December 10, 2018
Kirstjen M. Nielsen, Secretary
Department of Homeland Security
20 Massachusetts Ave., NW
Washington, DC 20529–2140

Dear Secretary Nielsen:

On behalf of the Oregon Academy of Family Physicians (OAFP), which represents over 1,600 family physicians and medical students, and the Oregon Chapter of the American College of Physicians (Oregon ACP), which represents over 1700 internal medicine physicians and medical students, and the Oregon Pediatric Society, which represents over 550 members in Oregon, we write in response to the proposed rule titled, “Inadmissibility on Public Charge Grounds” as published by the U.S. Citizenship and Immigration Services within the U.S. Department of Homeland Security in the October 10, 2018 Federal Register.

This proposal dramatically changes long-standing rules governing how and whether immigrants can be determined to be a “public charge;” widens the scope of programs considered by the government in making such a determination, and dramatically expands the government’s ability to refuse admission or deny individuals green cards or U.S. visas on this basis. We believe this is fundamentally dangerous to the health of Oregonians.

One in ten Oregon residents is an immigrant, while about one in eight U.S. born children has at least one immigrant parent, according to the American Immigration Council. Our organizations join many of our community partners in Oregon in opposing this proposal. If adopted, the proposal would make it much more likely that lawfully present immigrants could be denied green cards or U.S. visas, or even be deported, merely on the basis of seeking medically necessary health services for them and their family, including those for which they are eligible. Rather than face that threat, many patients will avoid needed care from their physicians, jeopardizing their own health and that of their communities. Additionally, widespread confusion about which benefits are and are not included in a public charge determination will also lead to families avoiding programs that are not clearly part of this proposed rule. This ambiguity will harm the health of millions of families.

The proposed regulation not only threatens our patients’ health, but also significantly increases uncompensated costs to the health care system and U.S. taxpayers as deferred care leads to more complex medical and public health challenges. Most important, the order puts a governmental barrier between health care providers and patients and does not ensure meaningful access to health care for patients in need.
The loss of these benefits will inevitably extend beyond non-citizen immigrants to communities and families, including the citizen children of immigrants. According to an analysis by Manatt Health, up to 41.1 million noncitizens and their family members could be affected by this rule. Of particular concern is the estimated 10.7 million citizen children who, because of their noncitizen family members, could be at risk of losing critical health care services.

Studies show that the health of children is linked to the health of their parents. Parents who are enrolled in health insurance are more likely to enroll their children. Disenrollment from health insurance by parents will result in a loss of coverage and access to preventative health care for their children.

In this regulation, the Department of Homeland Security asks if the Children’s Health Insurance Program (CHIP) should be included in the final rule. Our organizations would strongly oppose this inclusion. CHIP is a critical provider of health care for 120,000 children in Oregon, and many millions more nationwide. The Oregon Health Plan, our Medicaid program, covers half of all births in the state. It is essential that we remove any barrier for eligible women to access OHP services in order to safeguard their health and the health of their children. The OAFP, Oregon ACP, and OPS promote and support a safe and nurturing environment for all families that includes access to comprehensive medical, dental and mental health care, psychological and legal security.

**We strongly urge the Administration to abandon this effort and to work to ensure broader access, improved quality, and more affordable care for our patients.**

We appreciate the opportunity to make these comments.

Sincerely,

Robyn Liu, MD, MPH, FAAFP  
President, OAFP

Marianne Parshley, MD, FACP  
Governor, Oregon ACP

Carla McKelvey, MD, MPH, FAAP  
President, OPS

*The Oregon Academy of Family Physicians is a membership organization for more than 1600 physicians, residents, and medical students across the state who provide primary care for Oregonians of all ages.*

*The Oregon Chapter of American College of Physicians' more than 1700 members are internal medicine physicians, residents, and medical students who provide primary care, as well as hospital based and subspecialty care for adults across Oregon.*

*The Oregon Pediatric Society (OPS), the state chapter of the American Academy of Pediatrics, is dedicated to improving the health of all children in Oregon, regardless of income, race and ethnicity, gender, and immigration status.*