

The Public Charge Rule's Chilling Effect on Public Benefits Utilization in 200 Words

[Health Equity](#)

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Image



A new [analysis](#) from the Urban Institute highlights the risk of the "[public charge](#)" rule to children and families, with immigrant families avoiding enrollment in public benefits [that are essential](#) to the development and long-term health of children. The analysis shows that 1 in 5 adults in immigrant families with children reported that they or a family member avoided a public benefit (e.g., the Supplemental Nutrition Assistance Program, Medicaid/CHIP, housing subsidies) in 2019 for fear of risking their future green card eligibility. This number was even higher—3 in 10—among adults in low-income immigrant families with children.

The analysis highlights the “chilling effect” of the [public charge rule](#) and the importance of better communication with immigrant communities about the rule’s parameters. While most immigrant families reported being aware of the public charge rule and confident in their understanding of it, nearly 4 in 5 adults did not understand that children’s Medicaid enrollment is *not* a factor in their parents’ public charge determination.

These new data are especially worrisome in the context of the COVID-19 pandemic and its associated economic consequences, increasing the importance of safety net programs. COVID-19 testing and treatment are excluded from consideration for future public charge determinations, but this is likely not well understood. If immigrant families avoid accessing care that they need for fear of reprisal, this could undermine the societal response to the pandemic.

This post is part of our “_____ in 200 Words” series. In this series, we tackle issues related to children’s health policy and explain and connect you to resources to help understand them further, all in 200 words. If you have any suggestions for a topic in this series, please send a note to PolicyLab’s Strategic Operations & Communications Director [Lauren Walens](#).



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