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**JOINT NEW YORK STATE SENATE AND ASSEMBLY HEARING ON
THE NEW YORK HEALTH ACT (A.5248/S.3577)**

**Testimony of the New York Immigration Coalition
Presented by Max W. Hadler, Director of Health Policy**

May 28, 2019

My name is Max Hadler and I am the Director of Health Policy at the New York Immigration Coalition (NYIC). The NYIC is an advocacy and policy umbrella organization for more than 200 multi-ethnic, multi-racial, and multi-sector groups across the state working with immigrants and refugees. The NYIC Health Policy program and its Health Collaborative bring together immigrant-serving organizations and other stakeholders from the frontlines of the battle to improve health access across New York State.

The NYIC is grateful to Senator Rivera and Assemblymember Gottfried for convening this important hearing. At the NYIC we have long been vocal advocates of the New York Health Act because of the important implications it would have for immigrant communities across the state. The New York Health plan would be available to everyone who resides in the state, regardless of immigration status. From a coverage perspective, this would be a vast improvement over the current system of piecemeal programming and widespread restrictions that leave more than 400,000 New Yorkers uninsured because of their immigration status. New York Health would improve the health of all New Yorkers by allowing us to access care when needed instead of rationing based on ability to pay. This is particularly relevant for immigrant families who continue to suffer the discrimination of a state health system that denies full access to coverage because of where they were born or when they arrived in the U.S.

As we face down a hostile federal government determined to strip New Yorkers of the many health care protections we currently enjoy and sow chaos in our health care systems, the value and security of the New York Health Act and related efforts are clearer than ever. Along with Make the Road New York, the NYIC leads a sister campaign of the Campaign for New York Health called Coverage 4 All. Through that campaign we are working to protect the coverage of New Yorkers who may soon lose Deferred Action for Childhood Arrivals or Temporary Protected Status, as well as the health insurance protections that come with those designations (A.3316/S.1809). We are also actively pursuing the creation of a state-funded Essential Plan that would make eligible for coverage many of the more than 400,000 New Yorkers who cannot currently access health

insurance because of their immigration status (A.5974/S.3900). The New York Health Act would resolve all of these gaps by creating a single universal system of coverage that would not be vulnerable to the anti-immigrant machinations of the Trump administration or any future federal government that seeks to undermine immigrant communities by further restricting an already discriminatory system.

As we work toward passage of the New York Health Act, we must acknowledge that excluded immigrant families need coverage now and cannot wait the several years it may take to fully implement the New York Health plan. If we can achieve universal eligibility through Coverage 4 All on the path to New York Health, that path will be smoother, and immigrant New Yorkers' access to care greater, as a result. We thank Senator Rivera and Assemblymember Gottfried for their support and leadership in working to make both of these reforms a reality.

~~The current federal administration is not the reason to pass the New York Health Act, but it certainly accelerates the urgency. The Trump administration is systematically attacking immigrants' access to public benefits through backdoor rulemaking processes and executive orders to ruthlessly enforce several ill-conceived parts of our federal public benefits and immigration statutes. The most widely-reported of these is the Department of Homeland Security's proposed rule on "public charge," which would threaten immigrants' ability to enter the U.S. or obtain a green card because of their lawful enrollment in benefits like Medicaid and SNAP, or even simply for being poor. This proposed rule has not yet gone into effect and already one in seven immigrants is forgoing benefits out of fear of the rule's impact, according to a recent Urban Institute study.¹~~

Compounding the DHS rule, *Reuters* reported earlier this month that the Department of Justice is considering proposing a rule related to deportability on public charge grounds.² If finalized and effectuated, this rule would extend the reach of public charge not only to preventing entry or permanent residency to low-income immigrants, but to stripping people who already have green cards of their residency rights and enforcing their deportation from the U.S. because they have been enrolled in Medicaid to treat a chronic disease or enrolled in SNAP to prevent hunger.

And just last week, the president signed a memorandum that would force the sponsors of immigrant family members to pay the government for public benefits that those family members may have used.³ This "sponsor liability" is not currently enforced because of the chilling effect it would have as people forego life-sustaining treatment to avoid putting their family members in debt to a blood-thirsty federal government. Clearly, the Trump administration is unconcerned by this.

¹ <https://www.urban.org/urban-wire/public-charge-rule-looming-one-seven-adults-immigrant-families-reported-avoiding-public-benefit-programs-2018>

² <https://www.reuters.com/article/us-usa-immigration-benefits-exclusive/exclusive-trump-administration-proposal-would-make-it-easier-to-deport-immigrants-who-use-public-benefits-idUSKCN1S91UR>

³ <https://www.whitehouse.gov/presidential-actions/memorandum-enforcing-legal-responsibilities-sponsors-aliens/>

Last week's memo aims to further cut off access by forcing immigrants who are applying for public benefits to declare their sponsors' incomes when applying for means-tested programs, a process called "sponsor deeming" that would lead to many immigrants with low or no incomes to be ineligible for Medicaid or SNAP or cash assistance because of someone else's income.

All of these proposals, threats, and viciously racist, classist, and anti-immigrant attacks point to the need for a universal system in which everyone is included and nobody is left out for any reason, financial or otherwise. We need a system in which nobody could be deemed a public charge or separated from their family because of the type of health insurance coverage they have. In New York we are fortunate to have a solution. It is called the New York Health Act, and we need to make it law.

While much work remains to make the long-standing dream of the New York Health Act a reality, it is also critical that we begin to think about effective implementation of the program. ~~From the perspective of immigrant communities in New York, this must include strong mechanisms to~~ enforce existing language access laws through the New York Health plan. The pervasive segregation in the current health care system by payer and by patient race, ethnicity and preferred language will not be solved overnight without a concerted effort that makes voluntary hospitals and other private providers rise to the level of culturally responsive and linguistically appropriate care currently in place in best-practice organizations like many federally qualified health centers.

Appropriate implementation of an eventual New York Health plan must also include a well-conceived, well-funded, and well-executed outreach and education program to encourage use of the health care system by immigrant communities that are discouraged from seeking services by virulent anti-immigrant sentiment and the fear and apprehension it causes. As we face walls on our borders, the threatened suspension of asylum, the removal of status from people who have lived in this country for 20 years, major increases in enforcement, and policies like public charge that discourage immigrants from using vital programs and services, we must create a vision for a future of health care access and a welcoming message that ensures that a universal care and coverage system actually lead to equal access and opportunity for all New Yorkers.

With these thoughts in mind, the NYIC fully endorses the New York Health Act because it contributes to our vision of a New York state that is stronger when all people are welcome, treated fairly, and given the chance to pursue their dreams. We need a health care system that guarantees access to care as a public good, that is affordable, and that works for everyone. The New York Health Act moves us closer to that reality.

Thank you, Senator Rivera and Assemblymember Gottfried, for your work on behalf of immigrant communities, for calling this hearing, and for the opportunity to testify today.