

Immigration and Public Charge *(last updated 3/14)*

1. We have immigrant patients who are concerned that seeking care for COVID-19 could negatively impact their immigration status. What should we tell them?

Individuals should not refrain from seeking medical care for COVID-19 (testing or treatment) due to concerns about their immigration status. We know of no circumstances under which seeking COVID-19 testing and treatment would negatively impact a patient's immigration status, for the following reasons:

- The only time that using any public benefit (e.g., Medicaid, SNAP) could impact the immigration status of a person currently residing in the US is if that person is subject to a “public charge test.”
- Few immigrants will ever be subject to a “public charge test.” For example, refugees, victims of trafficking, persons without documentation, and persons who already have Legal Permanent Residency will never be subject to a public charge test.
- For those immigrants who could potentially be subject to a public charge test, this would only occur if and when they apply for Legal Permanent Residency status (aka their first Green Card). These individuals should know that:
 - Sliding fee discounts at a health center will never be considered in a public charge test.
 - “Emergency Medicaid” (see question below) will never be considered in a public charge test.
 - While regular Medicaid will generally be considered in a public charge test, on March 14, 2020, the US Customs and Immigration Service (USCIS) [announced](#) that Medicaid coverage for services related to COVID-19 (prevention, testing, or treatment) will not be considered in a public charge test.

2. What is “Emergency Medicaid”? Will it count in a public charge test?

Emergency Medicaid is Medicaid coverage for “emergency” services that is provided to individuals who would otherwise would have qualified for regular Medicaid except for their immigration status. For example, persons with Temporary Protected Status (TPS), DACA recipients, and persons without documentation are ineligible for regular Medicaid. However, if they meet all other Medicaid eligibility requirements (e.g., income and assets) they are eligible for “emergency Medicaid”.

The public charge rule explicitly states that Emergency Medicaid will not be considered in public charge tests.

3. How does Emergency Medicaid define “emergency services”?

An emergency means the sudden onset of a medical condition, including labor and delivery, which shows acute symptoms of sufficient severity (including severe pain) such that the absence of immediate medical attention could reasonably be expected to result in one or more of the following:

1. Serious jeopardy to the patient's health;

2. Serious impairment to bodily functions; or
 3. Serious dysfunction of a bodily organ or part.
4. **We have an immigrant patient who is eligible for regular Medicaid, and plans to apply for a Green Card soon. She is concerned that enrolling in Medicaid to cover her COVID-19 testing and treatment could negatively impact her public charge test. What should we tell her?**

As long as she limits her Medicaid use to services related to the prevention, testing, and treatment of COVID-19, the USCIS has stated that this use of Medicaid will not negatively impact her public charge test. Also, public charge tests do not consider the use of Medicaid and other public benefits that fall below a certain threshold (e.g., 12 months, certain dollar amounts.) If the patient chooses to remain on Medicaid after completing COVID-19 treatment, she should review the public charge rule, including the range of factors considered and the minimum thresholds for use of public benefits that would be considered.