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Submitted electronically via www.regulations.gov.

The Honorable Alejandro N. Mayorkas
Secretary of Homeland Security
Washington, DC 20528

RE: DHS Docket No. USCIS-2021-0013, Public Charge Ground of Inadmissibility

Dear Secretary Mayorkas:

The Conference of Boston Teaching Hospitals, on behalf of our 12 member hospitals, appreciates the opportunity to comment on the Department of Homeland Security's (DHS) advance notice of proposed rulemaking (ANPRM) on the public charge ground of inadmissibility. Our hospital members provided the highest quality health care to some of the most underserved patients in the Commonwealth of Massachusetts and across the nation, including immigrants of all statuses. As health care providers, we have a deep interest in ensuring no child or adult foregoes needed health care services for any reason, especially fear of deportation. Our nation's immigration laws and policies should not discourage immigrants and their families from seeking needed and essential health care, nutrition, housing, or other supports for which they are eligible.

According to a 2020 study by the Urban Institute, more than one in seven adults in immigrant families reported avoiding non-cash government benefits due to fear of jeopardizing their future green card status. Among those adults, nearly half avoided Medicaid, CHIP, or SNAP benefits.¹ And despite federal and state marketplace coverage being excluded from the Trump administration's admissibility determination, the chilling effect of the rule spilled over into these areas, discouraging enrollment.² When individuals forego health insurance coverage, they typically forego health services for themselves and their children. This leads to people getting sicker unnecessarily, and seeking out care only when things have become dire. This is unsustainable for any health care system and leads to considerably worse patient outcomes and challenges for hospital emergency departments.

To that end, we are particularly concerned about any changes to the public charge definition or admissibility determination criteria that would discourage immigrants, regardless of their status, from enrolling in public benefit programs. While we are certainly concerned about potential impacts on health insurance enrollment and access to services, we also know that food and housing stability

¹ https://www.urban.org/sites/default/files/publication/102221/amid-confusion-over-the-public-charge-rule-immigrant-families-continued-avoiding-public-benefits-in-2019_3.pdf

² <https://www.commonwealthfund.org/publications/issue-briefs/2021/feb/federal-policy-priorities-preserving-coverage-state-based-marketplaces>

are critical contributors to overall health status. Therefore, we strongly encourage DHS to state explicitly in any new definition of public charge that public health insurance programs, federal nutrition assistance, and federal housing supports are categorically excluded from any future admissibility determination. Due to the confusion that the 2019 final rule created in the immigrant community, only a clear exclusion of these programs will suffice to rebuild confidence in the ability of immigrants to safely access these programs. Receiving health care, nutrition, or housing assistance is not an indication of primary or permanent reliance on the federal government.

As health care providers, we do not turn away patients based on immigration status, health status, ability to pay, or any other factor. When patients come to us, we provide the best possible care. Similarly, the United States should treat immigrants who come to our country in the most humane way possible, ensuring they feel confident accessing the public benefits they may need to help build a healthy and stable life for themselves and their children without fear of retribution.

We appreciate the Department's efforts to bring clarity to this issue and create more certainty for immigrants and their families as it relates to public charge inadmissibility determinations. A clear definition of a public charge, as well as clear directives to reviewing agents, is necessary to overcome the harm caused by the previous administration's inappropriate interpretation of the statutory definition of a public charge.

Thank you for your consideration of our comments. Please do not hesitate to be in touch with any questions or if we can provide additional information on these or other matters.

Sincerely,

A handwritten signature in blue ink that reads "Patricia McMullin". The signature is written in a cursive, flowing style.

Patricia McMullin
Executive Director
Conference of Boston Teaching Hospitals