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Via online docket submission

Samantha Deshombres
Chief, Regulatory Coordination Division
Office of Policy and Strategy
U.S. Citizenship and Immigration Services
Department of Homeland Security
20 Massachusetts Avenue NW
Washington, DC 20529-2140

**Re: Inadmissibility on Public Charge Grounds
Formal Comment to Proposed Rule 83 FR 51114
DHS Docket No.: USCIS-2010-0012**

Dear Ms. Deshombres:

The Massachusetts Department of Public Health (MA DPH) submits this comment to the Proposed Rule Inadmissibility on Public Charge Grounds, 83 FR 51114, DHS Docket No.: USCIS-2010-0012 (Proposed Rule). The Commonwealth of Massachusetts, including MA DPH, opposes the Proposed Rule and strongly advises that the Department of Homeland Security (DHS) withdraw the Proposed Rule. Massachusetts values the immigrant community's role in making our state a vibrant and competitive commonwealth and believes the proposed changes to the public charge rule would harm these interests by discouraging lawful Massachusetts residents from accessing basic supports such as medical care and other programs intended to help lawful immigrants to build economic self-sufficiency. At a minimum, and in the event that DHS declines to withdraw the proposed rule in its entirety, MA DPH encourages the DHS to revise the Proposed Rule in order to exclude health benefits from being treated as a "public benefit" in any public charge determination.

The Massachusetts Department of Public Health promotes the health and well-being of all Massachusetts residents by ensuring access to high-quality public health and healthcare services, and by focusing on prevention, wellness and health equity in all people. MA DPH is

particularly concerned with the aspects of the Proposed Rule that would negatively affect health access and outcomes. Accordingly, we take this opportunity to comment to highlight the negative impact of the rule on some of the programs and services supported by MA DPH.

Nutrition

MA DPH Bureau of Family and Nutrition provides programs and services ensuring the health of the Commonwealth's mothers, infants, children and youth, including children and youth with special needs and their families. MA DPH notes that the public discussion and publication of the Proposed Rule may have already negatively impacted access to programs that support positive public health outcomes. For example, in February 2018 the news organization Reuters, released a proposed draft of the Proposed Rule Inadmissibility on Public Charge Grounds which included the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) as a public benefit. Since that time there has been a 2,000 person reduction from 2017 levels in participants in WIC across Massachusetts, even though WIC, ultimately, was not included in the programs considered by the Proposed Rule. Massachusetts WIC serves nearly half of all babies born in the Commonwealth, providing services to more than 200,000 eligible pregnant women, infants and children annually. In addition to alleviating food insecurity, WIC participation is associated with improved pregnancy outcomes, better birth weights, and a decrease in prematurity. Ensuring that families can access WIC services allows MA DPH to address the nutrition and health needs of low income families. An inability to access WIC will increase food insecurity for low income families. Food insecurity in households with children is associated with inadequate intake of several important nutrients, deficits in cognitive development, behavioral problems, and poor health.

MA DPH supports the proposed rule's exclusion of WIC from the types of public benefits considered in public charge inadmissibility determinations. MA DPH urges DHS likewise exclude receipt of benefits from the Supplemental Nutrition Assistance Program (SNAP) from any public charge determination. SNAP participation, like WIC, serves to reduce food insecurity and the negative health outcomes associated with limited or uncertain access to nutritious food. Nearly half of WIC households report that they rely on SNAP benefits in addition to WIC benefits to feed their families. Additionally, a decrease in SNAP participation as a result of treating receipt of SNAP benefits as a negative factor under the Proposed Rule would likely put a strain on WIC resources as more families will turn to WIC for food assistance.

Infectious Disease

MA DPH's Bureau of Infectious Disease and Laboratory Sciences tracks, tests for, and combats infectious disease. The Bureau also educates people in Massachusetts about preventing the spread of disease. MA DPH urges the DHS to exclude reliance on Medicare and Medicaid related benefits from the public benefits considered in public charge inadmissibility determinations. Massachusetts Medicare and Medicaid recipients rely on these programs to obtain diagnosis and treatment for tuberculosis and other infectious diseases, such as HIV. MA DPH is concerned that treatment of Medicare and Medicaid related benefits as a negative

factor in the public charge determination under the Proposed Rule will result in delays in diagnosing and treating these diseases due to the disincentive the Rule will create for lawfully present immigrants to take advantage of these public health supports. Additionally, MA DPH anticipates that promulgation of the Proposed Rule as written will result in decreased utilization of children's healthcare, including vaccinations, which will increase the risk for vaccine preventable diseases. These effects will pose an immediate risk to the health of individual immigrants and is also likely to result in increased transmission of tuberculosis or other infectious disease in the Commonwealth of Massachusetts and in other states, increasing the likelihood of an outbreak.

Increased transmission of these communicable diseases is, at a minimum, likely to require that public health agencies like MA DPH undertake larger and more complicated contact investigations. A contact investigation is a systematic process to identify who an infected person has come in contact with in order to stem the continued spread of an infectious disease, and is a vital tool in protecting public health. The MA DPH Bureau of Infectious Disease and Laboratory Sciences conducts epidemiologic contact investigations in instances of infectious disease outbreaks. In doing so, the Bureau often cooperates with our federal partners at the Centers for Disease Control and Prevention. If the Proposed Rule were to be enacted as written, MA DPH anticipates a chilling effect reducing the number of immigrants willing to cooperate with governmental entities conducting infectious disease investigations. As a result, such contact investigations will be more difficult, if not impossible, to conduct as individuals will choose not to disclose contacts out of fear. A reduction in MA DPH's ability to conduct infectious disease contact tracing will result in inability to stop transmission of infectious diseases, increasing the risk of outbreaks.

Cancer Screenings

The MA DPH Bureau of Community Health and Prevention promotes the well-being of people in Massachusetts by serving individuals, communities, and organizations in the areas of chronic disease prevention and wellness and access to quality health services. The Women's Health Network, a MA DPH service which provides cancer screening and diagnostic services, case management, and patient navigation to men and women in Massachusetts has learned from its contracted providers that, increasingly, immigrants will not access these services because they are concerned their personal information may be collected by a government agency while there is a risk of such information being used to determine whether they are a public charge. Early detection is closely tied to the successful treatment of many cancers. Any delays in screening caused by the Proposed Rule will increase the likelihood of negative health outcomes. Accordingly, MA DPH reiterates its request that the Proposed Rule be withdrawn in its entirety.

Sexual and Domestic Violence

MA DPH's Bureau of Community Health also administers a Division of Sexual and Domestic Violence Prevention that works to eliminate sexual and domestic violence and

support the health of those impacted by such violence. MA DPH has received notice of specific instances of negative effects on utilization of these programs as a result of generalized fears caused by the publication of the Proposed Rule. Sexual and Domestic Violence Survivor Service Providers have notified MA DPH of a number of survivors who have withdrawn from services for themselves and their children due to concerns about potential consequences with regards to their immigration status, including victims of human trafficking, rape, and domestic violence who are eligible for status under the Violence Against Women Act. This leaves people vulnerable to additional violence and impedes efforts to recover from the physical and mental health impacts of such violence. MA DPH consequently urges the Department of Homeland Security to withdraw the rule in its entirety so as to lessen the risk of negative health outcomes to these populations.

MA DPH is concerned that the Proposed Rule has already had negative impacts on public health, and will continue to do so should it become effective. The Massachusetts Department of Public Health opposes its promulgation and, in the strongest possible terms and urges the Department of Homeland Security to withdraw the Proposed Rule in its entirety. The Commonwealth of Massachusetts has made great strides toward improving and supporting the health of all its residents. The Proposed Rule would undermine this work. As such, the Massachusetts Department of Public Health urges the Department of Homeland Security to withdraw this Proposed Rule and instead support the work already being done on the federal, state, and local levels to protect public health.

Please let me know if you have any questions or need additional information about this important rule that will impact residents of the Commonwealth.

Sincerely,

A handwritten signature in blue ink, appearing to read 'MB', with a long horizontal flourish extending to the right.

Monica Bharel, MD, MPH
Commissioner
Massachusetts Department of Public Health

cc: Secretary Marylou Sudders, Executive Office of Health and Human Services