

The New Public Charge Rule: A Threat to Families' Oral Health

What is public charge?

Public charge is a test used by federal immigration officials to identify individuals who may primarily rely on the government for subsistence. If an individual is determined to be likely to become a public charge, the government can deny them entry to the U.S. or lawful permanent residency status (a "green card").

On October 10, 2018, the Trump administration proposed changes to the public charge rule that, if finalized in its proposed form, would broaden the scope of public benefits considered under a public charge determination. Benefits under consideration would include most forms of Medicaid, Medicare Part D premium and cost sharing assistance, the Supplemental Nutrition Assistance Program (SNAP) and housing assistance. If instituted, this change would create fear and disincentivize immigrant families from applying for or using health insurance and other public benefits for which they are legally eligible and that protect physical, mental and oral health.

How will the proposed policy impact access to dental care?

The public health programs being threatened by the proposed changes to the public charge rule are fundamental for protecting access to dental care and maintaining oral and overall health. Together with the Children's Health Insurance Program (CHIP), Medicaid provides coverage to more than 35 million children and includes mandatory coverage of all medically necessary dental care. Though states have greater discretion about offering dental services to adults via Medicaid, all but three states offer some dental coverage for adults.

As a result of the proposed changes to the definition of public charge, it is estimated that anywhere from 2.1 to 4.9 million people may <u>disenroll</u> from Medicaid or CHIP, including U.S.-born children with immigrant parents. This would result in <u>reduced access to oral health services</u> for both children and adults, increasing their risk for poor oral health outcomes and related chronic conditions.

How will the change in public charge impact oral health outcomes?

Oral health means more than just having healthy teeth – it is essential for the <u>general health</u> of all individuals. Dental disease is intricately connected to other chronic conditions including <u>diabetes</u>, <u>heart disease and stroke</u> <u>and can impact birth outcomes</u>, <u>employment</u>, <u>school performance and self-esteem</u>. Therefore, access to dental care is integral not only for oral health, but also for maintaining overall health and wellbeing.

Low-income and uninsured individuals are at increased risk of poor oral health outcomes, including early and/or untreated tooth decay, less frequent dental visits and greater unmet dental needs. These negative outcomes will be exacerbated by families' disenrollment from public programs like Medicaid that provide coverage for preventative and continuous oral health services. Because good nutrition is important for oral health, inclusion of SNAP in the proposed regulation could further put the oral health of children and families at risk.

Poor oral health has been associated with <u>difficulty eating</u>, increased risk of <u>heart disease</u> and <u>diabetes</u>. Diabetes has also been associated with poor oral health. Not only may it stem from poor oral health, but losing insurance coverage for management of diabetes may also result in worse oral health outcomes. Additionally, oral disease may affect mental and emotional well-being. It can <u>undermine self-esteem and lead to increased social isolation</u>, <u>chronic stress and depression</u>. Oral disease also limits <u>productivity and ability to work</u>. Among young children specifically, oral disease is associated with <u>developmental concerns and disrupted school attendance</u>.

Oral health is intertwined with overall well-being for both adults and children. The proposed public charge policy limits access to oral health services and will have dire consequences on the health of families.

What can I do?

- Submit a <u>public comment</u> opposing the Trump Administration's proposed changes to the public charge rule. **The comment period closes on December 10, 2018**
- Check out Community Catalyst's <u>public comment</u> on the proposed rule and a <u>fact sheet</u> on how the rule
 will affect different populations and stakeholders. You can also use the Oral Health Progress and Equity
 Network's (OPEN) <u>template letter</u> and <u>request access</u> to the Protecting Immigrant Families (PIF)
 coalition's comment template. Feel free to incorporate elements of these resources into your own unique
 organizational comment
- For additional information, PIF also has a <u>quick analysis</u> and <u>comment FAQ</u> about the proposed rule on their website
- You can also elevate the health impacts the proposed rule would have on social media from now until the **comment deadline on December 10**. Feel free to use the PIF coalition's <u>Digital Toolkit</u> as well as <u>Community Catalyst's social media graphics</u> to help you do so

For more information or if you have questions, please contact Kasey Wilson -Policy Analyst, Dental Access Project at Community Catalyst at (202) 587-2833 or kwilson@communitycatalyst.org