



Reconciliation: Protect Lifesaving Programs for Immigrant Survivors of Domestic Violence, Sexual Assault, and Human Trafficking

The Women's Refugee Commission (WRC) and Alliance for Immigrant Survivors (AIS) urge Congress to protect survivors of domestic violence, sexual assault, human trafficking and other crimes by opposing restrictions to lifesaving benefits that support their safety, healing, and long-term independence.

Both the House and Senate Reconciliation bills contain harmful provisions that eliminate essential benefits for eligible immigrant survivors. Without access to healthcare, food assistance, and other vital assistance, many survivors would be unable to leave abusive situations and support themselves or their children. With fewer resources, survivors and their children will be forced to remain in abusive situations longer.

Eliminating Access to Healthcare

Eligibility for federal health benefits is already extraordinarily limited for noncitizens, and even those who are eligible may wait years to access them. The House and Senate bills systematically block immigrant survivors' access to healthcare from every direction by:

- Restricting Access to Medicaid, CHIP (Sec 71110) and Medicare (Sec 71201): The Senate bill will eliminate eligibility for Medicaid, Child Health Insurance Program and Medicare for lawfully present asylees, refugees as well as eligible survivors of domestic violence and human trafficking. CBO estimates 7.8 million people would become uninsured due to Medicaid cuts present in the House-passed bill.
- 2. Reducing Federal Medical Matching Assistance Percentage (FMAP) rates (Sec 71111): Both the House and Senate bills would withhold billions of dollars from states that provide state-funded benefits to immigrant adults or children. This includes states that provide coverage to immigrant survivors of domestic violence, sexual assault, human trafficking, and other crimes prior to their eligibility for federal benefits. The House bill also eliminates states' ability to exercise the existing state option to extend pregnancy coverage to low-income women regardless of immigration status.
- Reducing Access to Affordable Care Act Marketplaces (<u>Sec 71301</u>): The
 Reconciliation bills would eliminate tax credits for many lawfully present immigrants,
 including asylees, refugees, eligible victims of domestic violence and human trafficking,





and make it nearly impossible for them to afford health insurance in Affordable Care Act marketplaces. Further, the Reconciliation bills would terminate the ability of lawfully present immigrants who earn less than 100% of the federal poverty level but are ineligible for Medicaid due to their status to enroll in ACA coverage. The CBO estimates 4.2 million people would lose marketplace coverage.

Impact on Survivors

Preserving access to these programs for survivors is <u>key to ending cycles of violence</u>. They provide a bridge to safety and a path to independence so that survivors never again face levels of economic hardship and isolation that are both caused by, and dramatically increase vulnerability to, abuse and exploitation.

<u>State-funded programs are especially critical for survivors</u>, many of whom have complex health needs stemming from abuse and must wait years or decades for their claims to be adjudicated. U visa applicants can wait up to twenty years for adjudication and the majority of survivors are not eligible for most public benefits during this time.

These state-funded benefits bridge the gap, allowing survivors to leave abusive situations and still get healthcare for themselves and their children. Currently 21 states provide coverage to some or all immigrant survivors who are not eligible for federal Medicaid. 14 states extend state-funded healthcare coverage to immigrant adults and children regardless of immigration status. This includes many survivors, including those who have not (yet) filed for humanitarian visas. 7 more states extend healthcare coverage specifically to some groups of survivors who have filed for a U visa, T visa, or other form of humanitarian relief at an earlier stage of the application process. Cutting off states' ability to extend coverage to noncitizens prevents them from protecting and supporting survivors in their communities.

Impact on Pregnant Women, Including Survivors

The House bill would also eliminate states' ability to exercise the existing state option to extend pregnancy coverage to some or all noncitizens. The Senate bill retains states' option to extend pregnancy coverage. 24 states plus DC have extended prenatal and pregnancy coverage regardless of immigration status. Twelve of these states provide up to twelve months of postpartum coverage. This coverage pays for labor and delivery costs that states would still need to pay for using other, often more expensive, means.

Medicaid is essential pregnancy coverage, especially for noncitizens who are significantly more likely to be uninsured. <u>41 percent of women in the United States give birth on Medicaid</u>. Research shows that extending pregnancy coverage regardless of immigration status results in





significantly better outcomes for both parents and children. The National Institute of Health found that many of these health benefits of prenatal coverage for noncitizen mothers manifest throughout their child's early life, with many not even showing up until preschool. It is imperative that states retain the option to continue offering pregnancy coverage to some or all noncitizens even if the FMAP reductions are implemented.

Limiting Access to Food Assistance

The Reconciliation bills would cut nearly \$300 billion from the Supplemental Nutrition Assistance Program (SNAP), representing the largest cut in the history of the program. (Sec 10108) While the Senate Parliamentarian rejected the provisions barring immigrants who are not citizens or lawful permanent residents from receiving SNAP benefits, we remain concerned about future restrictions to these critical food assistance programs.

Impact on Survivors

For survivors of domestic violence and human trafficking, access to SNAP can be lifesaving. Without it, survivors—including children—may be forced to remain in abusive situations due to a lack of basic resources. Nearly 80% of advocates surveyed by the National Resource Center on Domestic Violence reported that "most domestic violence victims rely on SNAP to help address their basic needs and to establish safety and stability."

For decades, these targeted supports for eligible noncitizen survivors of domestic violence and human trafficking have **received bipartisan support**¹ as a proven tool to break cycles of violence and promote independence. Preserving SNAP is not just sound - it is a matter of survival, safety, and breaking cycles of abuse that affect generations.

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¹ Section 501 of IIRIRA amended PRWORA to provide that certain categories of noncitizens who have been subjected to battery or extreme cruelty in the United States by a family member with whom they reside are "qualified" for purposes of eligibility for some public benefits, including SNAP. Similarly, access to benefits for certain victims of human trafficking was provided through the bipartisan Trafficking Victims Protection Act of 2000.