

Impact of Federal Welfare Reform on Immigrants

U.S. Commission on Immigration Reform
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FINAL REPORT

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I. OVERVIEW

This report was prepared by The Lewin Group for the U.S. Commission on Immigration Reform. This report is based on findings from a survey of key informants in five states (California, Florida, Illinois, New York and Texas) conducted to determine the effects of federal changes to welfare policy as a result of the enactment of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Public Law 104 –193, PRWORA). The survey, funded by the John D. and Catherine MacArthur Foundation, focused on the impact of changes to the following federal programs: food stamps, Supplemental Security Income (SSI), Temporary Assistance to Needy Families (TANF), and the Medicaid program (with the exception of emergency medical services), as well as on changes to state and local programs. Interviews were conducted from April through June 1997. Survey findings were updated through July 24, 1997. An executive summary and five detailed state reports accompany this overview.

This overview summarizes findings from the five state survey in the following areas:

Provisions of PRWORA that apply to immigrants

Political environment and state decisionmaking regarding PRWORA

State and local implementation of PRWORA

Impact of welfare reform on state and local governments, local economies, health and social service providers, and immigrants

Provisions of PRWORA

In August 1996, the 104th Congress of the United States passed historic welfare reform legislation that has had enormous consequences for states. Among the changes contained in the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 are specific restrictions on welfare programs and federal public benefits for immigrants. Title IV of PRWORA sets forth new requirements on the states to discontinue benefits and deny eligibility for federal, state and local welfare programs to specific classes of immigrants, including qualified immigrants, non-qualified immigrants, and illegal immigrants.

Title IV of PRWORA intersects with federal immigration law (i.e. Illegal Immigration Reform and Immigrant Responsibility Act of 1996), particularly as it relates to the designation or determination of immigration status. States are now required to understand the intricacies of immigration law in order to process applications by immigrants for welfare benefits.

Political Environment and State Decisionmaking Regarding PRWORA

In order to respond to the Welfare Act, states are required by their constitutions and by administrative practice to make a host of legislative and policy decisions with respect to the various federal, state and public benefits that immigrants receive. This is a challenging task because the criteria established in PRWORA for denying and limiting benefits to immigrants

are not uniform across programs.

Furthermore, despite the enactment of PRWORA, there is still a high level of uncertainty at the federal level surrounding immigrant eligibility for SSI and Medicaid. States are faced with the task of responding to the immigrant-related provisions of PRWORA in the absence of final decisions around major issues (e.g. whether SSI benefits will be restored for all or a fraction of legal immigrants) at the federal level.

As part of their response to PRWORA, many states and localities have legally challenged the denial of benefits for immigrants and are strongly advocating that the federal government reassumes its responsibility in this area. States argue that since they are not responsible for “immigration policy”, they should not be faced with the responsibility of having an “immigrant policy”, i.e. determining whether immigrants may receive benefits and paying for those benefits.

There is consensus that the objective of reducing federal responsibility for immigrants under these provisions will result in an unprecedented cost transfer to the states. In turn, some states will transfer liability for the costs to localities.

States are currently making complex and unprecedented decisions regarding federal programs in three areas: (i) immigrant eligibility decisions, i.e. whether immigrants should be covered and which types of immigrants should be covered; (ii) the level of benefits to be offered to immigrants; (iii) administrative decisions, i.e. whether to create new state programs or reform current programs to serve immigrants.

State and Local Implementation of PRWORA

The criteria for denying and limiting benefits to immigrants in PRWORA are not uniform across federal programs. The lack of uniformity and the complexity of program designs create a significant administrative burden on states to fashion program-specific eligibility changes, including management of information and the development of new tracking and monitoring systems for all affected programs.

Among the five states we surveyed, there is considerable variation in the extent to which decisions have been made. The legislative sessions in Florida, Illinois and Texas have ended. On the other hand, in California and New York, the legislatures are in session and there are still many uncertainties. In this section, we present an overview of the legislative and policy decisions that these five states have made through this point in time. States continue to debate about how to respond to the immigrant provisions of PRWORA. When the federal budget is approved, states may have to both reconsider their positions and evaluate issues they have not addressed yet. Additionally, once PRWORA is fully implemented, states will have to confront its impacts on immigrants.

Among the five states in this study, there is a wide range of responses to the immigrant provisions of the Welfare Act. Texas appears to be at one end of the spectrum. This state seems to be “in denial” of the devastating effects that PRWORA will have on the immigrant

population. On the other hand, Illinois falls on the other end of the spectrum, having already made several important decisions regarding immigrants. California, Florida and New York fall between Texas and Illinois with regard to reaching consensus around immigrant eligibility and program changes necessary to replace benefits for immigrants.

States are making decisions about eligibility for three major types of immigrants: qualified immigrants (as defined by the Welfare Act) who entered the country before the enactment of PRWORA (i.e. August 22, 1996), non-qualified immigrants, and legal immigrants who entered the country after the enactment of the Act (hereinafter referred to as new immigrants). State decisions concerning the four main federal programs are summarized below.

SSI: Only Illinois has decided to replace SSI for a fraction of qualified immigrants (i.e. those who were receiving benefits prior to August 22, 1996). Similarly, only Illinois will replace SSI for a fraction non-qualified immigrants--it will cover those individuals who were receiving benefits prior to the enactment of the Act. No state has decided to replace SSI for new immigrants.

Food Stamps: No state has decided to replace food stamps for qualified immigrants who entered the United States before the enactment of PWRORA, non qualified immigrants or new immigrants.

TANF: All states in the survey have decided to cover under TANF qualified immigrants who entered the country prior to August 22, 1996. No states have decided to cover non-qualified immigrants or new immigrants (during the five-year federal ban) for TANF at state cost.

Medicaid: All states in the survey will cover pre August 22, 1996 qualified immigrants under their Medicaid programs. However, no state will cover post August 22, 1996 qualified immigrants or new immigrants at state cost.

In addition to making decisions about immigrant eligibility, replacement of programs for immigrants and the respective level of benefits, states need to develop systems that track information on immigrants. Currently, states rely on the Systematic Alien Verification for Entitlements (SAVE) Program, a single federally-developed information system that can provide information on immigrant status. This is an inter-governmental information-sharing service for agencies and institutions that was developed pursuant to Section 121 of the Immigration Reform and Control Act of 1986 (IRCA). However, states now need information systems that can track immigrant categories and exemption criteria as defined in the Welfare Act. States are currently waiting for the U.S. Attorney General to develop verification criteria and procedures, and then they will have a year to make their systems conform to the new guidelines.

Impact of welfare reform on state and local governments, local economies, health and social service providers, and immigrants

The effects of the immigrant related provisions of the Welfare Act will be far reaching. State and local governments will face new responsibilities, an unprecedented cost transfer from the

federal government, and complicated administrative decisions. State projections of the number of immigrants who will become ineligible by type of public program apply only to current caseloads. Neither the states nor the federal government has the capacity at present to project the number of qualified, non-qualified and new immigrants who may need assistance but will not be eligible for public benefit programs in future.

The number of current recipients who will lose benefits as well as the cost to the states of losing those federal funds is significant. In California, 345,000 immigrants will lose food stamps; and 243,720 will lose SSI. In Florida, 97,658 immigrants will lose food stamps; 54,000 will lose SSI; 503 will lose TANF; and 3,062 will lose Medicaid. In Illinois 39,000 immigrants will lose food stamps; 22,000 will lose SSI; 1,698 will lose TANF; and 2,379 will lose Medicaid. In New York, 130,000 immigrants will lose food stamps; and 80,000 will lose SSI. In Texas, 140,937 immigrants will lose food stamps; 34,892 will lose SSI; about 37,061 will lose the state optional Medicaid benefits and 33,725 will lose SSI-linked Medicaid benefits. For those states that provided estimates, the loss of federal funds due to the immigrant provisions of PRWORA will be considerable. Under the Welfare Act, the most significant financial loss to the states will be the loss of SSI and food stamp funds. For food stamps and SSI, Florida will lose nearly \$311 million per year, while Illinois and Texas will lose about \$150 million each.

Local economies will be seriously affected by the direct loss of benefits as well as the indirect economic impact associated with diminished household incomes, purchasing power and workforce productivity.

Community-based social service and health care providers are likely to face an increased demand for their services as immigrants are denied public benefits. Whether the financial and structural capacity of these providers will be sufficient to offer a safety net to immigrants remains to be seen. Providers are also concerned that immigrants, qualified and nonqualified, may not seek necessary medical care due to the fear of being reported to the INS or fear of jeopardizing one's chances of obtaining citizenship. These fears could pose a serious health problem to the states and localities if immigrants do not receive care for infectious or communicable diseases like tuberculosis.

Immigrant families will be the most negatively impacted by PWRORA. The effects on immigrants include fear and confusion, diminished household incomes, increased food and housing insecurity, reduced access to health care and other social services, and changing incentives regarding naturalization, assimilation and family reunification strategies. The weakening of immigrants' socio-economic status and well-being will have a detrimental effect not only on immigrants themselves but on those U.S. citizens who are members of immigrant families and households as well as on communities where immigrants constitute a substantial fraction of the population, work force and social fabric.

II. INTRODUCTION

In April 1997, The Lewin Group received a grant from The John D. and Catherine T. MacArthur Foundation to conduct a survey of key informants in five states to determine the effects of federal changes to welfare policy as a consequence of Congressional enactment in 1996 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Public Law 104 - 193). Lewin also received funding from the U.S. Commission on Immigration Reform to prepare a report summarizing the findings from the five state survey.

The states included in the survey are California, Florida, Illinois, New York, and Texas. The number of immigrants residing in these five states collectively represents approximately 75% of the total number of immigrants currently living in the U.S.

This report summarizes the findings from the five state survey. Accompanying this Executive Summary are separate state reports which provide detailed findings from each of the states studied. Also attached in separate volumes are appendices for each of the states that include official documents, research papers, and other supporting materials that describe legislative, judicial, administrative, and other findings or activities outlined in each of the state reports.

This Executive Summary is organized into the following sections:

- Project Purposes and Methods
- State Policy Options
- State Decisions and Actions
- Actual and Expected Impacts on Immigrants
- State Efforts to Monitor Impacts
- Conclusion
- Appendices

III. PROJECT PURPOSES AND METHODS

In August 1996, the 104th Congress of the United States passed historic welfare reform legislation that has had enormous consequences for states. Among the changes contained in the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, (hereinafter referred to as PRWORA or the Welfare Act), are specific restrictions on welfare programs and federal public benefits for aliens (hereinafter also referred to as immigrants). Title IV of PRWORA (See Appendix I) sets forth new requirements on the states to discontinue benefits and deny eligibility for federal welfare programs to specific classes of immigrants, including qualified immigrants, non-qualified immigrants, and illegal immigrants. (Appendix I)

Title IV sets forth the basis of national policy concerning welfare benefits for immigrants including specific restrictions and exceptions regarding eligibility for federal benefits; eligibility for state and local benefits; attribution of income and affidavits of support for immigrants establishing eligibility; general provisions regarding verification and communication between states, local and federal authorities regarding immigrants and law enforcement; conforming amendments related to assisted housing; and earned income credit denied to unauthorized employees. A brief summary of the discontinuation of benefits by federal and state program for specific classes of immigrants is provided in Appendix II.

In its entirety, Title IV intersects with federal immigration law (i.e. Illegal Immigration Reform and Immigrant Responsibility Act of 1996), particularly as it relates to the designation or determination of immigration status. States are now required to understand the intricacies of immigration law in order to process applications by immigrants for welfare benefits. Currently, even the description of who is a “legal, qualified alien” creates confusion among many state workers unfamiliar with conditions surrounding entry to the U.S. by non-citizens and the role of the Immigration and Naturalization Service in the determination of immigration status. For qualified aliens, the distinctions drawn among asylees, parolees, refugees, persons with deportation withheld, and determination of minor children suffering abuse or cruelty and in need of welfare benefits altogether create ample opportunity for dismay and confusion at the local level of welfare program administration.

In addition, provisions of PRWORA regarding new eligibility requirements for immigrants requires substantial documentation by the applicant to establish all of the requirements, including residency and income provisions. One particular section of the law requires the attribution of sponsor income and resources for aliens with sponsorship. These requirements require significant understanding of immigration law and procedures and also impose new requirements to review the income and resources not only of the alien but of his/her sponsor which states have rarely performed.

Practically, states report that the enforcement of Title IV of PRWORA creates new types of work to determine an applicant’s immigration status for which they are unprepared and untrained. State respondents also report that the type of work required to process applications for benefits now borders on the exercise of federal powers regarding a determination of an individual’s immigration status. This intersection with federal responsibilities concerns the states and will continue to be an issue for states and localities.

Nearly one year since the passage of PRWORA, governors, legislators, agencies, interest groups, and citizens in each of the states are struggling to come to grips with the complexity of the federal law, the interaction of provisions in PRWORA with changes in federal immigration law, the range of policy and program alternatives available to the states to respond to PRWORA, and the expected impact of policy and program changes on immigrants.

Study Questions

The Lewin Group was commissioned to conduct a phone survey of key informants in five states with the highest proportion of resident immigrants to determine the impact of federal welfare policy on immigrants, including attention to impacts at the local level. The main study questions were as follows:

1. What changes are states planning in response to federal policy changes that discontinue immigrants from specific federal programs and federal/state programs?
2. How are counties and service providers responding to the federal and state welfare reforms?
3. How will the state and county welfare reforms affect the costs to states, counties and providers, particularly with respect to substitution of funds for withdrawn federal payments, and also with respect to other social (i.e. human) costs?
4. What are the problems that states, counties and providers report they will face in responding to welfare reform that were previously unforeseen by government officials?
5. What distinctions, if any, are states making to determine eligibility for welfare programs under their reforms with regard to an individual's immigration status, age, disability level, or employment status?
6. What are the direct effects of the policy changes, including health care delivery (access to care, payment for care, cost of care, and quality of care) for immigrants at the community level?
7. Are there state and local plans to monitor and assess the impact of policy changes?

Key Sources and Interviewees

Lewin developed a list of key informants in each of the states, drawing from several areas of the public and private sectors: government officials at the state and local levels charged with implementing state welfare reforms, service providers, research organizations, and advocacy groups. The officials contacted included key staff to Governors, Special Assistants on Welfare Reform, sponsors of key state legislation, state budget officers, agency heads in health care and welfare, legislators and legislative staff, state Attorneys General, County Commissioners, Boards of Supervisors, and other local officials charged with planning and executing local-level reforms.

Lewin initially contacted between 35 and 125 individuals in each of the states, depending on the size of the state, number of localities with significant immigrant populations, and the degree of local involvement in shaping state responses to the federal welfare changes. From the over 350 initial contacts, we developed about 200 key sources and conducted about 100 full interviews to produce the state reports. Key sources and interviewees are listed in Appendix III.

Lewin developed a structured interview protocol to guide each of the interviews. The protocol was sent in advance to each interviewee or group of interviewees, where we had multiple informants participating in a single interview (Appendix IV). Because of the complexity of the issues, the evolving nature of state decisionmaking and action in the implementation of welfare reform, and the uncertainty posed by ongoing federal budget negotiations concerning retention of certain key provisions of PRWORA affecting immigrants, informants had a need to speak well beyond the allotted time. In most cases, the interviews exceeded 60 minutes, some requiring follow-up interviews to complete the interview protocol and to secure additional referral sources.

Respondents welcomed the project effort and were extremely generous with their time, referrals, insight, and advice. A number of individuals contacted expressed interest in the study but declined to participate. Most of these non-respondents stated that since the status of decisionmaking was still in flux in their respective states, they did not want to engage in speculation or conjecture as to what the ultimate legislative decisions would be. Responses from each of the interviews were synthesized and are contained in separate state reports. The outline for each of the state reports is provided in Appendix V.

The following sections summarize findings from the state interviews. This report attempts to capture the high-level commonalities among the states and report on the significant differences with regard to decision processes, policy frameworks, program options, implementation of state and local decisions regarding welfare reforms affecting immigrants, and impacts on individuals and communities. Detailed state reports are attached to this Executive Summary. The state reports include findings from the many interviews conducted for each state and also include official records and proceedings describing the legislation and administrative procedures states have adopted or intend to adopt to implement welfare reform at the state and local level of government.

IV. STATE POLICY OPTIONS

In order to respond to the Welfare Act states are required by state constitutions and administrative practice to make a host of legislative and policy decisions with respect to the various federal, state and public benefits that immigrants receive. Various reasons why these changes pose challenging and protracted deliberations are discussed below.

The criteria established in PRWORA for denying and limiting benefits to immigrants are not uniform across programs. For example, food stamps and the Supplemental Security Income (SSI) program, which are entirely funded by the federal government, have been discontinued for legal immigrants, including qualified immigrants, with the exception of five categories of immigrants. For Temporary Assistance for Needy Families (TANF) program -- now a block grant according to PRWORA -- and Medicaid -- still an entitlement program funded by both the federal and the state governments -- states have the option of continuing to cover qualified immigrants who entered the United States before August 22, 1996.

Despite the enactment of PRWORA, there is still a high level of uncertainty at the federal level surrounding immigrant eligibility for SSI and Medicaid. The federal budget agreement

(April 1997) would restore SSI to those immigrants who become disabled after entering the United States; eliminate restrictions on SSI and Medicaid for qualified immigrant children; delay the ban on food stamps for current recipients from April 1, 1997 to September 30, 1997; and extend the exception for refugees and asylees from five to seven years. However, members of Congress continue to debate the extent of the restoration of benefits for immigrants. Most of the discussions have focused on the SSI program. Two particular amendments were passed to the Senate version of the Balanced Budget Act. The first amendment would exempt qualified immigrants who come in the future and are too disabled to naturalize from the SSI restrictions. The second amendment would allow Amerasians to receive SSI and all other benefits during their first seven years in the United States. While the Senate version passed a few amendments revising provisions impacting immigrants, the House version of the Balanced Budget Act did not include any such provisions. The conference committee is currently meeting to iron out the differences between the House and the Senate bills. According to the National Law and Immigration Center, the House and Senate Republican conferees decided to support the provisions least favorable to immigrants in cases where the House and Senate versions of the bill diverge. As of July 23, 1997, the bill would provide SSI to qualified immigrants who were receiving SSI on August 22, 1996; all other classes of immigrants are not qualified and therefore face the termination of their benefits. These decisions are not final, however, until the White House and the Congress complete their negotiations over the balanced budget bill.

Several governors and congressional members feel strongly that the federal government should reassume its responsibility and restore SSI and food stamps benefits for legal immigrants. States are afraid of taking action to replace those benefits with state funds while there is still no resolution at the federal level. It is felt that by assuming this responsibility, states would be weakening their position vis-à-vis the federal government. On the other hand, states face internal pressures to protect immigrants by replacing benefits. Pro-immigrant legislators, social service providers and advocacy groups argue that, although the federal government should ultimately be responsible, with the enactment of PRWORA, "the ball is now on the states' court." There are indications that large sectors of the population view as unacceptable the human, public health and economic costs of denying assistance to poor legal immigrants. For example, in California, a recent survey of registered voters showed that 92 percent support public benefits for legal immigrants¹.

There is consensus that the immigrant provisions of the Welfare Act represent an unprecedented cost transfer from the federal government to the states. Besides the direct costs of providing benefits, there would be significant administrative costs if states were to establish their own programs to serve immigrants. For example, if a state wanted to replace food stamps it would need to create a new program for immigrants, while citizens will continue to be served by the U.S. Department of Agriculture (USDA) food stamps program. Another possibility would be for the states to contract out the provision of benefits for immigrants with the federal government. Currently, a federal bill (HR1469), which has not been passed yet,

¹ The survey, conducted by the Service Employee International Union, polled a sample of registered voters who have voted in recent elections about various topics--the questions on public benefits for legal immigrants constituted a small section of the questionnaire. The results of this survey will be available soon.

contains language permitting states to contract with USDA to continue providing food stamps to legal immigrants.

In addition to the cost-shifting issue, states question whether the federal government has the right to force states to make decisions about public benefits for immigrants. States argue that “immigration policy”, i.e. determining and enforcing the conditions under which non-citizens can enter and reside in the country legally, is a federal responsibility. Therefore, states should not be faced with the responsibility of having an “immigrant policy”, i.e. determining whether immigrants, whom they did not admit, may receive benefits. Nor should states be asked “to act as agents of the INS”. An individual interviewed for this study illustrated this paradox by suggesting that if the federal government wants to decentralize immigrant policy, it should also be willing to decentralize immigration policy.

Policy options regarding federal programs

The decisions that states need to make regarding federal programs can be classified in three types:

- 1) Immigrant eligibility decisions, i.e. whether immigrants should be covered and which types of immigrants should be covered.
- 2) Economic decisions, i.e. determining the level of benefits to be offered to immigrants.
- 3) Administrative decisions, i.e. whether to create new state programs or reform current programs to serve immigrants.

SSI

According to the welfare act, with the exception of five immigrant categories, all non-citizens will lose eligibility for SSI. However, as discussed above, there is still great uncertainty around the continuation of the SSI program for immigrants. States will have to decide whether to establish a state-funded program to replace benefits for those immigrants who will eventually lose SSI. The range of decisions that states need to make are summarized in Table 4.1.

Table 4.1: Range of State Decisions Regarding Replacement of SSI for Immigrants

Immigrant eligibility decisions
Whether to wait until the federal budget is passed and it is clear which types of immigrants will lose SSI.
Whether to create a state program to replace SSI. If this program is created before the federal budget is passed, the state will have to estimate which types of immigrants are less likely to be covered by the federal government.
Whether to cover only qualified aliens as defined in the Welfare Act or all legal aliens (qualified and non-qualified).
Whether to cover only qualified (legal) immigrants who entered the country before the

<p>enactment of PRWORA (current immigrants) or cover all qualified (legal) immigrants regardless of their date of entry.</p> <p>Whether to subject state-funded coverage for qualified (legal) immigrants who entered the country after the enactment of PRWORA (new immigrants) to deeming.</p>
Economic decisions
Level of benefits.
Administrative decisions
<p>Structure of state program to replace SSI.</p> <p>If there are state programs linked to SSI (e.g. in-home support services, Medicaid), state may want to de-link eligibility to allow immigrants losing SSI to continue receiving benefits/services under those programs.</p>

Food stamps

According to the Welfare Act, with the exception of five immigrant categories, all non-citizens will lose eligibility for food stamps. States will have to decide whether to establish a state-funded program to replace food stamps. The range of decisions that states need to make are summarized in Table 4.2.

Table 4.2: Range of State Decisions Regarding Replacement of Food Stamps for Immigrants

Immigrant eligibility decisions
<p>Whether to discontinue food stamps for immigrants by April 1, 1997 or promote recertification of immigrants to receive food stamps to delay discontinuation.</p> <p>Whether to create a state program to replace food stamps.</p> <p>Whether to cover only qualified aliens as defined in the Welfare Act or all legal aliens (qualified and non-qualified).</p> <p>Whether to cover only qualified (legal) immigrants who entered the country before the enactment of PRWORA (current immigrants) or cover all qualified (legal) immigrants regardless of their date of entry.</p> <p>Whether to subject state-funded coverage for qualified (legal) immigrants who entered the country after the enactment of PRWORA to deeming.</p>
Economic decisions
Level of benefits.
Administrative decisions
<p>Whether to extend recertification periods as far as possible, but in any event not later than August 22, 1997. This option is from the waiver the USDA Food and Consumer Service issued subsequent to the enactment of PRWORA. The waiver allows States to extend certification periods for aliens currently receiving Food Stamps for up to 12 months, or up</p>

to 24 months in the case of elderly and disabled aliens, but not past August 22, 1997.

Whether to seek a waiver from USDA to exempt able-bodied, childless adults between the ages of 18 and 50 from the Federal welfare provisions if those individuals live in a county with an unemployment rate greater than 10 percent. Also, counties could qualify for a different waiver because of their designation as “labor surplus areas.”

If HR1469 is passed, whether to contract with USDA to continue providing food stamps to immigrants who lose assistance or create state program to replace food stamps.

Structure of state program to replace food stamps.

TANF

According to the Welfare Act states are authorized to determine the eligibility of qualified aliens for TANF. Federal funds may be used for covering qualified immigrants. States may use their own funds to cover non-qualified and new immigrants. The range of decisions that states need to make are summarized in Table 4.3.

Table 4.3: Range of State Decisions Regarding Continuation & Replacement of TANF for Immigrants

Immigrant eligibility decisions
<p>Whether to continue covering qualified immigrants. Federal funds may be used for covering qualified immigrants. If the state decides to cover qualified immigrants, the block grant amount received from the federal government, in combination with the corresponding state funds, should be sufficient to cover those immigrants. The state may decide to cover only certain types of qualified immigrants.</p> <p>Whether to use state funds to cover all legal immigrants (i.e. qualified and non-qualified immigrants). Federal funds may not be used to cover non-qualified immigrants.</p> <p>Whether to cover only qualified (legal) immigrants who entered the country before the enactment of PRWORA (current immigrants) or cover all qualified (legal) immigrants regardless of their date of entry. During the five year ban, federal funds may not be used to cover new qualified immigrants. After the five-year ban, federal funds may be used to cover qualified immigrants but states must deem the income and resources of the alien’s sponsor.</p> <p>Whether to subject state-funded coverage for qualified (legal) immigrants who entered the country after the enactment of PRWORA to deeming.</p> <p>Whether to cover citizen children of non-qualified immigrants.</p>
Economic decisions
<p>Level of benefits.</p>
Administrative decisions
<p>TANF implementation decisions around immigrants including:</p> <p style="padding-left: 40px;">Whether the state will implement any immigrant-specific programs in regard to work</p>

requirements, e.g. job training programs in appropriate languages

Whether the state plans to include any immigrant categories (e.g. refugees) in the fraction of recipients to be exempted from the TANF work requirements

If the state decides to cover new qualified or non-qualified immigrants, whether the state will have this spending count towards the “maintenance of effort” requirement for TANF under PRWORA

TANF implementation decisions around households composed of non-citizen and citizen members including:

Whether new qualified, non-qualified and illegal immigrant parents of citizen children will be eligible for limited assistance

Whether new qualified and non-qualified immigrant parents will have to meet work requirements

Whether undocumented immigrant parents will be required to meet work requirements through community service, since they are not legally permitted to work in the United States

Whether single undocumented immigrant parents will be eligible for child care.

Medicaid

According to the Welfare Act states are authorized to determine the eligibility of qualified aliens for Medicaid. Federal funds may be used for covering qualified immigrants. States may use their own funds to cover non-qualified and new immigrants. Emergency Medicaid must be available to all types of immigrants--including illegal immigrants. The range of decisions that states need to make are summarized in Table 4.4.

Table 4.4: Range of State Decisions Regarding Continuation & Replacement of Medicaid for Immigrants

Immigrant eligibility decisions

Whether to continue covering qualified immigrants. Federal funds may be used for covering qualified immigrants. The state may decide to cover only certain types of qualified immigrants.

Whether to use state funds to cover all legal immigrants (i.e. qualified and non-qualified immigrants). Federal funds may not be used to cover non-qualified immigrants.

Whether to cover only qualified (legal) immigrants who entered the country before the enactment of PRWORA (current immigrants) or cover all qualified (legal) immigrants regardless of their date of entry. During the five year ban, federal funds may not be used to cover new qualified immigrants.

Whether to cover citizen children of nonqualified immigrants and whether to distinguish between children in a family with citizen and nonqualified immigrants children.

Whether to subject coverage for qualified (legal) immigrants who entered the country

after the enactment of PRWORA to deeming.
Economic decisions
Level of benefits
Administrative decisions
Whether to establish eligibility criteria (i.e. medically needy) to allow immigrants who lose SSI to continue receiving Medicaid--such criteria may already exist.

Policy options regarding state and county programs

Besides restricting immigrant eligibility for federal programs, the Welfare Act limited immigrant eligibility for state and county programs. States are authorized to determine the eligibility of qualified immigrants who entered the United States before August 22, 1996, for state and county programs. States are also authorized to determine the eligibility of non-immigrants under the Immigration and Nationality Act and aliens paroled into the United States for less than a year. If a state wants state and county programs to cover non-qualified and illegal immigrants, it has to enact a state law after the enactment of PRWORA that affirmatively provides for such eligibility.

State legislative and policy decisions regarding immigrant-related provisions of Welfare Act

As described above, states are faced with making multiple decisions regarding the immigrant-related provisions of the Welfare Act. Among the five states we surveyed, there is considerable variation in the extent to which decisions have been made. The legislative sessions in Florida, Illinois and Texas have ended. On the other hand, in California and New York, the legislatures are in session and there are still many uncertainties. In this section, we present an overview of the legislative and policy decisions that these five states have made through this point in time. This, of course, does not mean that the states in question will not continue debating how to respond to the immigrant provisions of PRWORA. When the federal budget is approved, states may have to both reconsider their positions and evaluate issues they have not addressed yet. Additionally, once PRWORA is fully implemented, states will have to confront its impacts on immigrants.

Among the five states in this study, there is a wide range of responses to the immigrant provisions of the Welfare Act. Texas appears to be at one end of the spectrum. Several interviewees stressed that the state seems to be “in denial” of the devastating effects that PRWORA will have on the immigrant population. On the other hand, Illinois has already made two important decisions, i.e. replacing SSI for a fraction of those immigrants who may lose benefits and continuing prenatal care for all types of immigrants. Furthermore, Illinois appears to be the only state where practically all the range of policy options discussed in Section 2, have been considered. California, Florida and New York are between Texas and Illinois with regard to reaching consensus on a policy framework to determine program changes at the state and local levels of government. A complete discussion of each state is included in the case studies in this report.

Some of the issues that states have not fully addressed yet are whether to use state funds to cover non-qualified legal immigrants, i.e. persons residing in the United States under color of law (PRUCOL immigrants); whether to use state funds to cover immigrants who entered the United States after August 22, 1996 (new immigrants); and whether to subject coverage of new immigrants with state funds to the new deeming provisions.

State legislative and policy decisions regarding federal programs

Below we discuss the decisions that states have made regarding food stamps, SSI, TANF and Medicaid. Tables referenced follow on pages 19 through 22.

SSI

Except for Illinois, none of the states has decided to allocate state funds to replace SSI for those immigrants who will lose benefits. The Illinois legislature has appropriated \$10 million to cover 4,192 elderly legal immigrants who applied for SSI before August 22, 1996. At the federal level, the governors and/or congressional members of California, Florida, Illinois and New York have advocated that the federal government restore SSI. To our knowledge, Texas is the only state that has not been openly active at the federal level.

Food stamps

None of the states has made a decision to create a program to replace the food stamp program for immigrants. In California and New York, the creation of such program is being considered. For the time being, Illinois and Florida have decided against this option. Finally, the issue of replacing food stamps with a state-funded program has not been raised in Texas. In general, although the consequences of not restoring or replacing food stamps will be as devastating as the consequences of not restoring or replacing SSI, at the state level there is considerably less political support for food stamps than for SSI. At the federal level, the governor and/or congressional members of California, Florida, Illinois and New York have advocated that the federal government restore food stamps. However, discussions at the federal level have focused on SSI, and advocacy for food stamps has been less vocal. Again, to our knowledge, Texas is the only state that has not been strongly lobbying at the federal level.

Although the replacement of food stamps for legal immigrant has not received as much attention as the replacement of SSI benefits, numerous advocacy groups are deeply concerned about the consequences of denying food stamps to non-citizens.

As illustrated later in this report (see Tables 6.1 and 6.2), in terms of the number of individuals losing benefits, the denial of food stamps will be even more serious than the denial of SSI. In terms of lost federal funds, the loss of SSI would be roughly 150 percent larger than the loss of food stamps for Florida, 130 percent larger for Illinois, and 7 percent larger for Texas -- data for California and New York were not available. However, the amount of federal funds lost for both programs is significant. Additionally, the figures in Tables 6.1 and 6.2 do not

reflect that Congress is likely to restore SSI benefits for at least a fraction of immigrants, while restoring food stamps is not being considered².

Besides the direct impact on state finances, food stamp cuts will have a severe effect on legal immigrants' income. For instance, according to California Food Policy Advocates, in the state of California the average immigrant household cut from the program will lose about \$70 per person monthly. For immigrant families in Los Angeles and San Francisco, this will represent a reduction in their monthly income of one-fourth and one-third respectively.

Food stamp cuts will result in increased malnutrition. In California, several advocacy groups have stressed that the denial of food stamp benefits to legal immigrants will cause the largest increase in food insecurity since the Great Depression. Food stamp cuts will have serious consequences for both immigrant and citizen children. For instance, in California children represent about one-third of those legal immigrants who are likely to lose food stamps. Furthermore, citizen children whose non-citizen parents and/or siblings will lose food stamps will be negatively impacted by a reduction in their family's ability to purchase food. In turn, increased malnutrition and hunger will give rise to health problems (e.g. anemia, low-birth weight and growth stunting) as well as educational problems.

Finally, the discontinuation of food stamp benefits will have a large negative impact on local economies. In addition to the direct loss of purchasing power, studies have shown that there is a three-fold multiplier effect associated with food stamps³. Some local economic interests realize the negative effect that the food stamp cuts may have on them and a few have taken some action to address this issue, e.g. in Houston some grocery stores have begun disseminating information on naturalization because of concerns about potential losses in food stamp revenue. However, none of the individuals interviewed for this study mentioned any efforts on the part of local chambers of commerce or other economic interests to lobby state governments and/or legislatures to replace food stamps. An additional economic impact of the loss of food stamps will be the removal of an implicit subsidy from the federal government to employers. By providing food stamps, the federal government has helped improve the economic well-being, nutritional status, and productivity of important sectors of the workforce. For instance, off-season, food stamps help immigrant farm workers support themselves and their families. Without food stamps, employers are likely to face a less productive workforce. However, interviewees did not note any employer efforts to advocate for the replacement of food stamps.

As mentioned above, in general, at both the state and federal levels, there appears to be more political support for protecting the elderly and disabled population, while both Congress and the public have been less sympathetic towards families and children who will lose food stamps. However, in the months to come, as the effects of the food stamp cuts are fully understood and realized, it is likely that state governments, legislators and local economic interests will advocate more aggressively for the restoration of these benefits and/or take action to replace

² President Clinton did not provide for the restoration of food stamps for legal immigrants in his budget proposal.

³ The size of the multiplier effect comes from the California Food Policy Advocates, the Texas's, Comptroller and the El Paso Chamber of Commerce. The three sources agree that the food stamp multiplier (i.e. the indirect impact on local economies of losing direct food stamp funds) is about 3.0.

them. The announcement by Governor Pataki on July 23, 1997 that New York is likely to replace food stamps at least for children, the elderly or disabled who have legal immigrant status points in this direction⁴.

TANF

All states have decided to preserve TANF eligibility for qualified immigrants who entered the country before the enactment of PRWORA. Florida and Illinois already have decided against covering new qualified immigrants, while California and New York are still considering this option. With respect to non-qualified immigrants, Florida, Illinois and New York have decided against it, while California is still evaluating this alternative. In the last legislative session, the Texas legislature did not contemplate coverage for either new qualified or non-qualified immigrants.

States are now considering how to treat families comprised of immigrant parents (qualified and nonqualified) and citizen children. As the above table highlights, in Florida and Illinois, citizen children of nonqualified immigrants will receive benefits and their cases will be referred to as child only cases. These two states are not going to require the nonqualified immigrants to meet any work or community service requirements. The State of Illinois is planning on exempting these children from the five-year time-limit ban; it is not clear whether Florida will also exempt these children from the time limit. Similar to Florida and Illinois, the state of California will provide benefits to citizen children of nonqualified and qualified immigrants. However, in contrast to Florida and Illinois, California will not exempt these nonqualified immigrant parents from the work requirement; rather, these immigrants will be required to participate in community service activities. At this point in time, it is unclear how Texas and New York will treat the citizen children. No additional documentation or information was available.

Table 4.5 Overview of the Immigrant Provisions of the State TANF Plans

	California	Florida	Illinois	New York	Texas
TANF effective date	10/9/96	10/1/96	5/1/97	12/2/96	10/1/96
Time limit	60 mos.	48 mos.	60 mos.	60 mos.	12 continuous mos., 60 mos. lifetime
Provide TANF to qualified immigrants	Yes	Yes	Yes	Yes	Yes
Provide TANF to nonqualified immigrants: Who entered the U.S. prior to 8/22/96 Who entered the U.S. after 8/22/96	No No	No No	No No	No No	No No
Provide TANF to citizen children of nonqualified immigrant parents	Yes	Yes	Yes	Info N/A	Info N/A
Establish work requirements for nonqualified parents whose citizen children are receiving benefits	Yes, community service	No	No	Info N/A	Info N/A

⁴ "Albany Chiefs Near Pact on Food Aid for Immigrants", *The New York Times*, July 24, 1997.

Exempting certain qualified immigrants from work requirements	To be decided	No	To be decided	Info N/A	Info N/A
Subjecting new immigrant eligibility and coverage to deeming	Yes	Yes	Yes	Yes	Yes

Source: State TANF Plans

Under the TANF, states have the option of exempting a segment of the population from the work requirements. At this point in time, it appears that only one state (California) is considering whether to exempt refugees, asylees, or parolees. The remaining states will require qualified immigrants to meet the work requirements. In addition, the states have also stated that they plan on subjecting immigrant eligibility and coverage to deeming as stated in PRWORA.

Medicaid

All states have decided to preserve Medicaid eligibility for all qualified immigrants who entered the country before the enactment of PRWORA. Illinois and Florida have decided against covering new qualified immigrants, while California and New York are still considering this option. With respect to non-qualified immigrants, Florida, Illinois and New York have decided against it, while California is still evaluating this possibility. Texas did not contemplate coverage for either new qualified or non-qualified immigrants.

V. STATE DECISIONS AND ACTIONS

Table 5.1: State Policy Decisions Regarding Replacement of SSI Benefits for Immigrants

State	State will replace SSI for pre 8/22/96 qualified immigrants				State will replace SSI for post 8/22/96 qualified immigrants				State will replace SSI for non-qualified immigrants				Governor has openly advocated the federal government restore SSI		Congressional members have sponsored bills to restore SSI	
	Yes	No	TBD	NC	Yes	No	TBD	NC	Yes	No	TBD	NC	Yes	No	Yes	No
California			X				X				X			X		
Florida		X				X				X			X		X	
Illinois	X ¹					X			X ¹				X		X	
New York			X				X			X			X		X	
Texas				X				X				X		X ²		X

Note: *Yes* indicates that a bill or budget appropriation to replace SSI has been passed; *No* indicates that a bill or budget appropriation to restore SSI did not pass; *TBD* (to be decided) indicates that a decision about a bill or budget appropriation to restore SSI has not been made yet; *NC* (not considered) indicates that a bill or budget appropriation to restore SSI has not been considered.

¹ Covers 4,192 legal (both qualified and non-qualified) immigrants who are **not** disabled and applied for SSI **before** August 22, 1996.

² Interviews with the Governor’s Office have not been completed. A statement from the Governor’s office is forthcoming

Table 5.2: State Policy Decisions Regarding Replacement of Food Stamps Benefits for Immigrants

State	State will replace food stamps for pre 8/22/96 qualified immigrants				State will replace food stamps for post 8/22/96 qualified immigrants				State will replace food stamps for non-qualified immigrants				Governor has openly advocated the federal government restore food stamps		Congressional members have sponsored bills to restore food stamps	
	Yes	No	TBD	NC	Yes	No	TBD	NC	Yes	No	TBD	NC	Yes	No	Yes	No
California			X				X				X			X	X	
Florida		X				X				X			X		X	
Illinois		X				X				X				X	X	
New York			X				X			X			X		X	
Texas				X				X				X		X ⁵		X

Note: *Yes* indicates that a bill or budget appropriation to replace food stamps has been passed; *No* indicates that a bill or budget appropriation to restore food stamps did not pass; *TBD* (to be decided) indicates that a decision about a bill or budget appropriation to restore food stamps has not been made yet; *NC* (not considered) indicates that a bill or budget appropriation to restore food stamps has not been considered.

⁵ Interviews with the Governor's Office have not been completed; a statement from the Governor's Office is forthcoming.

Table 5.3: State Policy Decisions Regarding TANF Benefits for Immigrants

State	State will cover pre 8/22/96 qualified immigrants (as stated in TANF plan)		State will cover post 8/22/96 qualified immigrants at state's cost				State will cover non-qualified immigrants at state's cost			
	Yes	No	Yes	No	TBD	NC	Yes	No	TBD	NC
California	X				X				X	
Florida	X			X				X		
Illinois	X			X				X		
New York	X				X			X		
Texas	X					X				X

Note: For qualified immigrants, *Yes* indicates this is the state's intent under TANF plan; *No* indicates that this is not state's intent under TANF plan. For new and non-qualified immigrants, *Yes* indicates that a bill or budget appropriation to replace TANF has been passed; *No* indicates that a bill or budget appropriation to restore TANF did not pass; *TBD* (to be decided) indicates that a decision about a bill or budget appropriation to restore TANF has not been made yet; *NC* (not considered) indicates that a bill or budget appropriation to restore TANF has not been considered.

Table 5.4: State Policy Decisions Regarding Medicaid Benefits for Immigrants

State	State will cover pre 8/22/96 qualified immigrants		State will cover post 8/22/96 qualified immigrants at state's cost				State will cover non-qualified immigrants at state's cost			
	Yes	No	Yes	No	TBD	NC	Yes	No	TBD	NC
California	X				X				X	
Florida	X			X				X		
Illinois	X			X				X		
New York	X				X			X		
Texas	X					X				X

Note: For qualified immigrants, *Yes* indicates that state intends to cover these immigrants; *No* indicates that state does not intend to cover these immigrants. For new and non-qualified immigrants, *Yes* indicates that a bill or budget appropriation to replace Medicaid has been passed; *No* indicates that a bill or budget appropriation to restore Medicaid did not pass; *TBD* (to be decided) indicates that a decision about a bill or budget appropriation to restore Medicaid has not been made yet; *NC* (not considered) indicates that a bill or budget appropriation to restore Medicaid has not been considered.

VI. ACTUAL & EXPECTED IMPACTS OF THE WELFARE ACT ON IMMIGRANTS

Estimates of the number of immigrants losing benefits by federal program

Table 6.1 shows estimates of the number of immigrants who are likely to lose benefits. The number of immigrants who will lose SSI will be subject to the final outcome of the federal budget negotiations. For TANF and Medicaid, the five states have opted to cover qualified immigrant who entered the United States before the enactment of PRWORA. Illinois and Florida were able to provide estimates of the number of PRUCOL individuals who will lose TANF and Medicaid because they are no longer eligible under the welfare act. However, the other states did not provide these data.

It is important to note that the estimates provided by the states reflect only the number of *current recipients* who are likely to lose benefits. Furthermore, under PRWORA, except for the exempted categories, legal immigrants who entered the country before August 22, 1996 will not be able to apply for food stamps and SSI. New legal immigrants will not be able to apply for food stamps, SSI, TANF and Medicaid. Therefore, the estimates in Table 6.1 are a conservative estimate of the impact of the Welfare Act on immigrants. Ideally, estimates of the number of immigrants who would apply for benefits if they were still eligible should be added to the number of current recipients losing benefits.

The data in Table 6.1 show that in terms of the number of current recipients losing benefits, the largest impact would be felt by food stamp and SSI recipients. About 750,000 immigrants will lose food stamps in the five states, while about 430,000 immigrants will lose SSI.

Table 6.1: Number of Current Recipients by States to Become Ineligible by Program

	Food Stamps	SSI	TANF	Medicaid
California	345,000	243,720	N/A	N/A
Florida	97,658	54,000	503 ^a	3,062 ^{a b}
Illinois	39,000	22,000	1,698 ^a	2,379 ^a
New York	130,000	80,000	N/A	N/A
Texas	140,937	34,892	N/A	37,061 (State option); 33,725 (SSI-linked)

California: Data provided by the California Department of Social Services. SSI data do not take into account the provisions of the federal budget agreement.

Florida: AFDC, Food Stamp, and Medicaid data as of January 1997; SSI data as of December 1996. Data provided by the State Department of Children and Families Economic Self-Sufficiency Services Program,

Illinois: Data provided by the Illinois Department of Public Aid. SSI data do not take into account the provisions of the federal budget agreement.

New York: Food stamps data come from USDA; SSI data provided by the State Department of Social Services,

Texas: Data from the Texas Health and Human Services Commission, Report of the Interagency Workgroup on Welfare Reform, November 1, 1996. The 37,061 Medicaid estimate is based on July 1996 caseloads and indicates the minimum number of legal aliens who will be subject to the State's option to continue coverage. The 33,725 Medicaid estimate is based on updated SSI caseloads from January 1997. The figure indicates the number of aged and disabled qualified aliens receiving SSI who were not receiving institutional care and would be likely to lose Medicaid even if the state opted to continue coverage, because their only access to Medicaid was through SSI.

a:/Permanently Residing Under Color Of Law

b:/Not including SSI recipients

Estimates of the costs to the states by federal program

As illustrated in Table 6.2 for those states that provided estimates, the loss of federal funds due to the immigrant provisions of PRWORA will be considerable. For food stamps and SSI, Florida will lose nearly \$311 million per year, while Illinois and Texas will lose about \$150 million each. As explained above, these figures may change once the federal budget is approved. Under the Welfare Act, the most significant financial loss to the states will be the loss of SSI funds.

Table 6.2: Estimated Costs of Federal Welfare Reform to the States

	Food Stamps	SSI	TANF	Medicaid
California	N/A	N/A	N/A	\$16,000 ^a
Florida	\$89,064	\$221,616	\$561	\$3,123
Illinois	\$46,000	\$105,000	N/A	\$12,300 ^b
New York	N/A	N/A	N/A	N/A
Texas	\$122,200	\$130,300	\$9,000	\$90,000 (State option); \$94,600 (SSI-linked)

Notes: Numbers in thousands of dollars. Unless otherwise indicated, figures reflect amount of lost federal funds for current recipients (per year).

California: Data provided by the Legislative Analyst’s Office. a:\ Yearly cost to the state of covering new immigrants.

Florida: AFDC, Food Stamp, and Medicaid data as of January 1997; SSI data as of December 1996. Data provided by the State Department of Children and Families Economic Self-Sufficiency Services Program.

Illinois: Data provided by the Illinois Department of Public Aid (IDPA). SSI data do not take into account the provisions of the federal budget agreement. b:\ Yearly cost to the state of covering PRUCOL recipients (estimated by IDPA).

Texas: TANF estimates from Legislative Budget Board, December 1996. SSI, Food Stamps, and Medicaid estimates from the Texas Health and Human Services Commission, Report of the Interagency Workgroup on Welfare Reform, November 1, 1996. The \$90 million loss for SSI indicates the dollar value of coverage for legal aliens subject to the State’s option to continue coverage. The \$94.6 million indicates the dollar value of coverage for aged and disabled qualified aliens receiving SSI who were not receiving institutional care and would be likely to lose Medicaid even if the state opted to continue coverage, because their only access to Medicaid was through SSI.

Impacts on immigrants

Although PRWORA has not been fully implemented, state and county officials, social service providers and pro-immigrant advocacy groups in the five states in this study provided both data and compelling anecdotal evidence suggesting that the Act will have a significant negative impact on the well-being and health of large sectors of the immigrant population. The effects of PRWORA are discussed below.

Fear and confusion among the immigrant population

The Welfare Act has created widespread fear and confusion among immigrants. As discussed earlier, the final form that the immigrant provisions of PRWORA will take has yet to be determined. Even state and county officials, and advocates specialized in welfare and immigration issues find it difficult to fully understand the language and implications of the Act, and to keep track of its evolution. For low-income immigrants, many of whom are elderly, disabled, or not fully proficient in English, the technicalities of PRWORA may be incomprehensible. However, they are aware of the “bottom line”, i.e. they will lose their benefits because they are immigrants.

Effects on the socio-economic status of immigrants

By limiting eligibility to various public assistance programs, the Welfare Act will significantly reduce the income of those immigrant families who are currently receiving benefits. The SSI cuts will affect elderly and disabled legal immigrants, while the food stamp cuts will affect young adults and children. As discussed earlier, among legal immigrants, a substantial fraction of current food stamp recipients are children--e.g. in California roughly one-third of immigrants on the food stamp program are children. Furthermore, the Act will make new legal immigrants ineligible for TANF for five years after they enter the country.

PRWORA will not only have a negative effect on non-citizens but it will increase income, housing and food insecurity among U.S. citizens. In mixed households, i.e households composed of both non-citizens and citizens, a reduction in household income due to the immigrant-related provisions of the Act will impact all the members of the household not only the non-citizen ones.

Effects on the Health Status of Immigrants

By reducing the income of immigrant families by limiting SSI, food stamp and TANF eligibility, PWRORA will put immigrants at risk of malnutrition and inferior housing conditions including overcrowding. In turn, these risk factors will increase the likelihood of health problems among immigrants.

The Welfare Act has also reduced immigrants' access to social and health services. First, according to the Act, non-qualified, new qualified and undocumented immigrants will only be eligible for a narrow range of health services. Furthermore, the difficulty in understanding the scope of PRWORA may result in reduced access to services for which immigrants are still eligible. For instance, in several states nursing homes are already turning away immigrants. Illinois and New York have issued clarification letters to long-term care providers to prevent them from denying admission to immigrants. Additionally, the overlap between the Welfare Act and the Immigration Act has the potential of creating disincentives to access health care and other services. For example, service providers reported that immigrants fear that by using health services they may be at risk of deportation and/or jeopardizing their chances of becoming U.S. citizens.

For illegal aliens, one of the main impacts of PRWORA may be the lack of access to prenatal care. Several interviewees noted that the lack of prenatal care will result in higher health care costs, since high-risk pregnancies among undocumented women will go undetected until the women present themselves at emergency rooms to deliver their babies--according to PRWORA, all types of immigrants are still eligible for emergency health care. Furthermore, children born to these women are U.S. citizens and are eligible for Medicaid. The medical costs incurred in serving children whose mothers did not receive prenatal care have been shown to be higher than for those children whose mothers did receive care. Advocates and public health officials in the five states covered in this report noted that national data have demonstrated that for every dollar spent on prenatal care, three dollars are saved in future health care costs.

Despite overwhelming evidence that both from a public health and a financial perspective, prenatal care is highly effective, California and New York plan to discontinue these services for undocumented immigrants. Although the measure has not been implemented yet, providers already report a decline in prenatal care utilization by illegal immigrants. In California, a legal suit against the state government has delayed the implementation of this measure --originally scheduled for July 1st 1997-- at least until September 1st, 1997. In contrast to California and New York, Illinois has decided to preserve prenatal care for illegal immigrants.

Furthermore, PRWORA may give rise to serious public health problems. For instance, according to the Act, both legal and illegal immigrants can receive treatment if they have symptoms of a contagious disease. However, immigrants, especially illegal ones, are afraid of seeking health care. In Texas, some providers noted that language of PRWORA has the potential of increasing the spread of infectious diseases. For instance, individuals with active tuberculosis whose symptoms are mild may be denied treatment. This is a major concern along the Mexico-Texas border where TB prevalence is very high.

Finally, the Welfare Act is already having a severe negative impact on the mental health status of immigrants. Among individuals receiving SSI, the threat of being left without any means to support themselves has resulted in an increased incidence of mental health problems and suicides. Individuals interviewed for this report cited suicide cases as a dramatic illustration of the "unfairness" of the Welfare Act.

Effects on naturalization and assimilation

As explained in the introduction, there is an intersection between PRWORA and the Immigration Act. Immigrants are responding to both pieces of legislation and may find it hard to distinguish between the welfare and the immigration provisions. Both the threat of not being able to access public benefits and the threat of being deported are inducing a large number of immigrants to apply for citizenship. States, counties and community-based organizations are providing assistance to immigrants who want to seek naturalization. The Welfare Act has changed the incentives to become U.S. citizens facing immigrants. It remains to be seen whether these new incentives and the corresponding expected increase in naturalization rates will result in a faster assimilation process.

Furthermore, the deeming provisions of the Welfare Act--including the enforcement of affidavits of support--may change family reunification strategies among immigrants, e.g. by discouraging bringing into the United States elderly family members and/or small children who are more likely to need economic support.

Increased awareness about and mobilization around immigrant issues

Finally, despite all its negative impacts on immigrants, PRWORA may have at least one unintended positive outcome, that pro-immigrant service providers, community-based organizations and advocacy groups are becoming increasingly organized. For example, in California a bipartisan Committee in the legislature charged with summarizing the state options to respond to PRWORA has incorporated in its report the key initiatives of pro-immigrant groups

and legislators. In Illinois, advocacy groups have defined the terms of the debate. In Texas community-based organizations have been instrumental in explaining the implications of the Welfare Act to the state administration and legislature. Given that states are likely to become increasingly responsible for providing benefits and services to immigrants, pro-immigrant groups will have to strengthen their ability to shape the state political and policy responses towards immigrants.

VII.STATE EFFORTS TO MONITOR IMPACTS

At the present time, none of the states interviewed has an official, comprehensive plan to monitor the impacts of welfare reform change on immigrants. In fact, no state has a comprehensive plan to monitor the effects of welfare reform on other segments of the populations affected by this monumental legislation. The few monitoring studies that do exist focusing on the effects of welfare reform are being conducted by private research institutes funded by private philanthropies. Private organizations in New York and Texas have funded a monitoring project with particular focus on the disabled populations. Two states, New York and Florida, are planning to fund monitoring activities, but neither state has had the staff or other resources at their disposal to develop a monitoring approach.

Florida has a number of locally funded efforts to educate immigrant communities about changes in welfare programs. However, these programs do not link to any state efforts to monitor changes in program management or benefit use. In Texas, a number of charities and local governments are tracking changes in food sales as proxy measure of changes in food stamp circulation. There is no state-initiated effort to study the impact of changes in the food stamp program on the local economy or the nutritional status of populations at-risk.

The most immediate, albeit crude, tool available in each state to monitor changes in welfare programs is the monthly or quarterly caseload. These caseload figures are collected by each of the programs. In California and Texas, information on joint state/county-funded and county-only-funded welfare programs have been maintained primarily at the county level. In New York, the responsibility for maintaining information systems for welfare administration is devolving to the counties. Florida and Illinois have maintained centralized information systems for the state-funded welfare programs. However, in Florida county-only welfare programs are maintained by the counties and municipalities.

Clearly, states and counties are faced with several decisions regarding developing the capacity to track welfare program beneficiaries and resource use across localities. With changes in the lifetime limits imposed by the federal legislation and changes in eligibility requirements for immigrants, even the limited information systems currently maintained by states and counties will be inadequate to assure compliance with federal law. At present, of the states included in this study, none has indicated a current effort to integrate county and state information systems to track welfare caseload and benefit use across welfare programs and for specific classes of recipients, including immigrants.

States will have to rely increasingly on systems that track information on immigrants. The single federally-developed information system currently available to states that can provide information

on immigrant status is known as the Systematic Alien Verification for Entitlements (SAVE) Program. This is an intergovernmental information-sharing service for agencies and institutions that was developed pursuant to Section 121 of the Immigration Reform and Control Act of 1986 (IRCA).

Program components include a database of selected immigration status information on approximately 50 million individual non-citizens. The database is updated daily by the INS. States are using this information system to determine primary immigration status. However, states must still develop information systems that track immigrant categories and exemption criteria as defined in the Welfare Act. States are currently waiting for the U.S. Attorney General to develop verification criteria and procedures, and then they will have a year to make their systems conform to the new guidelines.

California, New York, Florida, and Texas are not developing centralized administrative information systems that link immigrants receiving state or local welfare benefits to immigration verification systems. Each county and municipality will be responsible for developing that capability. None of these states has plans to develop the capacity to electronically summarize the information linking immigrants to welfare programs or other tracking systems. Illinois has a centralized system, but immigrant categories are not uniform across programs. The prospects for developing centralized capabilities to monitor changes of welfare reform on immigrants are not bright. State and local resource constraints, competing demands for investments in information systems, and continuing devolution of responsibilities for program administration and financing to local government work against the likelihood that states will put a high priority on building a centralized capability to track the impact of welfare reform for immigrants and other populations affected by this historic change in welfare programs in the United States.

There remain public health interests in monitoring the impact of welfare reform at the state and local levels despite the apparent disinterest or disinclination of governments to fund these activities. The need to track communicable disease and contacts of individuals with communicable disease transcends local and state boundaries. Public health officials and providers may lose the ability to effectively intervene in the management of infectious diseases, many of which show a higher incidence among the poor and among immigrants from selected countries. Despite the limitations of current state and local tracking systems, it is possible to develop simulation techniques to estimate the incidence of disease and the patterns of infection for small areas and large regions to assist in the control of communicable disease among the population at-large. There is an immediate national interest in mitigating the worst effects that restrictions on access to public benefits and medical care may have on at-risk populations among immigrants.

VIII. CONCLUSIONS

The five states in this study are only starting to respond to the immigrant provisions of the Welfare Act. However, the current status of decisionmaking should not be viewed as inaction by the states. With the exception of Texas, all states are assessing various policy options ranging from covering all immigrants to minimizing state responsibility in this area. States are faced with both a significant cost shift from the federal government and the need to make complex decisions about immigrant eligibility. This transfer of immigrant-related costs and policy decisions is

unprecedented and states are challenging the constitutionality of many of the provisions in the Welfare Act, if not the Act in its entirety. Additionally, since states are unlikely to have the ability to completely replace federal benefits, immigrants will have access to lower levels of assistance.

In addition to the transfer of “immigrant policy” to the states, PRWORA raises another important question, i.e. whether it is legitimate to use welfare benefits as an immigration policy tool. First, the Welfare Act assumes that the availability of public benefits constitutes an incentive for immigration to the United States⁶. However, it is questionable whether immigrants factor public benefits into their decision to migrate⁷. Second, PRWORA seeks to reduce public assistance in order to generate incentives for individuals to work. However, for immigrants PRWORA also creates an incentive to naturalize in order to remain eligible for benefits.

Furthermore, a recent report by the National Academy of Sciences has shown that, overall, immigrants make a positive contribution to the U.S. economy. Furthermore, although at the state and local level immigrants have a negative fiscal impact, at the federal level they have a larger positive impact, resulting in an overall positive impact. Therefore, from a fiscal standpoint it should be questioned whether it is acceptable to use immigration status as an eligibility criteria for public benefits.

The effects of the immigrant related provisions of the Welfare Act will be far reaching. State and local governments will face new responsibilities, increased fiscal pressures and complicated administrative decisions. Local economies will be seriously affected by the direct loss of benefits as well as the indirect economic impact associated with diminished household incomes, purchasing power and workforce productivity. Community-based social service and health care providers are likely to face an increased demand for their services as immigrants are denied public benefits. Whether the financial and structural capacity of these providers will be sufficient to offer a safety net to immigrants remains to be seen⁸. Immigrant families will be the most negatively impacted by PWRORA. The effects on immigrants include fear and confusion, diminished household incomes, increased food and housing insecurity, reduced access to health care and other social services, and changing incentives regarding naturalization, assimilation and family reunification strategies. The weakening of immigrants’ socio-economic status and well-being will have a detrimental effect not only on immigrants themselves but on those U.S. citizens who are members of immigrant families and households as well as on communities where immigrants constitute a substantial fraction of the population, work force and social fabric.

⁶ See PRWORA, Section 400: “Statements of National Policy Concerning Welfare and Immigration”.

⁷ In the literature, migration flows have been explained as a function of wage and unemployment rate differentials between the origin and the destination country, and as a function of immigrant networks. See Madeline Zavoday. “Welfare and the Locational Choices of Immigrants,” Federal Reserve Bank of Dallas Economic Review.. Second Quarter, 1997.

⁸ A recent study of the impact of welfare reform in Los Angeles has shown that the capacity of the non-profit sector will be insufficient to fill the subsistence and human service gaps created by welfare reform (Wolch and Sommer, 1997, *Los Angeles in an Era of Welfare Reform*).

IX. LIST OF APPENDICES

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Appendix II Summary of Restrictions on Eligibility to Public Welfare Benefits

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Appendix V Outline for State Reports

**Appendix I. Title IV Personal Responsibility and Work Opportunity
Reconciliation Act of 1996**

Appendix II. Summary of Restrictions on Eligibility to Public Welfare Benefits

Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996 Limitations on immigrants' eligibility for federal, state and local public benefit programs

Federal programs	Current immigrants (i.e. aliens entering the country before the enactment of the Act)	New immigrants (i.e. aliens entering the country after the enactment of the Act)
“Specified Federal programs”- SSI	<p>Legal-qualified: Not eligible</p> <p>Exceptions: refugees; asylees; aliens whose deportation has been withheld; permanent residents (i.e., green card holders) who have worked for 40 qualifying quarters and did not receive any means-tested federal public benefits; veterans; aliens on active duty</p> <p>Legal-non qualified: (Not Eligible)</p> <p>Illegal: (Not Eligible)</p>	<p>Legal-qualified: (Not Eligible)</p> <p>Legal-non qualified: (Not Eligible)</p> <p>Illegal: (Not Eligible)</p>
“Specified Federal programs” - Food stamps	<p>Legal-qualified (i.e. permanent residents, asylees, refugees, aliens paroled into the U.S. for at least one year, aliens whose deportation is being withheld): Not Eligible</p> <p>Exceptions: refugees; asylees; aliens whose deportation has been withheld; permanent residents (i.e., green card holders) who have worked for 40 qualifying quarters and did not receive any means-tested federal public benefits; veterans; aliens on active duty</p> <p>Legal-non qualified: (Not Eligible)</p> <p>Illegal: (Not Eligible)</p>	<p>Legal-qualified: (Not Eligible)</p> <p>Legal-non qualified: (Not Eligible)</p> <p>Illegal: (Not Eligible)</p>
“Designated federal programs” –	<p>Legal-qualified: State is authorized to determine the eligibility of qualified aliens</p>	<p>Legal-qualified: Not Eligible for 5 years beginning on the date of entry into the U.S.</p>

<p>TANF(formerly AFDC), Part A of Title IV of the Social Security Act</p>	<p>Exceptions: Until five years after date of entry/grant of asylum/withholding for refugees, asylees and aliens whose deportation has been withheld, permanent residents who have worked 40 qualifying quarters, veterans, aliens on active duty (i.e. the eligibility of these aliens is not at the state's discretion)</p> <p>Legal-non qualified: Not Eligible</p> <p>Illegal: Not Eligible</p>	<p>After 5-year ban, in determining eligibility states must deem the income and resources of the alien's sponsor</p> <p>Exceptions: refugees; asylees; aliens whose deportation has been withheld; veterans; aliens on active duty; Cuban and Haitian refugees</p> <p>Legal-non qualified: Not Eligible</p> <p>Illegal: Not Eligible</p>
<p>"Designated federal programs" - Medicaid, a state plan under Title XIX of the Social Security Act</p>	<p>Legal-qualified: State is authorized to determine the eligibility of qualified aliens</p> <p>Exceptions: Until five years after date of entry/grant of asylum/withholding for refugees, asylees and aliens whose deportation has been withheld, permanent residents who have worked 40 qualifying quarters, veterans, aliens on active duty (i.e. the eligibility of these aliens is not at state's discretion)</p> <p>Legal-non qualified: Not Eligible</p> <p>Illegal: Not Eligible</p>	<p>Legal-qualified: Not Eligible for 5 years beginning on the date of entry into the U.S.</p> <p>After 5-year ban, in determining eligibility states must deem the income and resources of the alien's sponsor</p> <p>Exceptions: refugees; asylees; aliens whose deportation has been withheld; veterans; aliens on active duty; Cuban and Haitian refugees</p> <p>Legal-non qualified: Not Eligible</p> <p>Illegal: Not Eligible</p>

<p>“Designated federal programs” - Social services block grant, Title XX of the Social Security Act</p>	<p>Legal-non qualified: State is authorized to determine the eligibility of qualified aliens</p> <p>Exceptions: Until five years after date of entry/grant of asylum/withholding for refugees, asylees and aliens whose deportation has been withheld, permanent residents who have worked 40 qualifying quarters, veterans, aliens on active duty (i.e. the eligibility of these aliens is not at state’s discretion)</p> <p>Legal-non qualified: Not Eligible</p> <p>Illegal: Not Eligible</p>	<p>Legal-qualified: Not Eligible for 5 years beginning on the date of entry into the U.S.</p> <p>After 5-year ban, in determining eligibility states must deem the income and resources of the alien’s sponsor</p> <p>Exceptions: refugees; asylees; aliens whose deportation has been withheld; veterans; aliens on active duty; Cuban and Haitian refugees</p> <p>Legal-non qualified: Not Eligible</p> <p>Illegal: Not Eligible</p>
<p>“Federal public benefits”</p>	<p>Legal-qualified: eligible</p> <p>Legal-non qualified: Not Eligible</p> <p>Exceptions:</p> <ol style="list-style-type: none"> 1. Emergency medical care (Title XIX of the Social Security Act) 2. Short-term, in-kind disaster-relief 3. Public health assistance (not including Title XIX) for immunizations and treatment of symptoms of communicable diseases 4. Programs specified by the Attorney General that provide in-kind assistance at the community level; do not condition the provision of assistance on the recipient’s income; are necessary for the protection of life and safety 5. Housing assistance to the extent that the alien was receiving assistance when the Act was enacted <p>Illegal: Not Eligible</p> <p>Exceptions: same as above</p>	<p>Legal-qualified: Not Eligible for any <i>federal means-tested public benefit</i> for 5 years beginning on the date of entry into the U.S.</p> <p>After 5-year ban, in determining eligibility states must deem the income and resources of the alien’s sponsor</p> <p>Exceptions: refugees; asylees; aliens whose deportation has been withheld; veterans; aliens on active duty; Cuban and Haitian refugees</p> <p>Exceptions:</p> <ol style="list-style-type: none"> 1. Emergency medical care (Title XIX, Social Security Act) 2. Short-term, in-kind disaster-relief 3. Assistance under the National School Lunch act 4. Assistance under the Child Nutrition Act of 1966 5. Public health assistance (not including Title XIX) for immunizations and treatment of symptoms of communicable diseases 6. Payments for foster care or adoption assistance (several conditions apply)

<p>“Federal Public Benefits”</p>		<p>7. Programs specified by the Attorney General that provide in-kind assistance at the community level; do not condition the provision of assistance on the recipient’s income; are necessary for the protection of life and safety</p> <p>8. Several programs of student assistance under the Higher Education Act of 1965</p> <p>9. Means-tested programs under the Elementary and Secondary Education Act of 1965</p> <p>10. Benefits under the Head Start Act</p> <p>11. Benefits under the Job Training Partnership Act</p> <p>Legal-non qualified: (Not Eligible)</p> <p>Exceptions: Same as above</p> <p>Illegal: (Not Eligible)</p> <p>Exceptions: None</p>
<p>State public benefit programs</p>	<p>Legal-qualified, aliens who are not non-immigrants under the Immigration and Nationality Act, aliens paroled into the U.S. for less than one year: State authorized to determine eligibility</p> <p>Exceptions: Until five years after date of entry/grant of asylum/withholding for refugees, asylees and aliens whose deportation has been withheld, permanent residents who have worked 40 qualifying quarters and did not receive any federal means-tested public benefit, veterans, aliens on active duty (i.e. the eligibility of these aliens is not at state’s discretion)</p> <p>State has the authority to provide for attribution of sponsors income and resources to the alien with respect to state programs (“deeming”)</p>	<p>Legal-qualified: State authorized to determine eligibility</p> <p>Exceptions: Same as for current qualified immigrants</p> <p>Legal-non qualified: (Not Eligible)</p> <p>Illegal: (Not Eligible)</p>

<p>State Public Benefit Programs</p>	<p>Legal-non qualified, non-immigrants: [State may determine that non-qualified aliens are eligible for state and local public benefits only through the enactment of a state law after the enactment of the Act that affirmatively provides for such eligibility]</p> <p>Exceptions:</p> <ol style="list-style-type: none"> 1. Emergency medical care 2. Short-term, in-kind disaster-relief 3. Public health assistance (not including Title XIX) for immunizations and treatment of symptoms of communicable diseases 4. Programs specified by the Attorney General that provide in-kind assistance at the community level; do not condition the provision of assistance on the recipient's income; are necessary for the protection of life and safety <p>Illegal: State may determine that illegal aliens are eligible for state and local public benefits only through the enactment of a state law after the enactment of the Act that affirmatively provides for such eligibility</p>	
<p>County programs</p>	<p>Legal-qualified, aliens who are not non-immigrants under the Immigration and Nationality Act, aliens paroled into the U.S. for less than one year: State authorized to determine eligibility</p> <p>Exceptions: Until five years after date of entry/grant of asylum/withholding for refugees, asylees and aliens whose deportation has been withheld, permanent residents who have worked 40 qualifying quarters and did not receive any federal means-tested public benefit, veterans, aliens on active duty (i.e. the eligibility of these aliens is not at state's discretion)</p>	<p>Legal-qualified: State and county authorized to determine eligibility</p> <p>Legal-non qualified: (Not Eligible)</p> <p>Illegal: (Not Eligible)</p>

<p>County Programs</p>	<p>Legal-non qualified, non-immigrants: [State may determine that non-qualified aliens are eligible for state and local public benefits only through the enactment of a state law after the enactment of the Act that affirmatively provides for such eligibility]</p> <p>Exceptions:</p> <ol style="list-style-type: none"> 1. Emergency medical care 2. Short-term, in-kind disaster-relief 3. Public health assistance (not including Title XIX) for immunizations and treatment of symptoms of communicable diseases 4. Programs specified by the Attorney General that provide in-kind assistance at the community level; do not condition the provision of assistance on the recipient's income; are necessary for the protection of life and safety <p>Illegal: State may determine that illegal aliens are eligible for state and local public benefits only through the enactment of a state law after the enactment of the Act that affirmatively provides for such eligibility</p>	
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Notes: Information in parenthesis “()” indicates that although the respective restriction/exemption is not explicitly stated in PRWORA, that appears to be the implication of the Act.

Appendix III. List of Key Informants: Sources and Interviewees

INTERVIEWEES

California

Lisa Kalustian
Deputy Press Secretary
Governor Wilson's Office

Lynn Delap
California State Association of Counties

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Phil Ansell
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Dan Rabovsky
Legislative Analysis Office

Susan Drake
National Immigration Law Center

Tonya Broder
National Immigration Law Center

Barbara Earley
Program Assistant
Human Services Agency
San Joaquin County

Elena López-Eldridge
Mexican-American Legal Defense and
Education Fund

Joan Zinser
Deputy Director
Health and Human Services Agency
San Diego County

Bob Barton
Chief
Refugee Programs Bureau at the state

Lucy Quachanella
Western Center on Law & Poverty

Larisa Casillas
Interfaith Coalition for Immigrant Rights
(San Francisco)

Hellan Roth Dowden
Office of the Senate Majority Whip
Sacramento

Susan Alba
Commission for Humane Immigrant
Rights LA (CHIRLA)
Los Angeles

Florida

Gary Crawford
Refugee Program Administrator
State Department of Health Rehabilitative Services
State of Florida

Mark Schlakman, J.D.
Executive Office of the Governor
State of Florida

Patty Grogan
Executive Office of the Governor
Assistant to Special Counsel
State of Florida

Don Winstead
State Department of Health and Rehabilitative Services
State of Florida

Thomas Franklin
District 11 Administrator
Department of Children and Family Services
Dade County

Alex Penelas
Metro-Mayor of Dade County
Dade County

Henry Sori
Metro Dade Immigration Reform Project
Dade County

Tony Ojeda
Metro Dade Immigration Reform Project
Dade County

Ramon Perez-Goizueta
Public Relations
Little Havana Community Center
Dade County

Charles Hungerford
Advisory Council on Intergovernmental Relations
State of Florida

Illinois

Ed Silverman, Refugee Program
Bureau Manager
Bureau of Refugee and Immigrant Services

David Peterson
Deputy General Counselor
Illinois Department of Public Aid

Marcello Gaete
Policy Director
Office of State Senator Jesus Garcia

Lisa Simeon
Coalition for Immigrant and Refugee
Protection

Barbara Otto
SSI Coalition

Sid Mohn
Director
Heartland Alliance

Robert Paral
Director
Latino Institute

New York

Efrain Gonzalez
Senate

Kevin Webb
Committee Director for Senator Frank Padavan

Mark Lewis
Lobbyist and Consultant
Former NY State Refugee Coordinator

Jim Clyne
Deputy Secretary Speaker for Health
State of New York

Liz Krueger
Associate Director
Community Food Resource Center

Margie McHugh
Executive Director
New York Immigration Coalition

Manuel Rosa
Assistance Vice President
Health and Hospital Corporation

Marino Woolcock
Director
NY State Senate Local Government Committee

Tamar Bauer
Director of Public Affairs
March of Dimes

Esther Dyer, Ph.D.
Executive Director
NY Chapter of March of Dimes

Mike Cathers
Association of Counties

Donna O'Hare, M.D.
Project Director
New York Prenatal Care Assistance Program

Scott C. Amrhein
President and Executive Director for Center for Continuing Care
Greater New York Hospital Corporation

Lorraine Noval
Special Assistant to the Commissioner
NY Department of Social Services

Gila Zawadzki
United States Senator Alfonse D'Amato's Office

Angelic Tang
Executive Director
NYC Mayor's Office on Immigration Affairs

Texas

Betsy Attel
Senior Vice President
Parkland House and Hospital System
Dallas, TX

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Refugee Orientation Coordinator, East Dallas Counseling Center
Dallas, TX

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Coordinator, Information and Referral Services
Houston Area Women's Center
Houston, TX

Henrietta Cameron-Mann
Team Leader, Welfare Reform Project
State Auditor's Office
Austin, TX

Jason Cooke
Associate Director for Federal Relations
Texas Health and Human Services Commission

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Director of Operations, Family Violence and Refugee Unit
Texas Office of Immigration and Refugee Affairs
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Judy Denton
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Anne Dunkelberg
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Center for Public Policy Priorities
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Jim Elkins, FACHE
Hospital Administrator
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Regional Director, Regions 9 and 10
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Renato Espinoza
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Karen Fleshman
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United Network for Immigrant and Refugee Rights
Austin, TX

Sue Glover
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Texas Association of Counties
Austin, TX

Frank Grijalva
Public Information Director
Texas Department of Human Services
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Elisa Hendricks
Charitable Choice Workgroup
Texas Department of Human Services
Austin, TX

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Catholic Charities Diocese of Fort Worth
Fort Worth, TX

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Harris County Hospital District
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Robert Palm
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Interfaith Ministries for Greater Houston
Houston, TX

Luis Plascencia
Project Coordinator
Tomas Rivera Policy Institute
University of Texas at Austin
Austin, TX

Ann Sapp
Associate Commissioner for Governmental Affairs
Texas Department of Human Services
Austin, TX

Eduardo Sanchez, M.D.
Director
Association of Municipal Health Officers
Austin, TX

Jerry Robinson
Director
City of Laredo Health Department
Laredo, TX

Hon. Gracie Guzman Saenz
Houston City Council
Mayor Pro-Temp
Houston, TX

Kathy Talkington
Director of Federal Relations
Office of Intergovernmental Affairs
Texas Department of Health
Austin, TX

Laura Uribarri
Office of Rep. Norma Chavez (El Paso)
Austin, TX

OTHER SOURCES

California

Margaret Peña
Lobbyist
California State Association of Counties

John Vera
Director
Human Services Agency
San Joaquin County

Pat Craig
Craig Associates

John Sciamanana
American Public Welfare Association

Laura Waxman
United States Conference of Mayors

Todd Bland
California Legislative Analyst's Office

Frank Mecca
Executive Director
CA Association of County Welfare
Directors

Elena Shayne
County of Santa Clara
Washington DC Office

Pat Leary
Senate Budget

Bruce Wagstaff
Deputy Director
Welfare Programs Division
CA Department of Social Services

Florida

Elaine Bloom
House of Representatives

John Cosgrove
House of Representatives

Mario Diaz-Balart
Chair of the Ways and Means Committee
Senate

Lois Frankel
House of Representatives
State of Florida

Willie Logan
Finance and Taxation Committee
House of Representatives
State of Florida

Seymour Gelber
Mayor of Miami Beach
Dade County

Ron Wardlow
Senator
State of Florida

Dennis Wardlow
Mayor of Key West
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Susan Kreibel
Church World Services
Dade County

George Lewis
Miami Area Refugee Taskforce
Dade County

Harry Mavrogenes
Economic Development
Dade County

Anita Boch
District Administrator
Department of Children and Family Services

Judy Hoanscheldt
CDBG Coordinator

Dade County

Illinois

Roberto Cornelio
Corporation Council
City of Chicago

Maryann Mason
Immigrant and Refugee Task Force
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New York

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Chris Chichester
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NYC Mayor's Office of Immigrant Affairs

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Greater New York Hospital Association

Assemblyman Romeres
House of Representatives
State of New York

David Wollner
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State of New York

Catherine Ryan
Refugee Coordinator
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Margaret R. "Peggy" Boice
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Jude Filler
Executive Director
Texas Alliance for Human Needs
Austin, TX

Karen Hughes
Director of Communications
Office of the Governor
Austin, TX

Willa Lister
U.S. Conference of Mayors
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Vanna Slaughter
Director of Immigrant Services
Catholic Charities Diocese of Dallas
Dallas, TX

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Center for Immigration Research
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Appendix IV. Interview Protocol

Impact of the Federal Welfare Policy Reform on the Health of Immigrants in the United States

Survey Questionnaire

(supported by the MacArthur Foundation)

The Lewin Group

April 1997

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The Lewin Group

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I. State's (county's) response to changes in federal, state and county public benefits for immigrants

1. What changes are states planning in response to federal policy changes that discontinue immigrants from specific federal programs and federal/state programs?

Federal programs

Nutrition programs

How many immigrants will lose food stamps?

Does the state have plans to assist those immigrants who will lose food stamps? If yes, please describe those plans.

What has been the state policy regarding recertification of immigrants to receive food stamps?

Will the state make other federal nutrition programs such as WIC available to non-qualified immigrants?

SSI

How many immigrants will lose SSI? What is the composition of these immigrants (elderly versus disabled)?

Will SSI-linked programs for immigrants (e.g., personal care services) be preserved? How?

TANF/AFDC

How many immigrants were receiving AFDC? What proportion of legal aliens who were receiving AFDC are qualified aliens (as defined by the Act) and therefore may continue receiving benefits? Does the state plan to allow qualified (eligible) immigrant families to receive TANF? What types of qualified immigrants? How many immigrants will lose TANF (AFDC)?

Please provide us with a copy of the TANF plan for the state or with the waiver if there is one in place.

Will TANF be preserved for future legal-qualified immigrants after the 5-year ban?

What will the state do to cover non-qualified (non-eligible) immigrant families who were previously covered under AFDC? Does the state plan to advocate with federal agencies that this spending count toward the state "maintenance of effort" requirement?

Medicaid

How many immigrants were receiving Medicaid? What proportion of legal aliens who were receiving Medicaid are qualified aliens (as defined by the Act) and therefore may continue receiving benefits? Does the state plan to allow qualified immigrants to be eligible for Medicaid? What types of qualified immigrants? How many immigrants will lose Medicaid?

Will Medicaid be preserved for future qualified immigrants after the 5-year ban?

Will the state try to preserve Medicaid eligibility for those immigrants who will lose categorical eligibility (to Medicaid) because they will lose SSI?

Will the state try to preserve Medicaid eligibility for those immigrants who will lose categorical eligibility (to Medicaid) because they will lose TANF?

Title XX

How many immigrants were receiving social services under Title XX of the Social Security Act? What proportion of legal aliens who were receiving Title XX services are qualified aliens (as defined by the Act) and therefore may continue receiving benefits? Does the state plan to allow qualified immigrants to be eligible for Title XX services? What types of qualified immigrants? How many immigrants will lose Title XX services?

Will Title XX services be preserved for future qualified immigrants after the 5-year ban?

Other

How is the state interpreting the provision that non-qualified and illegal immigrants do not have the right to receive “federal public benefits”? How is the state applying the exceptions specified in the Act (e.g., emergency medical care, immunizations, treatment of symptoms of communicable diseases)?

How is the state interpreting the provision that future qualified immigrants cannot receive any federal means-tested public benefits for five years beginning on the date of entry into the United States? How is the state applying the exceptions specified in the Act (e.g., emergency medical care, immunizations, treatment of symptoms of communicable diseases)?

State programs

Will the state limit the eligibility of qualified aliens to state public benefits? What types of qualified legal aliens? What benefits? Please provide a list of those state public benefit programs that are (were) available to qualified immigrants and note those that will no longer be available.

According to the Act, non-qualified aliens are not eligible to receive state public benefits. How is the state interpreting this provision? Does the state plan to challenge it? What kind of state public benefits were non-qualified immigrants receiving? What will happen to these benefits?

Please provide a list of state public benefit programs that are (were) available to non-qualified immigrants and note those that will no longer be available.

According to the Act, illegal aliens are not eligible to receive state public benefits *unless* a state law is enacted after the enactment of the Act that affirmatively provides for such eligibility. How is the state interpreting this provision? Does the state plan to challenge it? Does state plan to enact a law to provide benefits to illegal immigrants? What kind of state public benefits are (were) illegal aliens receiving? What will happen to these benefits? Please provide a list of state public benefit programs that illegal immigrants are (were) receiving and note those that will no longer be available.

2. How are counties and service providers responding to federal and state welfare reforms?

Will the state limit eligibility of qualified aliens to county public benefit programs? What types of qualified legal aliens? What benefits? Please provide a list of those county public benefit programs that are (were) available to qualified immigrants and note those that will no longer be available.

According to the Act, non-qualified aliens are not eligible to receive local public benefits. How is the state interpreting this provision? Are there counties challenging it? Please provide a list of county public benefit programs that non-qualified immigrants are (were) receiving and note those that will no longer be available.

According to the Act, illegal aliens are not eligible to receive local public benefits. How is the state interpreting this provision? Are there counties challenging it? Please provide a list of county public benefit programs that illegal immigrants are (were) receiving and note those that will no longer be available.

3. How will welfare reform affect the costs to states, counties and providers, particularly with respect to substitution of funds for withdrawn federal payments, and also with respect to other social (i.e. human) costs?

Federal programs

Nutrition programs

How much federal funding will the state lose in food stamps? Will the state / county substitute for food stamps? To what extent? From what sources? At what cost to other programs? What will be the costs for the local economy?

SSI

How much federal funding will the state lose in SSI payments? Will state general assistance payments be used to support immigrants who lose SSI? To what extent? What will be the costs for the local economy?

TANF (AFDC)

Will state funds be used to provide TANF to future qualified immigrants? What funds? How much will this cost?

Medicaid

Will state funds be used to provide Medicaid to future qualified immigrants? What funds? How much will this cost?

If the state plans to preserve Medicaid eligibility or use a state medically needy program for those immigrants who will lose categorical eligibility because they will lose SSI or TANF, what will the costs of these options be?

State and county programs

If the state will be discontinuing state benefits for immigrants, how much will it save by doing so? Will counties have to bear the cost of these discontinued state benefits? What will be the social costs of denying these state benefits? Are there estimates?

If the state/county will be discontinuing county benefits for immigrants, how much will it save by doing so? Who will bear the cost of these discontinued county benefits (e.g., municipalities)? What will be the social costs of denying these county benefits? Are there estimates?

4. What distinctions, if any, are states making to determine eligibility for welfare programs under their reforms with regard to an individual's immigration status, age, disability level or employment status?

In those cases in which the state has the option of determining the eligibility of qualified immigrants (e.g., TANF, Medicaid, state and county benefits), what criteria is the state using to distinguish among different types of qualified aliens?

Prior to the enactment of the Act, did the state or counties distinguish between legal and illegal immigrants? What kind of verification system was in place?

How far along is the state in developing verification rules (i.e., procedures for verifying that an individual is a qualified alien) under the Act?

How is the state (county) training state (county) employees to determine eligibility based on immigration status?

Please describe any problems facing the state/counties in the implementation of verification rules. Have there been any legal challenges?

5. Are there state and local plans to monitor and assess the impact of policy changes?

How does the state/county plan to monitor the effects of the Act? What kind of monitoring activities are taking place for federal programs? For state programs? For county programs?

What kind of baseline information exists for federal, state and county programs?

What kind of information will the state/county collect for federal, state and county programs? What agencies will be responsible for collecting data and tracking the effects of the law? How will the information be used?

Are state/county MIS systems adequate for tracking the effects of the law?

II. Impact of the welfare reform on immigrants, state and county governments, and the community

1. What are the direct effects of the policy changes, including health care delivery (access to care, payment for care, cost of care, and quality of care) for immigrants at the community level?

What state/county agencies have started to turn away immigrants?

What are immigrants doing to replace the benefits they have lost? Where are they turning to (e.g., other governmental levels, non-profit agencies)?

Are there any observable effects of the welfare reform on immigrants, e.g., increased use of emergency rooms, homeless shelters? Please give examples.

Are there groups of legal immigrants getting organized to protest against or legally challenge the welfare Act? Please describe/give examples.

2. What are the problems that states, counties and providers report they will face in responding to welfare reform that were previously unforeseen by federal government officials?

Is the cost of providing services to immigrants being transferred from state to county governments? To other governments?

Is the cost of providing services to immigrants being transferred from state and county governments to the community, e.g., to charity organizations?

Are there any estimates of the “hidden costs” of denying services to immigrants, e.g., babies being born to immigrant mothers who do not have access to prenatal care will represent higher health care costs?

Are there any organizations/groups that have legally challenged the constitutionality of the welfare reform? Please explain.

3. Is the state providing assistance to immigrants to become naturalized or prove qualified status?

Is state/county/other groups providing advice/assistance to immigrants who wish to naturalize?

Is state/county/other groups providing advice/assistance to immigrants who need to prove qualifying quarters?

Are there already state/county agencies exchanging information with the INS on the status of aliens?

Appendix V. Outline for State Reports

IMPACT OF THE FEDERAL WELFARE POLICY REFORM ON IMMIGRANTS IN THE UNITED STATES

STATE REPORT OUTLINE

DRAFT

I. BACKGROUND

1. Size of state foreign born population (both in absolute numbers and with respect to. total state population) (If possible, break down foreign born by citizen vs. non-citizen, and legal vs. illegal)
2. Characteristics of state foreign born population, e.g. countries of origin, date of entry, income, educational level, occupation (If possible, break down foreign born by citizen vs. non-citizen, and legal vs. illegal)
3. Geographic distribution of state foreign born population, i.e. cities/counties with highest immigrant concentrations, both in absolute numbers and percentages (If possible, break down foreign born by citizen vs. non-citizen, and legal vs. illegal)

II. POLITICAL ENVIRONMENT AROUND WELFARE REFORM AND IMMIGRATION

1. Welfare reform and immigration issues that have already been resolved (e.g. preserve TANF for qualified immigrants)
2. Welfare reform and immigration issues that have not been resolved (e.g. benefits for new immigrants and illegal immigrants)
3. The governor's position
4. The federal senators and representatives' position
5. The state legislature's position
6. Budget proposals, bill proposals and other initiatives that address welfare reform and immigration issues
 - a. Groups sponsoring these proposals*
 - b. Issues addressed by these proposals*
 - c. Issues not addressed by these proposals*
7. Tensions between state and counties.
8. Legal challenges
9. Likely outcome of the political process (i.e. most likely decisions regarding issues that have not been resolved)

III. DISCONTINUATION OF FEDERAL PROGRAMS FOR IMMIGRANTS

1. Estimates of the number of legal immigrants losing food stamps, SSI, TANF, Medicaid (discuss differences between different sets of estimates)
2. Cost to the state
 - a. *Estimates of the cost to the state of replacing federal benefits (discuss differences between different sets of estimates)*
 - b. *Proposals to lessen cost-shifting to state*
3. Cost to the counties
 - a. *Discuss which counties are the most impacted*
 - b. *Estimates of the cost to the counties of replacing federal benefits (focus on most affected counties; be specific, i.e. distinguish between various federal programs: Food stamps, SSI, TANF, Medicaid, other)*
 - c. *Proposals to lessen cost-shifting to counties*
4. State's position regarding new immigrants and deeming

IV. DISCONTINUATION OF STATE AND COUNTY PROGRAMS FOR IMMIGRANTS

1. Plans to discontinue state and county benefits for qualified, non-qualified and illegal immigrants (be specific, i.e. provide a list of state and county programs that may be discontinued)
2. Plans to restructure state and county benefits as a result of the welfare reform

V. STATE AND COUNTY SYSTEMS FOR IMPLEMENTING IMMIGRANT PROVISIONS OF WELFARE REFORM

1. State and county immigrant status verification systems
 - a. *Current systems (e.g. verification concentrated at one state agency, verification done by counties; differences in coding across various programs and agencies)*
 - b. *Limitations of these systems for implementing welfare reform*
 - c. *Plans to change current systems (discuss financing)*

2. State and county naturalization assistance

a. State outreach efforts (target population, types of outreach, response from immigrants, expected outcomes, INS backlog)

b. County outreach efforts (target population, types of outreach, response from immigrants, expected outcomes, INS backlog)

c. Advocacy groups and community-based organizations' outreach efforts (target population, types of outreach, response from immigrants, expected outcomes, INS backlog)

d. Plans to "institutionalize" and increase funding for naturalization assistance

3. Data to monitor the impact of the welfare act on immigrants

VI. IMPACT OF THE WELFARE REFORM ON IMMIGRANTS

1. State and local government's perspectives and estimates

2. Advocacy groups' perspectives and estimates

3. Service providers' perspectives and estimates

VII. CONCLUSIONS