IMMIGRANT MED CARE CRITICIZED

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Body

Zhuo Hua Wu suffers from kidney stones, but all he has to relieve his pain is a mixture of tea remedies and a \$1.88 medication from Hong Kong.

Wu, 40, a kitchen worker at a Chinese restaurant, is a legal U.S. resident, and need not fear reaching out for mainstream medical *care*. But he doesn't, because he's ineligible for Medicaid and can't afford mainstream *care*.

In 1996, Congress changed the welfare laws and cut benefits to thousands of foreign-born U.S. residents like Wu.

"This [\$1.88 medicine] helps the pain a little bit, but what I really need is to have health insurance," he said. "I'm afraid that my condition is getting worse and worse."

When his pain becomes unbearable, Wu likely will end up in a hospital emergency room, where, according to a new study, more and more legal *immigrants* are ending up for their primary health *care*.

The study, released yesterday by the New York *Immigrant* Coalition, is titled "Welfare Reform and Health *Care*: The Wrong Prescription for *Immigrants*."

"Lawmakers are not paying attention to those who live here," said coalition executive director Margaret McHugh.
"This was a stupid law."

Joined at a Manhattan news conference by Rep. Jose Serrano (D-Bronx), City Controller Alan Hevesi and representatives of *immigrant* advocacy groups, McHugh called for the restoration of Medicaid to legal *immigrants*.

The Personal Responsibility and Work Opportunity Reconciliation Act, approved as a welfare reform in 1996, barred needy legal *immigrants* who have not been in this country for five years from receiving benefits such as food stamps and Medicaid.

The coalition's study, which conducted 14 focus groups in various <u>immigrant</u> communities in the city, concluded that <u>immigrants</u> get tuberculosis at double the rate of native-born citizens, and that infant mortality rates are higher in <u>immigrant</u> families.

In addition, it reveals, some 45% of permanent legal U.S. residents are uninsured. That figure is likely to increase by at least half by the year 2005, the report said.

Providing emergency health <u>care</u> for the uninsured - including legal <u>immigrants</u> unable to pay their hospital bills - is squeezing the resources of hospitals that serve low-income New Yorkers, officials said.

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