

May 7, 2020

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National Advocates for Asian
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The Honorable Mitch McConnell
Majority Leader
United States Senate
Washington, D.C. 20510

The Honorable Nancy Pelosi
Speaker
U.S. House of Representatives
Washington, D.C. 20515

The Honorable Charles Schumer
Minority Leader
United States Senate
Washington, D.C. 20510

The Honorable Kevin McCarthy
Minority Leader
U.S. House of Representatives
Washington, D.C. 20515

Dear Majority Leader McConnell, Minority Leader Schumer, Speaker Pelosi,
and Minority Leader McCarthy:

I am writing you, as you develop the highly needed next phases of COVID-19 response legislation, to ask that you include in it the bipartisan Covering Our FAS Allies Act (COFA Act, H.R. 4821 and S.2218). We appreciate that the Take Responsibility for Workers and Families Act (H.R. 6379) did include this measure, though we were disappointed that it was not a part of the final CARES Act. Given that COVID-19 affects people from all walks of life, all income levels, and all ages, we cannot exclude our COFA partners from the recovery. We look to your leadership to ensure this population, who contribute so much to our country, sees the end to what has become a cycle of neglect.

In 1996, people living in the United States under the Compacts of Free Association (COFA), which allows citizens of the Republic of the Marshall Islands, the Federated States of Micronesia, and the Republic of Palau to permanently live and work in the U.S. without a green card, lost eligibility for Medicaid. By all accounts, their exclusion as a category of qualified immigrants in welfare reform was an oversight. The Asian & Pacific Islander American Health Forum, which advocates for the health of Asian American, Native Hawaiian and Pacific Islanders and has over 150 community partners in 28 states, has been working with COFA leaders from around the country to undo this error.¹

It is entirely appropriate and necessary for Congress to address this longstanding problem in a COVID-19 relief bill. Pacific Islanders, where the data is available, are seeing a disproportionate rate of COVID-19 illness and death. In Oregon and California, Pacific Islanders have case rates three times the state average, while in Salt Lake City, Utah, it is more than twice the state's average rate.² In Iowa,

¹ See "Health Care for COFA Citizens." *Asian & Pacific Islander American Health Forum* (August 2019). Available at: <https://www.apiahf.org/resource/health-care-for-cofa-citizens/>.

² "Devastating COVID-19 Rate Disparities Ripping Through Pacific Islander Communities in the U.S.," *Pacific Islander Center of Primary Care Excellence* (April 24, 2020). Available at:

one headline recently reported, “Dubuque Marshallese community hit hard by COVID-19.”³ In addition, the U.S. has already provided over \$25 million to the COFA nations directly for COVID-19 aid, but has yet to address the needs of their citizens living here.⁴ If COFA communities in the U.S. cannot access testing, treatment and an eventual vaccine, we will be abandoning the promises we have made to these nations in exchange for the strategic military alliances they offer.

Last November, we sent the leaders of the Senate Finance and House Energy and Commerce Committees a letter, with now almost 300 signers, requesting restoration of Medicaid for COFA populations in the U.S.⁵ Since then, it has become even more clear that Congress must take action. With a coming economic downturn, for states that have chosen to use their own funding to provide health care for COFA populations, restoring Medicaid will provide important budget relief. And as Politico has reported, COFA populations work in low-wage jobs that are less likely to provide health insurance, areas of the economy that are particularly vulnerable right now.⁶ Cost must not be a barrier to testing and treatment and individuals, particularly ones facing disparities such as COFA people, should not fear medical debt after receiving COVID-19 related services.

Some states have taken action to address the health care needs of COFA populations, such as Washington, California and New York, which use state funds to cover them. Iowa and Arkansas have devoted resources for COVID-19 testing and treatment for COFA individuals. But state budgets are facing tremendous strain and due to chronic underfunding, public health departments and public clinics are not fully equipped to fill the gap left by Medicaid. Ultimately, the federal government must accept its role as the primary steward for COFA communities.

We cannot wait any longer to address what started as a legislative oversight, but has since become a public health injustice. In closing, please consider this example. One of our partners, the Arkansas Coalition of Marshallese (ACOM),

https://mk0picopce2kx432grq5.kinstacdn.com/wp-content/uploads/2020_0424-PICOPCE-COVID19-Press-Release.pdf.

³ Fisher, Benjamin. “The ICUs are full of us! 3 deaths reported as Dubuque Marshallese community hit hard by COVID-19.” *Telegraph Herald* (May 6, 2020). Available at: https://www.telegraphherald.com/coronavirus/article_bf1ba1a1-ba84-5bb9-97f7-58c981e7045a.html.

⁴ “The United States is Assisting Pacific Island Countries to Respond to COVID-19.” *U.S. Department of State* (April 21, 2020). Available at: <https://www.state.gov/the-united-states-is-assisting-pacific-island-countries-to-respond-to-covid-19/>.

⁵ See Letter from Organizations Supporting Action on COFA Medicaid (November 19, 2019). Available at: <https://bit.ly/APIAHF-COFA-Letter>.

⁶ Diamond, Dan. “Lawmakers Push to Restore Medicaid for Islanders Affected by Nuclear Tests.” *Politico* (April 16, 2020). Available at: <https://www.politico.com/news/2020/04/16/coronavirus-uninsured-pacific-islanders-190979>.

based in Springdale, Arkansas, has encountered increased challenges serving thousands of COFA community members during the pandemic. One client, “Ann,” who would be Medicaid eligible but for her COFA status, tested positive for COVID-19 and was put on a ventilator. This likely saved her life. However, because she is uninsured, she cannot afford the hospital bills. ACOM has dipped into their emergency fund to cover Ann’s costs for the moment, but this would not be sustainable for the long term or for many more clients. With this story in mind, I urge you to ensure that COFA communities have permanent restoration for Medicaid eligibility in the next COVID-19 legislation.

Please do not hesitate to contact Ben D’Avanzo (bdavanzo@apiahf.org), Senior Policy Analyst, and me (jchoi@apiahf.org) as we stand ready to work with you. Amidst this difficult time, thank you for your leadership.

Sincerely Yours,

A handwritten signature in blue ink, appearing to read 'JK Choi', with a stylized flourish at the end.

Juliet K Choi
Executive Vice President