

APPENDIX 4: IMMIGRANT SERVICES AND CATEGORIES

Immigrant Services

Description	Funding	Eligibility	Benefits	Limitations/Gaps	Enrollment Numbers	Administration
<p>The U.S. noncitizen population falls into several basic groupings for the determination of public assistance entitlements.</p> <p>See table on page 26 of report for categories of citizenship.</p>	<p>The federal government shares the cost of emergency care for undocumented immigrants with states through Medicaid. Health and other benefits for undocumented immigrants vary state by state.</p>	<p>Alien entitlement depends on two sets of criteria: immigration status and the specific program. People in the PRUCOL category generally have been held to be eligible for the majority of federal public benefit programs. A child may be eligible for coverage if he or she is a U.S. citizen or a lawfully admitted immigrant, even if the parent is not. Eligibility for children is based on the child's status, not the parent's. Many immigrant families have a mixed status and include both citizen and noncitizen members. Many parents in immigrant families are noncitizen but more than 70% of noncitizens' children are citizens.</p> <p>Most documented immigrants cannot receive federal Medicaid or SSI during their first five years or longer in the U.S., regardless of how much they have worked or paid in taxes. There are exceptions for some immigrants, such as refugees and asylees, who can continue to get insurance during their first seven years in the United States. (U.S.-born children of immigrants, who constitute the great majority of children in immigrant-headed families, are citizens and remain eligible for Medicaid and CHIP.)</p>	<p>Those who are otherwise barred from Medicaid due to their immigration status are eligible for Medicaid coverage for emergency medical care, which includes childbirth but not prenatal care. The federal government defines an emergency as "an acute condition that, without immediate care, would seriously jeopardize a patient's health or impair bodily functions, parts or organs."</p> <p>To allow legal immigrant children to receive doctor's visits, medicines and care, CHIP Reauthorization Act of 2009 gives states the option to enroll legal immigrant children and legal immigrant pregnant women who have been in the U.S. fewer than five years.</p>	<p>Health insurance coverage can help immigrant children and pregnant immigrant women access cost-effective preventive and parental care and avoid expensive emergency room care.</p> <p>Research has shown that immigrant children are less likely to have a medical home, see a physician, receive dental care, or be fully immunized than children from citizen families; and tend to rely on safety net health care providers and clinics.</p> <p>The lack of health insurance coverage is not the only barrier to health care for immigrant children. Language barriers create difficulties for immigrants trying to enroll in insurance coverage and, even if immigrants are insured, can create further problems when they try to locate health care providers or communicate with them.</p> <p>Many states have developed effective strategies to help those with limited English proficiency enroll in Medicaid and CHIP because confusing eligibility rules deter immigrant children from participating even if they are eligible.</p>	<p>In 2005, among children living in immigrant families, about 4.7 million have undocumented immigrant parents, although there was an estimated 1.6 million undocumented children.</p> <p>The percentage of low-income immigrant children who lack health coverage has climbed since 1996, when federal legislation restricted the eligibility of legal immigrants for Medicaid and CHIP during their first five years in the U.S. The disparities in health insurance coverage between citizen and immigrant children have grown significantly larger. Today, almost half of low-income immigrant children are uninsured. In California, undocumented immigrants account for 1,350 of 61,000 people receiving state-funded dialysis, and the group's portion cost the state \$51 million. Opponents of the policies are against using taxpayer funds to pay for services to undocumented immigrants and some states are concerned that covering the life saving procedures would draw more undocumented immigrants to their jurisdictions. The average immigrant utilizes less than half the dollar amount of health care services as the average native-born citizen; U.S. born persons receive about \$2,546 per capita in health care, compared to only \$1,139 for immigrants.</p>	<p>Federal and state Medicare and Medicaid programs.</p>