
The Children’s Health Insurance Program Reauthorization Act of 2009 (CHIPRA) gave states the option to cover lawfully residing immigrant children though Medicaid and the State Children’s Health Insurance Program (CHIP) without enduring the five-year waiting period that applies to most public assistance programs for immigrants.

Extending coverage to these children is likely not only to improve their health outcomes, but also to reduce the cost of uncompensated care in the health system as a whole. Low-income immigrant children who are insured are more likely to receive preventive health care and less likely to use hospital emergency rooms.

In its analysis of HB 7 (2014), AHCA has estimated that approximately 25,555 lawfully residing immigrant children would be eligible for KidCare under this bill. This would increase total KidCare enrollment by only one percent.

If enacted in 2014-15:
- The maximum cost to the state for covering these children would total about $21 million for all KidCare components, including Florida Healthy Kids, MediKids, CMS, and Medicaid for Children.
- As a result of the enhanced FMAP rate, Florida would draw down approximately $49 million in federal matching funds.
- Expanding coverage to lawfully residing children will reduce costs associated with providing Emergency Medicaid Assistance (EMA) for Non-Citizens.

This legislation does not seek to eliminate the waiting period for adult legal immigrants. Furthermore, these bills reaffirm that undocumented immigrants will continue to be ineligible for both Medicaid and CHIP, regardless of how long they have resided in the United States.

Endorsed by: