



December 19, 2025

Submitted via www.regulations.gov

Kristi Noem
Secretary of Homeland Security
Washington, D.C. 20528

Re: DHS Docket No. USCIS-2025-0304, U.S. Citizenship and Immigration Services

Dear Secretary Noem,

The undersigned national organizations of the Medicaid in Schools Coalition and allies are writing to express our strong opposition to the Department of Homeland Security (DHS) Notice of Proposed Rulemaking (NPRM) changes regarding "public charge," [published in the Federal Register](#) on November 19, 2025 because of its dramatic, negative impact on children, families and communities.

The Medicaid in Schools Coalition represents over 65 organizations dedicated to protecting and advancing Medicaid-funded health services in schools that students need to learn to the best of their ability. The new rule would not only reduce children's use of critical health supports, but it would also harm school districts' core operations and ability to provide essential student services.

One in four children in the U.S. – 19 million children – have at least one immigrant (non-U.S. born) parent. The majority of these children are U.S. citizens, either in mixed-immigration status households (with non-citizen parents) or with naturalized citizen parents. Only about three percent of children in the U.S. are themselves non-citizens.¹

These citizen children are entitled to certain benefits – like Medicaid and CHIP coverage – but they will be deterred from enrolling in and using these programs out of fear and

¹ Drishti Pillai, Akash Pillai, and Samantha Artiga. *Children of Immigrants: Key Facts on Health Coverage and Care*. KFF, 2025.
<https://www.kff.org/racial-equity-and-health-policy/children-of-immigrants-key-facts-on-health-coverage-and-care/>.

confusion around how it will impact their family's immigration status. This means children will not receive critically important health services to stay healthy, attend school and be ready to learn.

In addition to a significant body of research that documents the impact of the public charge "chilling effect" from previous proposals, the proposed rule itself recognizes this impact, and specifically, recognizes harms that could include:

- "Worse health outcomes, such as increased prevalence of obesity and malnutrition (especially among pregnant or breastfeeding women, infants, and children), reduced prescription adherence, and increased use of emergency rooms for primary care due to delayed treatment.
- Higher prevalence of communicable diseases, including among U.S. citizens who are not vaccinated.
- Increased rates of uncompensated care, where treatments or services are not paid for by insurers or patients.
- Increased poverty, housing instability, reduced productivity, and lower educational attainment."²

In addition to the impacts on students' health and educational outcomes, reductions in Medicaid enrollment will have a direct impact on school funding and resources. For over 30 years, the school-based Medicaid program has ensured school districts can pay for vital health services provided to students, including students with disabilities. When fewer students are enrolled in Medicaid, it decreases the amount of funding schools receive to pay for integral health services and staff.

This rule would especially devastate rural schools and communities where a higher share of children and families are covered by Medicaid. Medicaid-funded school health services play an especially significant role for children in rural areas where longer travel distances and workforce shortages create greater barriers to care.

Medicaid is an essential social safety net program that helps ensure all students – not just those enrolled in the program – can be successful after they graduate from high school. When even two or three students miss class for preventable illnesses, this can lead to catch-up challenges for the students, disrupt project-based learning and collaboration, and lead to less time for learning new content.

As members of the Medicaid in Schools Coalition, we urge you to reject this rule change and uphold the existing 2022 regulation. For the health of our students, and our futures, we must ensure that all students can access the public benefits they need to be healthy and thrive.

² Department of Homeland Security, *Public Charge Ground of Inadmissibility*, November 19, 2025, 90 Federal Register 52168 (2025 NPRM). <https://www.federalregister.gov/d/2025-20278/p-523>.

If you have questions about the letter or wish to meet to discuss this issue further, please feel free to contact the Medicaid in Schools Coalition co-chairs: Jessie Mandle (Jessie@healthyschoolscampaign.org), Sasha Pudelski (spudelski@aasa.org), and Kelly Vaillancourt Strobach (kvaillancourt@naspweb.org)

Sincerely,

AASA, The School Superintendents Association

AFT: Education, Healthcare, Public Services

All4Ed

Association of School Business Officials International (ASBO)

Council of Administrators of Special Education

Healthy Schools Campaign

National Association of Pediatric Nurse Practitioners

National Association of School Nurses

National Association of School Psychologists

National Education Association

National School Climate Center

The Arc of the United States