



Healthcare Policy Roundup

September 4, 2018

Catch the Highlights!

- *Legal immigrants avoid nutrition services amid potential rule penalizing use of public benefits*
- *Trump Administration pays New York \$74 million for the Essential Plan*
- *Study explores impact of tobacco-free pharmacy law on retailer density in NYC neighborhoods*

Questions? Comments?

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Immigrants avoid WIC services amid public charge fears:

Legal immigrants are avoiding government-funded nutrition programs in fear of jeopardizing green card eligibility, according to agencies monitoring enrollment for the federal Women, Infants, and Children (WIC) nutrition program. Local providers and health departments have reported a sharp decline in program participation since publication of a leaked “public charge” rule that would penalize legal immigrants for using a wide range of public benefits.

Earlier this year, reporters obtained a draft of the rule that would expand an existing list of government benefits disqualifying legal immigrants from obtaining green card status. Currently, the rule penalizes immigrants for using Supplemental Security Income (SSI), Temporary Assistance for Needy Families (TANF), General Assistance (GA), and long-term care (e.g. institutionalization) at the government’s expense. Now, lawmakers are looking to add additional programs such as WIC, Medicaid, and the Supplemental Nutrition Assistance Program (SNAP) – also known as food stamps.

Healthcare providers fear that low enrollment in WIC programs will lead to higher rates of children born at low birth weight. According to a recent report, at least 18 states say they’ve seen up to a 20% drop in enrollment that they attribute to fears around immigration policy. While government officials are unable to track down the exact number of immigrants avoiding public programs due to policy fears, providers say that anecdotal evidence points to the proposal as a significant contributor to falling participation. There are growing concerns as well that immigrants, both documented and undocumented, may fear accessing needed healthcare at federally qualified health centers in reaction to the Trump Administration’s threats.

Trump Administration restores \$574 million to New York Essential Plan:



The Trump Administration has restored \$574 million in funding to the New York State Essential Plan in response to litigation filed against the federal government. New York and Minnesota filed a joint lawsuit last year after the federal government stopped making cost-sharing reduction payments to the states’ respective programs.

The Essential Plan was created under the Affordable Care Act’s Basic Health Program and offers cost-sharing reduction payments to insurance companies as an incentive to pay out-of-pocket costs for low-income individuals. Federal officials sought to justify the \$1

billion cut saying that funding was never appropriated in Congress. However, the states argued that the elimination of funding was a “transparent attempt to dismantle” the ACA.

The restored funding will support New York’s statewide program covering families who earn up to 200% of the federal poverty level but who do not qualify for Medicaid. As of January 31, 2018, approximately 739,000 New Yorkers have enrolled in the program.

Impact of tobacco-free pharmacy law varies throughout NYC:

Despite citywide implementation of a tobacco-free pharmacy law, there remain significant disparities in tobacco retailer density throughout New York City neighborhoods. Since going into effect August 2017, retailer density decreased by an average of 6.8% throughout the city. However, neighborhoods of higher socioeconomic status saw up to a 15% reduction in the number of retailers selling tobacco.

The data is reported in a new study published in *Tobacco Control* by the University of Columbia’s Mailman School of Public Health. According to the study, neighborhoods benefitting the most from the new law were predominantly white, had greater educational attainment, and were of higher income status. Neighborhoods seeing less of an impact had more residents without high school diplomas or health insurance. Areas in the central Harlem, north and central Brooklyn, and the South Bronx saw little to no change.

The tobacco-free pharmacy law was passed last year as part of a larger legislative package related to smoking cessation. According to lead author Danile Giovenco, “Banning tobacco sales in pharmacies...has received deserved praise and is a sensible public health strategy to curb tobacco use. It is important, however to continue to monitor the reductions in retailer density and tobacco use prevalence across neighborhoods.”



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