Testimony on the Health/Medicaid 2017-2018 Budget

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Submitted by:

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Coverage 4 All campaign

The Coverage 4 All campaign is grateful for the opportunity to submit testimony on the 2016-2017 New York State Executive Budget. Coverage 4 All is a campaign to expand coverage to all New Yorkers. Led by a coalition of community members, community organizations, health care providers, legal service providers, and advocates from labor, immigrant, and health care consumer advocates, our objective is to create a statewide health insurance product for New Yorkers who are excluded from eligibility for coverage because of their immigration status. Coverage 4 All is a campaign of Health Care for all New York and is co-led New York Immigration Coalition and Make the Road New York.

As we prepare this budget, immigrants in New York are entering an ever deepening period of stress and vulnerability from changes at the federal level. A capricious Executive Order blocking many lawfully permanent residents and all refugees from entry to the country, renewed immigration enforcement activities across the nation, and a leaked draft Executive Order on public charge consequences for using public benefits for lawfully present individuals have created an intense environment of fear and insecurity. ¹ New York state elected officials, led by Governor Cuomo, have publicly and passionately committed to protecting and supporting immigrant communities under attack from Washington. Ensuring access to health coverage must be part of this response.

Undocumented immigrants in New York State have been shown to contribute more than $1,108,625,000 annually in state and local taxes. ² Investing in coverage expansions for this

¹ Under current US Citizenship and Immigration Services guidance, using non-cash assistance such as Medicaid and food stamps does not prompt public charge determination, or determination that someone is “primarily dependent on the government for subsistence.” A draft Executive Order leaked in early February suggests that the Trump administration contemplates a change to this guidance. The current guidance is available at https://www.uscis.gov/news/fact-sheets/public-charge-fact-sheet. Accessed on February 15, 2017.
population are not only good for immigrants but also critical for strengthening our workforce and tax base.

We urge New York to include $81 million in its budget to increase the upper age limit of the Child Health Plus program from 18 to 29 years. This would create a Young Adult option for people who are not eligible for subsidized health insurance because of their immigration status, enabling nearly 100,000 young adult immigrants to become eligible for affordable health coverage already offered to other New Yorkers of the same age. According to the Community Service Society of New York, approximately 90,100 immigrant New Yorkers would be eligible under our proposal, of which approximately 27,880 would likely enroll. The cost per member per month at the time of the report's publication in January 2016 was $234, making the total cost of the Child Health Plus expansion $78.2 million. Accounting for annual inflation of 3%, the expansion would cost $81 million.3

The Community Service Society examined this proposal in 2016, in the context of providing coverage for people who are not eligible for Medicaid, the Essential Plan, or subsidized Qualified Health Plans because of their immigration status, including many young adult immigrant “DREAMers.” These are young adults who came to the United States as children, have grown up in this country, and contribute to the strength of the New York State economy in the workforce and paying taxes. Many of them are parents with young children. They are part of the broader population of undocumented immigrants that bolster our state and local economy.

The Child Health Plus (CHP) program is a model universal coverage program for New Yorkers through age 18. It is the main reason that New York has one of the lowest child uninsurance rates in the country, at just 3%. CHP is an ideal platform for offering equal access to coverage to those who are ineligible for Medicaid or New York State of Health Marketplace coverage. Increasing the upper age limit from 18 to 29 would provide young adult immigrants with access to coverage that is equivalent to the coverage offered to other New Yorkers of the same age in the Essential Plan or through Qualified Health Plans in the Marketplace. We propose age 29 as a cut-off in order to be consistent with the New York State program that extends coverage to young adults whose parents have insurance on the private market.4 This proposal will ensure that this group of young adult immigrants are afforded equality in access to coverage. A similar proposal is currently being contemplated in Washington State.


The benefits of increased coverage for both the individuals gaining coverage and society at large are well-documented. People without insurance coverage are more likely than their insured counterparts to delay seeking care, incur medical debt or file for bankruptcy, and experience high rates of morbidity and mortality because of their inability to access preventive care or services needed to manage serious and chronic health conditions. It is inevitable that some people without coverage will fall ill or need health services. When this happens, the losses experienced by the health care system are offset through higher prices for everyone.

Providing coverage to immigrants is important for everyone in New York State, not just the direct beneficiaries of improved access to care. Notably, coverage helps reduce the costs of publicly-funded uncompensated care, bolstering the financial standing of health care providers across the state. New York spends more than any other state to pay for uncompensated care and faces significant federal uncompensated care funding reductions over the next decade.

The times in which find ourselves require staunch and ambitious commitments to ensure the security and health of all communities that contribute to New York State economy. With efforts underway to repeal the Affordable Care Act and a new raft of terrifying immigration enforcement underway, New York has the opportunity to further cement its leadership to other states by making a firm commitment to supporting young adults’ ability to stay healthy for years to come.

Thank you for the opportunity to contribute. Please do not hesitate to contact me with questions at ecalhoon@nyic.org.

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5 Ibid. See page 4 for detailed overview of the literature on the benefits of coverage expansions.