Concurrent Session 2 - Access & Coverage Track

12:40 p.m. to 2:10 p.m. – Low Income & Vulnerable Populations

Ms. Mason will address health access issues for low-income populations both from her perspective as a member on Governor Dayton's task force and as a provider of legal services.

Ms. Haji-Taki will address: Health care policy and immigration law are complex issues that intersect often and when combined, the issue becomes even more contentious. Minnesota has continually been at the forefront of providing coverage for noncitizens, and filling coverage gaps at the state level. An example of Minnesota's progress includes exercising a state option to expand Medicaid to undocumented pregnant women. The Affordable Care Act and Minnesota's decision to expand Medical Assistance (MA) have significantly expanded health coverage options for lawfully present noncitizens. Furthermore, strong advocacy by DHS, legislators, and advocates, to implement MinnesotaCare as the state's Basic Health Plan will continue to provide a low coverage option for noncitizens in Minnesota. Despite our state's progress to cover noncitizens, language, cultural barriers, and confusion about eligibility are just a few of the hurdles that some immigrant communities still struggle with. Thus, it is crucial for the Department and stakeholders to work collectively to ensure all Minnesotans have access to affordable health care.

Mr. Burdick will address: State and federal health care reform efforts have had a dramatically positive impact on the lives of children and adults living with mental illnesses. Expanded eligibility for Medicaid, mental health parity, and other recent reforms have greatly expanded access to mental health treatment and services. However, challenges to accessing mental health care persist. Many people with mental illnesses are still uninsured or underinsured, there is a severe shortage of mental health providers (both here in Minnesota and across the nation), and the mental health service delivery system remains under-developed, fragmented, and rife with gaps and bottlenecks. Mr. Burdick will discuss the huge gains experienced by people with mental illnesses as a result of health care reform, as well as the substantial work that remains to ensure people with mental illness can access appropriate care when and where they need it.

Ralonda Mason, JD

Ralonda Mason is the Supervising Attorney for Mid-Minnesota Legal Aid - St. Cloud. She focuses on public assistance programs including healthcare programs. She has worked extensively in the implementation of health reform serving on the Governor's Health Reform Task Force and leading Project Care, an education and enrollment outreach initiative in Central Minnesota. Ms. Mason is a graduate of the University of Notre Dame and Southern Methodist University School of Law. She has been advising clients and providing administrative advocacy on health care issues for more than 25 years.

Fatema Haji-Taki, JD

Fatema Haji-Taki currently works in the Health Care Eligibility and Access division at the Minnesota Department of Human Services (DHS) where she develops, analyzes, and implements health care eligibility policy and supports operational initiatives across Minnesota Health Care Programs (MHCP). Fatema plays a significant role in implementing Medicaid eligibility policy provisions of the Affordable Care Act (ACA) and serves a subject matter expert on health care policy for noncitizens.

Fatema brings diverse experience, specialized expertise in health care, and a strong commitment to social justice. Prior to working at DHS, Fatema served as a MNsure Outreach and Enrollment Navigator at Health Access MN and Immigrant Law Center of Minnesota. Her work included researching and analyzing health care eligibility policies, as well as conducting statewide outreach events with a specific focus on immigrant populations. She also assisted consumers with enrollment by explaining, discussing, and interpreting coverage options to facilitate plan selections.

Fatema has also worked as a Legal Fellow at the Battered Women's Legal Advocacy Project in Minneapolis and Acting Pro Bono Director at the Immigrant law center of Minnesota. She earned her Juris Doctor (J.D.) from Northeastern University School of Law in Boston, MA. She also holds a Bachelors of Arts (B.A.) in Political Science and Global Studies from the University of Minnesota.

Matthew Burdick, JD

Matt Burdick is the Public Policy Director at NAMI Minnesota (National Alliance on Mental Illness). NAMI is a grassroots advocacy organization dedicated to improving the lives of children and adults living with mental illnesses and their families. Matt advocates on mental health issues at the state legislature and with state administrative agencies in the areas of health care, human services, housing, and criminal justice. Matt also coordinates NAMI Minnesota's grassroots advocacy efforts. He holds a bachelor’s degree in Sociology and Political Science from Augsburg College.

Health Care Coverage for Noncitizens in Minnesota

Hamline Health Law Institute Symposium
October 24, 2014

Fatema Haji-Taki

Noncitizens & the Affordable Care Act

* **Roadmap**
  - Health Care Coverage Policy for noncitizens in MN
  - Statistics of Noncitizens in Minnesota

Acronyms

* ACA = Affordable Care Act
* **APTC= Advanced Premium Tax Credit**
* DHS = MN Dep't of Human Services
* HHS = U.S. Dep't of Health & Human Services
* **MA = Medical Assistance**
* **MCRE = MinnesotaCare**
* LPR = Lawful Permanent Resident
* QHP = Qualified Health Plan

Health Coverage Options for Lawfully Present Noncitizens

MA:
0-133% +5

MCRE:
0-200%
(usually 138-200%)

APTC:
200-400%

QHP:
>400%

Ages 0-2 → 283% +5
Ages 2-18 → 275% +5
Pregnant Women → 278% +5

Naturalized Citizens under ACA

* **Eligible on the same basis as U.S. born citizens**
  - Subject to individual mandate
* **Verification of citizenship status**
  - Will be verified via Social Security Administration (SSA)
  - If unable to verify with SSA, verification will go to Department of Homeland Security's records
  - Will have opportunity to provide other proof or correct records if unable to verify electronically

Noncitizens under ACA: "Lawfully Present" vs. Undocumented

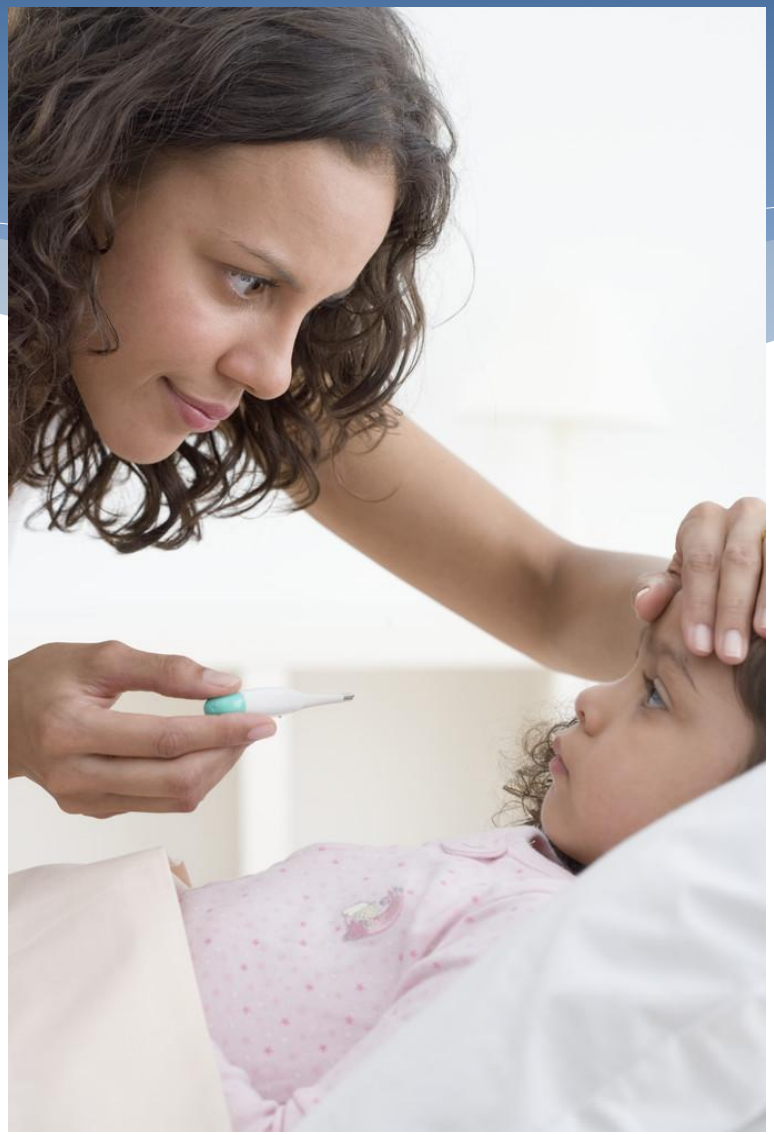
- **"Lawfully Present" (broad umbrella)**
  - ✓ Subject to individual mandate unless exempt
  - ✓ Defined in 45 C.F.R. 152.2
  - Lawful Permanent Residents (LPRs or "green card" holders)
  - Permission to stay temporarily in the U.S.
    - Includes individuals on student/worker/pending immigration statuses
- **Undocumented**
  - Individuals who entered the U.S. without permission
  - Individuals who no longer have permission to stay in the U.S. (e.g. expired student or tourist visas)

MA Eligibility for Noncitizens

* **1996**
  - Personal Responsibility and Work Opportunity Reconciliation Act of 1996 ("Welfare Reform")
  - Illegal Immigration Reform & Immigrant Responsibility Act of 1996 (IIRIRA)

* **Eligibility for MA is complex**
  - 5-year bar for LPRs with some exceptions
  - Most adult noncitizens ineligible with some exceptions

Pregnant Women & Children under 21



- **Children's Health Insurance Program of 1997 (CHIP)**
  - MN chose to expand MA coverage to undocumented pregnant women using federal CHIP funds
- **Children's Health Insurance Program Reauthorization Act of 2009 (CHIPRA), Section 214**
  - Extended MA to lawfully present
    - Children under 21
    - Pregnant women

MCRE/APTC Eligibility for Noncitizens Rule of Thumb

- **Most noncitizens are eligible for coverage**
  - ✓ If not eligible for MA → eligible for MCRE/APTC
- **Two groups not eligible for any coverage**
  - ✓ Deferred Action for Childhood Arrivals (DACA)
  - ✓ Undocumented noncitizens

Undocumented Noncitizens

* Exempt from individual mandate
* Ineligible for APTC
* Unable to purchase QHPs on MNsure even without APTC
* Ineligible for MA, MCRE
* Eligible for Emergency Medical Assistance (EMA)
* Exception: Pregnant women are eligible for MA

Undocumented noncitizens with Lawfully Present Children

* **Lawfully Present Children**
  - Eligible for MA, MCRE, APTC, QHPs

* **Application of Tax Penalties & APTC**
  - ***If parents are below threshold for filing taxes***
    - Lawfully present children are exempt
  - ***If undocumented parents are required to file taxes***
    - Lawfully present children are subject to individual mandate
    - Parents eligible for APTC for their children if they qualify

Key Assurances for Noncitizen Applicants

* **Immigration Concerns**
  - *U.S. Immigration & Customs Enforcement (ICE)*
    - ✓ Enrollment information will not be used for enforcement
  - *HHS regulations*
    - ✓ Only applicants need to submit immigration information

* **Public Charge Concerns**
  - Health care subsidies will **not** result in public charge (unless receiving MA long term care in an institution)

Who are Lawfully Present Noncitizens?

Common Bases for Immigrating

Family petition

- 65% applying based on close family relationship in the U.S.

Freedom

- 16% applying for asylum (in U.S.) or refugee (if living outside of U.S.)

Employment Visas

- 13% noncitizens invited by U.S. employers to fill positions where there is a shortage

Lawful Permanent Residents ("Green Card" Holders)

LPR pathway: not for all visas

Majority LPRs through family petition

Limited availability through employer

Pathway to Citizenship

Special Provisions for Vulnerable Populations

Violence Against Women Act (VAWA)

- Battered spouse, child, parent of U.S. citizen or Lawful Permanent Resident (LPR)

Crime Victims (U-visa)

- To facilitate reporting of crimes by undocumented victims

Victims of Trafficking (T-visa)

- Immigration status for victims of human trafficking

Special Immigrant Juvenile Status (SIJS)

- Children who are abused/abandoned/neglected by parent/legal guardian in their home country or in the U.S.

Other Special Provisions contd…

Temporary Protected Status (TPS)

- Department of Homeland Security may designate a country for TPS because conditions temporarily prevent the country's nationals from returning safely

Countries Currently Designated for TPS

- El Salvador
- Haiti
- Honduras
- Nicaragua
- Somalia
- Sudan
- South Sudan
- Syria

Deferred Action for Childhood Arrivals (DACA/DREAMers)

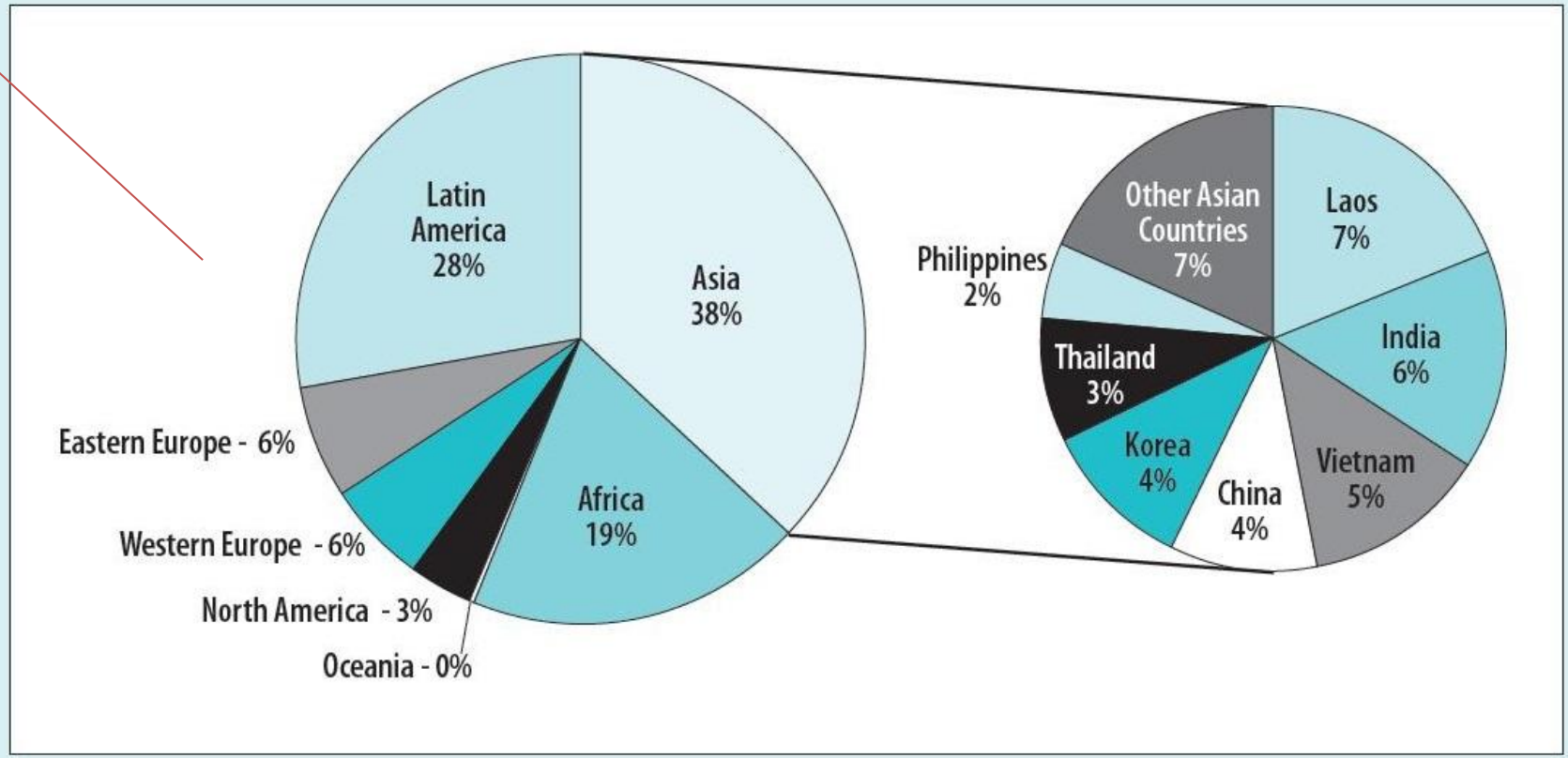
* **June 15, 2012**
  - Dep't of Homeland Security created program to grant deferred action to certain noncitizens who came as children
  - "Lawfully Present" for immigration purposes
    - employment authorization card/SSNs/driver's license

* **ACA coverage**
  - Not lawfully present per HHS regs and DHS policy
    - Ineligible for health coverage
    - Exception: Pregnant women on DACA are eligible for MA

Noncitizens in Minnesota

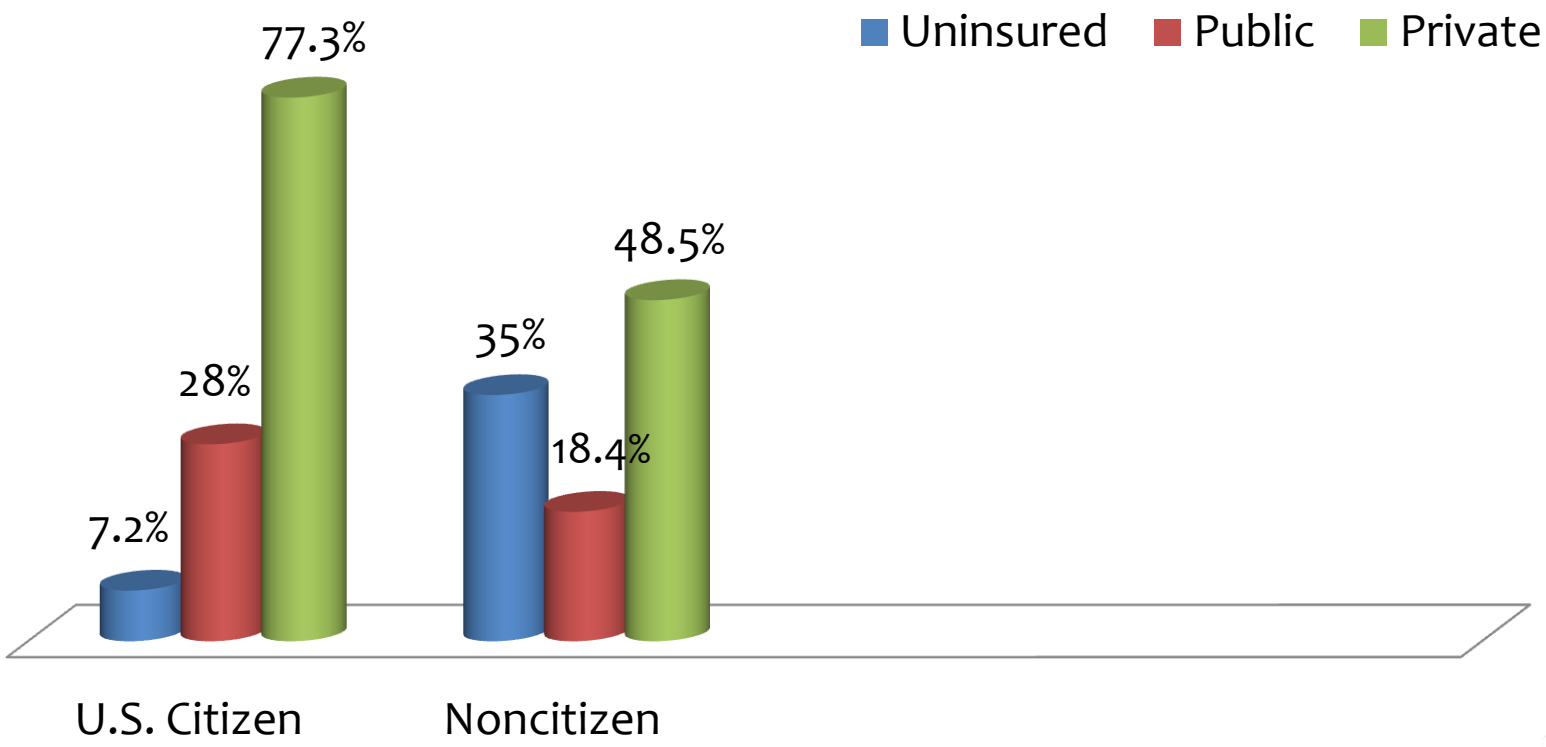
1 in 11
Minnesotans are
Latino or Asian

Minnesotans Born Abroad by Place of Birth, 2006 - 2010

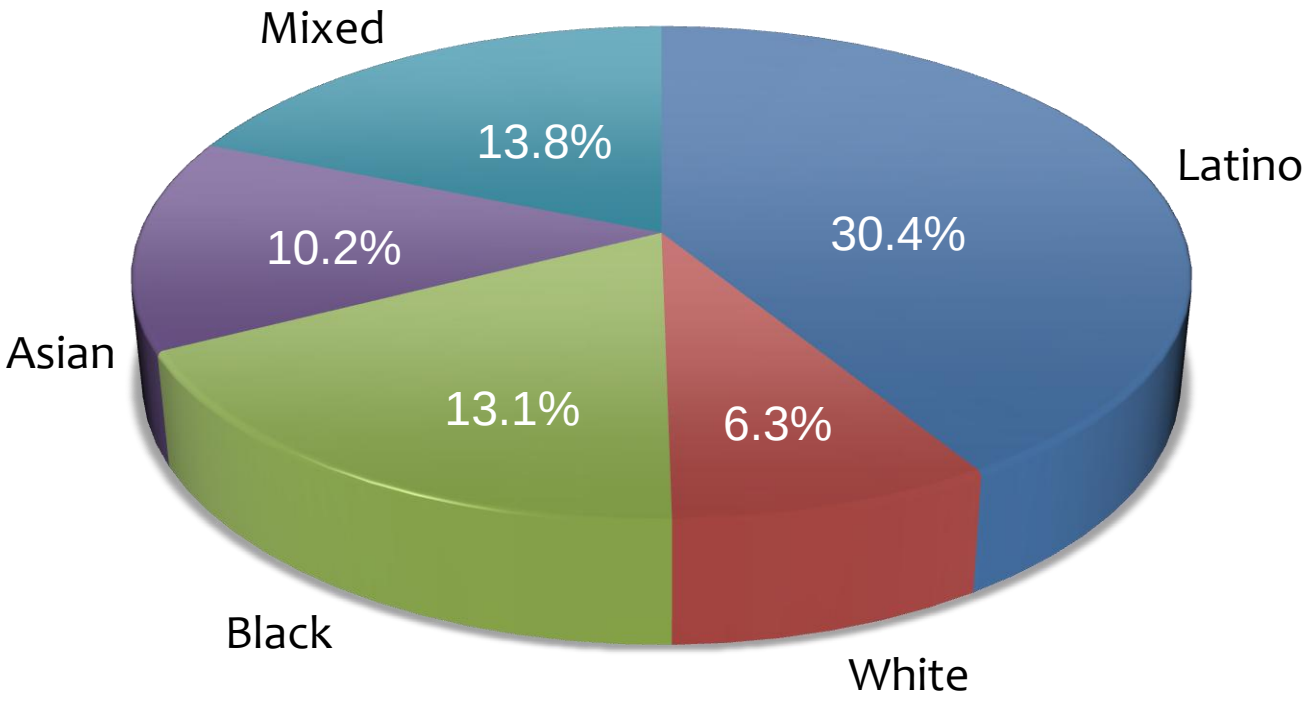


Source: American Community Survey, 2006-2010

Coverage Type by Citizenship (2012)



Uninsured Rate by Race/Ethnicity (2012)



Refugees & Asylees in MN

National vs. State

- 23% of Minnesota's noncitizens are considered refugees/asylees
- National Average: 17%

Of all the states…

- Minnesota has the highest proportion of refugees/asylees among the immigrant population

Minnesota at a glance…

In 2003, there were 8,406 new LPRs in MN
In 2013, there were 12,781 new LPRs in MN

No. of LPRs becoming citizens in MN in 2003: 6,226
No. of LPRs becoming citizens in MN in 2013: 10,526

Top six countries of LPR admissions to MN in 2012
(1) Somalia (2) Ethiopia (3) Burma (4) Mexico
(5) India (6) Kenya

Top six countries of LPR admissions to U.S. in 2013
(1) Mexico (2) China (3) India (4) Philippines
(5) Dominican Republic (6) Cuba

IMMIGRATION STATE-BY-STATE

New Americans in **Minnesota**

7.3% of Minnesotans are foreign born

8.8% are Latino or Asian

45.9% of immigrants in the state are naturalized U.S. citizens

4.3% of registered voters are New Americans

86.3% of children with immigrant parents are U.S. citizens

79.1% of children with immigrant parents are English proficient

79.4% of naturalized citizens have a high school diploma or higher

12,735 foreign students contribute **$319.2M** to the state's economy

Make up **8.6%** of the workforce.

2.1% of the workforce is unauthorized.

DID YOU KNOW?

Minnesota would lose **$4.4 billion** in economic activity and about **24,299 jobs** if all unauthorized immigrants were removed.

Latino-owned businesses had sales and receipts of **$1.6 billion** and employed **5,970** people

Asian-owned businesses had sales and receipts of **$2.4 billion** and employed **16,950** people

The purchasing power of Latinos is **$5.4 billion**. Asian buying power totaled **$8.4 billion**.

Read more at immigrationpolicy.org

Helpful Links

* DHS Table: Immigration Status and Minnesota Insurance Affordability Program Eligibility
  http://bit.ly/1r4Q0Dk

* National Immigration Law Center: Lawfully Present Individuals Eligible under the Affordable Care Act
  http://bit.ly/OvprrP

* HealthCare.gov: Immigration status and the Marketplace
  http://1.usa.gov/1h3AaSM

Immigration Status and Minnesota Insurance Affordability Program Eligibility

Effective January 1, 2014

Immigration Status	Qualified Programs		
	Pregnant Women	**Children under 21**	**Adults 21 and Older - Parents, Adults without Children, Blind, Disabled, Elderly**
• Afghan/Iraqi Special Immigrants • Amerasians • American Indian noncitizens • Asylees • Battered noncitizens/children who have resided in the U.S. for > 5 years • Conditional Entrants • Cuban/Haitian Entrants • Immigrants paroled for 1 year or more and resided in the U.S. for > 5 years • LPRs who have resided in the U.S. > 5 years • Refugees • T-Visa • Trafficking victims • Withholding of Removal	• Medical Assistance (MA) • MinnesotaCare • Advanced Premium Tax Credit (APTC) • Qualified Health Plan (QHP) without subsidy	• MA • MinnesotaCare • APTC • QHP without subsidy	• MA • MinnesotaCare • APTC • QHP without subsidy
• Applicants for asylum • Battered noncitizens and their children who have resided in the U.S. for < 5 years • Beneficiary of approved visa petition with pending application for adjustment • Deferred Enforced Departure decision by President • Family unity beneficiaries • Granted employment authorization under 8 CFR 274a.12(c) • Granted Deferred Action status • Granted an administrative stay of removal • K-Visa	• MA • MinnesotaCare • APTC • QHP without subsidy	• MA • MinnesotaCare • APTC • QHP without subsidy	• Emergency Medical Assistance (EMA) • MinnesotaCare • APTC • QHP without subsidy

Immigration Status and Minnesota Insurance Affordability Program Eligibility

Effective January 1, 2014

Immigration Status	Qualified Programs		
	Pregnant Women	**Children under 21**	**Adults 21 and Older - Parents, Adults without Children, Blind, Disabled, Elderly**
• LPRs who have resided in the U.S. for < 5 years • Lawful temporary residents (LTRs) • Marshall Islanders, Micronesians and Palauans • Lawfully present in American Samoa • Nonimmigrants • Paroled for less than 1 year • Paroled for 1 year or more who have resided in the U.S. for < 5 years • Pending immigration status • Special Immigrant Juvenile Status (SIJS) • Pending application for SIJS • Temporary protected status (TPS) • Temporary resident status under 8 USC 1160 or 1255a • U-Visa • V-Visa • Other lawfully present noncitizens	• MA • MinnesotaCare • APTC • QHP without subsidy	• MA • MinnesotaCare • APTC • QHP without subsidy	• EMA • MinnesotaCare • APTC • QHP without subsidy
• Undocumented noncitizens • Deferred Action for Childhood Arrivals (DACA)	• CHIP-funded MA (NM/PC) • EMA	• EMA	• EMA
Noncitizens receiving services at the Centers for Victims of Torture	Medical Assistance if person does not qualify for MA without a spenddown.		