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Testimony in Support of LD 718, *An Act To Improve the Health of Maine Residents by Closing Coverage Gaps in the MaineCare Program and the Children's Health Insurance Program*
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Good morning Senator Claxton, Representative Meyer, and members of the Joint Standing Committee on Health and Human Services. My name is Kathy Kilrain del Rio and I am the Director of Campaigns and Healthcare Advocacy for Maine Equal Justice, a nonprofit legal aid provider working with low-income Mainers to increase economic security, opportunity, and equity for people in Maine. Today I am submitting testimony in support of LD 718, An Act To Improve the Health of Maine Residents by Closing Coverage Gaps in the MaineCare Program and the Children's Health Insurance Program.

An expecting mom who needs prenatal care, a young child with a health condition that could become life threatening if untreated, an older person who needs to control their diabetes, a young man who needs mental health care... these are just some of many examples of Mainers who I've been contacted about in the last six months because they are trying to find a way to get health care that is denied them due to their immigration status.

As you've heard from many people today, immigrants from many different backgrounds and navigating different aspects of our complex immigration system are excluded from the Medicaid program due to harmful restrictions that were added in the nineties. For many years and with bipartisan support, Maine continued to provide coverage for immigrants until that coverage was abruptly ended in 2011. With that policy change, we forced many of our family, friends, neighbors, coworkers, and classmates who are immigrants to go without health care except when an issue becomes an emergency. This has led to poorer health conditions, harms academic success, affects workers' productivity, and, most sadly, has led to earlier deaths.

At Maine Equal Justice prior to the pandemic we would often hear stories like those you've heard and read from others today where individuals and families scramble to patch together any health care they can get, try to weigh whether or not an emergency will be covered by Emergency MaineCare, make painful tradeoffs to pay for one family member's medicine and hope another family member could go without or stretch it out because they can't afford both, and many others.

When the pandemic struck Maine, we knew that many immigrants without health care were working in essential jobs – growing and processing food, working in grocery stores and other retail, providing care to people with disabilities and older Mainers, working at hospitals and other health care providers, and employed throughout our hospitality industries. Low-income workers can rarely afford to take time off and many did not have sick time. Many Maine immigrants continued to show up and do necessary in-person work from the start of the pandemic.

For those of us without access to health care, the virus can be more threatening. Without preventive care to identify health issues, people can suffer with underlying conditions that make them more vulnerable to the virus and more likely to suffer worse effects if they get sick. Chronic conditions that can be managed – like asthma, diabetes, and heart disease – go untreated without health care, which again can make people more vulnerable to the virus. When you couple these challenges with existing systemic issues that create health disparities for Mainers of color, especially Black Mainers, it came as no surprise that Maine’s racial disparities for COVID-19 soon were the worst in the nation.

Those disparities helped shine a spotlight on some of the barriers to good health facing many immigrants in our communities. One clear policy solution that quickly arose was to ensure everyone who is income eligible can access MaineCare regardless of their immigration status. LD 718 would make that solution a reality. The last year has reinforced what most of us already knew: our lives and our health are deeply connected to the lives and health of everyone else in our community. It benefits us all to ensure everyone has access to health care. And, quite simply, it’s the right thing to do.

Health coverage helps enable families to access needed care. It helps protect families from unaffordable expenses due to medical care and is critical for the health and development of children.ⁱ Being uninsured leads to poorer quality of health care, lower rates of preventive care, and greater probability of death with uninsured adults more than 25 percent more likely to die prematurely than those with insurance.ⁱⁱ

That’s not surprising when you consider that people without coverage are more likely to wait until a health issue becomes serious to seek care and they then learn that they have a condition in a late or less treatable stage than if it had been caught early. People without coverage are more likely to die or have poorer health outcomes from accidents, heart attacks, and strokes.ⁱⁱⁱ

Children without coverage are more likely than those with insurance to be hospitalized for avoidable medical conditions and to miss more school due to poor health.^{iv} Children without coverage who have conditions like diabetes or asthma are more likely to suffer poorer health outcomes than those with insurance.^v

Your committee has heard before about the importance of coverage for good maternal and infant health outcomes, but as a report from the Kaiser Family Foundation notes, there is growing understanding that access to care “throughout a woman’s reproductive years, including before and after a pregnancy, is essential for prevention, early detection, and treatment of some of the conditions that place women at higher risk for pregnancy-related complications, including cardiovascular disease, diabetes, and chronic hypertension.”^{vi}

There are many families with mixed statuses – meaning different family members may have a different immigration status or be U.S. citizens. It can be confusing and painful to have some family members be considered deserving of health care and others not considered deserving of health care. We know that when parents have access to coverage, children with coverage are more likely to see a doctor and get preventive care. Parents’ health also impacts the wellbeing and financial stability of the entire family.

As immigrants move through the immigration process – or as laws and rules change at the federal level – their immigration status can change. As their immigration status changes or they become citizens, immigrants can become eligible for coverage. Children who are born here, regardless of the immigration status of their parent, are U.S. citizens and eligible for MaineCare. When we fail to invest in preventive care and necessary care for chronic conditions now, we can end up having to cover the costs for more expensive care down the road – either because people become eligible for full MaineCare or because we need to pay for emergency care. It makes good financial sense to cover necessary health care for everyone.

All Mainers should have health care, but passing this bill is also an investment in our workforce and economy. Immigrants contributed \$62 million in state and local taxes in 2016^{vii}. Economists, business leaders, and experts in our workforce have repeatedly named immigration as a key solution to Maine’s workforce challenges. As our State Economist, Amanda Rector has stated: “Even if we kept all of our young people here, we simply do not have enough of them in the state now to replace the retiring baby boomers. We must attract more workers to the state if we are going to have enough people to fill the jobs that will open up as the older workers retire, and we’ll have to attract even more if we want businesses to be able to grow.”^{viii} But immigrants can help address this demographic challenge. A report from CEI found that the population of foreign-born individuals grew by 23 percent from 2000 to 2013 while Maine’s native-born population grew just 4 percent. From 2000-2013, the foreign-born population increased by 23 percent to 45,285 residents, compared to under 4 percent growth within the native-born population.^{ix}

Immigrants from nations across the world have helped weave the fabric of our state. Those who are making their homes here today are bringing vitality, leadership, and economic growth to our state just as immigrants have done throughout our history. Ensuring that immigrants have the health care they need to have a strong start here is an investment in Maine’s future and the right thing to do. Access to health care for all Mainers who are immigrants will increase

equity, strengthen their financial security, and result in healthier individuals, families, and communities. For these reasons and the many others you have heard today, we urge you to support LD 718 and close these harmful gaps in our MaineCare and CHIP programs. I'm happy to answer any questions you may have. Thank you.

ⁱ <https://www.kff.org/uninsured/issue-brief/key-facts-about-the-uninsured-population/>

ⁱⁱ <https://www.nilc.org/wp-content/uploads/2015/11/consequences-of-being-uninsured-2014-08.pdf>

ⁱⁱⁱ Ibid.

^{iv} Ibid.

^v Ibid.

^{vi} <https://www.kff.org/wp-content/uploads/2019/09/Testimony-Medicaid-and-Health-Coverage-for-Low-Income-Women-in-Pregnancy-and-After-Childbirth-1.pdf>

^{vii} https://www.newamericaneconomy.org/wp-content/uploads/2018/08/G4G_Portland.pdf

^{viii} <http://www.mainebiz.biz/article/20160923/NEWS01/160929971/report:-immigrants-key-to-addressing-maine's-workforce-woes>

^{ix} Coastal Enterprise Institute (CEI), March 2016, *Building Maine's Economy: How Maine Can Embrace Immigrants and Strengthen the Workforce*