

Bruce

Elena

~~Cynthia~~

Steve

Jack

Ken

Barbara

Janet, Cynthia

~~20 people~~

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SPECIAL DCLCA D.C. TRANSMITTAL

DATE: 4/03/97 TIME: 11:11 AM

DELIVERED BY: FAX ☐ Shuttle ☐

Other _____

RESPONSE FROM JUDY NEEDED BY:

DATE: _____ TIME: _____

ATTN: Paulette/Regina

Please take the following action:

TO: JUDY L. CHESSER**THRU:** Diane B. Garro _____
David Warner _____**FROM:** David Mattson *DM*
Analyst: Bobbie Walsh, (410) 965-3535**SUBJECT:** Questions and Answers From Diana Fortuna-ACTION**REMARKS:** We have reviewed and marked-up the subject package of Qs&As from Diana Fortuna.**DECISION NEEDED:**

Approve: _____ Disapprove: _____ Date: _____

COMMENTS FROM JUDY:

cc Cynthia - Return to Diana Fortuna
I'll enter these charges. FYI.
They also want to
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why not elderly +
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COST OF IMMIGRANT PROPOSALS

QUESTION:

How much does your Budget spend on giving immigrants welfare benefits?

ANSWER:

- ▶ The President's Budget assists those legal immigrants who, through no fault of their own, are unable to work: children and individuals who are disabled.
- ▶ The President's immigrant proposals total \$14.6 billion over five years FY 1998-2002, \$4.9 billion are Medicaid costs (see attached table). The President's budget seeks to:
 - ▶ Restore SSI and Medicaid eligibility for the disabled immigrants (\$13.7 billion SSI and Medicaid costs). The welfare law would discontinue SSI and restrict Medicaid benefits for legal immigrants including the disabled and children. The President's budget would continue to provide SSI and Medicaid for 320,000 legal immigrants who become disabled after they enter the country and exempt them from the deeming rules.
 - ▶ Restore Medicaid eligibility for non-SSI immigrant children (\$.2 billion Medicaid costs only). The Administration's budget would continue Medicaid for approximately 30,000 immigrant children, if they are otherwise eligible, and exempt them from the deeming rules.
 - ▶ Extend the refugee assistance exemption period from 5 to 7 years (\$0.7 billion SSI and Medicaid costs). The President's budget would lengthen the exemption period for refugees and asylees from 5 to 7 years. The 5 year exemption in the welfare law does not provide enough time for refugees and asylees to become citizens.
 - ▶ Delay the Food Stamp ban until the end of FY 1997 (\$0.2 billion - the cost of this proposal is not included in the overall immigrant proposal cost since the costs are incurred in FY 1997) . The welfare law denies Food Stamps to most legal immigrants currently receiving benefits and future applicants, affecting a million immigrants. Last year's Omnibus Consolidated Appropriations Act delayed the ban from January 1, 1997 to April 1, 1997 to give immigrants in the process of naturalizing more time to complete the process prior to having their benefits eliminated. Recognizing the effort that many are making to become citizens, this proposal would extend the delay to the end of FY 1997.

UNDERMINING WELFARE REFORM – PROTECTING LEGAL IMMIGRANTS

QUESTION:

Aren't you opening up the welfare reform bill with your immigrant proposals?

ANSWER:

- ▶ *NO*
- ▶ The President ~~is~~^s remain^s firmly committed to implementing the welfare reforms enacted last year.
- ▶ But the immigrant restrictions of the new welfare law ~~had~~^{has} nothing to do with the central goal of welfare reform – moving welfare recipients from welfare to work. This is not an effort to “open up” welfare reform, it is an effort to restore benefits cuts that were attached to welfare reform and shouldn't have been part of the bill to begin with.
- ▶ Legal immigrants work hard, pay taxes and contribute to American society. Immigrant children and disabled immigrants who fall on hard times through no fault of their own should get medical and other vital assistance when they need it.

Welfare Reform
was about putting
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These people – children
and the disabled –
can't work.

NGA PROPOSALS AND IMMIGRANTS

QUESTION:

The Governors asked the Administration to work with them and the Congress to "meet the needs of aged and disabled legal immigrants who cannot naturalize," but specifically stated we did not need to reopen welfare reform to do it. Why then does the Administration propose to reopen welfare reform and make costly changes that would give welfare to immigrants?

ANSWER:

- ▶ *The Administration's proposals do not reopen welfare reform. Welfare reform was about putting people to work. Those people -*
- ▶ The Administration is committed firmly to the major reform of welfare enacted last year.
- ▶ But the immigrant restrictions of the new welfare law had nothing to do with the central goal of welfare reform—moving welfare recipients from welfare to work. This is not an effort to "open up" welfare reform, it is an effort to restore benefits cuts that shouldn't have been in the welfare bill to begin with. ✓
- ▶ Legal immigrants work hard, pay taxes and contribute to American society. Immigrant children and disabled immigrants who fall on hard times through no fault of their own should get medical and other vital assistance when they need it.
- ▶ The Administration's immigrant proposals are responsive to the concerns noted by the Governors and we welcome the opportunity to work with them and the Congress to rectify some of the unfair burdens placed on immigrants.
- ▶ Our budget addresses the needs of immigrants disabled after entry by reinstating their eligibility for SSI and Medicaid; exempts all legal immigrant children from eligibility restrictions; extends SSI and Medicaid eligibility for refugees from 5 to 7 years; and delays the Food Stamps cut-off until the end of the FY 1997.
- ▶ These proposals would restore aid to these most vulnerable people who need assistance through no fault of their own. ✓
- ▶ In addition, our proposal is responsive to the NGA statement that the immigrant provisions represent a considerable cost shift to state and local governments. ~~These provisions~~ reduce the burden on states and local governments. *The Administration's proposals*

children and the disabled - can't work.

IS THERE A TANF SURPLUS?

QUESTION: Won't surpluses from TANF be sufficient to allow states to provide benefits to legal immigrants?

ANSWER: • NO

- It's not a surplus. TANF block grant levels are held flat based on state AFDC, JOBS, and Emergency Assistance spending during 1992-1995. Because AFDC caseloads have gone down, we can expect that the cost to states of AFDC-type *benefit* payments over the next few years should be lower than they were in 1992-1995. However, the funds are needed to support the transition from welfare to work.

When TANF was established, the states and the Congress realized that, as compared to the AFDC system, more funds would be needed in the early years to move families from welfare to work. Because of the recent decline in AFDC caseloads, states are in an especially good position to begin the historic transformation from the welfare program to a jobs program.

This is because any decrease in the total amounts states spend on direct benefits will help states meet critical needs and afford the increased costs of providing training, child care, creating jobs in high-unemployment areas, and other assistance needed to support the transition from welfare to work. Therefore, moving recipients into the workforce will not produce short-term savings.

keep together FY While the block grant levels for each state do not increase from FY 1997 through ~~EX~~ 2000, required work participation rates increase from 25 to 50 percent, and required hours of work per week increase from 20 to 30 over that time period. There will be increased child care costs associated with these requirements. In addition, inflation will raise costs for services and may lead to increased nominal per-capita benefit costs. Finally, if there is a recession, we can expect that the pool of families needing TANF assistance will increase.

- This is ~~only~~ the beginning of welfare reform. To fulfill the central goal of welfare reform, ~~moving people from welfare to work~~, we must make sure that the tools to achieve it are available to states and communities. States will have to use their financial resources to provide supports like job training and child care necessary to move large numbers of single parents from welfare to work. And it will require an unprecedented commitment from business, non-profit organizations, and religious institutions. That's why the President's budget includes over \$3 billion for grants, as well as expanded tax incentives, to support states, cities, and the private sector in creating job opportunities for the hardest to employ welfare recipients. In fact, Republicans and Democrats in Congress have agreed that one of the five priority areas of bipartisan discussion in the budget will be incentives for business to hire welfare recipients.

perhaps delete -
This
It isn't
about
non citizens
& essentially
repeats
the argument
above.

- Cuts in assistance to legal immigrants are a cost-shift to states. As the National Governors Association has said, the welfare reform restrictions on federal assistance to legal immigrants is a considerable cost-shift to states. If states divert financial resources

to legal immigrants, they may not have sufficient resources for job training and child care necessary to move large numbers of parents from welfare to work.

- Even under the old system, benefits are only part of the equation. The TANF block grant combined funds for AFDC benefits with JOBS funds, Emergency Assistance funds, and funds for administration. Although AFDC benefit expenditures have declined, funds for other activities, such as Emergency Assistance, have increased substantially. Therefore, the effect of flat-funding TANF at 92-95 levels only provides unanticipated funds under one part of the equation, ~~benefit payments~~. *Increased expenditures for other activities have to be paid from the TANF block grant.* ? expenditures?
- Different states are in very different situations. Some states have especially great needs for services, or smaller reductions in caseloads, or other special circumstances like areas of rural poverty which might need greater investments in economic development or transportation. Similarly, about 80 percent of all legal immigrants reside in only six states--CA, NY, TX, FL, NJ, and IL. That's why some Governors like Governors Pataki, Bush, and Chiles have been so clear about the need for additional resources. In addition, because the decline in AFDC caseloads since 1995 has not been uniform across states, the financial impact of TANF will vary considerably across states.

After caseload decline, many hard-to-place recipients remain on the rolls. Now that caseloads are down, states are likely to find that they are now reaching the harder to place people, which will lead to increased costs. The legislation says this is a critical investment for us to make--we need to expect work, and we need to provide the supports necessary for families to move from welfare to work.

This bullet should be moved ahead of those relating to noncitizens.

MAKING SPONSORS RESPONSIBLE

QUESTION: Why shouldn't these immigrants--disabled and children--be taken care of by the sponsors who agreed to take care of them?

ANSWER:

- We agree that sponsors need to be held responsible and accountable.
- However, welfare reform makes most legal immigrants ineligible for SSI and Food Stamp assistance, even those who have never had sponsors or whose sponsors have died.
- In fact, recent INS estimates of all FY 1994 non-refugee immigrants found that nearly half--or 44 percent--did not have sponsors.
- Also, sponsors of immigrants who arrived before welfare reform signed affidavits of support that are not legally binding and therefore do not obligate them to provide support or to reimburse for public assistance.
- The new law requires all family-based, and some employment-based, immigrants to have legally binding affidavits of support (which will be available in May 1997).
- Our proposal would exempt from these harsh new rules only those legal immigrants who become disabled after entry into the U.S. or legal immigrant children.
- Sponsors of legal immigrants who become disabled after entry have no possible way of planning for the costly care that results from a severe disability.
- We think it is unfair to impoverish such sponsors beyond regular program requirements for family income, or to withdraw assistance from disabled immigrants who have never had sponsors.
- Under the new deeming rules, not only must sponsors impoverish themselves so that immigrant family members are eligible for SSI and Medicaid assistance, but they are also liable to repay the amount of assistance received by such family members when these rules have made them least able to make repayments.
- Similarly, sponsors of immigrant children--like many working parents both citizens and legal immigrants--have difficulty maintaining affordable health insurance and will be overwhelmed by health care expenses arising from severe illnesses or injuries suffered by their children (for example, children who suffer from leukemia or serious head injuries).
- Denying Medicaid to legal immigrant children whose families have fallen on hard times threatens the health and well-being of an extremely vulnerable population, and likely leads to more costly health care in the future.

STATE AND LOCAL IMPACTS OF NEW IMMIGRANT RESTRICTIONS**QUESTION:**

What is the impact of the new immigrant eligibility restrictions on state and local governments and other service providers?

ANSWER:

- ▶ Similar to other estimates in this area, it is difficult to predict with any precision.
- ▶ However, CBO estimated total federal budget savings (through FY 2002) of nearly \$24 billion from the passage of welfare reform, and state and local governments will now have to decide how much of their own assistance they will provide to legal immigrants in order to replace this huge withdrawal of federal assistance.
- ▶ Even though states and localities are provided options to deny various assistance to legal immigrants similar to that enacted for federal programs, it is unclear whether they will take such a course. Many of the legal immigrants are likely to remain residents of the state and denying them fundamental safety net assistance will merely result in other costs such as increased public health threats, increased homelessness and hunger, etc.
- ▶ States (and localities) with large immigrant populations will be affected disproportionately by the new restrictions (e.g., California, New York, Texas, Florida, Illinois, New Jersey, and Massachusetts).
- ▶ Therefore, these provisions represent a significant cost-shift from the federal government to state and local governments.
- ▶ The Medicaid restrictions in particular, but also the SSI restrictions, could adversely affect the revenues of hospitals and other health providers (such as nursing homes and doctors) in high-immigrant communities.

REFUGEE ELIGIBILITY EXTENSION

QUESTION:

What accounts for the high welfare utilization rates among refugees?

ANSWER:

- ▶ By definition, refugees and asylees are individuals who come to our country to escape persecution in their country of origin. These individuals have generally experienced war or other violent trauma and often need more time to put their lives together and become self-supporting than other legal immigrants.
- ▶ About one-half of refugees speak little or no English at arrival; only about one-tenth speak English fluently.
- ▶ Therefore, we believe refugees and asylees need a longer eligibility period for assistance than other qualified aliens because of the unique circumstances that bring refugees and asylees to the U.S.
- ▶ Specifically, refugees and asylees need an additional two years to address their special needs and to provide sufficient time to enable them to achieve stable self-support. The President's budget proposal would extend refugees' eligibility for SSI and Medicaid benefits from 5 to 7 years.
- ▶ The longer time period is particularly important because more recent refugee populations have included larger numbers of older and elderly individuals who require a longer time to adjust.
- ▶ Finally, refugees are not even eligible to apply for naturalization until they are near the end of their 5 years residence. Since the processing time for naturalization applications is now about 1 year, this extension from 5 to 7 years is necessary to physically permit refugees to comply with INS procedures without being denied crucial services during the interim.

CUBAN/HAITIAN ENTRANTS

QUESTION:

Are Cuban/Haitian entrants eligible for assistance under the new welfare reform rules?

ANSWER:

- They are specifically eligible for the special refugee assistance programs under the Office of Refugee Resettlement.
- Even though Cuban/Haitian entrant status is not specifically included in the list of immigration categories which define who is a "qualified alien", most entrants have been given parole status for a period of at least 1 year or legal permanent resident status which does make them qualified aliens.
- If entrants are qualified aliens, they would be treated the same as other qualified aliens under the state eligibility options in TANF and Medicaid (if they entered the U.S. before enactment of the welfare law in August 1996), or denied TANF and Medicaid for 5 years after entry (if they entered after enactment in August 1996).
- Under welfare reform, Cuban/Haitian entrants are not specifically exempted from eligibility restrictions as refugees are.

Background

Under ^a bilateral agreement between ^{the} U.S. and Cuba it is estimated that about 20,000 Cubans will be allowed to enter the U.S. annually, the majority of whom will be parolees or legal permanent residents (i.e., qualified aliens), with an estimated 6,000-7,000 likely to be refugees.

IMMIGRANTS WHO LOSE SSI-EFFECT ON MEDICAID ELIGIBILITY

QUESTION:

Do immigrants who lose SSI lose Medicaid as well?

ANSWER:

- ▶ Not necessarily. The welfare bill specifically cuts off SSI cash assistance to qualified immigrants. The question of which immigrants retain Medicaid eligibility is a complicated one, because of the considerable variation that exists in Medicaid programs across the States, Territories, and the District of Columbia.
- ▶ In most states, receipt of SSI automatically makes an individual eligible for Medicaid. Therefore immigrants who lose their SSI and are not otherwise eligible for Medicaid under an optional eligibility category, may lose their Medicaid coverage.
- ▶ However, many states have optional eligibility categories to cover immigrants who lose their SSI. Specifically some states can cover individuals who meet SSI criteria but are not actually receiving cash assistance. In addition, some states can cover immigrants if they have a medically needy program.
- ▶ States that have a medically needy category and no other optional eligibility category may face difficulties in covering immigrants who lose SSI due to current Medicaid eligibility rules.¹ We realize that the medically needy rules pose a problem for some states and are exploring both administrative and legislative possibilities to give states the most flexibility to cover immigrants.
- ▶ Thus, whether or not an immigrant can continue to receive Medicaid coverage after they lose their SSI depends on what other optional eligibility categories each state covers for Medicaid.
- ▶ Immigrants in states that do not have an optional eligibility category may lose their Medicaid when they lose their SSI cash assistance.² We are exploring both administrative and legislative possibilities to give states the most flexibility to cover immigrants.
- ▶ As always, states can amend their plan to include this option, but coverage would be expanded to all individuals meeting the criteria, not just legal immigrants.
- ▶ Of course, all states have the option to decide not to offer Medicaid to qualified immigrants.

¹Arkansas, California, Georgia, Kansas, Kentucky, North Carolina, Wisconsin, and Illinois.

²Alabama, Delaware, Louisiana, Nevada, New Mexico, Texas, Wyoming, and South Dakota.

STATE AND LOCAL IMPACTS OF NEW IMMIGRANT RESTRICTIONS

QUESTION:

What is the impact of the new immigrant eligibility restrictions on state and local governments and other service providers?

ANSWER:

- ▶ It is difficult to predict with any precision. However, CBO estimated total federal budget savings (through FY 2002) of nearly \$24 billion from the passage of these provisions of welfare reform, and state and local governments will now have to decide how much of their own assistance they will provide to legal immigrants in order to replace this huge withdrawal of federal assistance.
- ▶ Even though states and localities are provided options to deny various assistance to legal immigrants similar to that enacted for federal programs, it is unclear whether they will take such a course. Many of the legal immigrants are likely to remain residents of the state and denying them fundamental safety net assistance will merely result in other costs such as increased public health threats, increased homelessness and hunger, etc. Some states have constitutions that would require state and local governments to provide assistance.
- ▶ States (and localities) with large immigrant populations will be affected disproportionately by the new restrictions (e.g., California, New York, Texas, Florida, Illinois, New Jersey, and Massachusetts).
- ▶ Therefore, these provisions represent a significant cost-shift from the federal government to state and local governments.
- ▶ The Medicaid restrictions in particular, but also the SSI restrictions, could adversely affect the revenues of hospitals and other health providers (such as nursing homes and doctors) in high-immigrant communities.

NGA PROPOSAL AND IMMIGRANTS

QUESTION:

The Governors asked the Administration to work with them and the Congress to “meet the needs of aged and disabled legal immigrants who cannot naturalize,” but specifically stated we did not need to reopen welfare reform to do it. Why then does the Administration propose to reopen welfare reform and make costly changes that would give welfare to immigrants?

ANSWER:

- ▶ The Administration is firmly committed to the major reform of welfare the President signed into law last year.
- ▶ But the immigrant restrictions of the new welfare law had nothing to do with the central goal of welfare reform -- moving welfare recipients from welfare to work. This is **not** an effort to “open up” welfare reform, it is an effort to restore benefit cuts that should not have been in the welfare bill to begin with.
- ▶ Legal immigrants work hard, pay taxes and contribute to American society. Immigrant children and disabled immigrants who fall on hard times through no fault of their own should get medical and other vital assistance when they need it.
- ▶ The Administration’s immigrant proposals are responsive to the concerns noted by the Governors and we welcome the opportunity to work with them and the Congress to rectify some of the unfair burdens placed on immigrants and the communities they live in.
- ▶ Our budget addresses the needs of immigrants disabled after entry by reinstating their eligibility for SSI and Medicaid; exempts all legal immigrant children from SSI and Medicaid eligibility restrictions; extends SSI and Medicaid eligibility for refugees from 5 to 7 years; and delays the Food Stamps cut-off until the end of the FY 1997.
- ▶ These proposals would restore aid to these most vulnerable people who need assistance through no fault of their own.
- ▶ In addition, our proposal is responsive to the NGA statement that the immigrant provisions represent a considerable cost shift to state and local governments. These provisions significantly reduce the burden on state and local governments.

UNDERMINING WELFARE REFORM -- PROTECTING LEGAL IMMIGRANTS

QUESTION:

Aren't you opening up the welfare reform bill with your immigrant proposals?

ANSWER:

- ▶ The President remains firmly committed to implementing the welfare reforms he signed into law last year.
- ▶ But the immigrant restrictions of the new welfare law never had anything to do with the central goal of welfare reform --moving welfare recipients from welfare to work. This is **not** an effort to "open up" welfare reform, but an effort to restore benefit cuts that were attached to welfare reform for budgetary reasons and shouldn't have been part of the bill to begin with.
- ▶ Legal immigrants work hard, pay taxes and contribute to American society. Immigrant children and disabled immigrants who fall on hard times through no fault of their own should get medical and other vital assistance when they need it.

IS THERE A TANF SURPLUS?

QUESTION: Won't surpluses from TANF be sufficient to allow states to provide benefits to legal immigrants?

ANSWER:

- **It's not a surplus.** TANF block grant levels are held flat based on state AFDC, JOBS, and Emergency Assistance spending during 1992-1995. Because AFDC caseloads have gone down, we can expect that the cost to states of AFDC-type *benefit* payments over the next few years should be lower than they were in 1992-1995. However, the funds are needed to support the transition from welfare to work.

When TANF was established, the states and the Congress realized that, as compared to the AFDC system, more funds would be needed in the early years to move families from welfare to work. Because of the recent decline in AFDC caseloads, states are in an especially good position to begin the historic transformation from a welfare program to a jobs program.

This is because any decrease in the total amounts states spend on direct benefits will help states meet critical needs and afford the increased costs of providing training, child care, creating jobs in high-unemployment areas, and other assistance needed to support the transition from welfare to work. Therefore, moving recipients into the workforce will not produce short-term savings.

While the block grant levels for each state do not increase from FY 1997 through FY 2000, required work participation rates increase from 25 to 50 percent, and required hours of work per week increase from 20 to 30 over that time period. There will be increased child care costs associated with these requirements. In addition, inflation will raise costs for services and may lead to increased nominal per-capita benefit costs. Finally, if there is a recession, we can expect that the pool of families needing TANF assistance will increase.

- **This is only the beginning of welfare reform.** To fulfill the central goal of welfare reform -- moving people from welfare to work -- we must make sure that the tools to achieve it are available to states and communities. States will have to use their financial resources to provide supports like job training and child care necessary to move large numbers of single parents from welfare to work. And it will require an unprecedented commitment from business, non-profit organizations, and religious institutions. That's why the President's budget includes over \$3 billion for grants, as well as expanded tax incentives, to support states, cities, and the private sector in creating job opportunities for the hardest to employ welfare recipients. In fact, Republicans and Democrats in Congress have made this a priority area for bipartisan discussion on the budget.
- **Cuts in assistance to legal immigrants are a cost-shift to states.** As the National Governors Association has said, the welfare reform restrictions on federal assistance to legal immigrants is a considerable cost-shift to states. If states divert financial resources to legal immigrants, they may not have sufficient resources for job training and child care necessary to move large numbers of parents from welfare to work.

- **Even under the old system, benefits are only part of the equation.** The TANF block grant combined funds for AFDC benefits with JOBS funds, Emergency Assistance funds, and funds for administration. Although AFDC benefit expenditures have declined, funds for other activities, such as Emergency Assistance, have increased substantially. Therefore, the effect of flat-funding TANF at 92-95 levels only provides unanticipated funds under one part of the equation -- benefit payments.
- **Different states are in very different situations.** Some states have especially great needs for services, or smaller reductions in caseloads, or other special circumstances like areas of rural poverty which might need greater investments in economic development or transportation. Similarly, about 80 percent of all legal immigrants reside in only six states -- CA, NY, TX, FL, NJ, and IL. That's why some Governors like Governors Pataki, Bush, and Chiles have been so clear about the need for additional resources. In addition, because the decline in AFDC caseloads since 1995 has not been uniform across states, the financial impact of TANF will vary considerably across states.
- **After caseload decline, many hard-to-place recipients remain on the rolls.** Now that caseloads are down, states are likely to find that they are now reaching the harder to place people, which will lead to increased costs. The legislation says this is a critical investment for us to make -- we need to expect work, and we need to provide the supports necessary for families to move from welfare to work.

WHY NOT A BLOCK GRANT

QUESTION:

Why not just establish a block grant to the States to assist them in providing services to those legal immigrants who lose SSI?

ANSWER:

- There is no infrastructure in place at the state level to deliver income support to the disabled population. In many states, it is local government that directly provides health care to the indigent.
- Charity organizations may become these immigrants' only source of income support. Under a block grant that provides funds to State governments, it is not clear how the funds would reach those private organizations that actually provide the services.
- The history of using block grants to provide services to immigrants is discouraging. It has been attempted before without good results. The block grant created by the 1986 immigration reform law was the State Legalization Impact Assistance Grants (SLIAG) program, and it proved to be an inefficient method of assisting the States and very difficult for them to manage. In addition, although SLIAG was federally funded, its appropriation in the third year was reduced by almost two-thirds to support discretionary spending elsewhere. By the fifth year, SLIAG funding was reduced to zero.
- A block grant of the size being discussed (\$2-3 billion) would meet only a small fraction of the need. Such a small block grant would either be concentrated in a few areas, leaving many communities unassisted, or it would be spread so thin that heavily affected areas would receive only a tiny fraction of the help they need.
- It appears that any new block grant would be only temporary, i.e., for two or three years. This will just leave those legal immigrants that a block grant is able to reach without support two years from now.
- The best solution is to retain eligibility for the most vulnerable immigrants -- those legal immigrants who become disabled after entering the United States, refugees, and immigrant children -- within the existing Federal social safety net.

MAKING SPONSORS RESPONSIBLE

QUESTION: Why shouldn't immigrants be taken care of by the sponsors who agreed to take care of them?

ANSWER:

- We agree that sponsors need to be held responsible and accountable. That's why we support the new law requiring all family-based and some employment-based immigrants to have legally binding affidavits of support.
- However, nearly all legal immigrants now in the U.S. either have no sponsors or have sponsors who are not legally obliged to support them.
- Recent INS estimates of all FY 1994 non-refugee immigrants found that nearly half--or 44 percent--did not have sponsors.
- Also, sponsors of immigrants who arrived before welfare reform signed affidavits of support that are not legally binding and therefore do not obligate them to provide support or to reimburse for public assistance.
- Our proposal would exempt from these harsh new rules only those legal immigrants who become disabled after entry into the U.S. or legal immigrant children. Sponsors of legal immigrants who become disabled after entry have no possible way of planning for the costly care that results from an unforeseen severe disability.
- We think it is unfair to impoverish such sponsors beyond regular program requirements for family income, or to withdraw assistance from disabled immigrants who have never had sponsors.
- Under the new deeming rules, not only must sponsors impoverish themselves so that immigrant family members are eligible for SSI and Medicaid assistance, but they are also liable to repay the amount of assistance received by such family members when these rules have made them least able to make repayments.
- Similarly, sponsors of immigrant children--like many working parents, both citizens and legal immigrants--have difficulty affording health insurance and would be overwhelmed by health care expenses arising from severe illnesses or injuries suffered by their children (for example, children who suffer from leukemia or serious head injuries).
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COST OF IMMIGRANT PROPOSALS

QUESTION:

How much does your Budget spend on restoring welfare benefits to legal immigrants?

ANSWER:

- ▶ The President's Budget assists those legal immigrants who, through no fault of their own, are unable to work: children and individuals who are disabled.
- ▶ The President's immigrant proposals total \$14.6 billion over five years FY 1998-2002, \$4.9 billion are Medicaid costs. The President's budget seeks to:
- ▶ **Restore SSI and Medicaid eligibility for disabled immigrants (\$13.7 billion SSI and Medicaid costs).** The welfare law would discontinue SSI and restrict Medicaid benefits for legal immigrants, including the disabled and children. The President's budget would continue to provide SSI and Medicaid for 320,000 legal immigrants who become disabled after they enter the country and exempt them from the new deeming rules.
- ▶ **Restore Medicaid eligibility for non-SSI immigrant children (\$2 billion Medicaid costs only).** The Administration's budget would restore Medicaid eligibility to approximately 30,000 immigrant children, if they are otherwise eligible, and exempt them from the new deeming rules.
- ▶ **Extend the refugee exemption period from 5 to 7 years (\$0.7 billion SSI and Medicaid costs).** The President's budget would lengthen the exemption period for refugees and asylees from 5 to 7 years. The 5 year exemption in the welfare law does not provide enough time for refugees and asylees to become citizens.
- ▶ **Delay the Food Stamp ban until the end of FY 1997 (\$0.2 billion - these costs are incurred in FY 1997) .** The welfare law denies Food Stamps to most legal immigrants currently receiving benefits and future applicants, affecting a million immigrants. Last year's Omnibus Consolidated Appropriations Act delayed the ban from January 1, 1997 to April 1, 1997 to give immigrants in the process of naturalizing more time to complete the process prior to having their benefits eliminated. Recognizing the effort that many are making to become citizens, this proposal would further extend the delay to the end of FY 1997.

WHY NOT ALL ELDERLY

QUESTION:

Why didn't the Administration request reinstatement of eligibility for all elderly non-citizens?

ANSWER:

- Within the context of balancing the federal budget by FY2002, the Administration proposal targets the most vulnerable legal immigrants affected by welfare reform -- disabled adults, including the elderly, and children -- and reinstates their SSI and Medicaid eligibility.
- Under the Administration plan, all legal immigrants over the age of 65 who are disabled will qualify for benefits -- including the majority of the elderly on SSI.

INCREASE OF NON-CITIZENS ON SSI ROLLS

QUESTION:

What explains the increase in the number of non-citizens on the SSI rolls?

ANSWER:

The number of non-citizens on the SSI rolls has increased along with the number of legal immigrants admitted into the United States. Since 1980, the percentage of foreign born persons living in the U.S. has grown from slightly less than 4 percent of the U.S. population to over 9 percent of the U.S. population, according to the Bureau of the Census.

Given the increase in immigration, it is not surprising that there has been an increase in the numbers of non-citizens on the SSI rolls over the past 13 years. However, the number remains a small percentage of the total SSI rolls, rising from 3 percent in 1982 to a little over 12 percent in 1995.

Statistically, the largest increase in noncitizen participation has been seen in the aged recipient population. But this increase should be viewed in the same context. Over this same 13-year period, the number of aged citizen recipients has been declining, because most citizens aged 65 and older now receive Social Security benefits that are large enough to preclude SSI eligibility. Participation of aged citizens has dropped from almost 1.5 million in 1982 to a little over 987,000 in 1995, a decline of 32 percent. Therefore, the increase in the percentage of aged noncitizens on SSI is due both to the decrease in the number of citizen aged, as well as to the increase in the number of noncitizen aged.

In addition, the number of aged non-citizens newly awarded benefits each year has declined from about 73,000 in 1993 to just a little over 46,000 in 1995, a decline of 37 percent.

REFUGEE ELIGIBILITY EXTENSION

QUESTION:

What accounts for the high welfare utilization rates among refugees?

ANSWER:

- ▶ By definition, refugees and asylees are individuals who come to our country to escape persecution in their country of origin. These individuals have generally experienced war or other violent trauma requiring medical and income assistance. They often need more time to put their lives together and become self-supporting than other legal immigrants.
- ▶ About one-half of refugees speak little or no English at arrival; only about one-tenth speak English fluently.
- ▶ Therefore, we believe refugees and asylees need a longer eligibility period for assistance than other qualified aliens because of the unique circumstances that bring refugees and asylees to the U.S.
- ▶ Under the President's proposal, refugees and asylees would get an additional two years of eligibility, to provide additional time to enable them to naturalize or to achieve stable self-support. The President's budget proposal would extend refugees' eligibility for SSI and Medicaid benefits from 5 to 7 years.
- ▶ The longer time period is particularly important because more recent refugee populations have included larger numbers of older and elderly individuals who require a longer time to adjust.
- ▶ Finally, refugees are not even eligible to apply for naturalization until they are near the end of their 5 years residence. Since the processing time for naturalization applications is now about 1 year, this extension from 5 to 7 years is necessary to physically permit refugees to comply with INS procedures without being denied crucial services during the interim.

TREATING LEGAL IMMIGRANTS FAIRLY: SUMMARY

"We must join together to do something else, too, something both Republican and Democratic Governors have asked us to do: to restore basic health and disability benefits when misfortune strikes immigrants who came to this country legally, who work hard, pay taxes and obey the law. To do otherwise is simply unworthy of a great nation of immigrants."

-President Clinton, 1997 State of the Union.

Restoring fair treatment for legal immigrants is a key part of the President's agenda this year.

The President's budget proposal makes good on his promise to correct the welfare law's harsh provisions on legal immigrants -- provisions that punish children and legal immigrants with severe disabilities, and burden State and local governments. The welfare law denies most legal immigrants access to fundamental safety net programs unless they become citizens -- even though they are in the U.S. legally, are responsible members of our communities, and in many cases have worked and paid taxes. These provisions have nothing to do with the real goal of welfare reform, which is to move people from welfare to work.

- The President's budget proposes to restore Supplemental Security Income (SSI) and Medicaid to legal immigrants who become disabled after they entered the country and to legal immigrant children. This country should protect legal immigrants and their families -- people admitted as permanent members of the American community -- when they suffer accidents or illnesses that prevent them from earning a living. Similarly, the country should provide Medicaid to legal immigrant children if their families are impoverished.
- The President proposes to extend the SSI and Medicaid eligibility period for refugees and asylees from 5 to 7 years, to give that vulnerable group additional time to naturalize.
- Finally, the budget proposes to delay the ban on Food Stamps for legal immigrants from April to September 1997 to provide more time for immigrants who are in the process of naturalizing to complete the process.

The President's proposal would reinstate SSI eligibility for approximately 320,000 severely disabled legal immigrants. Of these 320,000 immigrants, the budget restores Medicaid coverage to 195,000 disabled legal immigrants. In addition, the proposal restores Medicaid coverage to about 30,000 non-disabled legal immigrant children. The cost of these immigrant proposals is \$14.6 billion over 5 years -- \$9.7 billion in SSI costs, and \$4.9 billion in Medicaid costs.

In January, the National Governors' Association agreed that the legal immigrant provisions of the welfare law will cause a considerable cost shift to some states and expressed concerns about the effect of the law on aged and disabled legal immigrants. Providing state-funded benefits to this needy population will divert resources from job training and child care -- which are critical to moving people from welfare to work. The NGA passed a resolution asking Congress and the President to work together to find an equitable solution for states and vulnerable legal immigrants without reopening the welfare reform debate. The President's proposal would do just that.

TREATING LEGAL IMMIGRANTS FAIRLY: RESTORING BENEFITS FOR LEGAL IMMIGRANTS WITH SEVERE DISABILITIES

The President's budget would restore SSI benefits for 312,000 legal immigrant adults who become disabled after their entry into the U.S., in recognition of the fact that they cannot provide for their own support through work. Of those 312,000 legal immigrant adults, approximately 195,000 adults would have Medicaid coverage restored.

Denying SSI eligibility to aged and disabled legal immigrants has nothing to do with welfare reform. Barring legal immigrants who played by the rules and entered the country according to our laws from programs available to all other taxpayers is unfair and shortsighted.

- Approximately 900,000 SSI recipients are now receiving notices that they are at risk of losing their benefits, unless they can show that they are citizens or are in one of a narrow group of exceptions. Under current law, over 400,000 legal immigrants will lose their SSI benefits in August and September of this year.
- Disabled legal immigrants who have sponsors can turn to them for assistance, but many sponsors can't afford the extra costs associated with a disability. In addition, an estimated 44% of legal immigrants, such as refugees, never had sponsors in the first place. Others had sponsors who have died or ceased to support them.
- Many disabled legal immigrants are elderly and reside in nursing homes or assisted living facilities. Without SSI cash assistance, they may face eviction from assisted living arrangements. About 39,000 legal immigrants are in nursing homes and a large number have difficulties with the activities of daily living.
- Nearly 70% of legal immigrants on SSI are over age 65; nearly 30% are over 75 years of age.
- Without SSI payments, state and local governments and private charities will become the prime source of assistance to legal immigrants with severe disabilities.
- In addition, under current state Medicaid plans, it appears that some states may have no provision to continue Medicaid coverage for legal immigrants who lose their SSI. In some states, disabled recipients who lose their SSI may also be without any help for medical expenses.

TREATING LEGAL IMMIGRANTS FAIRLY: PROTECTION FOR LEGAL IMMIGRANT CHILDREN

The President proposes to restore SSI and Medicaid for legal immigrant children.

- The welfare reform law denies SSI and Medicaid to many legal immigrant children who become seriously ill, or have an accident and become disabled, and whose families fall on hard times. It also denies preventive services under Medicaid to legal immigrant children, likely leading to more costly health problems in the future. This policy threatens the health and well-being of a very vulnerable population -- legal immigrant children of low-income parents who need medical services or cash assistance (if disabled), and cannot work their way out of need. We all lose if we deny future citizens the care and support that all children need.
- Under the President's proposal, legal immigrant children would continue to be eligible for SSI and Medicaid. In FY 1998, this proposal would protect SSI and Medicaid eligibility for about 8,000 disabled legal immigrant children, and ensure medical care for about another 30,000 non-disabled children. Existing program income eligibility rules are not affected; only legal immigrant children who are members of low-income families would be eligible for the restored SSI and Medicaid.
- The President's proposal does not undermine or "reopen" welfare reform. The welfare reform provisions denying assistance to legal immigrant children have nothing to do with the central goal of welfare reform: moving people from welfare to work. Instead, the President's proposal protects access to health care for vulnerable low-income children who are permanent members of this nation's communities, cannot work, and do not have any other means of health care. It also protects cash assistance for low-income immigrant children with severe disabilities.
- It is important to note that legal immigrant children cannot become naturalized citizens unless both parents are citizens, or the surviving or custodial parent is a citizen. Therefore, unlike adult legal immigrants, children immigrants do not have an independent avenue to naturalization. For example, orphaned immigrant children must be adopted by a U.S. citizen in order to be classified as a citizen.
- The SSI and Medicaid costs associated with these immigrant children are about \$400 million over 5 years. This policy will ensure that low-income immigrant families with severely disabled immigrant children continue to have a safety net of SSI and Medicaid. It also guarantees that non-disabled legal immigrant children are protected by the Medicaid benefit package, which provides on-going assistance for children suffering from chronic asthma, screening for developmental disabilities, and well-child and preventive care to prevent the need for intensive and costly care in the future.

TREATING LEGAL IMMIGRANTS FAIRLY: EXTENDING ELIGIBILITY FOR REFUGEES

- As a nation of immigrants, this country has a long-standing policy of welcoming to this country refugees and asylees who are fleeing persecution in their home country, and helping them resettle in their new home.
- Under the welfare law, refugees and asylees are exempt from SSI and Medicaid eligibility restrictions for the first 5 years that they are in the U.S. However, after 5 years, needy refugees and asylees would be denied SSI benefits, and Medicaid coverage is a state option rather than guaranteed.
- The President's proposal would extend from 5 to 7 years the period of SSI and Medicaid eligibility for refugees and asylees. This extension would alleviate current hardships while providing elderly refugees an extra 2 years to learn English well enough to naturalize. This policy would cost about \$700 million over 5 years, and protect eligibility for about 17,000 refugees and asylees in FY 1998.
- Few refugees arrive with any financial assets that can be used for self-support. In addition, refugees do not have sponsors.
- Refugees and asylees need a longer eligibility period for assistance than other legal immigrants because of the circumstances that bring them to this country in the first place. Refugees and asylees come to the U.S. with a history of persecution in their country of origin. These individuals frequently experience greater difficulties putting their lives together and becoming self-supporting than other legal immigrants. About one-half of refugees speak little or no English when they arrive here; only about one-tenth speak English fluently.
- Elderly refugees are a particularly vulnerable group. SSA data indicate that of the estimated 58,000 elderly refugees who will lose their SSI eligibility in August/September 1997, 24,000 are aged 75 or older. An estimated two-thirds (38,000) of the 58,000 are severely disabled.
- Generally, refugees and asylees may apply for citizenship after residing in the United States for 5 years. However, the naturalization process can take up to a year, or more. Therefore, individuals who entered the U.S. as refugees or asylees will lose their SSI -- and potentially their Medicaid -- before completing the application process for citizenship, even if they apply for citizenship as soon as they meet the 5 year residency requirement. Also, many elderly refugees are not able to acquire sufficient English language skills in this period of time to pass the citizenship test.
- In refugee communities, the pending loss of SSI and Medicaid and the inability to become naturalized citizens is a major concern. Elderly refugees are understandably terrified that they will be left destitute and homeless.

TREATING LEGAL IMMIGRANTS FAIRLY: THE FOOD STAMP PROGRAM

The welfare reform law made most legal immigrants ineligible to participate in the Food Stamp Program. It was effective immediately for new applicants and at the next recertification for already participating non-citizens.

Concerned about the impact of the law on legal immigrants, who are in the country legally and, in many cases, work and pay taxes, the Administration has worked since the passage of the law to ensure fairer treatment for legal immigrants.

- As an immediate first step, on the day he signed the law the President signed a directive instructing USDA to allow states to extend the certification periods (the time during which people are authorized to receive benefits) of currently participating non-citizens in order to ensure that their recertification be made fairly and accurately. USDA responded by issuing a memorandum to all state agencies on August 26, 1996 that waived Food Stamp regulations and allowed state agencies to extend the certification periods of all households containing participating noncitizen members up to the maximum time permitted by law -- 12 months (24 months in the cases of households with all elderly or disabled adult members), though not beyond August 22, 1997.
- The President then signed the Omnibus Consolidated Appropriations Act on September 30, 1996, which delayed implementation of the welfare law's provisions for participating legal immigrants until April 1, 1997. As a result, state agencies must redetermine the eligibility of all legal immigrant recipients between April 1, 1997 and August 22, 1997. USDA provided written guidance on implementing the new law to State agencies on October 2, 1996.
- On October 18, 1996, USDA provided written guidance to State agencies on how to implement the provision allowing legal immigrants who have worked or can be credited with 40 quarters of qualified work to receive food stamps. USDA authorized certification pending verification for immigrants who, alone or in combination with parents and/or spouse, have spent sufficient time in the U.S. to have acquired 40 quarters of coverage. These individuals need only to attest to 40 quarters of qualifying work at the time of application to meet the 40 quarters test, with subsequent verification by SSA.
- USDA has been working closely with states to develop ways to manage certification periods to ensure that legal immigrants can continue to participate in the Food Stamp Program through August 1997. Thirty-two states continue to use the certification period waiver to extend benefits.
- Finally, the President's budget includes a provision that would extend participation of certified legal immigrants through the end of fiscal year 1997, thus providing them more time to naturalize or to achieve the needed 40 quarters of work to qualify for the program.

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Immigrant Provisions of Welfare Reform

Summary of Immigrant Provisions

(*Personal Responsibility and Work Opportunity Reconciliation Act*, Title IV, ["Welfare Reform" P.L. 104-193], as amended by the *Illegal Immigration Reform and Immigrant Responsibility Act* ["Immigration Law" P.L. 104-208])

General: The new welfare reform statute seeks to restrict access to certain programs by legal immigrants and deny access by undocumented immigrants to many government funded programs.

I. "Qualified Aliens" - immigrants defined as "qualified aliens" are eligible for certain federal public benefits (see below).

A. Qualified aliens include (sec 431):

- Legal Permanent Residents
- Asylees
- Refugees
- Aliens paroled into the U.S. for at least one year
- Aliens whose deportations are being withheld¹
- Aliens granted conditional entry²
- Battered alien spouses, battered alien children, and the alien parents of battered children who fit certain criteria. (Added by Immigration Law)

B. "Federal Public Benefit" (sec 401) - The statute defines a "federal public benefit" as:

1. Any federally provided or funded grant, contract, loan, professional or commercial license and
2. Any retirement, welfare, health, disability, public or assisted housing, postsecondary education, food assistance, unemployment benefit, or any other similar benefit for which payments or assistance are provided to an individual, household, or family eligibility unit by a federal agency or by federally appropriated funds.

II. "Qualified Aliens" - are ineligible for specified federal programs.

A. SSI and Food Stamps - Regardless of when they entered the country, most "qualified aliens" are banned from receiving SSI & Food Stamps (Sec 402 (a)) - (see exceptions below)

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SSI: Current recipients will have their eligibility redetermined and if so determined, & ended within year of enactment. New applicants are ineligible.

Food Stamps: Current recipients, eligibility redetermination to happen at recertification, not before April 1, 1997 but within year of enactment. New applicants are ineligible.

B. *Qualified aliens who entered the country prior to enactment - 8/22/96*

States can decide the eligibility for TANF, the Social Services Block Grant (Title XX), and Medicaid of most "qualified aliens" who arrived in this country prior to August 22, 1996 (Sec 402 (b)) (*see exceptions in II.C. below*).

C. *Qualified aliens who entered the country on or after 8/22/96*

1. Five-year ban - Most "Qualified aliens" entering the country on or after enactment are banned from receiving assistance from federal means-tested programs for five years (Sec 403) (*see exceptions below*). States have the option to decide the eligibility of these aliens for TANF, Title XX and Medicaid unless these programs are subject to the ban.

2. "Federal means-tested public benefits" - guidance on the definition of "federal means-tested public benefits" is pending. The statute includes a list of the programs that are *not* covered by the 5-year ban. All qualified aliens are eligible for the listed programs regardless of their date of entry (*see below*):

- Emergency Medical assistance under Medicaid, if would otherwise qualify
- Short term, non-cash, in-kind emergency disaster relief
- Public health assistance for immunizations, testing and treatment of symptoms of communicable diseases, but not to include Title XIX
- Programs, services, assistance as specified by the Attorney General, which
 - deliver in kind services at the community level
 - do not condition the provision of assistance, the amount of assistance, or the cost of assistance provided on the recipient's income or resources
 - are necessary for the protection of life or safety
- Housing, other HUD assistance if alien is already receiving on date of enactment
- School lunch
- Child nutrition programs
- Payments for foster care and adoption assistance
- Student assistance
- Means-tested Elementary and Secondary Education Assistance (ESEA) programs

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Immigrant Provisions of Welfare Reform

- Head Start
- Job Training
- Refugee and entrant assistance activities for Cuban and Haitian entrants²/parolees (parolees are qualified aliens but otherwise subject to the five year ban).

Section has been

XIX added

D. Exceptions to SSI/Food Stamp bans, the 5-year ban on new entrants, and to the state options to set eligibility for aliens: the following groups are allowed access to federal and state benefit programs;

1. Refugees for 5 years from date of entry only, and asylees and aliens whose deportation has been withheld under sec 243(n) of the INA, for 5 years from date status received.
2. Veterans, members of the military on active duty, and their spouses and unmarried dependent children.
3. Those who have worked 40 qualifying quarters without receiving federal means-tested public benefit during any such quarter beginning after 12/31/96. Quarters worked by parents when the alien was a child, or by a spouse while married, may be counted towards the 40 (*NOTE: This exception does not apply to the 5-year ban*).

III. Aliens who are "not qualified" aliens are ineligible for "federal public benefits"

A. Examples of aliens who are not qualified are:

1. **Non-immigrants (temporary residents)** -- Individuals here on time-limited visas to work, study, or travel.
2. **Undocumented immigrants**--Individuals who entered as temporary residents and overstayed their visas, or are engaged in activities forbidden by their visa, or who entered without a visa.
3. **Others**--Individuals who are given temporary administrative statuses (e.g. stay of deportation, voluntary departure) until they can formalize permanent status, or individuals paroled for less than one year.

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B. Exceptions - All aliens, including those who are "Non-qualified" are eligible for certain excepted programs (Sec 401(b), Sec 411(b)) such as:

- Emergency Medical assistance under Medicaid, if would otherwise qualify
- Short term, non-cash, in-kind emergency disaster relief.
- Public health assistance for immunizations, testing and treatment of symptoms of communicable diseases, but not to include Title XIX.
- Programs, services, assistance as specified by the Attorney General, which
 - deliver in kind services at the community level
 - do not condition the provision of assistance, the amount of assistance, or the cost of assistance provided on the recipient's income or resources
 - are necessary for the protection of life or safety.
- Housing, other HUD assistance if alien is already receiving on date of enactment. *(This provision is in 401(b) only; non-qualified aliens are not made eligible for state housing assistance in 411(b)).*

IV. Access to state and local programs for aliens (Sec 411, 412) - States have authority to determine immigrants' eligibility for state and local programs, with some conditions.

- A.** Undocumented immigrants are not eligible for state/local benefits unless the state passes a new law after 8/22/96 affirmatively making them eligible. No legislation is required to retain access for non-immigrants to state and local benefits (Sec 411(a)).
- B.** States may restrict the eligibility of qualified aliens, non-immigrants and certain parolees. They may not restrict eligibility for refugees during their first five years from entry, veterans, and those who have earned 40 qualifying quarters (Sec 412) *(see II.D., above for complete listing)*. States may not deny access by any alien to state or local benefits that meet the definition of excepted services described in Sec 411(b) *(see exceptions listed above, III.B)*.

V. Verification - Within 18 months from the date of enactment, the Attorney General, in consultation with the Secretary of Health and Human Services, must promulgate regulations requiring verification that a person applying for a Federal public benefit is a qualified alien and is eligible to receive such benefit. States must have a verification system in place 24 months after the regulations are promulgated for the federal public benefits they administer (Sec. 432(b)). In addition, the Attorney General, in consultation with DHHS, must issue procedures for applicants to provide proof of citizenship in a fair and nondiscriminatory manner (Sec 432(a)(2)).

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Exemption - Nonprofit charitable organizations are specifically exempt from any requirement to determine, verify or otherwise require proof of alien eligibility or status (Sec 432(d)).

VI. Affidavits of Support and Attribution of Income (Deeming) - Prior to the new welfare statute, affidavits of support signed for sponsored immigrants were not legally enforceable and time-limited "deeming" of sponsor income occurred in only three programs: SSI, Food Stamps, and AFDC. The new welfare statute requires a legally binding affidavit of support to establish that an alien is not excludable as a public charge, and extends deeming to "federal means-tested benefits" until the immigrant with the new affidavit becomes a citizen or has worked 40 qualifying quarters.

A. Affidavit of support - The new affidavit is legally enforceable against the sponsor by the alien and by federal and state governments which provide any means-tested benefits, but not later than 10 years after an alien last receives any such benefit. The affidavit is enforceable with respect to means-tested benefits until citizenship or until 40 qualifying quarters are earned.

1. The Attorney General must develop in consultation with DHHS the new affidavit within 90 days of enactment of the Immigration law. The requirements for a sponsor's affidavit of support shall apply to affidavits executed beginning 60-90 days after the form is formulated by the Attorney General (Sec. 423(a)).

2. "Nongovernmental" entities, Federal, state or local governments "shall request" reimbursement from the sponsor for amount of any non-exempted means-tested public assistance a sponsored alien has received. Action may be brought for non-payment anytime within 10 years from receipt of any such benefit. No reimbursement is required for the excepted services listed in 403(c).

3. Sponsors must notify the Attorney General and the state of residence of the sponsored immigrant of any address changes of the sponsor (Sec 423(a)).

B. Sponsorship Requirements - With some exceptions, sponsors must now have an income of at least 125 percent of federal poverty to sponsor an immigrant (previously 100 percent). All family-based immigrants must be "sponsored," meaning that a family member must have signed an affidavit stating that they will provide the assistance necessary to maintain the immigrant at an annual income at least 125 percent of the federal poverty line.

C. Deeming - Under welfare reform, when determining eligibility for federal means-tested public benefits (e.g., Medicaid and TANF), the income and resources of the sponsor and sponsor's spouse who executed a new affidavit of support shall be "deemed"

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available to the sponsored immigrant (Sec 421). Programs specifically not included in the five year ban (Sec 403(c)) are also not subject to deeming and reimbursement by the sponsor.

1. These new deeming rules only apply to immigrants who have executed the new, legally binding affidavits. The new deeming period extends until citizenship, or until an immigrant has earned the 40 qualifying quarters. However, most aliens will be barred from eligibility during their first 5 years due to the 5-year ban on receipt of federal means-tested public benefits. Over the next 5 years, deeming may apply only to aliens who have executed the new affidavits of support and who are exempt from the 5-year bar, such as veterans, active military and their families.

2. New indigency and battered spouse and children exceptions to deeming requirement. Under the Immigration law amendments, deeming does not apply to certain battered immigrants; furthermore, if an alien would be unable to obtain food and shelter without assistance, then only the amount of income and resources of the sponsor or the sponsor's spouse actually provided will be attributed to the sponsored alien (Sec. 421 (e),(f)).

3. States are authorized to deem for their public benefits. Some programs are exempted from the new state deeming authority: certain emergency medical, emergency disaster, programs comparable to assistance provided under the school lunch act and the child nutrition act, public health assistance for immunizations, testing and treatment of symptoms of communicable diseases, foster care and adoption, other programs as specified by the Attorney General of a state (Sec. 422).

VII. Other Provisions

- A. **Communication between state and local agencies and the INS:** no prohibitions are allowed on states or local governments regarding their ability to send or receive information with the INS regarding immigration status of an alien (Sec.434).
- B. **Reporting of Illegal Immigrants:** States receiving TANF block grants, the Social Security Administration, the Department of Housing and Urban Development, and public housing agencies must report 4 times a years to INS aliens they know are "unlawfully" in the U.S. (Sec 404).

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Notes

- 1. Under section 243(h) of the Immigration and Nationality Act (INA).
- 2. Pursuant to section 203(a)(7) of the INA as in effect prior to April 1, 1980.
- 3. As defined in section 501(e)(2) of the Refugee Education Assistance Act of 1980.

WELFARE REFORM IMMIGRANT PROVISIONS IMPLEMENTATION EFFECTIVE DATES

August 22, 1996	P.L. 104-193 passed; Qualified Aliens entering on or after 8/22/96 are: ineligible for federal means-tested benefits for five years after entry (except for refugees, asylees, and aliens whose deportation has been withheld for 5 years after date such status is received; and veterans/active duty military and dependents); and ineligible for SSI and Food Stamps until citizenship (except for above exceptions, plus an exception for legal permanent residents who have earned 40 qualifying quarters of covered employment).
January 1, 1997	States have the option to deny Medicaid, TANF, and Title XX Social Services Block Grant benefits to pre-August 1996 qualified aliens. Three states currently plan to deny TANF coverage to qualified aliens (Alabama, Wyoming, and South Carolina beginning March 31, 1997). No states have reported that they plan to deny Medicaid or SSBG.
January 13, 1996	HCFA issued a regulation giving states extra time to redetermine Medicaid eligibility for immigrants losing SSI. Medicaid continues until this redetermination takes place.
January 22, 1996	HCFA transmitted to the states a state Medicaid Manual providing policy guidance on issues relating to Medicaid coverage for immigrants, among other issues. HCFA also sent state Medicaid directors letters regarding waivers on February 5, 1997.
February 1 - March 31, 1997	First notices of SSI ineligibility were sent to approximately 900,000 current noncitizen SSI recipients the first week of February 1997; first notices will continue to be sent on staggered basis of 112,500 per week over 8 weeks. SSI recipients must then establish that they are either citizens or otherwise exempt before August. All notices will be sent by March 31, 1997.
Late March	New legally binding affidavits of support promulgated; all family-based and some employment-based legal immigrants required to submit affidavits as condition of entry. These immigrants will be subject to new deeming until citizenship rules under federal means-tested programs after the 5-year ban on eligibility (unless they have 40 quarters of covered employment).
April 1 - August 22, 1997	Current Food Stamps recipients who are qualified aliens become ineligible for Food Stamps upon redetermination. Most states have already notified current recipients of changes, although they are not required to by statute.

- July-August 1997 Notices of Planned Action (NPAs) informing immigrant recipients of SSI benefit termination in 30 days will be sent. Those receiving first notices in February will receive NPAs in July; those receiving first notices in March will receive NPAs in August.
- August 22, 1997 All Qualified Aliens become ineligible for SSI and Food Stamps until citizenship unless they meet one of the exemptions (refugees, asylees, and aliens whose deportation has been withheld for 5 years after date such status is received; legal permanent residents who have earned 40 qualifying quarters; and veterans/active duty military and dependents).

Diana,

A few edits to the Q&As:

-Ken told us last week he thought the reference to Shaw's "death rate" statement should be dropped if this went public.

-I would prefer to ~~not~~ reference the two-thirds of the elderly get on the basis of disability in a public document. The actuary's estimate of 2/3 includes both the ability to meet eligibility criteria and guesses on rate the elderly will apply for disability benefits and is so soft that it is better to only source verbally.

-You can take or leave the edits on the "making sponsors responsible" Q&A. It seems like the disabled after entry point got buried in the stream of bullets but the points do have a logical flow so I didn't want to rearrange them.

-Jack Smalligan



WHY NOT A BLOCK GRANT

QUESTION:

Why not just establish a block grant to the States to assist them in providing services to those non-citizens who lose SSI?

ANSWER:

- There is no infrastructure in place at the state level to deliver income support to the disabled population. In many states, it is local government that directly provides health care to the indigent.
- Charity organizations may become these immigrants' only source of income support. Under a block grant that provides funds to State governments, it is not clear how the funds would reach those private organizations that actually provide the services.
- The history of using block grants to provide services to immigrants is discouraging. It has been attempted before without good results. The block grant created by the 1986 immigration reform law was the State Legalization Impact Assistance Grants (SLIAG) program, and proved to be an inefficient method of assisting the States and very difficult for them to manage. In addition, although SLIAG was federally funded, its appropriation in the third year was reduced by almost two-thirds to support discretionary spending elsewhere. By the fifth year, SLIAG funding was reduced to zero.
- The best solution is retain eligibility for the most vulnerable immigrants -- those who become disabled after entering the United States, refugees, and immigrants-- within the existing Federal social safety net.
- The Administration takes strong exception to statements made on the Hill that a temporary block grant approach would suffice because "the death rate" of disabled legal immigrants will solve the problem. Such statements are profoundly offensive to citizens and non-citizens with and without disabilities.

WHY NOT ALL ELDERLY

QUESTION:

Why didn't the Administration request reinstatement of eligibility for all elderly non-citizens?

ANSWER:

- The Administration proposal targets the most vulnerable legal immigrants affected by welfare reform -- disabled adults and children -- and reinstates their SSI and Medicaid eligibility.
- *Many* ~~Approximately two-third~~ of the non-citizens who are receiving SSI benefits because they are aged 65 can qualify on the basis of disability. ✓
- Within the context of balancing the federal budget by FY 2002, the Administration is seeking to restore assistance only for the most vulnerable legal immigrants.

ADDITIONAL INFORMATION:

- The Administration did not propose to ban SSI eligibility for all aged non-citizens as part of welfare reform. Originally, the Administration proposed to exempt from the general ban on SSI eligibility those non-citizens who were over age 75. However, because of budget concerns, the first priority became protecting non-citizens disabled adults and children.
- Individuals who decide to sponsor aged immigrants are more likely to know, when they sign the affidavit of support, that it is unlikely that these non-citizens will be able to support themselves and that there may be age-related health expenses that they will be responsible for.

MAKING SPONSORS RESPONSIBLE

Take a
leaver

QUESTION: Why shouldn't these immigrants -- disabled and children -- be taken care of by the sponsors who agreed to take care of them?

ANSWER:

- We agree that sponsors need to be held responsible and accountable. ←
- However, welfare reform makes most legal immigrants ineligible for [SSI and Food Stamp] assistance, even those who have never had sponsors or whose sponsors have died.
- In fact, recent INS estimates of all FY 1994 non-refugee immigrants found that nearly half--or 44 percent--did not have sponsors.
- Also, sponsors of immigrants who arrived before welfare reform signed affidavits of support that are not legally binding and therefore do not obligate them to provide support or to reimburse for public assistance. ←
- The new law requires all family-based, and some employment-based, immigrants to have legally binding affidavits of support (which will be available in May 1997). ← bold ?
- Our proposal would exempt from these harsh new rules only those legal immigrants who become disabled after entry into the U.S. or legal immigrant children. ←
- Sponsors of legal immigrants who become disabled after entry have no possible way of planning for the costly care that results from a severe disability.
- We think it is unfair to impoverish such sponsors beyond regular program requirements for family income, or to withdraw assistance from disabled immigrants who have never had sponsors. ←
- Under the new deeming rules, not only must sponsors impoverish themselves so that immigrant family members are eligible for SSI and Medicaid assistance, but they are also liable to repay the amount of assistance received by such family members when these rules have made them least able to make repayments.
- Similarly, sponsors of immigrant children--like many working parents both citizens and legal immigrants--have difficulty maintaining affordable health insurance and will be overwhelmed by health care expenses arising from severe illnesses or injuries suffered by their children (for example, children who suffer from leukemia or serious head injuries).
- Denying Medicaid to legal immigrant children whose families have fallen on hard times threatens the health and well-being of an extremely vulnerable population, and likely leads to more costly health care in the future.

INCREASE OF NON-CITIZENS ON SSI ROLLS

QUESTION:

What explains the increase in the number of non-citizens on the SSI rolls?

ANSWER:

The number of non-citizens on the SSI rolls has increased along with the number of legal immigrants admitted into the United States. In 1980 there were 9.5 million foreign born persons living in the U.S.- slightly less than 4 percent of the U.S. population. Since then, the number has increased by 15 million. Today we have 24.5 million foreign born residents in the U.S.-- almost 9.5 percent of the U.S. population, according to the Bureau of the Census.

Given the increase in immigration it is not surprising that there has been an increase in the numbers of non-citizens on the SSI rolls over the past 13 years. However, the number remains a small percentage of the total SSI rolls, rising from 3 percent in 1982 to a little over 12 percent in 1995. The number of sponsored non-citizens receiving SSI has risen more slowly from about 2 percent to only about 8 percent over the same period. ✓

Statistically, the largest increase in noncitizen participation has been seen in the aged recipient population. But this increase should be viewed in the same context. Over this same 13-year period, the number of aged citizen recipients has been declining, because most citizens aged 65 and older now receive Social Security benefits that are large enough to preclude SSI eligibility. Participation of aged citizens has dropped from almost 1.5 million in 1982 to a little over 987,000 in 1995, a decline of 32 percent. In addition, the number of aged non-citizens newly awarded benefits has declined from about 73,000 in 1993 to just a little over 46,000 in 1995, a decline of 37 percent.

Had affidavits of 50

TO: Diana Fortuna
— for comment.

SOCIAL SECURITY ADMINISTRATION
OFFICE OF LEGISLATION AND CONGRESSIONAL AFFAIRS
Baltimore Maryland 21235

Fax Terminal Tel. No. (410) 966-2904

Date: March 27, 1997

Pages: Cover +1

Fax Terminal Tel. No: (202) 482-7153

Auto Dial No.

TO: | Judy Chesser

David Mattson *Added*

(410) 965-2615

PLEASE CALL (410) 965-2615 IF RETRANSMISSION IS NECESSARY

MESSAGE:

AS REQUESTED

We have added pregnant women to the list of problematic noncitizens groups for the DPC.

cc: Brian Coyne

Problematic Groups Relating to Noncitizens Provisions in Welfare Reform

1. "Qualified aliens" who become blind or disabled after their entry into the United States. (In President's draft budget proposal.)
2. Disabled "qualified alien" children. (In President's draft budget proposal.)
3. Refugees, asylees, and individuals who have had their deportations withheld and whose 5-year eligibility limit has expired. (President's draft budget proposal would extend 5-year limit to 7 years.)
4. Amerasian immigrants. (President's draft budget proposal would treat as refugees, asylees, etc.)
5. Cuban and Haitian entrants.
6. Members of Hmong tribe who fought for U.S. Government during Vietnam War, their spouses (including widow(er)s), and unmarried dependent children.
7. American Indians born in Canada or Mexico.
8. Lawful permanent residents (LPRs) who have resided in the United States for the requisite number of years and who have a petition pending for naturalization or who have been accepted for naturalization but are awaiting the official swearing-in.
9. LPRs who are receiving Social Security benefit but who have less than 40 quarters of coverage (e.g., young disabled workers, certain survivors, and retirees born before 1929).
10. Elderly and disabled individuals who are unable to prove their U.S. citizenship due to lost records or their incapability to assist with the search for documents.
11. Elderly noncitizens who have been in the United States for many years and do not know whether they naturalized. (Some problems with INS records have been encountered. In addition, individuals who are too disabled to take citizenship oath of allegiance may not be covered under disability waiver provision in INS regulations.)
12. Pregnant women.

Question

How will the welfare reform law affect immigrants who receive food stamps?

Answer

- ◆ Under the new law, most immigrants will be ineligible. Refugees, asylees, and deportees are eligible for only 5 years from the date they were admitted as refugees or granted asylee or deportee status. Legal permanent residents are eligible only if they (or a spouse or parent) have worked for 10 years or are veterans, on active military duty, or the spouse or child of a veteran or person on active duty.
- ◆ The law provides that all immigrants must have their eligibility reexamined between April 1 and August 22, 1997. About 1 million immigrants who do not meet the new requirements will lose their benefits.
- ◆ Most immigrants receiving food stamps participate in a household with members who are citizens (e.g., an immigrant parent with citizen children). In these cases, the eligible members will continue to receive food stamps, but the amount of assistance will be reduced.
- ◆ More immigrants will lose benefits each month as States redetermine the eligibility of current recipients. Thirty-four States have taken advantage of the waiver to extend certification periods authorized by Executive Order. Unlike SSI, which is federally administered, the Food Stamp Program is administered by States and implementation of the cut-off will vary from State to State.
- ◆ Extending the cut-off deadline to September 30 as proposed in the Presidents' budget would allow more time for some immigrants to naturalize. However, until the change is effective, food stamp households with immigrants will continue to lose benefits.
- ◆ Terminating benefits for immigrants will save an estimated \$3.63 billion over 6 years.

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**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
200 INDEPENDENCE AVE., SW
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OFFICE OF THE ASSISTANT SECRETARY FOR LEGISLATION

**CONGRESSIONAL LIAISON OFFICE
ROOM 406G HUMPHREY BUILDING**

TO: Diana Fortuna 456-7431

FROM: Irene Bueno

DATE: 4/2/97

TOTAL PAGES INCLUDING COVER: 12

Attached are the HHS comments on the qs and as.

Please let me know if you have any comments or questions.

Thank you.

COST OF IMMIGRANT PROPOSALS

QUESTION:

How much does your Budget spend on giving immigrants welfare benefits?

ANSWER:

- ▶ The President's Budget assists those legal immigrants who, through no fault of their own, are unable to work: children and individuals who are disabled.
- ▶ The President's immigrant proposals total \$14.6 billion over five years FY 1998-2002, \$4.9 billion are Medicaid costs (see attached table). The President's budget seeks to:
- ▶ **Restore SSI and Medicaid eligibility for the disabled immigrants (\$13.7 billion SSI and Medicaid costs).** The welfare law would discontinue SSI and restrict Medicaid benefits for legal immigrants including the disabled and children. The President's budget would continue to provide SSI and Medicaid for 320,000 legal immigrants who become disabled after they enter the country and exempt them from the deeming rules.
new
- ▶ **Restore Medicaid eligibility for non-SSI immigrant children (\$2 billion Medicaid costs only).** The Administration's budget would ~~continue~~ Medicaid for approximately 30,000 immigrant children, if they are otherwise eligible, and exempt them from the deeming rules.
restore elig. b. lity to
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Full explanation of extension in Q & A.
- ▶ **Delay the Food Stamp ban until the end of FY 1997 (\$0.2 billion - the cost of this proposal is not included in the overall immigrant proposal cost since the costs are incurred in FY 1997).** The welfare law denies Food Stamps to most legal immigrants currently receiving benefits and future applicants, affecting a million immigrants. Last year's Omnibus Consolidated Appropriations Act delayed the ban from January 1, 1997 to April 1, 1997 to give immigrants in the process of naturalizing more time to complete the process prior to having their benefits eliminated. Recognizing the effort that many are making to become citizens, this proposal would extend the delay to the end of FY 1997.
Further

UNDERMINING WELFARE REFORM -- PROTECTING LEGAL IMMIGRANTS

QUESTION:

Aren't you opening up the welfare reform bill with your immigrant proposals?

ANSWER:

- ▶ The President ~~is~~ remaining firmly committed to implementing the welfare reforms enacted last year. ✓
- ▶ But the immigrant restrictions of the new welfare law ~~had nothing~~ ^{never had anything} to do with the central goal of welfare reform -- moving welfare recipients from welfare to work. This is **not** an effort to "open up" welfare reform, it is an effort to restore benefits cuts that were attached to welfare reform and shouldn't have been part of the bill to begin with. ✓
- ▶ Legal immigrants work hard, pay taxes and contribute to American society. Immigrant children and disabled immigrants who fall on hard times through no fault of their own should get medical and other vital assistance when they need it.

for purely budgetary reasons

NGA PROPOSALS AND IMMIGRANTS

QUESTION:

The Governors asked the Administration to work with them and the Congress to "meet the needs of aged and disabled legal immigrants who cannot naturalize," but specifically stated we did not need to reopen welfare reform to do it. Why then does the Administration propose to reopen welfare reform and make costly changes that would give welfare to immigrants?

ANSWER:

- ▶ The Administration is committed firmly to the major reform of welfare enacted last year.
- ▶ But the immigrant restrictions of the new welfare law had nothing to do with the central goal of welfare reform --moving welfare recipients from welfare to work. This is not an effort to "open up" welfare reform, it is an effort to restore benefits/cuts that shouldn't have been in the welfare bill to begin with. ✓
- ▶ Legal immigrants work hard, pay taxes and contribute to American society. Immigrant children and disabled immigrants who fall on hard times through no fault of their own should get medical and other vital assistance when they need it.
- ▶ The Administration's immigrant proposals are responsive to the concerns noted by the Governors and we welcome the opportunity to work with them and the Congress to rectify some of the unfair burdens placed on immigrants, *and the communities they live in.*
- ▶ Our budget addresses the needs of immigrants disabled after entry by reinstating their eligibility for SSI and Medicaid; exempts all legal immigrant children from eligibility restrictions; extends SSI and Medicaid eligibility for refugees from 5 to 7 years; and delays the Food Stamps cut-off until the end of the FY 1997. *SSI + Medicaid*
- ▶ These proposals would restore aid to these most vulnerable people who need assistance through no fault of their own. ✓
- ▶ In addition, our proposal is responsive to the NGA statement that the immigrant provisions represent a considerable cost shift to state and local governments. These provisions reduce the burden on states and local governments.

Significantly

WHY NOT A BLOCK GRANT

QUESTION:

Why not just establish a block grant to the States to assist them in providing services to those non-citizens who lose SSI?

ANSWER:

- There is no infrastructure in place at the state level to deliver income support to the disabled population. In many states, it is local government that directly provides health care to the indigent, *and it is unclear whether state support would match increased local needs.*
- Charity organizations may become these immigrants' only source of income support. Under a block grant that provides funds to State governments, it is not clear how the funds would reach those private organizations that actually provide the services.
- The history of using block grants to provide services to immigrants is discouraging. It has been attempted before without good results. The block grant created by the 1986 immigration reform law was the State Legalization Impact Assistance Grants (SLIAG) program, and proved to be an inefficient method of assisting the States and very difficult for them to manage. In addition, although SLIAG was federally funded, its appropriation in the third year was reduced by almost two-thirds to support discretionary spending elsewhere. By the fifth year, SLIAG funding was reduced to zero.
- The best solution is ^{to} retain eligibility for the most vulnerable immigrants -- those who become disabled after entering the United States, refugees, and immigrants -- ^{immigrants} within the existing Federal social safety net. _{children}
- The Administration takes strong exception to statements made on the Hill that a temporary block grant approach would suffice because "the death rate" of disabled legal immigrants will solve the problem. Such statements are profoundly offensive to citizens and non-citizens with and without disabilities.
- [?] (Most) Discussion about a new block grant to assist immigrants has indicated that it would only be temporary (i.e. 2 or 3 years).
- ~~Also, many of the block grant proposals would not protect legal immigrants who become disabled after~~
- ~~legal immigrants~~ ^{just} This will leave legal immigrants with severe disabilities without necessary assistance 2 years from now. (see attached discussion)

- Two-year Delay in Implementation

Either a two year delay or a short-term block grant is the minimum that is likely to emerge from Congress this year. A two year delay is nothing more than a stop-gap that would not change the fundamental unfairness of the impending restrictions, and that might actually make it harder to make the necessary changes once the extension runs out.

In two years, when the issue is revisited, the same fiscal constraints that today make restoring benefits so difficult will again be in play. But then, any changes would be under the terms of the balanced budget agreement that is likely to pass this year. All new costs will have to be offset by an increase in taxes or by reductions in expenditures elsewhere in the budget. Moreover, the economic outlook may not be as rosy as today, and offset money may be even more difficult to find than is now the case.

In two years, the same cancer victims, nursing home residents, etc. as today will again face imminent loss of survival benefits. To the extent feasible, the provisions penalizing these people should be eliminated now rather than later.

- Block Grant

Block grants to the states are a poor way to take care of the need that would be created by failing to restore legal immigrant eligibility for SSI. At its best, a block grant would take the SSI money that elderly and disabled legal immigrants are currently using for rent and other necessities and give it to the states. States would then be permitted, or required, to give the money back to the affected elderly and disabled legal immigrants to use for rent and other necessities. There is no articulable reason to waste the administrative resources that would be necessary to place the states in the middle of this transaction.

But the block grant proposals being developed in Congress are worse than merely wasteful. First, the amounts of money that have been discussed, \$2-3 billion, are far below the \$22 billion that will be taken out of the hands of elderly and disabled legal immigrants between now and FY 2002. This shortfall ensures that states will not be able to meet the needs of legal immigrants fighting to avoid hunger and eviction. Second, the proposals call for a 2 or 3 year one-time block grant. But, to qualify for SSI in the first place, the affected legal immigrants had to prove they were unemployable because of age or disability. They will be just as unemployable, and just as needy, in 2 or 3 years, but the federal funds will be gone.

- Other proposals

The rest of the proposals in Congress are all well-intentioned, and demonstrate broad support for change, but unfortunately they face extraordinary difficulty because of the nature of the legislative process. The various proposals to relax naturalization requirements, or to permit assistance while waiting for the INS to act, are especially compelling given the current alarming escalation of INS naturalization backlogs. But these proposals may face a particularly tough road this year, when Congress appears to be headed in the opposite direction, towards even stricter controls and more difficult standards for naturalization.

-- March 12, 1997

WHY NOT ALL ELDERLY

QUESTION:

Why didn't the Administration request reinstatement of eligibility for all elderly non-citizens?

ANSWER:

- The Administration proposal targets the most vulnerable legal immigrants affected by welfare reform -- disabled adults and children -- and reinstates their SSI and Medicaid eligibility. *including the elderly,*
- *We estimate that* Approximately two-thirds of the non-citizens who are receiving SSI benefits because they are aged 65 can qualify on the basis of disability.
- Within the context of balancing the federal budget by FY 2002, the Administration is seeking to restore assistance *to* only for the most vulnerable legal immigrants.

ADDITIONAL INFORMATION:

- *all* The Administration did not propose to ban SSI eligibility for all aged non-citizens as part of welfare reform. Originally, the Administration proposed to exempt from the general ban on SSI eligibility those non-citizens who were over age 75. However, *Given the provisions enacted* because of budget concerns, the first priority became protecting non-citizens disabled adults and children. *However, we believe that about 2/3 of the current "elderly" on SSI will be able to re-qualify as "disabled".* Individuals who decide to sponsor aged immigrants are more likely to know, when they sign the affidavit of support, that it is unlikely that these non-citizens will be able to support themselves and that there may be age-related health expenses that they will be responsible for.

- • Because of budget concerns, our first priority is protecting non-citizen disabled adults and children. However, we believe that about two-thirds of the current "elderly" on SSI will be able to re-qualify as "disabled" and thereby maintain SSI and Medicaid eligibility.

MAKING SPONSORS RESPONSIBLE

QUESTION: Why shouldn't these immigrants -- ^{the} disabled and children -- be taken care of by the sponsors who agreed to take care of them?

ANSWER:

- We agree that sponsors need to be held ^{more} responsible and accountable ^{than in the past.}
- However, welfare reform makes most legal immigrants ineligible for [SSI and Food Stamp] assistance, even those who have never had sponsors or whose sponsors have died.
- ~~However~~ ^{In fact,} recent INS estimates of all FY 1994 non-refugee immigrants found that nearly half--or 44 percent--did not have sponsors.
- Also, sponsors of immigrants who arrived before welfare reform signed affidavits of support that are not legally binding and therefore do not obligate them to provide support or to reimburse for public assistance.
- The new law requires all family-based, and some employment-based, immigrants to have legally binding affidavits of support (which will be available ^{perhaps} ~~by~~ ^{by} May/June 1997).
- Our proposal would exempt from these harsh new rules only those legal immigrants who become disabled after entry into the U.S. or legal immigrant children.
- Sponsors of legal immigrants who become disabled after entry have no possible way of planning for the costly care that results from ^{unforeseen} ~~a~~ severe disability.
- We think it is unfair to impoverish such sponsors beyond regular program requirements for family income, or to withdraw assistance from disabled immigrants who have never had sponsors.
- Under the new deeming rules, not only must sponsors impoverish themselves so that immigrant family members are eligible for SSI and Medicaid assistance, but they are also liable to repay the amount of assistance received by such family members when these rules have made them least able to make repayments.
- Similarly, sponsors of immigrant children--like many working parents both citizens and legal immigrants--have difficulty maintaining affordable health insurance and will be overwhelmed by health care expenses arising from severe illnesses or injuries suffered by their children (for example, children who suffer from leukemia or serious head injuries).
- Denying Medicaid to legal immigrant children whose families have fallen on hard times threatens the health and well-being of an extremely vulnerable population, and likely leads to more costly health care in the future.

IMMIGRANTS WHO LOSE SSI--EFFECT ON MEDICAID ELIGIBILITY

QUESTION:

Do immigrants who lose SSI lose Medicaid as well?

ANSWER:

- ▶ Not necessarily. The welfare bill specifically cuts off SSI cash assistance to qualified immigrants. The question of which immigrants retain Medicaid eligibility is a complicated one, because of the considerable variation that exists in Medicaid programs across the States, Territories, and the District of Columbia.
- ▶ In most states, receipt of SSI automatically makes an individual eligible for Medicaid. Therefore immigrants who lose their SSI and are not otherwise eligible for Medicaid under an optional eligibility category, may lose their Medicaid coverage.
- ▶ *However, many states have optional eligibility categories ^{that may} to cover immigrants who lose their SSI. Specifically some states can cover individuals who meet SSI criteria but are not actually receiving cash assistance. In addition, some states can cover immigrants if they have a medically needy program.*
- ▶ States that have a medically needy category and no other optional eligibility category may face difficulties in covering immigrants who lose SSI due to current Medicaid eligibility rules.¹ We realize that the medically needy rules pose a problem for some states and are exploring both administrative and legislative possibilities to give states the most flexibility to cover immigrants.
- ▶ Thus, whether or not an immigrant can continue to receive Medicaid coverage after they lose their SSI depends on what other optional eligibility categories each state covers for Medicaid.
- ▶ Immigrants in states that do not ^{cover appropriate} have an optional eligibility category may lose their Medicaid when they lose their SSI cash assistance.² We are exploring both administrative and legislative possibilities to give states the most flexibility to cover immigrants.
- ▶ As always, states can amend their plan to include this option, but coverage would be expanded to all individuals meeting the criteria, not just legal immigrants.
- ▶ Of course, all states have the option to decide not to offer Medicaid to qualified immigrants.

¹Arkansas, California, Georgia, Kansas, Kentucky, North Carolina, Wisconsin, and Illinois.

²Alabama, Delaware, Louisiana, Nevada, New Mexico, Texas, Wyoming, and South Dakota.

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What explains the increase in the number of non-citizens on the SSI rolls?

ANSWER:

The number of non-citizens on the SSI rolls has increased along with the number of legal immigrants admitted into the United States. In 1980 there were 9.5 million foreign born persons living in the U.S.- slightly less than 4 percent of the U.S. population. Since then, the number has increased by 15 million. Today we have 24.5 million foreign born residents in the U.S.-- almost 9.5 percent of the U.S. population, according to the Bureau of the Census.

Given the increase in immigration it is not surprising that there has been an increase in the numbers of non-citizens on the SSI rolls over the past 13 years. However, the number remains a small percentage of the total SSI rolls, rising from 3 percent in 1982 to a little over 12 percent in 1995. ~~The number of sponsored non-citizens receiving SSI has risen more slowly, from about 2 percent to only about 8 percent over the same period.~~ This data doesn't exist.

Statistically, the largest increase in noncitizen participation has been seen in the aged recipient population. But this increase should be viewed in the same context. Over this same 13-year period, the number of aged citizen recipients has been declining, because most citizens aged 65 and older now receive Social Security benefits that are large enough to preclude SSI eligibility. Participation of aged citizens has dropped from almost 1.5 million in 1982 to a little over 987,000 in 1995, a decline of 32 percent. In addition, the number of aged non-citizens newly awarded benefits has declined from about 73,000 in 1993 to just a little over 46,000 in 1995, a decline of 37 percent.

per year

~~add affidavit of 50~~
Therefore, the increase in the percentage of aged noncitizens on SSI is due to the decrease in the number of citizen aged, as well as to the increase in the number of noncitizen aged. both

REFUGEE ELIGIBILITY EXTENSION

QUESTION:

What accounts for the high welfare utilization rates among refugees?

ANSWER:

- ▶ By definition, refugees and asylees are individuals who come to our country to escape persecution in their country of origin. These individuals have generally experienced war or other violent trauma and often need more time to put their lives together and become self-supporting than other legal immigrants. *requiring medical and income assistance*
- ▶ About one-half of refugees speak little or no English at arrival; only about one-tenth speak English fluently.
- ▶ Therefore, we believe refugees and asylees need a longer eligibility period for assistance than other qualified aliens because of the unique circumstances that bring refugees and asylees to the U.S.
- ▶ Specifically, refugees and asylees need an additional two years to address their special needs and to provide sufficient time to enable them to achieve stable self-support. The President's budget proposal would extend refugees' eligibility for SSI and Medicaid benefits from 5 to 7 years.
- ▶ The longer time period is particularly important because more recent refugee populations have included larger numbers of older and elderly individuals who require a longer time to adjust.
- ▶ Finally, refugees are not even eligible to apply for naturalization until they are near the end of their 5 years residence. Since the processing time for naturalization applications is now about 1 year, this extension from 5 to 7 years is necessary to physically permit refugees to comply with INS procedures without being denied crucial services during the interim.

CUBAN/HAITIAN ENTRANTS

QUESTION:

Are Cuban/Haitian entrants eligible for assistance under the new welfare reform rules?

ANSWER:

- They are specifically eligible for the special refugee assistance programs under the Office of Refugee Resettlement.
- Even though Cuban/Haitian entrant status is not specifically included in the list of immigration categories which define who is a "qualified alien", most entrants have been given parole status for a period of at least 1 year or legal permanent resident status which does make them qualified aliens.
- If entrants are qualified aliens, they would be treated the same as other qualified aliens under the state eligibility options in TANF and Medicaid (if they entered the U.S. before enactment of the welfare law in August 1996), or denied TANF and Medicaid for 5 years after entry (if they entered after enactment in August 1996).
- Under welfare reform, Cuban/Haitian entrants are not specifically exempted from eligibility restrictions as refugees are.

Background

Under bilateral agreement between U.S. and Cuba it is estimated that about 20,000 Cubans will be allowed to enter the U.S. annually, the majority of whom will be parolees or legal permanent residents (i.e., qualified aliens), with an estimated 6,000-7,000 likely to be refugees.

**INTERNAL Q&A's ON ADMINISTRATION'S
LEGAL IMMIGRANT PROPOSALS**

9

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COST OF IMMIGRANT PROPOSALS

QUESTION:

How much does your Budget spend on ^{restoring} giving immigrants welfare benefits? ⁴⁰

ANSWER:

- ▶ The President's Budget assists those legal immigrants who, through no fault of their own, are unable to work: children and individuals who are disabled.
- ▶ The President's immigrant proposals total \$14.6 billion over five years FY 1998-2002, \$4.9 billion are Medicaid costs (~~see attached table~~). The President's budget seeks to:
- ▶ **Restore SSI and Medicaid eligibility for the disabled immigrants (\$13.7 billion SSI and Medicaid costs).** The welfare law would discontinue SSI and restrict Medicaid benefits for legal immigrants including the disabled and children. The President's budget would continue to provide SSI and Medicaid for 320,000 legal immigrants who become disabled after they enter the country and exempt them from the deeming rules.
- ▶ **Restore Medicaid eligibility for non-SSI immigrant children (\$0.2 billion Medicaid costs only).** The Administration's budget would continue Medicaid for approximately 30,000 immigrant children, if they are otherwise eligible, and exempt them from the deeming rules.
- ▶ **Extend the refugee assistance exemption period from 5 to 7 years (\$0.7 billion SSI and Medicaid costs).** The President's budget would lengthen the exemption period for refugees and asylees from 5 to 7 years. The 5 year exemption in the welfare law does not provide enough time for refugees and asylees to become citizens.
- ▶ **Delay the Food Stamp ban until the end of FY 1997 (\$0.2 billion - ~~the cost of this proposal is not included in the overall immigrant proposal cost since the costs are~~** incurred in FY 1997). The welfare law denies Food Stamps to most legal immigrants currently receiving benefits and future applicants, affecting a million immigrants. Last year's Omnibus Consolidated Appropriations Act delayed the ban from January 1, 1997 to April 1, 1997 to give immigrants in the process of naturalizing more time to complete the process prior to having their benefits eliminated. Recognizing the effort that many are making to become citizens, this proposal would extend the delay to the end of FY 1997.

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Aren't you opening up the welfare reform bill with your immigrant proposals?

ANSWER:

- ▶ The President is remain firmly committed to implementing the welfare reforms enacted last year.
- ▶ But the immigrant restrictions of the new welfare law had nothing to do with the central goal of welfare reform --moving welfare recipients from welfare to work. This is **not** an effort to "open up" welfare reform, ~~it is~~ ^{but} an effort to restore benefits cuts that were attached to welfare reform and shouldn't have been part of the bill to begin with.
- ▶ Legal immigrants work hard, pay taxes and contribute to American society. Immigrant children and disabled immigrants who fall on hard times through no fault of their own should get medical and other vital assistance when they need it.

NGA PROPOSALS AND IMMIGRANTS

QUESTION:

The Governors asked the Administration to work with them and the Congress to “meet the needs of aged and disabled legal immigrants who cannot naturalize,” but specifically stated we did not need to reopen welfare reform to do it. Why then does the Administration propose to reopen welfare reform and make costly changes that would give welfare to immigrants?

ANSWER:

- ▶ The Administration is committed firmly to the major reform of welfare enacted last year.
- ▶ But the immigrant restrictions of the new welfare law had nothing to do with the central goal of welfare reform --moving welfare recipients from welfare to work. This is **not** an effort to “open up” welfare reform, it is an effort to restore benefits cuts that shouldn’t have been in the welfare bill to begin with.
- ▶ Legal immigrants work hard, pay taxes and contribute to American society. Immigrant children and disabled immigrants who fall on hard times through no fault of their own should get medical and other vital assistance when they need it.
- ▶ The Administration’s immigrant proposals are responsive to the concerns noted by the Governors and we welcome the opportunity to work with them and the Congress to rectify some of the unfair burdens placed on immigrants.
- ▶ Our budget addresses the needs of immigrants disabled after entry by reinstating their eligibility for SSI and Medicaid; exempts all legal immigrant children from eligibility restrictions; extends SSI and Medicaid eligibility for refugees from 5 to 7 years; and delays the Food Stamps cut-off until the end of the FY 1997.
- ▶ These proposals would restore aid to these most vulnerable people who need assistance through no fault of their own.
- ▶ In addition, our proposal is responsive to the NGA statement that the immigrant provisions represent a considerable cost shift to state and local governments. These provisions reduce the burden on states and local governments.

IS THERE A TANF SURPLUS?

QUESTION: Won't surpluses from TANF be sufficient to allow states to provide benefits to legal immigrants?

ANSWER:

- O **It's not a surplus.** TANF block grant levels are held flat based on state AFDC, JOBS, and Emergency Assistance spending during 1992-1995. Because AFDC caseloads have gone down, we can expect that the cost to states of AFDC-type *benefit* payments over the next few years should be lower than they were in 1992-1995. However, the funds are needed to support the transition from welfare to work.

When TANF was established, the states and the Congress realized that, as compared to the AFDC system, more funds would be needed in the early years to move families from welfare to work. Because of the recent decline in AFDC caseloads, states are in an especially good position to begin the historic transformation from the welfare program to a jobs program.

This is because any decrease in the total amounts states spend on direct benefits will help states meet critical needs and afford the increased costs of providing training, child care, creating jobs in high-unemployment areas, and other assistance needed to support the transition from welfare to work. Therefore, moving recipients into the workforce will not produce short-term savings.

While the block grant levels for each state do not increase from FY 1997 through FY 2000, required work participation rates increase from 25 to 50 percent, and required hours of work per week increase from 20 to 30 over that time period. There will be increased child care costs associated with these requirements. In addition, inflation will raise costs for services and may lead to increased nominal per-capita benefit costs. Finally, if there is a recession, we can expect that the pool of families needing TANF assistance will increase.

- O **This is only the beginning of welfare reform.** To fulfill the central goal of welfare reform -- moving people from welfare to work -- we must make sure that the tools to achieve it are available to states and communities. States will have to use their financial resources to provide supports like job training and child care necessary to move large numbers of single parents from welfare to work. And it will require an unprecedented commitment from business, non-profit organizations, and religious institutions. That's why the President's budget includes over \$3 billion for grants, as well as expanded tax incentives, to support states, cities, and the private sector in creating job opportunities for the hardest to employ welfare recipients. In fact, Republicans and Democrats in Congress have agreed that one of the five priority areas of bipartisan discussion in the budget will be incentives for business to hire welfare recipients.
- O **Cuts in assistance to legal immigrants are a cost-shift to states.** As the National Governors Association has said, the welfare reform restrictions on federal assistance to legal immigrants is a considerable cost-shift to states. If states divert financial resources

to legal immigrants, they may not have sufficient resources for job training and child care necessary to move large numbers of parents from welfare to work.

- O **Even under the old system, benefits are only part of the equation.** The TANF block grant combined funds for AFDC benefits with JOBS funds, Emergency Assistance funds, and funds for administration. Although AFDC benefit expenditures have declined, funds for other activities, such as Emergency Assistance, have increased substantially. Therefore, the effect of flat-funding TANF at 92-95 levels only provides unanticipated funds under one part of the equation -- benefit payments.
- O **Different states are in very different situations.** Some states have especially great needs for services, or smaller reductions in caseloads, or other special circumstances like areas of rural poverty which might need greater investments in economic development or transportation. Similarly, about 80 percent of all legal immigrants reside in only six states -- CA, NY, TX, FL, NJ, and IL. That's why some Governors like Governors Pataki, Bush, and Chiles have been so clear about the need for additional resources. In addition, because the decline in AFDC caseloads since 1995 has not been uniform across states, the financial impact of TANF will vary considerably across states.
- O **After caseload decline, many hard-to-place recipients remain on the rolls.** Now that caseloads are down, states are likely to find that they are now reaching the harder to place people, which will lead to increased costs. The legislation says this is a critical investment for us to make -- we need to expect work, and we need to provide the supports necessary for families to move from welfare to work.

WHY NOT A BLOCK GRANT

QUESTION:

Why not just establish a block grant to the States to assist them in providing services to those non-citizens who lose SSI?

ANSWER:

- There is no infrastructure in place at the state level to deliver income support to the disabled population. In many states, it is local government that directly provides health care to the indigent.
- Charity organizations may become these immigrants' only source of income support. Under a block grant that provides funds to State governments, it is not clear how the funds would reach those private organizations that actually provide the services.
- The history of using block grants to provide services to immigrants is discouraging. It has been attempted before without good results. The block grant created by the 1986 immigration reform law was the State Legalization Impact Assistance Grants (SLIAG) program, and proved to be an inefficient method of assisting the States and very difficult for them to manage. In addition, although SLIAG was federally funded, its appropriation in the third year was reduced by almost two-thirds to support discretionary spending elsewhere. By the fifth year, SLIAG funding was reduced to zero.
- The best solution is retain eligibility for the most vulnerable immigrants -- those who become disabled after entering the United States, refugees, and immigrants -- within the existing Federal social safety net.
- The Administration takes strong exception to statements made on the Hill that a temporary block grant approach would suffice because "the death rate" of disabled legal immigrants will solve the problem. Such statements are profoundly offensive to citizens and non-citizens with and without disabilities.

WHY NOT ALL ELDERLY

QUESTION:

Why didn't the Administration request reinstatement of eligibility for all elderly non-citizens?

ANSWER:

- The Administration proposal targets the most vulnerable legal immigrants affected by welfare reform -- disabled adults and children -- and reinstates their SSI and Medicaid eligibility.
- Approximately two-thirds of the non-citizens who are receiving SSI benefits because they are aged 65 can qualify on the basis of disability.
- Within the context of balancing the federal budget by FY 2002, the Administration is seeking to restore assistance only for the most vulnerable legal immigrants.

ADDITIONAL INFORMATION:

- The Administration did not propose to ban SSI eligibility for all aged non-citizens as part of welfare reform. Originally, the Administration proposed to exempt from the general ban on SSI eligibility those non-citizens who were over age 75. However, because of budget concerns, the first priority became protecting non-citizens disabled adults and children.
- Individuals who decide to sponsor aged immigrants are more likely to know, when they sign the affidavit of support, that it is unlikely that these non-citizens will be able to support themselves and that there may be age-related health expenses that they will be responsible for.

MAKING SPONSORS RESPONSIBLE

QUESTION: Why shouldn't these immigrants -- disabled and children -- be taken care of by the sponsors who agreed to take care of them?

ANSWER:

- We agree that sponsors need to be held responsible and accountable.
- However, welfare reform makes most legal immigrants ineligible for SSI and Food Stamp assistance, even those who have never had sponsors or whose sponsors have died.
- In fact, recent INS estimates of all FY 1994 non-refugee immigrants found that nearly half--or 44 percent--did not have sponsors.
- Also, sponsors of immigrants who arrived before welfare reform signed affidavits of support that are not legally binding and therefore do not obligate them to provide support or to reimburse for public assistance.
- The new law requires all family-based, and some employment-based, immigrants to have legally binding affidavits of support (~~which will be available in May 1997~~).
- Our proposal would exempt from these harsh new rules only those legal immigrants who become disabled after entry into the U.S. or legal immigrant children.
- Sponsors of legal immigrants who become disabled after entry have no possible way of planning for the costly care that results from a severe disability.
- We think it is unfair to impoverish such sponsors beyond regular program requirements for family income, or to withdraw assistance from disabled immigrants who have never had sponsors.
- Under the new deeming rules, not only must sponsors impoverish themselves so that immigrant family members are eligible for SSI and Medicaid assistance, but they are also liable to repay the amount of assistance received by such family members when these rules have made them least able to make repayments.
- Similarly, sponsors of immigrant children--like many working parents both citizens and legal immigrants--have difficulty ~~maintaining~~ ^{affording} affordable health insurance and ~~will~~ ^{would} be overwhelmed by health care expenses arising from severe illnesses or injuries suffered by their children (for example, children who suffer from leukemia or serious head injuries).
- Denying Medicaid to legal immigrant children whose families have fallen on hard times threatens the health and well-being of an extremely vulnerable population, and likely leads to more costly health care in the future.

STATE AND LOCAL IMPACTS OF NEW IMMIGRANT RESTRICTIONS

QUESTION:

What is the impact of the new immigrant eligibility restrictions on state and local governments and other service providers?

ANSWER:

- ▶ ~~Similar to other estimates in this area,~~ it is difficult to predict with any precision. *these provisions of?*
- ▶ However, CBO estimated total federal budget savings (through FY 2002) of nearly \$24 billion from the passage of welfare reform, and state and local governments will now have to decide how much of their own assistance they will provide to legal immigrants in order to replace this huge withdrawal of federal assistance. *?OMB?*
- ▶ Even though states and localities are provided options to deny various assistance to legal immigrants similar to that enacted for federal programs, it is unclear whether they will take such a course. Many of the legal immigrants are likely to remain residents of the state and denying them fundamental safety net assistance will merely result in other costs such as increased public health threats, increased homelessness and hunger, etc.
- ▶ States (and localities) with large immigrant populations will be affected disproportionately by the new restrictions (e.g., California, New York, Texas, Florida, Illinois, New Jersey, and Massachusetts).
- ▶ Therefore, these provisions represent a significant cost-shift from the federal government to state and local governments.
- ▶ The Medicaid restrictions in particular, but also the SSI restrictions, could adversely affect the revenues of hospitals and other health providers (such as nursing homes and doctors) in high-immigrant communities. *?*

drop?

IMMIGRANTS WHO LOSE SSI--EFFECT ON MEDICAID ELIGIBILITY

QUESTION:

Do immigrants who lose SSI lose Medicaid as well?

ANSWER:

- ▶ Not necessarily. The welfare bill specifically cuts off SSI cash assistance to qualified immigrants. The question of which immigrants retain Medicaid eligibility is a complicated one, because of the considerable variation that exists in Medicaid programs across the States, Territories, and the District of Columbia.
- ▶ In most states, receipt of SSI automatically makes an individual eligible for Medicaid. Therefore immigrants who lose their SSI and are not otherwise eligible for Medicaid under an optional eligibility category, may lose their Medicaid coverage.
- ▶ However, many states have optional eligibility categories to cover immigrants who lose their SSI. Specifically some states can cover individuals who meet SSI criteria but are not actually receiving cash assistance. In addition, some states can cover immigrants if they have a medically needy program.
- ▶ States that have a medically needy category and no other optional eligibility category may face difficulties in covering immigrants who lose SSI due to current Medicaid eligibility rules.¹ We realize that the medically needy rules pose a problem for some states and are exploring both administrative and legislative possibilities to give states the most flexibility to cover immigrants.
- ▶ Thus, whether or not an immigrant can continue to receive Medicaid coverage after they lose their SSI depends on what other optional eligibility categories each state covers for Medicaid.
- ▶ Immigrants in states that do not have an optional eligibility category may lose their Medicaid when they lose their SSI cash assistance.² We are exploring both administrative and legislative possibilities to give states the most flexibility to cover immigrants.
- ▶ As always, states can amend their plan to include this option, but coverage would be expanded to all individuals meeting the criteria, not just legal immigrants.
- ▶ Of course, all states have the option to decide not to offer Medicaid to qualified immigrants.

¹Arkansas, California, Georgia, Kansas, Kentucky, North Carolina, Wisconsin, and Illinois.

²Alabama, Delaware, Louisiana, Nevada, New Mexico, Texas, Wyoming, and South Dakota.

INCREASE OF NON-CITIZENS ON SSI ROLLS

QUESTION:

What explains the increase in the number of non-citizens on the SSI rolls?

ANSWER:

has grown from 9.5 million
The number of non-citizens on the SSI rolls has increased along with the number of legal immigrants admitted into the United States. *gone sh. 70 of*
In 1980 there were 9.5 million foreign born persons living in the U.S., slightly less than 4 percent of the U.S. population. ~~Since then, the number has increased by 15 million. Today we have 24.5 million foreign born residents in the U.S. - almost 9.5 percent of the U.S. population, according to the Bureau of the Census.~~ *to over*

Given the increase in immigration it is not surprising that there has been an increase in the numbers of non-citizens on the SSI rolls over the past 13 years. However, the number remains a small percentage of the total SSI rolls, rising from 3 percent in 1982 to a little over 12 percent in 1995. The number of sponsored non-citizens receiving SSI has risen ~~more slowly~~, from about 2 percent to only about 8 percent over the same period. *te* *don't w/c*

Statistically, the largest increase in noncitizen participation has been seen in the aged recipient population. But this increase should be viewed in the same context. Over this same 13-year period, the number of aged citizen recipients has been declining, because most citizens aged 65 and older now receive Social Security benefits that are large enough to preclude SSI eligibility. Participation of aged citizens has dropped from almost 1.5 million in 1982 to a little over 987,000 in 1995, a decline of 32 percent. In addition, the number of aged non-citizens newly awarded benefits has declined from about 73,000 in 1993 to just a little over 46,000 in 1995, a decline of 37 percent. *✓*

add affidavit of SV

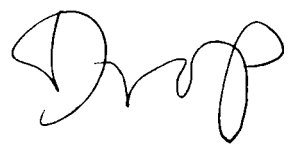
REFUGEE ELIGIBILITY EXTENSION

QUESTION:

What accounts for the high welfare utilization rates among refugees?

ANSWER:

- ▶ By definition, refugees and asylees are individuals who come to our country to escape persecution in their country of origin. These individuals have generally experienced war or other violent trauma and often need more time to put their lives together and become self-supporting than other legal immigrants.
- ▶ About one-half of refugees speak little or no English at arrival; only about one-tenth speak English fluently.
- ▶ Therefore, we believe refugees and asylees need a longer eligibility period for assistance than other qualified aliens because of the unique circumstances that bring refugees and asylees to the U.S.
- ▶ *Under the P's proposal would get given*
~~Specifically, refugees and asylees need an additional two years to address their special needs and to provide sufficient time to enable them to achieve stable self-support.~~ The President's budget proposal would extend refugees' eligibility for SSI and Medicaid benefits from 5 to 7 years. *or apply (MCI 7)*
- ▶ The longer time period is particularly important because more recent refugee populations have included larger numbers of older and elderly individuals who require a longer time to adjust.
- ▶ Finally, refugees are not even eligible to apply for naturalization until they are near the end of their 5 years residence. Since the processing time for naturalization applications is now about 1 year, this extension from 5 to 7 years is necessary to physically permit refugees to comply with INS procedures without being denied crucial services during the interim.



CUBAN/HAITIAN ENTRANTS

QUESTION:

Are Cuban/Haitian entrants eligible for assistance under the new welfare reform rules?

ANSWER:

- They are specifically eligible for the special refugee assistance programs under the Office of Refugee Resettlement.
- Even though Cuban/Haitian entrant status is not specifically included in the list of immigration categories which define who is a "qualified alien", most entrants have been given parole status for a period of at least 1 year or legal permanent resident status which does make them qualified aliens.
- If entrants are qualified aliens, they would be treated the same as other qualified aliens under the state eligibility options in TANF and Medicaid (if they entered the U.S. before enactment of the welfare law in August 1996), or denied TANF and Medicaid for 5 years after entry (if they entered after enactment in August 1996).
- Under welfare reform, Cuban/Haitian entrants are not specifically exempted from eligibility restrictions as refugees are.

Background

Under bilateral agreement between U.S. and Cuba it is estimated that about 20,000 Cubans will be allowed to enter the U.S. annually, the majority of whom will be parolees or legal permanent residents (i.e., qualified aliens), with an estimated 6,000-7,000 likely to be refugees.