

Access to Comprehensive Care and Health Coverage for Farmworkers

Learning Collaborative Session 2 of 4: Health policy considerations

Housekeeping

- Yes, this will be recorded, but we'll only post the main presentations.
- PowerPoints and resources are available will be emailed.



- Use the Zoom platform to engage: **chat**, **raise your hand to speak**, **send questions**, and **share reactions**.

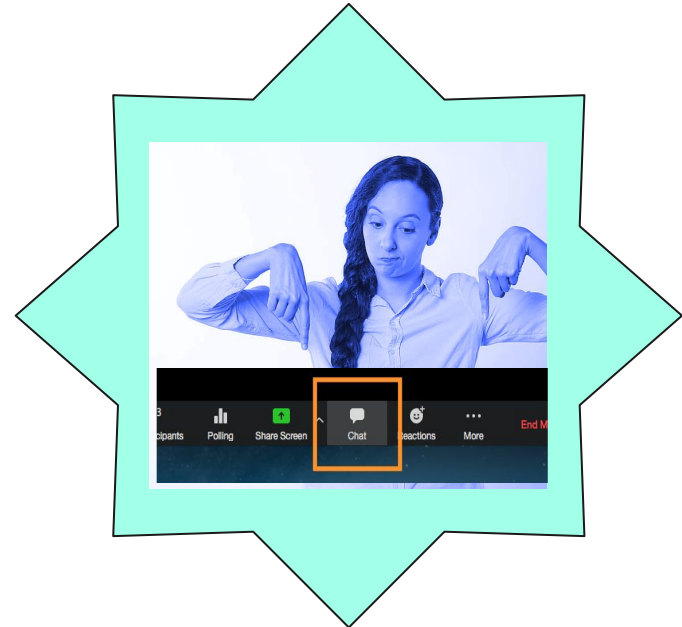
This image may appear when we have questions for you.

Who is joining us today?



Type **your name, title, organization, state** into the chat

Icebreaker: What is your favorite Halloween costume memory and/or what are the Halloween costumes this year?





Agenda

1. Welcome & Introduction
2. Legislative updates impacting access to health coverage
3. Health insurance & eligibility for farmworkers
4. Discussion
5. Session 2 Wrap up

Legislative updates & health policies
impacting coverage for farmworkers

End of the Public Health Emergency (PHE)

- Prior to the pandemic, states were required to renew coverage for people with Medicaid or CHIP coverage at least once a year and to disenroll individuals who no longer qualified for coverage.
- During the COVID-19 pandemic, Congress acted to ensure people did not lose access to critical health care by preventing states from terminating a person's Medicaid coverage, even if they no longer qualified.
- Now that the public health emergency has ended, federal law requires states to restart regular Medicaid renewals.

Impact of Medicaid Unwinding

- Across all states with available data, 73% of all people disenrolled had their coverage terminated for procedural reasons.
- Approximately 9.5 percent of Medicaid enrollees (8.2 million) will leave Medicaid due to loss of eligibility and will need to transition to another source of coverage. Based on historical patterns, 7.9 percent (6.8 million) will lose Medicaid coverage despite still being eligible (“administrative churning”).
- Children and young adults, as well as Latino and Black individuals, are predicted to be impacted disproportionately. Latino individuals comprise over one quarter of those predicted to be ineligible for Medicaid and over one-third of those predicted to experience churning.

Impact of Medicaid Unwinding

Challenges with re-enrollment for farmworkers:

- Individuals enrolled in Medicaid may have moved during the pandemic and may not receive their renewal notices at their new addresses.
- Others may receive their notices but may not know that Medicaid renewals have restarted or may face barriers as they take steps to complete their renewals.
- Individuals who are no longer eligible for Medicaid may not be aware of other options for comprehensive coverage (ie. through ACA marketplace)
- Parents who are no longer eligible for Medicaid coverage may not know that their children may still be eligible and may not return their renewal forms.
- Individuals with limited english proficiency (LEP) make up a disproportionate share of the Medicaid population and are more likely than English proficient enrollees to experience administrative barriers to completing Medicaid renewal processes, and lose coverage even when eligible.

ACA & DACA recipients

- The Deferred Action for Childhood Arrivals (DACA) program was enacted in 2012 to protect eligible young adults who were brought to the U.S. as children from deportation and to provide them with work authorization for temporary, renewable periods.
- While individuals with DACA status can be authorized to work, they remain ineligible for many federal programs, including health coverage through Medicaid, the Children's Health Insurance Program (CHIP), and the Affordable Care Act (ACA) health insurance marketplaces.
- In April 2023, the Biden administration proposed a rule to expand eligibility for health coverage to DACA recipients ahead of Open Enrollment 2024.
 - *Final rule has not yet been published*

Discussion

- How has your organization responded to and been impacted by recent changes in Medicaid, ACA, and the end of the public health emergency?



Other legislative updates:

Federal:

- **Lift the Bar Act (HR 4170/S 2038)**
 - Introduced June 2023 (Jayapal/Hirono)
 - Would remove 5-year bar for public benefit eligibility for Lawfully Present Immigrants
 - Fact Sheet: https://www.farmworkerjustice.org/wp-content/uploads/2023/04/FJ-LIFT-the-BAR-Act-Factsheet-Final_June-2021.pdf
- **HEAL for Immigrant Families Act (HR 5008/S 2646)**
 - Introduced July 2023 (Jayapal/Booker)
 - Expand access to Medicaid for LPRs and DACA, to ACA for undocumented immigrants
 - Fact Sheet: <https://napawf.org/resources/heal-act-2023-section/>

Other legislative updates:

State:

- CA, IL, OR, NY - eligibility to enroll in state-funded coverage, regardless of immigration status
 - CA : 19-25 year olds, 50 years old + ; expanding to 26-49 year olds in 2024
 - IL: 42 and older
 - OR :19-25 year olds, 55 years old +
 - NY: 65 years old +
- CO - eligibility for state-funded subsidies to purchase private health insurance
 - Up to 300% FPL
- WA -eligibility to enroll in state Marketplace and qualify for state-funded subsidies (effective Jan. 2024)



Questions???

Discussion

- Is there other legislation in your state that is impacting or can potentially impact health insurance access?





Eligibility & other considerations for farmworkers

1. Medicaid
2. Employer health insurance
3. Workers compensation
4. Coverage through ACA

Eligibility & Coverage

1. Employer health insurance:

- Worker must be full-time employee
- No immigration requirements
- Covers a worker's children and may also cover their spouse.

2. ACA Marketplace Insurance*

- Worker must live in U.S.; live/work in state in which they are applying, and have a qualifying immigration status, and not be in prison.

3. Medicaid:

- Worker must live or work in the state in which they are applying, meet low-income requirements, and have a qualifying immigration status. Covers a worker's children and may also cover their spouse.
- Eligibility requirements vary by state

4. Workers' Compensation: Coverage for when a worker is injured on the job. This is **not** equivalent to full health insurance.

- Coverage varies by state
- H-2A workers are covered by workers' compensation, regardless of state laws

NOTE*:

- Lawfully present immigrants are eligible for coverage through the Health Insurance Marketplace
- People who have these immigration statuses DO NOT qualify for the ACA marketplace: Undocumented immigrants AND Deferred Action for Childhood Arrivals (DACA) - though DACA grantees may be eligible for coverage starting in 2024
- Workers only have to provide information about immigration status for the people whom they want to receive insurance coverage.

Who is “Lawfully Present” under the ACA?

- U.S. citizens and U.S. citizen nationals
- Lawful Permanent Residents
- Asylees, Refugees, Cuban/Haitian Entrant
- Parolees
- Battered Spouses/Children/Parents
- Victims of Trafficking and his/her Spouse, Child, Parent, or Sibling
- Individuals with non-immigrant visas status, including workers and students (incl. H-2A and H-2B visas)
- Individuals in TPS, Deferred Action (except DACA), and Deferred Enforcement Departure (DED)
- Lawful temporary resident
- Administrative order staying removal issued by DHS
- Member of a federally-recognized Indian tribe or American Indian born in Canada
- Resident of American Samoa

Applicants for the following status:

- TPS with Employment Authorization
- Special Immigration Juvenile Status
- Victim of Trafficking Visa
- Adjustment to LPR status
- Asylum (only if they have been granted employment authorization are under 14 and have had an application pending for at least 180 days)
- Withholding of Deportation or Withholding of Removal under the immigration laws or under the CAT

Financial assistance

- In general, people who have ACA marketplace health insurance pay very little for their premium if they have a low income and/or many dependents (children).
- There are two primary methods of financial assistance:
 - Advanced Premium Tax Credit (APTC)
 - Cost Sharing Reductions
- If a worker is offered health insurance through their employer, however, **they are not eligible** for the tax credit for ACA marketplace insurance.

Tax Credits & Cost Sharing

Advanced Premium Tax Credit (APTC): subsidies that lower an individual's or family's monthly premium for health insurance. Eligibility is determined by immigration status/income eligibility:

- U.S. citizens and qualified immigrants eligible for Medicaid – individuals or families between 100% and 400% FPL.
- Lawfully present individuals **not eligible** for Medicaid due to immigration status (Including H-2A workers) – individuals or families between 0% and 400% FPL

Cost Sharing Reductions: reduced out-of-pocket costs such as co-pays, co-insurance, and deductibles.

- Income eligibility is up to 250% FPL and **only applies** if worker enrolls in Silver plan.

Migratory Workers & ACA

Special Considerations

- Reluctance to enroll in coverage in area that is not their permanent home
 - Esp. workers who may already have coverage in their home state
- Out-of-network vs. in-network coverage
- Coverage can be lost or change when **moving between states AND moving within states.**
- 60-day Special Enrollment Period (if outside of open enrollment)
 - Limited timeframe to enroll in health insurance
 - Depending on the length of the season, may not be worthwhile to enroll or re-enroll in ACA coverage

H-2A Workers and ACA

Special considerations for H-2A workers

- Understanding health insurance options
 - Workers' compensation vs. comprehensive health insurance
 - U.S. health system vs. system in their home country
 - Eligibility for financial assistance
- H-2A workers MUST disenroll from health insurance before they leave the U.S.
- Document verification
- Cannot begin enrollment process until they arrive in the U.S.
 - Eligible for 60-day Special Enrollment Period
- Filing taxes
 - Workers from Mexico may be able to claim dependents in Mexico as part of their household size on their marketplace application
 - Tax filing requirements for H-2A workers is complicated
- Accessing health insurance information, making premium payments post-enrollment

Questions?





Please complete the session 2 evaluation

Please click the link in the chat to fill out the evaluation survey:

<https://www.surveymonkey.com/r/9BNJBZP>



What's Next?

Session 3: Outreach strategies & lessons from the field

- What challenges has your organization faced in conducting outreach and enrolling farmworkers in health insurance?

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Thank you!