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860 WINTER STREET
WALTHAM, MA 02451-1411
TEL (781) 893-4610
TOLL-FREE (800) 322-2303
FAX (781) 893-9136
WWW.MASSMED.ORG

November 19, 2018

The Honorable Kirstjen M. Nielsen
Secretary of Homeland Security
Washington, D.C. 20528

Dear Secretary Nielsen:

I am submitting the following comments on behalf of the 25,000 physicians, residents and medical students of the Massachusetts Medical Society (MMS) in response to the notice of proposed rulemaking "Inadmissibility on Public Charge Grounds," 8 CFR 103.8 CFR 212 to 214.8 CFR 248; RIN 1615-AA22. As the following comments detail, the MMS strongly opposes these proposed rules, which would significantly deter immigrant families from seeking critical health care, housing, and food, for which they are eligible, and would penalize their immigration status if they choose to seek benefits to which they are entitled. Our guiding policy emphasizes Massachusetts physicians' commitment to working for the best possible health care for every patient in the Commonwealth regardless of racial identification, national or ethnic origin, sexual orientation, gender identity, religious affiliation, disability, immigration status, or economic status.

These proposed rules would expand the criteria for determining a "public charge" far beyond the extent envisioned in the original formulation of the law, thereby warping the concept of "public charge" into an unethical deterrent for lawful immigration. A "public charge" is defined as a person "likely to become primarily dependent on the government for subsistence."¹ A determination of public charge is grounds for denial of a green card application, because the applicant is deemed likely to continuously depend primarily on the state for their livelihood. The proposed rule would, for the first time, expand the calculation of public charge to include an immigrant's use, or likely use, of Medicaid, the Supplemental Nutrition Assistance Program (SNAP), housing assistance, and Medicare Part D low income subsidy and potentially CHIP. The proposed rule also changes significantly the income requirements to require an income above 250% of the federal poverty level (FPL), or \$62,750 for a family of four.

These proposed rules would significantly impede access to essential health care to persons lawfully present in the United States, a policy fundamentally inimical to the laws of our country and the health of our patients. We believe, as do our physicians colleagues nationally, that families will be fearful of accessing legal and necessary health care, for fear it will be used against them in the legal immigration process.

¹ <https://www.uscis.gov/greencard/public-charge>

This is particularly stark for children, who would suffer acutely from the passage of these proposed rules. As the American Academy of Pediatrics notes, many families applying for green cards would choose not to seek essential benefits. The Fiscal Policy institute estimates that “chilling effect” these rules would cause would extend to 24 million people in the United States, including 9 million children.

The proposal applies not only to the health care benefits, but also to those benefits essential to meeting needs associated with the social determinants of health. As has been very well documented, access to housing and food is essential to protecting the health of vulnerable patient populations. These proposed rules would further impede access to those essential benefits from those persons, thereby exacerbating the unconscionable harms caused by inhibiting their access to health care per se.

On behalf of the nearly 25, 000 physicians of the Massachusetts Medical Society and the patients we serve, I urge you to rescind this harmful proposal.

Sincerely,

A handwritten signature in black ink, appearing to read "Alain Chaoui".

Alain A. Chaoui, MD.