



Samantha Deshommes
Chief, Regulatory Coordination Division
Office of Policy and Strategy
U.S. Citizenship and Immigration Services
Department of Homeland Security

Re: DHS Docket No. USCIS-2021-0013

Dear Ms. Deshommes,

On behalf of the Association of Women's Health, Obstetric and Neonatal Nurses, an organization that represents the interests of 350,000 specialty nurses, I submit these comments in response to the Department of Homeland Security "Public Charge" rule proposed on February 24, 2022.

AWHONN submitted comments opposing the 2019 public charge rule when it was proposed. That rule had the effect of discouraging immigrants in need from seeking assistance when they needed it including access to health care and may therefore have had deleterious impacts on their health. No one should be discouraged from accessing needed health care.

As an association of healthcare providers and an organization that advocates for the wellbeing of pregnant parents and infants, we support this proposed rule for as narrowly as possible applying the definition of "public charge" in the law and limiting it to only those likely to become primarily dependent on the government for subsistence.

AWHONN considers access to comprehensive, quality health care services a basic human right. Therefore, AWHONN strongly supports policy initiatives that guarantee access to such health care services for all people including immigrants. Individuals who fear being considered a public charge are less likely to seek primary care, causing an increased use of emergency rooms and emergent care as a method of primary health care due to delayed treatment.

Because AWHONN members provide care primarily to pregnant parents and infants, AWHONN is especially concerned with eliminating the barriers to care for these populations.



Medicaid covers almost half of childbirths in the US.¹ Including Medicaid in the public charge grounds of inadmissibility would contribute to a chilling effect where immigrants of all statuses are wary of seeking the maternity care they need. The best way to mitigate this unwanted outcome is to exclude all Medicaid benefits from the public charge determination.

Public assistance does not lead to dependence on government aid. People's situations change, often suddenly, and public assistance may help them to get back onto their feet. In addition, pregnant parents, whose pregnancies may not have been planned, need prenatal and maternity to have a healthy childbirth and a healthy newborn.

If you have any questions or desire to further discuss these issues, please contact AWHONN Government Affairs Director Seth Chase at schase@awhonn.org or 202-261-2427.

Sincerely,

Jonathan Webb, MPH, MBA
Chief Executive Officer

¹ Medicaid and CHIP Payment and Access Commission. Medicaid's Role in Financing Maternity Care. January 2020 Fact Sheet. Available from: <https://www.macpac.gov/wp-content/uploads/2020/01/Medicaid%E2%80%99s-Role-in-FinancingMaternity-Care.pdf>