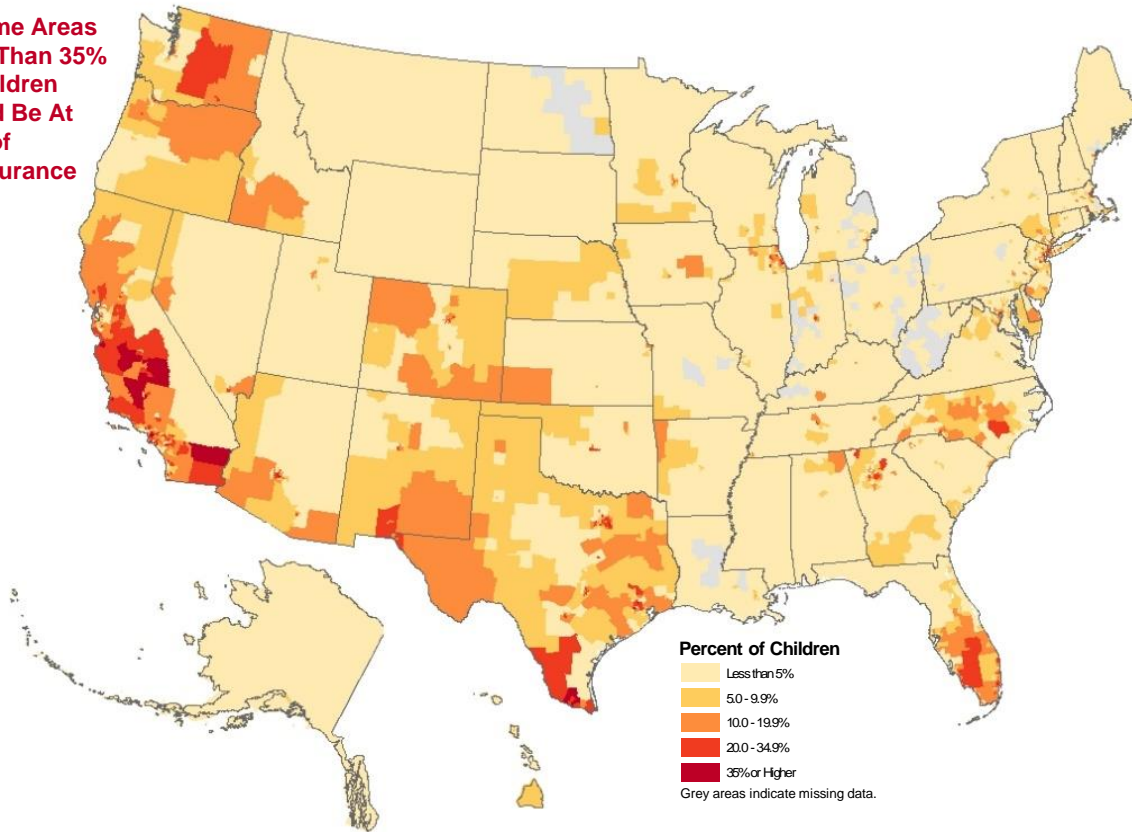


# Visualizing the Effects on Children of Changes in the Public Charge Rule

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**In Some Areas  
 More Than 35%  
 of Children  
 Would Be At  
 Risk of  
 Uninsurance**



## One in Five California Children At Risk of Direct or Chilling Effect in Health Insurance



Children at Risk in California	Total	No MTHI	MTHI
Total Children Ages 0-17	9,114,000	5,097,000	4,017,000
Child and parent(s) citizens	5,932,000	3,954,000	1,978,000
Child citizen not living with either parent	384,000	140,000	244,000
Child citizen living with non-citizen parent(s)	2,438,000	822,000	1,616,000
Child non-citizen	359,000	181,000	178,000

MTHI = Means-tested Health Insurance programs including Medicaid and CHIP. Values rounded to nearest 1,000.

## Data and Methodology

2014-2016 American Community Survey (ACS) Public Use Microdata Sample.

To evaluate the at-risk population, we grouped children ages 0 to 17 into four categories based on both child and resident parent citizenship status:

- Child noncitizen (directly at risk).
- Child citizen living with noncitizen parent(s) (at risk of "chilling effect").
- Child and parent(s) citizens.
- Child citizen not living with either parent.

We then determined whether each child was listed as participating (at the time of the survey) in Medicaid, CHIP, or other means-tested public health insurance programs. We cross-tabulated participants by the child and parent citizenship risk categories.

## Background

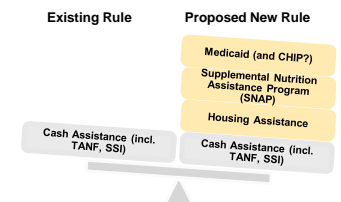
Under current policy, any foreign national may be designated a "public charge" if more than half of his or her household's income is from certain government sources, such as Supplemental Security Income or cash assistance from the Temporary Assistance for Needy Families program.

Historically *excluded* from public charge determinations:

- Health benefits such as Medicaid and the Children's Health Insurance Program (CHIP).
- Health care subsidies under the Affordable Care Act.
- Nutrition assistance such as the Supplemental Nutrition Assistance Program (SNAP).
- Housing assistance such as Section 8.

Any immigrant who has been designated a public charge may be prevented from changing status (such as converting from a nonimmigrant student visa to legal permanent resident status), denied citizenship, or, in rare cases, deported.<sup>1</sup>

A recent policy proposal seeks to broaden the list of programs that would be considered in public charge determinations.<sup>2</sup>



## Direct and Chilling Effects

If the proposed rule goes into effect, a noncitizen child's participation in public health and nutrition assistance programs could directly lead to a public charge determination. The effect on dependent citizen children is unclear, but community groups noted that the announcement of a potential change resulted in a "chilling effect" in public program enrollment among citizen children of noncitizen parents.

## Findings

We estimate that nearly 180,000 noncitizen children in California would be at risk of losing their health insurance coverage—mostly Medicaid or CHIP—under the new rule. An additional 1.6 million citizen children of noncitizen parents in California could also be at risk, with concentrations highest in Central California. In a nationwide analysis by PUMA, we find that in some areas 35% or more children would be at risk of uninsurance under the proposed rule.

## References

1. Krista Perreira, Hirokazu Yoshikawa, and Jonathan Oberlander. "A New Threat to Immigrants' Health — The Public-Charge Rule," *The New England Journal of Medicine* 379, no. 10 (2018): 901-903.
2. Homeland Security Department, Notice of Proposed Rule, "Inadmissibility on Public Charge Grounds," *Federal Register* 83, no. 196 (Oct. 10, 2018): 51114.

For more information, and for analysis of effects on SNAP participation, see <https://www.prb.org/proposed-changes-in-immigration-policy-put-children-at-risk-of-losing-health-insurance/>