities.

We strongly urge the Department of Homeland Security (DHS) to reject the inclusion of Medicaid and the Children’s Health Insurance Program (CHIP) within a public charge determination.

Adding Medicaid and CHIP to a public charge determination would have a damaging effect on Arizona. Medicaid currently serves as a lifeline for nearly 1.9 million Arizonans, which is over a quarter of the state’s population. In addition to quality health coverage, it provides financial stability to families who are disproportionately susceptible to medically-induced financial ruin. It allows families of limited means to dedicate scarce resources towards other basic needs, such as food and housing. Medicaid is also a financial engine for our state government and health care industry, annually contributing nearly \$2.2 billion toward hospital payments. Should the proposed rule pass, it is estimated that Arizona hospitals would lose over \$380 million per year due to individuals avoiding health care services.⁴

Arizona’s CHIP (KidsCare) was reactivated in 2016 and currently covers over 32,000 children.⁵ The program is a successful resource that provides quality, affordable coverage for Arizona’s youth, setting them on a path to become healthy adults. The chilling effect associated with adding CHIP to the public charge criteria would push Arizona’s children away from preventive health services and threaten public health. This could have health and economic consequences for decades.

We strongly urge DHS to reject the inclusion of additional public benefits, including housing and nutrition assistance, within a public charge determination.

A growing body of evidence is revealing that human health and well-being is determined by factors that stretch far beyond traditional medical care.⁶ The quality of one’s housing, their ability to access and afford nutritious foods, and one’s education – often viewed as separate from health – are in fact key determinants of health. These factors must be supported, particularly for underserved populations, if our nation and state are to thrive.

In Arizona, housing affordability is declining at a rate similar to that of the rest of the nation.⁷ In Phoenix and Tucson, the current percent of homes considered affordable for median income families has dropped from 85% in 2011 to less than 67% – levels comparable to those seen during the great recession in 2008.⁸ Although our state’s economy is growing, the lack of affordable housing increasingly destabilizes low-income communities’ living conditions. Local stakeholders are collaborating to advance

⁴ Mann, C., Grady, A., Orris, A. (2018). *Medicaid Payments at Risk for Hospitals Under the Public Charge Proposed Rule*. Manatt. Available at: <https://www.manatt.com/Manatt/media/Media/PDF/White%20Papers/Medicaid-Payments-at-Risk-for-Hospitals.pdf>

⁵ Arizona Health Care Cost Containment System (2018). Population Highlights. Available at: <https://www.azahcccs.gov/Resources/Downloads/PopulationStatistics/2018/Dec/AHCCSPopulationHighlights.pdf>

⁶ World Health Organization (2018). Social Determinants of Health. Available at: https://www.who.int/social_determinants/en/

⁷ University of Arizona (2017). Making Action Possible for Southern Arizona. Available at: <https://mapazdashboard.arizona.edu/economy/housing-affordability>

⁸ National Association of Home Builders (2018). Housing Opportunity Index. Available at: <https://www.nahb.org/en/research/housing-economics/housing-indexes/housing-opportunity-index.aspx>

affordable housing in new and innovative ways; however, adding housing assistance to the public charge determination would surely set us back.

The Supplemental Nutrition Assistance Program (SNAP) is also a critical resource for our state, serving over 800,000 Arizonans at risk of food insecurity.⁹ The program provides support to lift families out of poverty, reduces hunger, and helps prepare children for success in school. Including SNAP in a public charge determination would only force immigrant families to choose between getting a meal and avoiding demerits on their immigration status.

As a matter of principle, Vitalyst firmly supports the concept of health equity – the recognition that everyone should have “a fair and just opportunity to be healthier.”¹⁰ The provisions outlined in this proposal run counter to this principle and would have a disproportionate impact on Latino/a communities in Arizona, further exacerbating disparities that already exist. Rather than providing opportunities for underserved populations, it demonstrates an overt bias against low-income individuals experiencing poor health in their earliest and twilight years of life. This is not a reflection of Arizona’s values, nor does it reflect the words inscribed on our nation’s beacon of liberty that have welcomed families into this country for over 130 years.

The proposed rule claims that self-sufficiency is its primary purpose, yet its provisions would only place self-sufficiency further from reach. It threatens access to housing, food and health care – all of which are key drivers to our health, education and economy.

While we appreciate the opportunity to provide comment on this proposal, we are strongly opposed on the basis that it jeopardizes the building blocks of a healthier and more prosperous Arizona. We intend to continue our efforts to improve the health of individuals and communities in Arizona; however, these changes to public charge determinations would clearly hurt our endeavors.

Sincerely,



Suzanne Pfister
President & CEO
Vitalyst Health Foundation

⁹Supplemental Nutrition Assistance Program: Number of Persons Participating (2018) Available at: <https://fns-prod.azureedge.net/sites/default/files/pd/29SNAPcurrPP.pdf>

¹⁰ Robert Wood Johnson Foundation (2017). What is Health Equity? Available at: <https://www.rwjf.org/en/library/research/2017/05/what-is-health-equity-.html>