COMMITTEE ON FINANCE
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The Children's Health Insurance Program Reauthorization Act of 2009: FAIRLY PROVIDING HEALTH CARE FOR KIDS IN NEED

Before 1996, legal immigrants were eligible for Medicaid on the same basis as U.S. citizens. But the 1996 welfare reform law prohibited Federal funding for Medicaid coverage, nutrition assistance (food stamps), and Supplemental Security Income payments to most legal immigrants who had lived in the U.S. for less than five years. The Children's Health Insurance Program was created in 1997 with the same restrictions.

Congress has already lifted the 1996 restrictions on low-income legal immigrants receiving nutrition assistance Supplemental Security Income. To allow legal immigrant children to receive the doctor's visits, medicines, and care they need to stay healthy, the Children's Health Insurance Program 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. Strong arguments support this policy:

- **State leaders and bipartisan leaders at the Federal level have long supported this change:** The National Governors Association and the National Council of State Legislatures have called for lifting the legal immigrant restrictions.[1] In 2003, the U.S. Senate passed legislation that would remove the current ban on legal immigrant coverage in its version of the Medicare drug law.[2] The bipartisan U.S. Commission on Immigration Reform called for lifting restrictions on legal immigrants' eligibility for public benefits shortly after the 1996 restrictions were put into place.[3]

- **States are already providing the coverage:** As of 2009, 23 states – almost half – are using their own state funds to provide Medicaid and/or CHIP coverage for legal immigrant children or pregnant women who are ineligible solely because of the Federal restrictions.[4] Keeping children healthier in these states is likely to reduce the shifting of costs for emergency-room visits and uncompensated care onto those with insurance. Making federal funds available for this coverage would fulfill the promise of Federal partnership with states to get health care to low-income residents.

- **Legal immigrants shoulder many of the same responsibilities as other Americans:** Legal immigrants work and pay taxes just like American citizens. Nearly all legal immigrant children will eventually become U.S. citizens. Immigrant children will account for a significant share of our future workforce and tax base.[5] Young legal immigrant men turning 18 must register for the U.S. draft, and many serve in our Armed Forces. Legal immigrant children are future U.S. citizens, workers, taxpayers, and members of the Armed Forces, and should have access to health care.

- **Access to Federal programs should be consistent:** Legal immigrants have access to other important programs that give kids the right start in life, like public schools and nutrition assistance. While the 1996 Personal Responsibility and Work Opportunity Reconciliation Act instituted the five-year ban on legal immigrants' access to nutrition assistance, Medicaid and CHIP, and Supplemental Security Income (SSI), that ban has since been lifted for nutrition assistance and SSI.

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[1] National Governors Association Policy Position, *HHS-09 The State Children's Health Insurance Program (S-CHIP)*, July 24, 2007; and National Conference of State Legislatures official policies approved at the 2008 NCSL Legislative Summit (http://www.ncsl.org/statefed/FallForumpolicies08.htm).
[2] Prescription Drug and Medicare Improvement Act of 2003 (Introduced in Senate)[S.1]
[3] *Becoming an American: Immigration and Immigrant Policy*, U.S. Commission On Immigration Reform 1997 Report to Congress
[4] *States providing medical coverage to legal immigrant children and/or pregnant women,* National Immigration Law Center, January 2009
[5] Leighton Ku, PhD, MPH, *Restoring Medicaid and SCHIP Coverage to Legal Immigrant Children and Pregnant Women: Implications for Community Health and Health Care for Tomorrow's Citizens,* The George Washington University School of Public Health and Health Services Department of Health Policy, January 13, 2009.