The Health Equity and Access under the Law (HEAL) for Immigrant Women and Families Act of 2019

What is the Problem?
As the Trump Administration continues to limit access to affordable, comprehensive health insurance and attacks immigrants’ rights, the health, safety, and wellbeing of immigrants and their families are in jeopardy. The five-year bar on Medicaid and CHIP enrollment in addition to other restrictions mean that immigrants must navigate a complicated patchwork of care that often forces them to pay out-of-pocket for basic health services. Furthermore, the administration’s targeted threats on immigrants’ access to health care, such as the “public charge” rule, have instilled fear in immigrant communities when seeking care.

These onerous barriers disproportionately harm immigrant women, who are the majority of immigrants and particularly likely to be low-income, young, and uninsured. According to the Guttmacher Institute, one-third of noncitizen immigrant women ages 15-44 are uninsured. For women in that group who are also low income, that proportion grows to almost half. Obtaining healthcare is not a reality for these women if it is not affordable.

Now more than ever, the basic human needs and rights of the nation’s immigrants must be elevated in policymaking.

What does the HEAL for Immigrant Women & Families Act of 2019 do?
The Health Equity & Access under the Law (HEAL) for Immigrant Women & Families Act of 2019 removes political interference and restores coverage so immigrants in the United States can participate in the health care programs their billions of tax dollars support. By ensuring that all immigrants can access affordable coverage for which they are otherwise eligible, this bill will allow immigrant women and their families to receive the health care they need, and create healthier communities and a stronger economy. Specifically, the bill:

- **Restores enrollment to full-benefit Medicaid and the Children’s Health Insurance Program (CHIP) to all federally authorized immigrants who are otherwise eligible.** The bill removes the discriminatory legal barriers to health coverage for immigrants imposed by the Personal Responsibility and Work Opportunity and Reconciliation Act (PRWORA). Specifically, the bill eliminates that 1996 law’s restrictive five-year waiting period and outdated list of “qualified” immigrants for Medicaid and CHIP eligibility. Through these changes, the bill ensures all individuals granted federally authorized presence, including Deferred Action for Childhood Arrivals (DACA) recipients, are eligible for federally funded health care programs.

- **Removes the unjustifiable exclusion of undocumented immigrants from accessing health insurance coverage on the Affordable Care Act’s Health Insurance Exchanges.** The bill would allow all individuals’ immediate eligibility to purchase qualified health insurance coverage, obtain premium tax credits and cost-sharing reductions, and enroll in the Basic Health Program, in accordance with existing income eligibility requirements. This access would be available for everyone, regardless of their documentation or status.

- **Ensures access to public and affordable health coverage for Deferred Action for Childhood Arrivals (DACA) recipients,** and ensures that those who will gain new forms of administrative relief via a deferred action program will not be similarly excluded from the health care programs their tax dollars support.

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1 Guttmacher Institute, *Immigrant women need health coverage, not legal barriers*, December 4, 2018, [https://www.guttmacher.org/infographic/2018/immigrant-women-need-health-coverage-not-legal-barriers-0](https://www.guttmacher.org/infographic/2018/immigrant-women-need-health-coverage-not-legal-barriers-0). Low-income women are those in families with incomes under the federal poverty level ($20,420 for a family of three in 2017). Data include some information on undocumented immigrants, although that information is generally acknowledged to be a considerable undercount of that population group.
• **Reinstates Medicaid eligibility for COFA migrants**, or citizens of the Republic of the Marshall Islands, Federated States of Micronesia, and the Republic of Palau, who were inadvertently barred from the Medicaid program by the 1996 welfare law. Compact of Free Association (COFA), an international agreement between the US and these three Pacific Islands, originally allowed their citizens to receive federally funded health care coverage.

**Why should you support the HEAL for Immigrant Women & Families Act of 2019?**

• **Health should not depend on immigration status.** Every individual deserves to be healthy and to obtain **affordable** health care with dignity, regardless of how long they have been in the US or the status they have been granted.

• **This is important for women and families.** When women are healthy, their entire family benefits. Immigrant women are often the decision-makers regarding health care for their families and the backbones of their communities.

• Under current law, immigrants must navigate a complicated patchwork of care that often forces them to pay out-of-pocket for basic health care, particularly if a community health center or employer-sponsored health insurance is not available to them. **Obtaining healthcare is not a reality for immigrant women if it is not affordable.**

• From threats to health care and nutrition to affordable housing, to separating families at the border and mass deportation, the **Trump administration has been relentless in attempting to strip away agency and dignity from immigrant families.** In light of these threats and constant attacks, we need **bold and impactful legislation** that expands access to the basic care that immigrant women and their families need and deserve.

**How can you support the HEAL for Immigrant Women & Families Act of 2019?**

• **To cosponsor**, contact Stephanie Kang with Rep. Pramila Jayapal: stephanie.kang@mail.house.gov or Linda Antinone with Rep. Deb Haaland at linda.antinone@mail.house.gov