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Samantha Deshommes  
Regulatory Coordination Division Chief  
Office of Policy and Strategy  
U.S. Citizenship and Immigration Services  
Department of Homeland Security  
20 Massachusetts Avenue NW Washington, DC 20529-2140

Mark Phillips  
Residence and Naturalization Division Chief  
Office of Policy and Strategy  
U.S. Citizenship and Immigration Services  
Department of Homeland Security  
20 Massachusetts Avenue NW Washington, DC 20529-2140

Attention: DHS Docket No. USCIS-2010-0012

Dear Chiefs Deshommes and Phillips:

The Houston Health Department believes the deeply harmful public health impact of 83 SR 51114 will stretch beyond the immigrant community, resulting in an increased vulnerability to potentially life-threatening illness and disease for all Houstonians.

Public health is centered on preventing people from getting sick or injured. This preventative service approach saves lives and billions of dollars annually in healthcare costs. By imposing massive new barriers to legal immigration for people who receive public assistance, fewer will participate in vital public health services, resulting in the following problems for all Americans:

- **More vaccine-preventable disease outbreaks** due to fewer people being vaccinated. School and college enrollment would also decrease due to children not meeting immunization requirements.
- **Increased in chronic diseases** due to fewer people participating in health preventative education. Treating people for heart disease, cancer, diabetes and other chronic diseases is much costlier than offering services to prevent it in the first place.
- **More sick and malnourished children** due to decreased enrollment in nutrition assistance programs like Women, Infant and Children (WIC) and the Supplemental Nutrition Assistance Program. Additionally, fewer children will have access to vital healthcare coverage through the Children’s Health Insurance Program (CHIP).
- **Increase in preventable deaths** due to people not getting referrals for healthcare, acquiring vaccine-preventable diseases and developing chronic illnesses.
• **Increase in costly tax-payer funded hospitalizations** for conditions that may have been addressed or prevented through public health services.

• **Inability to effectively investigate, control and stop disease outbreaks** due to people not providing information about contacts in fear of jeopardizing their immigration status.

• **Less effective public health interventions** due to less accurate disease information because fewer people are participating in public health programs and providing less information.

• **Increased burden on already stressed emergency services** due to persons with chronic health conditions deteriorating from a lack of on-going care and becoming critically ill, to include but not limited to renal failure patients needing emergent dialysis, cardiac patients developing congestive heart failure, diabetics developing diabetic ketoacidosis. Acute care for these emergencies is far more expensive and dangerous than quality continuing care.

The fear and confusion already felt by millions of immigrant families due to escalating anti-immigrant rhetoric and policies would be worsened by this proposed rule, regardless of whether they are technically subject it. For example, Houston’s WIC (Women, Infants & Children) enrollment has decreased by more than 20 percent since the November 2016 election. In addition, it is more challenging to get Sexually Transmitted Disease patients to provide names of all their contacts, contributing to a 59 percent increase in reported cases in Houston-Harris County in the first quarter of 2018.

As a public health agency, we are responsible for protecting the health and well-being of everyone within our jurisdiction, regardless of immigration status. The negative public health impact of this rule will not only affect immigrants, but would consequently have a detrimental effect on the entire population.

For the sake of everyone’s health and well-being, the Houston Health Department strongly urges the Department of Homeland Security against implementation of 83 FR 51114.

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Stephen L. Williams, M.Ed, MPA  
Director, Houston Health Department

David Persse, MD  
Local Health Authority, Houston Health Department  
Medical Director, Houston Fire Department