



IMMIGRATION POLICY CENTER

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September 30, 2009

THE TRUTH ABOUT COSTLY VERIFICATION SYSTEMS, UNAUTHORIZED IMMIGRANTS AND HEALTH CARE

As health care bills make their way through Congress, lawmakers are debating whether or not to include overly burdensome citizenship verification requirements to ensure that unauthorized immigrants do not have access to health insurance. However, past attempts to implement these kinds of additional measures have prevented U.S. citizens and legal immigrants from receiving health care, while uncovering very few instances of unauthorized immigrants trying to abuse the system. In fact, research shows that unauthorized immigrants do not come to the United States for health care benefits or any other public services for which they are not eligible. These additional measures threaten to ensnare far more citizens than unauthorized immigrants and add unnecessary costs to health care reform.

Past efforts to use verification to weed out illegal immigrants have proven expensive and ineffective.

- The Deficit Reduction Act of 2005 required everyone to present proof of citizenship when applying for or renewing Medicaid coverage. This was enacted despite the fact that there was no evidence that unauthorized immigrants were accessing Medicaid.
- The [GAO](#) found that the verification requirements “cost significantly more to implement than they have saved in expenditures by excluding unauthorized immigrants from Medicaid coverage. For every \$100 spent by federal taxpayers to implement the new requirements in six states, only 14 cents in Medicaid savings can be documented.”
- In the six states surveyed, costs to taxpayers to implement the verification procedures totaled \$16.6 million—which only yielded eight unauthorized immigrants.
- The GAO also found that the verification requirements resulted in [U.S. citizens](#) being delayed or denied Medicaid because they could not provide the necessary documentation.

Unauthorized immigrants do not come to the U.S. for health care.

- [Surveys](#) have repeatedly found that unauthorized immigrants overwhelmingly come to the U.S. to work, not to receive services.

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Unauthorized immigrants do not game the system and receive health care for which they are not eligible.

- Unauthorized immigrants are [not eligible](#) for most publicly funded programs, including federal health care (Medicaid and Medicare).
- According to the [California Immigrant Policy Center](#), unauthorized immigrants are reluctant to access programs for which they are eligible because they fear that their lack of immigration status will be reported to authorities. Others do not use health services because of [language barriers](#), because they are confused over eligibility rules, or because they [fear losing a day's wages](#).
- Contrary to the myth that free clinics that serve unauthorized populations are overrun with immigrants seeking free care, interviews with [clinic staff](#) found that clinics have not been overwhelmed. One doctor said, “my concern is that needy people are not coming in.”

Noncitizens are significantly less likely to use emergency room services than U.S. citizens.

- Unauthorized immigrants are eligible for emergency care. Many assume that, because they are eligible, they use a large amount of costly emergency services. However, research shows that this is false.
- According to the [Kaiser Commission](#), even though noncitizens have poorer access to care and receive less primary care than citizens, they are less likely than citizens to use the emergency room. In 2006, 20% of U.S. citizen adults and 22% of U.S. citizen children had visited the emergency room within the past year. In contrast, 13% of noncitizen adults and 12% of noncitizen children had utilized emergency room care.
- A 2006 study published in *Health Affairs* journal found that communities with high rates of [emergency room usage](#) tend to have relatively small noncitizen populations. Cities with large immigrant populations such as Miami-Dade County, Florida and Phoenix, Arizona have much lower rates of emergency room use than areas with small immigrant populations such as Cleveland.

Ensuring that immigrants have the same access to essential services will improve public health and the well-being of all people living in the U.S., not just immigrants.

- The [Center for Science in the Public Interest](#) concluded that prevention can save on health care costs, stating that comprehensive prevention programs are the most economical way to maximize health and minimize costs.
- It is important that all people receive basic health care because immigrants are in our neighborhoods, our schools, and our churches. It is in the interest of public health that everyone receives basic immunizations and other basic care.