VIEWPOINTS

Health care coverage needed for undocumented immigrants

By Enrico Marcelli, Manuel Pastor and Steven P. Wallace Special to The Bee

espite last fall being marred by a faltering federal website, the Affordable Care Act closed its first official enrollment period with unexpectedly high numbers. As usual, California led the way: the state achieved more than 1.4 million sign-ups on its insurance exchange, nearly 1 in 6 of the nation's total. An additional 1.9 million are newly enrolled in Medi-Cal.

California is now set to lead in another way: by closing the gap in coverage left when Congress decided to exclude undocumented immigrants from participating in either the insurance exchanges or the expansion of Medicaid benefits.

The exclusion was largely a matter of politics. The administration and Congress did

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not want health care to be mixed up with yet another contentious issue, immigration reform.

Now, state Sen. Ricardo Lara, D-Bell Gardens, has proposed a "Health for All" bill (Senate Bill 1005) that aims to remedy the situation in California by making Medi-Cal available to undocumented residents and by creating an accessible option for private insurance coverage similar to the state exchange.

We hope that debates about the bill will leave aside the heated rhetoric of Washington and be guided by our research and report of the facts on the ground here in the Golden State.



Enrico Marcelli



Manuel Pastor



Steven P. Wallace

The first fact is simply that there is a gap. To be clear, not all of the state's undocumented have been left to one side under the current system. There are some county-level programs that provide coverage, emergency care in hospital is available, and some are eligible for employer-based coverage. Still, recent estimates from UC Berkeley and the UCLA Center for Health Policy Research suggest that 1.4 million undocumented Californians will remain uninsured when the Affordable Care Act is fully implemented.

The second key fact is that this is a sizable, stable and integrated population. Undocumented immigrants represent 7 percent of our state's total population – and nearly half of them have lived in the U.S. for more than 10 years. Undocumented Californians are also 6 percent of all heads of households – and nearly three-quarters have at least

one citizen living in the house. Indeed, nearly 1 in 6 of all California children have at least one undocumented parent, with more than 80 percent of those children being U.S. citizens.

The third key fact is that their future is our future. This is partly because of the sizable number of children and mixed-status families. But it's also because the undocumented are nearly 9 percent of our state's total workforce, with the share much higher in sectors such as agriculture, construction and retail. And because 62 percent of all bankruptcies in the U.S. in 2007 involved medical debt, leaving such a large and important part of our population without

health insurance makes them more vulnerable to sickness and economic hardship and puts the whole state at risk.

The fourth key fact is economic. In upcoming debates on the Lara bill, talk of costs is likely to dominate. But we should remember that undocumented Californians pay \$2.7 billion annually in sales, income and property taxes. And including a group that tends to be younger, healthier and, reports suggest, less likely to use health care may improve risk-sharing in state insurance pools.

The fifth fact is political: Providing health coverage for all may be less controversial than some might think. After all, 86 percent of California adults favor a path to citizenship for "illegal immigrants," including 72 percent of self-identified Republicans. And perhaps because of frustration with the policy stalemate in Washington, 55 percent of California's registered voters support the state making its own policies, separate from the federal government, to address the needs of undocumented immigrants.

Lara has made the moral arguments for his bill, and Wendy Lazarus, co-president of The Children's Partnership, has made a compelling case about the spillover effects on children's health.

We hope the debate about the Lara bill will advance with concern for vulnerable populations, attention to what the data tell us, and an underlying vision that California can be stronger, socially and economically, when everyone has access to affordable health insurance.

Enrico Marcelli is an associate professor of sociology at San Diego State University. Manuel Pastor is director of the Center for the Study of Immigrant Integration at the University of Southern California. Steven Wallace is chair of the Department of Community Health Sciences at the UCLA School of Public Health.