

USCCB Migration-Related Requests for COVID-19 Package 4

1. Testing and treatment for COVID-19 must be available to all
2. Provide access to individual rebates (cash payments) to those who file taxes with an ITIN.
3. Include automatic extension of work authorization and visas
4. Place restrictions on immigration detention and enforcement
5. Halt implementation of “public charge” rule

(1) Ensure access to testing and treatment for COVID-19 for all and that such care is covered under emergency Medicaid Emergency for those who do not have other insurance Response measures to COVID-19 must ensure that *all persons are able to receive free COVID-19 testing and COVID-19-related care*. Leaving out some communities leaves all communities at greater risk since testing and treatment are done not only for the sake of the individual’s health but as part of the public health response to halt and mitigate the impact of COVID-19. Failure to provide inclusive testing and treatment will harm tens of millions of people, undermine efforts to contain the virus and put further strain on providers and states that will be burdened with uncompensated care costs at a time of particular vulnerability. We commend that the CARES Act provides **testing and treatment** for those among the uninsured who are eligible for Medicaid, U.S. citizens and those known as “qualified” migrants.”¹ But, unfortunately, for those who do not qualify for Medicaid (Sections 1611 and 1613 of Title 8.), the CARES Act provides **testing only** through the National Disaster Medical System.² This leaves undocumented immigrants, people with DACA, TPS holders, and others excluded from the definition of “qualified” immigrant and leaves them therefore ineligible for Medicaid. Under section 1613, even qualified immigrants are ineligible for Medicaid during their first 5 years in the U.S., with some exceptions. Unfortunately, the new Medicaid state option for uninsured individuals in the prior bills don’t address these restrictions, leaving many immigrants ineligible for services provided under the state option. The next legislative package must confirm that testing and treatment for COVID-19 and related conditions are considered treatment for an emergency condition under 42 U.S.C. 1396b(v). This would help address concerns about the public charge consequences of seeking or receiving testing and treatment. Recognizing that the public health of all is jeopardized if any group is left unserved, the state option should cover treatment and should be amended to clarify that it operates “notwithstanding any other provision of law.”

(2) Make individuals eligible for cash payments with an ITIN The direct cash payments under the CARES Act protect public health because they make it easier for sick or at-risk populations to stay home rather than interact with the public. Without a cash lifeline, many family breadwinners will be forced out of their homes just to feed their families. Under the third coronavirus package, an individual (and the person’s spouse, if filing jointly) must have a social security number to qualify for a stimulus cash payment, with a limited exception for military families (where at least one spouse must have an SSN). Unfortunately, this leaves out mixed status families, such as those where the parent(s) are filing their taxes with an Individual Taxpayer Identification Number and the children have a social security number.

¹ Update on Access to Healthcare for Immigrants and their Families, National Immigrant Law Center, 3/18/2020 available at <https://www.nilc.org/issues/health-care/update-on-access-to-health-care-for-immigrants-and-their-families/> (See note for full list of qualified immigrants).

²Chris Breyers, Johns Hopkins School of Public Health, et al, Undocumented Immigrants and COVID-19, New England Journal of Medicine, 3/27/2020, available at <https://www.nejm.org/doi/pdf/10.1056/NEJMp2005953?articleTools=true>

All people who file taxes in the United States, including U.S. citizen spouses and children who are filing taxes in mixed status households, should be eligible for cash payments to help ensure that families are able to afford shelter and food during this crisis, regardless of what taxpayer identification number they use. In addition, there should be an automatic eligibility assessment and payment process for recipients of means-tested public benefits who have not earned enough income to file taxes but who qualify for the stimulus cash payment.

(3) Include Automatic Extensions of Work Permits and Immigration Benefits At a time of national uncertainty, individuals awaiting adjudication of immigration benefits, dealing with the USCIS office closures, and/or anticipating the potential loss of work authorization are living under the looming threat of a loss of status and livelihood simply because of the inability of the federal government to process applications during the course of the pandemic. While USCIS is allowing individuals to use prior biometrics data to submit work authorization requests, there is a great deal of uncertainty about their ability to continue processing requests and petitions. Nonimmigrants should have their status automatically extended to prevent confusion and consequences for their immigration status in the future. Individuals with DACA and TPS face tremendous uncertainty about their ability to receive work authorization. Congress should include a provision in the next legislative package to automatically extend work authorization for the length of time that the individual previously was work authorized. Agricultural workers are also essential and should be permitted to continue working legally in the U.S.

(4) Place restrictions on immigration detention and enforcement The administration has put lives at risk and threatened public safety by continuing immigration enforcement and detention unabated through the course of the COVID-19 pandemic and by rapidly expelling children and families under an unprecedented new rule that circumvents long-standing, bipartisan protections for asylum-seekers and unaccompanied children. Notably, despite multiple requests from Members of Congress, ICE has yet to provide its written policies or procedures regarding COVID-19, including how it is identifying detained immigrants who may have COVID-19 or are otherwise more susceptible to contracting it. Individuals who are elderly, pregnant and at-risk continue to be detained. The next stimulus package should:

- Require ICE and CBP to use all available discretionary powers to [release](#) all immigrants possible from detention utilizing humanitarian parole, release on recognizance, and including provisions allowing for release notwithstanding other provisions of law (See [USCCB COVID-19 Detention recommendations](#))
- Require CBP to drastically reduce the number of people in their custody and restrict prolonged detention while ensuring access to asylum and processing unaccompanied children and to publicly report on a continual periodic basis the number of CBP staff or detainees who have contracted COVID-19.

(5) Halt implementation of new public charge rules DHS and State Department's public charge rules took effect on February 24, 2020. The regulations have deterred immigrants and their U.S. citizen family members from seeking health, nutrition assistance, and other essential services. In order to protect public health, Congress must halt the application of the DHS and DOS public charge regulations during this crisis.



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