HEAL for Immigrant Women and Families Act

NFPRHA Supports H.R. 1974

Sponsored by Representative Michele Lujan Grisham (D-NM), the Health Equity & Access Under the Law (HEAL) for Immigrant Women and Families Act is designed to expand access to health coverage for immigrants by removing barriers to health coverage for lawfully present individuals and deferred action recipients.

What Does the Bill Do?

HEAL removes restrictions preventing immigrant access to federal health insurance coverage. This includes:

- Removing the five-year ban preventing lawfully present individuals from accessing coverage through Medicaid or the Children's Health Insurance Program (CHIP);
- Allowing deferred action recipients, including individuals granted Deferred Action for Childhood Arrivals (DACA), to obtain subsidized coverage through the Affordable Care Act’s exchanges; and
- Ensuring access to Medicaid and CHIP for eligible DACA recipients.

Why Do We Need HEAL?

Many immigrants and their families face barriers to health insurance coverage solely based on their immigration status. Immigrant women in particular tend to be disproportionately low-income, of reproductive age and lacking health insurance coverage. The legal barriers immigrant women face as a result of restricted access to health coverage and affordable care lead to higher risk of negative reproductive, sexual, and maternal health outcomes. For example, immigrant women disproportionately have higher rates of cervical cancer and related deaths, likely because they forego timely screenings. By removing restrictions to health insurance coverage, HEAL will ensure access to high-quality health care for immigrants.

NFPRHA Supports HEAL

- HEAL removes barriers restricting immigrant access to health services. Immigrants contribute to our health care system and economy as taxpayers and restrictions to health care contribute to negative health outcomes for immigrants and their families. NFPRHA supports providing access to family planning and sexual health care for all and believes that a person’s immigration status or ability to provide citizenship documentation should not have any impact on their ability to have timely access to affordable, confidential, high-quality family planning and sexual health services, supplies, and information.

Footnotes

2 Ibid.