

August 29, 2023

The Honorable J.D. Vance
288 Russell Senate Office Building
Washington, DC 20515

The Honorable Josh Brecheen
1208 Longworth House Office Building
Washington, DC 20510

Dear Senator Vance and Representative Brecheen:

I am writing on behalf of First Focus Campaign for Children, a bipartisan children's advocacy organization dedicated to making children and families a priority in federal budget and policy decisions, to express our opposition to the No Obamacare for Illegal Aliens Act (H.R. 4727/S. 2374).

Deferred Action for Childhood Arrival (DACA) recipients and their children deserve equitable access to federal healthcare programs. The proposed federal rule that H.R. 4727/S. 2374 attempts to obstruct is a long overdue correction to arbitrarily denying DACA recipients from participating in the Medicaid, Children's Health Insurance Program (CHIP, Basic Health Program (BHP), and Health Insurance Marketplaces. This has meant thousands of youth and young adults who have largely been left without access to affordable health care coverage. This exclusion not only harms DACA recipients themselves, but also their U.S. citizen children's health care coverage, which is closely linked to that of their parents.¹

Approximately 300,000 U.S.-born children have at least one parent who is a DACA recipient.² Children are not just small adults, and their health needs are unique. Regular check-ups, vaccinations, screenings, and early identification of developmental delays or chronic conditions are pivotal for addressing health concerns before they become more severe and costly to treat. Adequate and consistent health care coverage sets them up for improved health and economic outcomes into adulthood.³ Currently uninsurance rates among children of immigrants are double that of their peers with citizen parents, resulting from restrictions that prevent their parents from accessing insurance.⁴

¹ Jessica Schubel, "Expanding Medicaid for Parents Improves Coverage and Health for Both Parents and Children." Center on Budget and Policy Priorities. June 14, 2021.

<https://www.cbpp.org/research/health/expanding-medicaid-for-parents-improves-coverage-and-health-for-both-parents-and>

² Nicole Prchal Svajlenka and Trinh Q. Truong. "The Demographic and Economic Impacts of DACA Recipients: Fall 2021 Edition." Center for American Progress. November 24, 2021.

<https://www.americanprogress.org/article/the-demographic-and-economic-impacts-of-daca-recipients-fall-2021-edition/>

³ Karina Wagnerman, Alisa Chester, and Joan Alker. "Medicaid is a Smart Investment in Children." Georgetown University Health Policy Institute: Center for Children and Families. March 2017.

<https://ccf.georgetown.edu/wp-content/uploads/2017/03/MedicaidSmartInvestment.pdf>

⁴ "Health Coverage of Immigrants." Kaiser Family Foundation. December 20, 2022.

<https://www.kff.org/racial-equity-and-health-policy/fact-sheet/health-coverage-and-care-of-immigrants/>

Preventing DACA recipients from accessing health care coverage directly harms children by reducing their access to coverage. Due to the “welcome mat” effect, research shows that increased parental health care coverage leads to increased coverage for their children.⁵ For example, following the passage of the ACA, an additional 710,000 children gained coverage between 2013-2015, despite the fact that children’s eligibility had not changed.⁶ Therefore, this legislation will likely strip these children of their health insurance.

Health care coverage is essential to children’s healthy development. The American Academy of Pediatrics suggests that children should have regular, routine checkups at birth, three-to-five days after birth, at 1, 2, 4, 6, 9, 12, 15, 18, 24, and 30 months and once a year thereafter into adulthood. Young children need these visits to ensure any social, emotional, or developmental delays are detected early. However, a lack of coverage may prohibit the children of DACA recipients from receiving care, as nearly one-third of children without health insurance have not seen a doctor in the past year and did not access crucial developmental care.⁷ Additionally, when parents have coverage their children are more likely to access the routine and preventative health care that sets them up for a healthier life.⁸ Proposals that seek to reduce or eliminate health coverage for DACA recipients will serve to harm their children’s health and ability to receive care.

Efforts to block communities from accessing equitable health care coverage undoubtedly harms children and their health. DACA recipients and their children deserve equal access to essential health services, and arbitrary legislation that puts up barriers to coverage is not prioritizing the health of children and their families. Thank you for your consideration.

Sincerely



Bruce Lesley
President

⁵ Julie L. Hudson and Asako S. Moriya. “Medicaid Expansion For Adults Had Measurable ‘Welcome Mat’ Effects On Their Children.” *Health Affairs*, 36, no. 9, (2017): 1643-1651, <https://www.healthaffairs.org/doi/10.1377/hlthaff.2017.0347>.

⁶ Ibid.

⁷ Jennifer Tolbert, Patrick Drake, and Anthony Damico. “Key Facts about the Uninsured Population.” Kaiser Family Foundation. December 19, 2022. <https://www.kff.org/uninsured/issue-brief/key-facts-about-the-uninsured-population/>.

⁸ Maya Venkataramani, Craig Evan Pollack, and Eric T Roberts, “Spillover Effects of Adult Medicaid Expansions on Children’s Use of Preventive Services,” *Pediatrics* 160, no. 6 (2017), DOI: 10.1542/peds.2017-0953.