

**Congress of the United States**  
**Washington, DC 20515**

December 15, 2006

The Honorable Leslie V. Norwalk  
Acting Administrator  
Centers for Medicare and Medicaid Services  
200 Independence Avenue, S.W.  
Room 443-G, Hubert H. Humphrey Building  
Washington, DC 20201

Dear Ms. Norwalk:

We are writing to again express our grave concern with the new Medicaid citizenship documentation regulations, and in particular, the disproportionate impact the regulations will have on Hispanic American newborns.

In the preamble to the recent regulations on Medicaid citizenship documentation, the Centers for Medicare and Medicaid Services stated that babies born to mothers on emergency Medicaid should no longer be automatically provided one year of automatic Medicaid eligibility.<sup>1</sup>

As the media has reported and members of Congress have explained in other correspondence, this new policy reverses longstanding precedent and is an incorrect interpretation of law.<sup>2</sup> Immediate proof of eligibility and citizenship is burdensome and unnecessary: children born to women on Medicaid almost invariably meet eligibility criteria themselves, and these newborns are clearly citizens by virtue of being born in this country. Documents such as birth certificates can take weeks to produce, and without a year of automatic eligibility, newborns may have to forgo critically important post-natal care.

We are writing today to draw your attention to the particularly harsh impact this new policy will have on Hispanic American newborns. The new policy affects only babies born to women on emergency Medicaid—most likely women who are legal immigrants

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<sup>1</sup> 71 Federal Register 39214 (July 12, 2006).

<sup>2</sup> Letter from Henry A. Waxman and John D. Dingell to Leslie Norwalk, Acting Administrator, Centers for Medicare and Medicaid Services (Dec. 4, 2006); *New York Times*, “Medicaid Wants Citizenship Proof for Infant Care”, (Nov 3, 2006).

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barred under law from receiving Medicaid services for five years despite their legal status, and undocumented immigrants who are likely to be from Latin America.<sup>3</sup> This policy will therefore likely decrease access to care for Hispanic American newborns.


Hispanic American children already suffer from poor access to care. In 2005, 21.9 percent of Hispanic American children were uninsured. This is more than triple the rate of non-Hispanic white children and a higher rate than any other racial or ethnic group.<sup>4</sup> Even more disturbing, this disparity in access to care widened from 2004 to 2005. While our nation expanded insurance coverage for non-Hispanic white children, Hispanic children grew more likely to be uninsured.<sup>5</sup>

In a recent report on health disparities, the Institute of Medicine recently stated that “access-related factors are likely the most significant barriers to equitable care, and must be addressed as an important first step toward eliminating healthcare disparities.”<sup>6</sup> It is disturbing that CMS is actively engaged in efforts that will limit access to care and exacerbate health disparities.

In January of this year, Secretary Michael Leavitt said that “eliminating health disparities as they affect racial, ethnic, and underserved populations is a critical goal of the department.”<sup>7</sup> This new policy, however, stands in direct opposition to that critical goal. We ask you to immediately issue a letter to State Medicaid Directors stating clearly that all newborn citizens born to women on Medicaid should be deemed eligible for Medicaid. We also ask that you reply to this letter by Friday, December 22, 2006.

Sincerely,

  
HILDA L. SOLIS  
Chair, Health Task Force  
Congressional Hispanic Caucus

  
GRACE F. NAPOLITANO  
Chair  
Congressional Hispanic Caucus

Cc: Dennis Smith

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<sup>3</sup> Pew Hispanic Center, *The Size and Characteristics of the Unauthorized Migrant Population in the U.S.: Estimates Based on the March 2005 Current Population Survey* (March 7, 2006). 78% of unauthorized migrants were from Latin America.

<sup>4</sup> US Census Bureau, *Income, Poverty, and Health Insurance Coverage in the United States: 2005* (Aug. 2006). 7.2% of white non-Hispanic children were uninsured.

<sup>5</sup> US Census Bureau, *Income, Poverty, and Health Insurance Coverage in the United States: 2004* (August 2005). 21.1% of children of Hispanic origin were uninsured while 7.6% of non-Hispanic white children were uninsured.

<sup>6</sup> Institute of Medicine, *Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care*, at 33 (2003).

<sup>7</sup> Department of Health and Human Services, *News Release: HHS Awards More than \$56 Million to Eliminate Health Disparities* (Jan. 9, 2006).