

UPDATE | April 24, 2015

Dr. Lisa Hofler: “My Patients Need and Deserve Health Care Coverage”

Lisa Hofler, MD, MPH, is a current [Leadership Training Academy Fellow](#) practicing in the southeastern U.S.



As an obstetrician-gynecologist, I am proud to support the **Health Equity and Access under the Law (HEAL) for Immigrant Women and Families Act of 2015**, legislation that would restore health care coverage for many of my patients. For nearly two decades, politicians have enacted restrictive policies that prevent immigrants from accessing affordable health coverage. The HEAL for Immigrant Women and Families Act, reintroduced in Congress by Rep. Lujan Grisham this week, would among other things restore access to health care programs like Medicaid and the Children’s Health Insurance Program for immigrants who are authorized to live and work in the U.S.

The current legal and policy barriers to affordable health coverage

disproportionately harm immigrant women. Working in a large safety-net hospital in the Southeast, I regularly see immigrant patients who are pregnant and have not received adequate prenatal care. Certainly there are a number of possible individual reasons for not seeking this care, from language barriers to logistical barriers in finding time and a means to travel to a health clinic. But most definitely, lack of health insurance is a significant barrier preventing many women—pregnant or not—from seeking the health care they need.

For example, there are pregnant women whose first visit to a health care provider is a month before their due date—their concern for the health of their pregnancy outweighing the worry about the prohibitive cost of care. In some cases, they have gestational diabetes, a common condition that is easily diagnosed and treated during the course of routine prenatal care. But because they miss the screening for this condition, they also miss most of the benefits of treating their diabetes early on.

Other times, the first care my patients receive is when they arrive at the hospital in preterm labor. In some of these instances, without access to affordable contraception, their second pregnancy followed rapidly after their first. A short interval between pregnancies and lack of prenatal care can put women at risk for many complications, such as anemia and preterm labor, resulting in prolonged hospitalization; and for their babies, prematurity, low birthweight, and a resulting long NICU stay.

Access to affordable, timely, and comprehensive contraceptive, prenatal, and postnatal care is essential to reduce unintended pregnancies, pregnancy complications, and maternal mortality. And when mothers are healthy, the whole family is healthier.

Denying immigrant women and families health coverage doesn't eliminate their need for health care. It just creates worse health outcomes that often could have been prevented with access to affordable health care. The good news is that our lawmakers in Congress can do something about this: show their commitment to improving health care access for immigrant communities by cosponsoring the HEAL for Immigrant Women and Families Act.

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