

2025 FEDERAL
POLICY SERIES
Health Care



2025 FEDERAL POLICY SERIES

INTRODUCTION

The 119th Congress and the new Administration have triggered dynamic and often forceful debates on the direction of national policy. From economic opportunity to immigration to health care, these debates are poised to trigger drastic reorganizations of American life in ways that are likely to influence Latino communities in particular. At a time when Latino issues are front and center, Hispanic Federation's Federal Policy Series provides an opportunity for decision-makers across the federal landscape to hear directly from the Latino community regarding their values and policy priorities. The 2025 Federal Policy Series will focus on nine issues important to Latinos across the United States, with standalone chapters, each addressing a specific challenge faced by the Latino community.

As the nation's premier Latino nonprofit membership organization, Hispanic Federation works directly with its network of 850 organizations across 43 states and territories, including Puerto Rico, the District of Columbia and the US Virgin Islands; the policy proposals outlined in this series are reflective of this depth of community experience.

Hispanic Federation's greatest strength lies in its deep roots in Latino communities and relationships with grassroots leaders, nonprofits, public officials, policymakers, media, small business owners, and private sector leaders. Our policy and advocacy work aims to advance Latino opportunity and equity by focusing on three pillars: Civil Rights, Justice, Equity and Empowerment. Our methodology in driving policy change is to work with community on the ground to identify inequities and develop solutions. Latinos are a dynamic and diverse population that is actively reshaping the course of this nation. Latinos/Latinas/Latines/Latinx can be Black, White, Indigenous, Asian, Arab and/or Mestizo, among other ethnicities. As such, the recommendations embedded within our summer policy series are wide-ranging, covering everything from civil rights to housing, and outline proposals grounded in research and experience to support communities from rural farm workers to urban businessowners and everyone in between.



2025 FEDERAL POLICY SERIES: Health Care

EXECUTIVE SUMMARY

“Once a dream, it is now my pledge to be a good doctor for all who live in this great country. My motto as your Surgeon General will be ‘good science and good sense.’ And so, I ask for your help and the grace of God as I strive to give something back to the Nation that has been so good to me.”

– **Antonia Novella, MD and former U.S. Surgeon General.**¹

Hispanic Federation (HF) believes that access to affordable, effective, and culturally competent health care should be a fundamental right, and that that right is imminently achievable in this country. We have taken a national leadership role in raising awareness of Latino health disparities, promoting strategies to improve Latino health, increasing Latinos’ access to affordable and quality health care, regardless of immigration status, and providing supportive grants to nonprofit organizations that address health disparities in communities of color. Our agenda builds upon these successes to highlight avenues by which the federal government may continue to support safe, healthy communities.

**ACCESS TO AFFORDABLE,
EFFECTIVE, AND
CULTURALLY COMPETENT
HEALTHCARE SHOULD BE
A FUNDAMENTAL RIGHT**

We at Hispanic Federation understand that public health campaigns are more effective when conducted with interlocutors who are well-enmeshed in targeted communities. That’s why we have striven to work with government health partners to boost vaccination rates with considerable success — in New York State for instance, bringing the Latino community to the second-highest vaccination rate for crucial jabs, subverting national trends.² Likewise, Hispanic Federation has actively promoted mental health awareness via innovative initiatives like *Por Nosotros*, a program designed to reduce stigma and address mental health issues among Latino community-based organizations and their frontline staff, which combines provider outreach with artistic enterprises.

Over the subsequent pages, we outline a vision of public health that holistically approaches the real threats to Hispanic health. These include investments in data and research to proactively identify potential challenges before they become epidemics, the co-equal consideration of mental and physical health, and targeted considerations for vulnerable populations like transgender individuals and those living with HIV/AIDS.

SITUATION REPORT

While recent years have brought improvement, health care remains a critical challenge for all Americans, and Latinos in particular. The Latino community has the highest uninsured rates of major demographic groups in the country with 16.8% of Latinos lacking any form of health insurance compared to 5.3% of non-Hispanic whites, and we face exorbitant gaps in private coverage, increasing dependence on public programs.³ Thus, the Latino community simultaneously needs the federal government to encourage the private sector to support Latinos to the same degree it does non-Hispanic whites, and for federal coverage to cover a greater share of Hispanic health care needs.

Fortunately, the Affordable Care Act has quickly become a cornerstone of the American health care system, bridging gaps between essential needs-based programs like Medicaid with employer-driven private insurance. It has proven effective on that particular point, with the uninsured rates falling across demographic groups.⁴ Moreover, the Latino community has benefited from increased access to care via the ACA, with fewer Latinos reporting that they lack a usual source of care, delaying prescriptions, or worrying about and having trouble paying medical bills.⁵ There remain some key challenges in the effective implementation of the Affordable Care Act from the perspective of the Latino community, however. Studies suggest there are uneven, inconsistent gains in health care affordability and access according to linguistic capacity.⁶ These challenges are dwarfed though by forthcoming reductions in subsidies for health care premiums and alterations to eligibility that risk undermining health care gains for millions of families.

**THE LATINO COMMUNITY
HAS THE HIGHEST
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GROUPS IN THE COUNTRY**

These coverage gaps exacerbate outcomes from rising rates of chronic conditions like obesity and diabetes. Regrettably, elevated rates of food scarcity combined with challenges accessing fresh produce put Latinos at a disadvantage in addressing the root causes of such conditions.⁷ Fortunately, real-world data demonstrates that when presented with culturally competent public health campaigns, Latino individuals are more likely than the average American to engage in preventative and chronic treatment, suggesting a clear path forward.⁸

ASKS AND OPPORTUNITIES

Public Health Initiatives

- Vaccination Programs:** Repeated real world trials and biological theory render it incontrovertible that vaccines work.⁹ Public vaccination campaigns ended polio,¹⁰ smallpox,¹¹ and are even contributing to a massive decline in cervical cancer rates.¹² Nonetheless, the Latino community suffers from markedly lower vaccination rates than our non-Hispanic white peers.¹³ To address these imbalances, Congress should expand preexisting vaccine education campaigns to include a greater array of linguistically competent and culturally relevant programming. Furthermore, while the Department of Health and Human Services has recently stepped back from its traditional support for vaccination campaigns, it is clear that safe and effective vaccination continues to enjoy bipartisan consensus.¹⁴ **Thus, we call upon Congress to redouble its commitment to vaccination as a central pillar of public health.**
- Rejoin the WHO:** On January 20, 2025, the United States began the process of withdrawing from the World Health Organization (WHO).¹⁵ While the WHO has occasionally missed the mark, it also has provided invaluable forewarning and collaborative opportunities in dealing with everything from Ebola to West Nile Virus.¹⁶ Thus, the United States risks losing access to life-saving networks that advance US global interests. **Consequently, Hispanic Federation exhorts the Administration to reverse this withdrawal to maximize American opportunities.**
- Mental health programming:** Mental health looms increasingly large over American discourse, with majorities maintaining that there exists an epidemic of mental health challenges.¹⁷ However, the Latino community in general is being left behind in this mental health awakening, with Latinos being 60% less likely to seek treatment for mental health conditions than non-Hispanic whites.¹⁸ **Hispanic Federation calls for mental health policies attuned to Latinos, the LGBTQ+ community, and new arrivals in particular, as well as essential health-facing social media reforms.**
- We urge the federal government to work with partners to develop programs supporting immigrant mental health, including that of mixed-status families, by expanding treatment options through uncovered resident funds.
- Education scholarship indicates that well-funded afterschool programs and extracurricular options reduce isolation and anger.¹⁹ Hispanic Federation endorses redoubling funding for such initiatives to support the healthy development of well-rounded youth and communities.
- Approximately 37% of Latino gun deaths are suicides.²⁰ This tragic reality underscores the need for urgent mental health services. While measures like the suicide prevention hotline are excellent launch points, they require greater funding to reduce wait-times and ensure that callers may be directed to linguistically and culturally competent interlocutors.²¹
- HIV/AIDs:** According to the Centers for Disease Control (CDC), screening and treatment can yield transformative results for most Latinos living with HIV.²² It is vital that research, screening, and treatment gaps be addressed. Hispanic Federation has been serving the HIV-positive community for decades through programs combining awareness campaigns, developing

VACCINES WORK

THE LATINO COMMUNITY IN GENERAL IS BEING LEFT BEHIND IN THIS MENTAL HEALTH AWAKENING, WITH LATINOS BEING 60% LESS LIKELY TO SEEK TREATMENT FOR MENTAL HEALTH CONDITIONS THAN NON-HISPANIC WHITES

public policy, and connecting individuals living with HIV/AIDS to culturally-competent care.²³

As such, Hispanic Federation implores Congress take the following steps to build upon our nation's recent successes in combatting HIV/AIDS:

- Fully fund the plan to end HIV in America by 2030.
 - Promulgate a policy guidance affirming that nondiscriminatory access to health care for LGBTQ+ individuals and support services is an essential component of public health policy, including in the fight against HIV/AIDS.
 - Pass long-term, obligated budgets for the CDC, Human Resource Service Administration, and the National Institutes of Health (NIH) such that those departments can conduct long-term strategic health campaigns.
- NONDISCRIMINATORY ACCESS TO HEALTHCARE FOR LGBTQ+ INDIVIDUALS AND SUPPORT SERVICES IS AN ESSENTIAL COMPONENT OF PUBLIC HEALTH POLICY**
- **Nutrition:** Latinos accounted for 21.9% of adult and 35.8% of youth Supplemental Nutrition Assistance Program (SNAP) beneficiaries in 2023.²⁴ Food insecurity continues to be a core problem facing Latino households; **as such, Hispanic Federation demands that Congress implement systemic improvements to nutrition availability.**
 - Reforms like those proposed under the Closing the Meal Gap Act would scale SNAP benefits by calculating them according to the Low Cost Food Plan versus the current Thrifty Food Plan, and require regular revisions of SNAP benefits to reflect best practices nutritional guidelines.²⁵ Hispanic Federation urges Congress to enact such reforms as a way to ensure all Americans have stable access to quality food: boosting health, productivity, and agricultural economic output.
 - At present, Puerto Rico receives its nutrition benefits from the Nutrition Assistance Program — a block grant program that is wholly distinct from SNAP. Its austere terms delimit nutrition assistance in Puerto Rico to roughly 75% of the benefits on a per capita basis than other Americans receive, and suffer uniquely negative nutritional outcomes because of it. It is past time that Puerto Rico be restored to the full SNAP program from the NAP program.
 - The Chronic-Special Needs Program or C-SNP under Medicare advantage provides nutrition and other benefits to those with diagnosed chronic conditions.²⁶ This program serves a vital role in supporting Latinos, including those living with diabetes. Its eligibility should be expanded to those with diagnosed pre-diabetes and a mirror program implemented in Medicaid.
 - Furthermore, **Hispanic Federation implores the creation of new rules obligating health insurance providers to tender benefits toward social determinants of health, chiefly nutrition and activity through options like:**
 - Broadening eligible expenses under HSA and FSA plans to include nutritionist coverage, healthy food, and exercise for pre-diabetes and at-risk weight ranges, or ideally for general health.
 - The creation of new programs under Medicaid modeled after plans like Humana's Healthy Options program²⁷ and C-SNP that provide benefits for nutrition and other lifestyle alterations for those battling chronic conditions.²⁸
 - Pilot programs and cohort studies for insurers like Medicaid, Tricare, and private insurers assessing the viability of covering costs associated with healthy lifestyles, like dietary and activity interventions, to lower long-term health care costs.

- Social Determinants of Health:** Public health research increasingly validates that factors ranging from education to social relationships to local spaces are crucial in shaping health outcomes on not only community bases, but indeed on the individual level.²⁹ As such, public health scholars and officials have embraced the social determinants of health as an actionable framework for improving individual and societal health outcomes.³⁰ The Centers for Disease Control have identified five pillars of public health action orchestrated around the social determinants: education access, health care and quality, neighborhood and built environment, social and community context, and economic stability.³¹ In turn, the Office of Disease Prevention and Health Promotion's 'Healthy People 2030' campaign urged the adoption of policies to address inequality across these pillars to improve public health outcomes.³² **Hispanic Federation urges the Administration to continue and fully support these programs, and for Congress to pass statutory language requiring federally-funded public health programs to consider and address the social determinants of health.**
- Safe Firearm Storage:** Hispanic Federation urges the expansion of and funding for safe firearm storage programs to provide American households with the means to reduce risks of undue harm to themselves and their communities. Programs funding safe storage devices including gun safes, monitoring devices, and re-registration programs enjoy bipartisan popularity and are successful with new and long-term gunowners alike, suggesting a promising avenue to reduce preventable and tragic gun-related deaths. **Hispanic Federation exhorts Congress to provide funding for safe firearm storage initiatives across the country.**
- Firearms and Mental Health:** Approximately 37% of Latino gun deaths are suicides.³³ This tragic reality highlights the need for urgent mental health services with a focus on immediate violence prevention. Preexisting programs like the suicide prevention hotline require greater funding to reduce wait-times and ensure that callers may be directed to linguistically and culturally competent interlocutors.³⁴ Likewise, expanded coverage and funding for mental health will provide critical resources that would work toward self-harm prevention. **Hispanic Federation entreats the federal government to redouble its commitment to mental health and expand red flag laws and other psychiatric bars to firearm access to mitigate the risks of self-harm that stem from the intersections of poor mental health and firearm access.**
- Ghost Guns:** The Bureau of Alcohol, Tobacco, Firearms, and Explosives' (ATF) expansion of means-based policing including the tracking of crime guns and targeting the proliferation of ghost guns has yielded success at hindering the most severe offenders.³⁵ While the vast majority of American gunowners are law-abiding hobbyists or concerned citizens who purchase their firearms legally and follow requisite registration steps the growing proliferation of ghost guns by nefarious actors risks precipitously setting back public safety efforts. By focusing on those who explicitly circumvent such regulations, federal law enforcement has been able to target those disinclined to follow other federal statutes, including against violent acts; these efforts should be renewed. **Hispanic Federation demands that lifesaving, crime-stopping work monitoring ghost and crime guns be maintained.**
- Community Safety Reform:** The raft of firearm-facilitated violence that has emerged in the United States risks infringing upon vulnerable communities' civil rights to safe and healthy environments. Community policing has proven effective at forging partnerships between local communities and law enforcement officers (LEOs), thereby proactively preventing crime, establishing trust between vulnerable and at-risk communities and law enforcement and reducing the costs of law enforcement.³⁶ While the majority of Latinos feel confident in their local LEO's, their confidence in and support for local law enforcement remains below non-Hispanic white peers, suggesting the clear need for further trust-building reforms.³⁷ Funding pilot and expansion programs for community-based policing would facilitate these goals. Likewise, the implementation of community violence intervention (CVI) programs have contributed to a multiyear decline in violent crime rates; the most successful have reduced

violent crime by 30%, while further increasing community trust in law enforcement.³⁸ **Hispanic Federation urges Congress to reinvest in programs like community policing and community violence intervention that are proven to increase public safety for all Americans.**

- **Gun Shows and Background Checks:** It remains a tragic truth that one of the greatest factors facilitating categories of violence against the Latino community, including domestic violence, is the ambient availability of firearms.³⁹ For years, unscrupulous actors have exploited lax regulations surrounding the purchase of firearms to circumvent longstanding background checks and other regulatory interventions that hundreds of millions have used responsibly for decades.⁴⁰ **Hispanic Federation exhorts the federal government to enact legislation closing loopholes around firearm purchase background checks and registrations, including the gun show loophole, to augment public safety.**

Health Care Access and Affordability

- **Prescription Drug Access:** As prices for prescription drugs continue to rise, the Latino community is harder hit than many, with Hispanic adults at a higher likelihood than non-Hispanic whites of skipping medication due to cost.⁴¹ These developments come as the U.S. already spends more on prescription drugs than any other developed nation, with prices 2-4 times higher than in peer nations like Australia, Canada, and France, totaling almost 10% of all health care spending.⁴²

**ADMINISTRATIONS
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- Government Accountability Office (GAO) research suggests that market-based strategies, including supporting competition but also negotiation, are a promising avenue for reducing prescription drug prices. In turn, administrations have authorized Medicare to negotiate drug prices, with remarkable success.⁴³ **Hispanic Federation encourages the federal government to retain and expand market-based drug-price negotiation programs.**
- **340B Drug Pricing:** Since its inception in 1992, the 340B drug pricing program has emerged as a vital pillar of the country's medical safety net. Through the provision of subsidies to outpatient medical facilities, the 340B program has facilitated expanded access to health care among vulnerable and affluent populations alike.⁴⁴ Nonetheless, the program has, at best, inconsistently passed on those subsidies to patients as reductions in the costs of care. As such, the 340B program should be simultaneously expanded and clarified to ensure that it best serves the population it was intended to support. Congress should implement statutory program oversight and transparency reforms to require entities to disclose how they use 340B savings and report key metrics such as charity care levels, community benefit investments, and patient demographics. Likewise, reauthorization of the program must mandate that covered entities, particularly hospitals, implement income-based sliding scale policies for 340B drugs, prohibit aggressive debt collection for low-income individuals, and publicly post their assistance policies. **We urge Congress to pass these reforms to the 340B program to further improve fiscal and geographic access to quality health care.**
 - As an additional option, Congress should fund a study of nationwide implementation of restrictions akin to those of California's proposition 34 which requires certain nonprofit providers to spend 98% of revenue from federal prescription drug discount programs on direct patient care and expanded drug price negotiation programs.⁴⁵ A national version of these programs may reduce the transfer of health care price overhead to patients.
- **Medicaid:** Medicaid is a vital resource for the Latino community. Thus, we not only oppose any proposed reduction in Medicaid services, but also encourage the expansion of health programmatic eligibility within and beyond Medicaid both for initial and comprehensive

benefits coverage to approach the goal of universal coverage of all Latinos and all Americans. Unfortunately, recent legislation risks stripping hundreds of billions in funding for Medicaid over the next decade, jeopardizing access to health care for millions of Americans.⁴⁶ **As such, Hispanic Federation not only demands that Congress take steps to reverse these cuts to Medicaid spending, but also to explore further initiatives to expand and strengthen the program for decades to come.**

- The 1332 State innovation waivers have proven successful in encouraging innovation in coverage through the Affordable Care Act to supplement other forms of federal coverage, and as such should be continued and expanded.⁴⁷
 - Hispanic Federation demands that the federal government expand full access to the Medicaid program for residents of Puerto Rico, with full details in Hispanic Federation's forthcoming chapter dedicated to policy recommendations on resolving the challenges facing Puerto Rico.
 - Hispanic Federation also supports the provision of funding to support initiatives like the implementation of Husky Health in Connecticut, which has been effective at closing gaps in care to ensure coverage for both minors and expectant and current mothers.
 - Additionally, the creation of a national version of New York's Excluded Workers Fund could provide a way for Congress to provide essential health care coverage to workers who are uncovered by traditional programs,⁴⁸ thereby reducing necessary and likely unredeemed costs from emergency room and urgent care visits.
- A NATIONAL VERSION OF NEW YORK'S EXCLUDED WORKERS FUND COULD PROVIDE A WAY FOR CONGRESS TO PROVIDE ESSENTIAL HEALTHCARE COVERAGE TO WORKERS WHO ARE UNCOVERED BY TRADITIONAL PROGRAMS**
- **The Affordable Care Act:** Since its passage in 2010, the Affordable Care Act has quickly become a cornerstone of the American health care system, bridging gaps between essential needs-based programs like Medicaid with employer-driven private insurance. There remain key challenges in the effective implementation of the Affordable Care Act from the perspective of the Latino community, however. Studies suggest there are uneven, inconsistent gains in health care affordability and access according to linguistic capacity.⁴⁹ These data are of no surprise to Hispanic Federation and our partners, who have worked diligently for years to support enrollment in and service within the ACA for our communities.⁵⁰ **Pursuant to this information and our programmatic experiences, Hispanic Federation urges the following actions:**
 - Public subsidies for ACA marketplace plan premiums must be maintained and expanded to ensure that four million Americans do not lose their health care due to Congressional inaction.⁵¹
 - Repealing recently passed changes to ACA enrollment periods and eligibility that are likely to lead to more than one million people losing coverage under the Affordable Care Act.⁵²
 - Public health officials must systematically consider access to language in awareness campaigns, registration programs, and plan notices. These measures would generate consistent and substantial gains in health care access at relatively low costs as there remain greater portions of non-English speakers lacking potential coverage under the ACA.
 - The ACA has persistently seen uneven success in health care expansion when measured against national origin of enrollees. In turn, Hispanic Federation urges HHS to disaggregate data about ethnicity and country of origin of participants in the ACA to develop targeted

strategies to maximize health care gains from allocation of educational and advertising resources. Furthermore, HHS should clarify data privacy firewalls guaranteeing that any personally identifiable information will only be used for the purposes of the purposes of provisioning health care and in Health Insurance Portability and Accountability Act (HIPAA) and Institutional Review Board (IRB)-compliant research, to ensure that eligible families and individuals feel safe and secure in enrolling in these plans.

- With research persistently⁵³ affirming⁵⁴ that Medicaid Expansion has resulted in extensions of health care access,⁵⁵ Hispanic Federation exhorts the federal government to take steps to address the concerns of individual states who have yet to embrace the voluntary expansion of Medicaid funding.
- Public support for DREAMers has been consistent since the initial implementation of DACA.⁵⁶ As such, HF calls for the Congressional implementation of terms akin to those of the judicially paused CMS ruling extending full coverage under the ACA to DACA recipients.⁵⁷
- Finally, as recent federal experiments with varying levels of funding for the ACA at the national level have demonstrated that gains in health care from its provisions are highly sensitive to funding, we encourage ACA funding to be mapped out on an anticipated per-capita basis and from there regarded as a third-rail investment in public health, with commensurately reliable, robust funding.

Maternal and Reproductive Health

- **Maternal Health:** The Latina community is facing a crisis in maternal health and infant mortality brought on by critical gaps in care, coverage, and certain prenatal benefits. Hispanic Federation teams across multiple states have been active in developing programming and coordinating policy considerations in the fight to improve maternal health outcomes, from public information campaigns to midwife and doula expansion, as well as postpartum mental health.⁵⁸

THE LATINA COMMUNITY IS FACING A CRISIS IN MATERNAL HEALTH AND INFANT MORTALITY BROUGHT ON BY CRITICAL GAPS IN CARE, COVERAGE, AND CERTAIN PRENATAL BENEFITS

- **Hispanic Federation vigorously supports the passage and enactment of outstanding legislation to advance maternal health outcomes for our community, and prospective and current mothers across the country**, by:
 - Extending the supplemental nutrition program for women, infants and children (WIC) to fully cover postpartum and breastfeeding periods.
 - Increasing data collection, equity, and disaggregation to better develop public health strategies.
 - Supporting the expansion of the perinatal workforce through education assistance programs and streamlining registration processes to maximize potential points of care for prospective and current moms.
- Recent research by the Department of Health and Human Services and the CDC has indicated that one critical gap in care for pregnant Latinas lay in the uptake of folic acid supplements. Latina women have a greater likelihood of giving birth to children with neural tube defects than both non-Hispanic white and Black women.⁵⁹ HF urges the renewal and expansion of public health campaigns to support uptake of 400mg of folic acid per day.

- **Reproductive Health:** The Supreme Court's decision in *Dobbs v. Jackson Women's Health* transformed the reproductive health landscape in this country. Now growing numbers of states are restricting abortion care and moving to limit contraceptive access.⁶⁰ Now, close to 60% of Latinas are of typical childbearing age, and about 50% of Latinas live in states that heavily restrict reproductive rights.⁶¹ Insufficient access to reproductive care is both a civil liberties issue and a public health risk.
 - **Hispanic Federation calls for codifying the universal right to contraceptive care, including over the counter, and for contraceptives to be fully covered by both public and private health insurance.**⁶²
 - Hispanic Federation supports expanding and guaranteeing access to the full suite of reproductive care, including abortive procedures. Research in the Journal of the American Medical Association suggests that infant mortality rates have increased 7% since the Dobbs decision.⁶³

ABOUT 50% OF LATINAS LIVE IN STATES THAT HEAVILY RESTRICT REPRODUCTIVE RIGHTS. INSUFFICIENT ACCESS TO REPRODUCTIVE CARE IS BOTH A CIVIL LIBERTIES ISSUE AND A PUBLIC HEALTH RISK

DATA SUPPORTING ASKS

Public Health Initiatives

- Hispanic Federation has taken a national leadership role in Latino public health initiatives including:
 - Raising awareness of Latino health disparities, promoting strategies to improve Latino health, increasing Latinos' access to affordable and quality health care, regardless of immigration status.
 - Providing supportive grants to nonprofit organizations that address health disparities in communities of color.
 - Working with government health partners to boost vaccination rates with considerable success — in New York State for instance, bringing the Latino community to the second-highest vaccination rate for crucial immunizations.⁶⁴
 - Connecting vulnerable populations, including new Americans, with essential services like health plan enrollment to offset research-proven consequences of migrants⁶⁵ being at greater risk of mental health challenges than the populace at large through initiatives like Project Esperanza.⁶⁶
 - Fighting against HIV/AIDS by designing and launching national, state-wide, and locally-focused health initiatives, including providing individuals with treatment information, and health care navigation services to vulnerable migrants and asylum seekers.⁶⁷
 - Boosting nutrition in Latino communities including through providing information about nutrition science, nutrition programs, advocating for expansion of nutrition programs, and through direct aid.⁶⁸
- In 2022, Latinos were 4x more likely than non-Hispanic Whites to be diagnosed with HIV. That year, the Latino community saw almost 32,000 new HIV cases, with diagnoses increasing 17% in the four-year period.⁶⁹
 - While fewer than half of all Latino individuals in the US living with HIV have access to vital medication,⁷⁰ Latino testing rates are greater than the majority, and stage 3 HIV cases are almost 50% lower than non-Hispanics.
 - Furthermore, a majority of HIV-positive Latinos are retained in care, and 65% were virally suppressed.⁷¹
- Recent public health research has only validated the importance of the social determinants model to understanding health outcomes. For instance, growing literature illustrates that negative social determinant signifiers, like stress and housing insecurity, can produce negative health effects on the individual epigenetic level, potentially rivalling the consequences of behaviors like smoking.⁷²

Health Care Access and Affordability

- Hispanic Federation has advocated for the now approved 1332 waiver for New York State and is currently active in its implementation to ensure success in boosting not only coverage but also preventative care access.⁷³
- The Affordable Care Act has proven effective at boosting health care access among Latinos, with the uninsured rate among non-Hispanic Whites falling from ~14% in 2008 to 8.5% in 2017, among Blacks from ~22% in 2008 to 13.9% in 2017, and among Latinos from ~42% in 2008 to 25% in 2017.⁷⁴ Hispanic Federation has been active in supporting Latino enrollment in and service within the ACA.

- All told, some 24m of the nation's ~65m Latino individuals — 30% — were enrolled in Medicaid in 2020.⁷⁵ Across the program itself, Latinos accounted for 28% of all Medicaid and CHIP insured individuals in 2020, but of were 37% of beneficiaries falling under the category of "limited benefits."⁷⁶
- Moreover, the Latino community has benefited from increased access to care via the ACA, with fewer Latinos reporting that they lack a usual source of care, delaying prescriptions, or worrying about and having trouble paying medical bills.⁷⁷
- Research has suggested there exists significant variance in the ACA's augmentation of access to health care among Latinos based on nationality; for instance, Cuban-Americans benefited from the ACA far more than did Mexican-Americans, even when controlling for citizenship, language, education, region, and income.⁷⁸
- Scholarly work continues to support the fact that ACA gains have been most striking in those states which elected to expand eligibility for Medicaid under the voluntary terms of the ACA.⁷⁹
- Studies confirm that the efficacy of the ACA is sensitive to adjustments in funding, including for awareness and registration efforts. When components of funding were limited in 2019 for instance, some gains were partially reversed.⁸⁰

Maternal and Reproductive Health

- Latina expectant mothers are over twice as likely to receive late or no prenatal care than are non-Hispanic white expectant mothers.⁸¹
- Meanwhile, birth complication rates are already elevated and rising in our community,⁸² with the maternal mortality rate rising precipitously over the last few years.⁸³ Elevated infant mortality rates at birth only compound the developing crisis in maternal mortality.⁸⁴

**LATINA EXPECTANT MOTHERS
ARE OVER TWICE AS LIKELY TO
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CARE THAN ARE NON-HISPANIC
WHITE EXPECTANT MOTHERS**

CONCLUSION

A nation can only be as strong as its people, and a people can only be as strong as their health enables them to be. This basic, yet essential idea has spurred public health policy in the United States for centuries, from George Washington's mandatory inoculation of the Continental Army against smallpox in 1777 to Congress's creation of Medicare under the Great Society in 1965. Our economy relies on healthy workers, our children upon healthy classrooms, and our communities upon healthy neighbors. The last decades have seen inconsistent progress on Americans' access to health care, during which intermittent Congresses and Administrations have taken some steps that supported public health, and some that undermined it. As the United States continues to navigate the aftermath of the Covid-19 pandemic, it is essential that that we seize this moment to guarantee that all Americans have access to affordable, quality health care.

Hispanic Federation has long stood at the forefront of community-based health care programming; as such, we are intimately familiar with the obstacles and opportunities facing America's health care system. Numerous disparities exist in our nation's health care system, from the uneven distribution of medical debt stemming from unpredictable and often exorbitant costs of care to challenges accessing not only specialists but even primary care providers. These imbalances trigger unacceptable downstream effects, from decreased educational outcomes to lower workplace productivity. Our nation enjoys the world's greatest corpus of medical expertise and productive capacity, and through effective policy like reinforcing Medicare and Medicaid, empowering medical research, and investing in community-based care providers, we can ensure that America's medical assets are shared by all of its people.

Learn more about Hispanic Federation's policy priorities by scanning the QR code at right.



Endnotes

- 1 <https://www.presidency.ucsb.edu/documents/remarks-the-swearing-ceremony-for-antonia-novello-surgeon-general> (Accessed 5/2/25)
- 2 Hispanic Federation, "New York State Hispanic/Latinx Health Action Agenda: Our Health – Our Future," 2022. <https://www.hispanicfederation.org/nys-hispanic-health-action-agenda-2022.pdf> (Accessed 5/2/25)
- 3 <https://minorityhealth.hhs.gov/hispaniclantino-health> (Accessed 5/2/25)
- 4 Thomas C Buchmueller and Helen G. Levy, "The ACA's Impact on Racial and Ethnic Disparities in Health Insurance Coverage and Access to Care," *Health Affairs*, Vol. 39, no. 3, (2020), pp 395-402; 397-398.
- 5 ASPE, "Health Insurance Coverage and Access to Care Among Latinos: Recent Trends and Key Challenges," *Office of Health Policy*, HP-202-1-22, Oct. 8, 2021.
- 6 Thomas C. Buchmueller et al., "Effect of the Affordable Care Act on Racial and Ethnic Disparities in Health Insurance Coverage," *AJPH Policy*, Vol. 106, No. 8; August: 2016; Hector E. Alcala et al., "Impact of the Affordable Care Act on Health Care Access and Utilization Among Latinos," *JABFM*, Vol. 30, No. 1, 2017.
- 7 Matthew P. Rabbit et al., "Household Food Security in the United States in 2023," publication of the Economic Research Service, USDA, Sept. 2024. Rabbit et al., 19. <https://www.cardiometabolichealth.org/hispanic-heritage-month-persisting-food-deserts-in-latino-communities/> (Accessed 5/2/25) Nicole I. Larson, Mary T. Story, Melissa C. Nelson, "Disparities in Access to Healthy Foods in the U.S.," *American Journal of Preventative Medicine*, Issue 36, No. 1, 2009. 76.
- 8 <https://minorityhealth.hhs.gov/hiv-aids-and-hispanic-americans> (Accessed 5/2/25)
- 9 <https://www.hopkinsmedicine.org/health/treatment-tests-and-therapies/vaccines> (Accessed 5/2/25); <https://www.harvard.edu/in-focus/vaccines/> (Accessed 5/2/25)
- 10 <https://www.cdc.gov/global-polio-vaccination/why/index.html> (Accessed 5/2/25)
- 11 <https://www.cdc.gov/smallpox/about/index.html> (Accessed 5/2/25)
- 12 <https://www.washingtonpost.com/wellness/2024/12/05/cervical-cancer-hpv-vaccine-deaths-drop> (Accessed 5/2/25)
- 13 <https://minorityhealth.hhs.gov/immunizations-and-hispanic-americans> (Accessed 5/2/25)
- 14 <https://wyofile.com/barrasso-joins-gop-critics-democrats-in-pressing-rfk-jr-on-vaccines/> (Accessed 9/8/25.)
- 15 <https://www.whitehouse.gov/presidential-actions/2025/01/withdrawing-the-united-states-from-the-worldhealth-organization/> (Accessed 5/2/25)
- 16 <https://www.whitehouse.gov/presidential-actions/2025/01/withdrawing-the-united-states-from-the-worldhealth-organization/> (Accessed 5/2/25)
- 17 <https://www.kff.org/report-section/kff-cnn-mental-health-in-america-survey-findings/> (Accessed 5/2/25) Between lingering consequences of the covid-19 pandemic, economic distress, and increases in cyberbullying, it's little wonder that Americans are paying increased attention to their mental health – and are concerned with what they're seeing. <https://www.apa.org/news/press/releases/apa-mental-health-report.pdf> <https://pmc.ncbi.nlm.nih.gov/articles/PMC3705414/> (Accessed 5/2/25)
- 18 <https://minorityhealth.hhs.gov/mental-and-behavioral-health-hispanics> (Accessed 5/2/25)
- 19 https://aspe.hhs.gov/sites/default/files/private/pdf/265236/4_MCASP_LiteratureReview.pdf (Accessed 5/2/25)
- 20 <https://giffords.org/lawcenter/report/gun-violence-in-hispanic-and-latino-communities/> (Accessed 5/2/25)
- 21 <https://www.kff.org/mental-health/issue-brief/988-suicide-crisis-lifeline-two-years-after-launch/> (Accessed 5/2/25)
- 22 <https://www.hiv.gov/tasp> (Accessed 5/2/25); <https://www.hiv.gov/hiv-basics/hiv-prevention/reducing-mother-to-child-risk/preventing-mother-to-child-transmission-of-hiv> (Accessed 5/2/25)
- 23 Including through programs like Latinos Unidos Contra El Sida (LUCES) and Ser Saludable. See below.
- 24 <https://www.pewresearch.org/short-reads/2023/07/19/what-the-data-says-about-food-stamps-in-the-u-s/> (Accessed 5/2/25)
- 25 <https://www.congress.gov/bill/118th-congress/senate-bill/1336> (Accessed 5/2/25)
- 26 Out of approximately 675,000 individuals enrolled in the program, over 95% are enrolled for diagnoses of diabetes or cardiovascular conditions. <https://www.kff.org/medicare/issue-brief/medicare-advantage-in-2024-enrollment-update-and-key-trends/> (Accessed 5/2/25)
- 27 <https://www.humana.com/medicare/medicare-programs/healthy-options-allowance> (Accessed 5/2/25)
- 28 <https://www.medicare.gov/health-drug-plans/health-plans/your-coverage-options/SNP> (Accessed 5/2/25)
- 29 For instance, Dennis Raphael, "Social Determinants of Health: Present Status, Unanswered Questions, and Future Directions," *International Journal of Health Sciences*, Vol. 36, No. 4, 2006; Khushbu Chelak and Swarupa Chakole, "The Role of Social Determinants of Health in Promoting Health Equality: A Narrative Review," *Cureus*, Vol. 5, No. 15, 2023.
- 30 <https://my.clevelandclinic.org/health/articles/social-determinants-of-health> (Accessed 8/19/25.)
- 31 <https://www.cdc.gov/public-health-gateway/php/about/social-determinants-of-health.html> (Accessed 8/19/25.)
- 32 <https://odphp.health.gov/healthypeople/priority-areas/social-determinants-health> (Accessed 8/19/25.)
- 33 <https://giffords.org/lawcenter/report/gun-violence-in-hispanic-and-latino-communities/> (Accessed 5/2/2025)

- 34 <https://www.kff.org/mental-health/issue-brief/g88-suicide-crisis-lifeline-two-years-after-launch/> (Accessed 5/2/25)
- 35 <https://www.atf.gov/firearms/docs/report/nfcta-volume-ii-part-iii-crime-guns-recovered-and-traced-us/download> (Accessed 5/2/2025)
- 36 <https://online.wilson.edu/resources/what-is-community-policing/> (Accessed 8/18/25); <https://www.lesniakinstitute.org/5-reasons-why-community-policing-is-effective/> (Accessed 8/18/25)
- 37 <https://www.usatoday.com/story/news/nation/2023/09/18/most-americans-support-local-police-including-blacks-and-latinos/70893299007/> (Accessed 8/18/25.)
- 38 Johns Hopkins School for Public Health, <https://publichealth.jhu.edu/center-for-gun-violence-solutions/solutions/community-violence-intervention> (Accessed 7/23/25.)
- 39 For instance, Stansfield et al., 2021 who found negligible correlation between "economic disadvantage" and Hispanic Intimate-partner homicide, vs. Caetano, Ramisetty-Mikler, and Harris (2010) whose primary conclusions emphasized the link between poverty and IPV, as reported in Mancera, Dorgo, and Provencio-Vasquez, 2017, as well as Petrosky et al., 2017, in Stansfield et al., 2021. 2.
- 40 <https://everytownresearch.org/report/background-check-loopholes/> (Accessed 5/2/25)
- 41 <https://www.cdc.gov/nchs/products/databriefs/db470.htm> (Accessed 5/2/25)
- 42 <https://www.gao.gov/prescription-drug-spending> (Accessed 5/2/25)
- 43 <https://www.cms.gov/inflation-reduction-act-and-medicare/medicare-drug-price-negotiation> (Accessed 5/2/25)
- 44 Elizabeth Watts et al., "340B Participation and Safety Net Engagement among Federally Qualified Health Centers," *JAMA Health Forum*, Vol. 5, No. 10, 2024; Ryan P. Knox et al., "Outcomes of the 340B Drug Pricing Program," *JAMA Health Forum*, Vol. 4, No. 11, 2023.
- 45 <https://voterguide.sos.ca.gov/propositions/34/> (Accessed 5/2/25)
- 46 <https://www.kff.org/medicaid/health-provisions-in-the-2025-federal-budget-reconciliation-law/#2ca666ac-5d15-4454-8973-241566e22bb5> (Accessed 9/8/25.)
- 47 Hispanic Federation advocated for the now approved of 1332 waiver for NYS and is currently active in its implementation to ensure success in boosting not only coverage but also preventative care access. Hispanic Federation, "New York State Hispanic/Latinx Health Action Agenda: Our Health – Our Future," 2022. <https://www.hispanicfederation.org/nys-hispanic-health-action-agenda-2022.pdf> (Accessed 5/2/25)
- 48 Inter alia, for immigration status.
- 49 Thomas C. Buchmueller et al., "Effect of the Affordable Care Act on Racial and Ethnic Disparities in Health Insurance Coverage," *AJPH Policy*, Vol. 106, No. 8, August: 2016. Hector E. Alcala et a., "Impact of the Affordable Care Act on Health Care Access and Utilization Among Latinos," *JABFM*, Vol. 30, No. 1, 2017.
- 50 <https://www.hispanicfederation.org/our-work/health/> (Accessed 8/19/25.)
- 51 <https://kffhealthnews.org/news/article/obamacare-affordable-care-act-enhanced-premium-subsidies-expiring-florida-texas/> (Accessed 8/14/25.)
- 52 https://www.cbo.gov/system/files/2025-06/Wyden-Pallone-Neal_Letter_6-4-25.pdf (Accessed 9/30/25.) <https://publichealth.jhu.edu/2025/the-changes-coming-to-the-aca-medicaid-and-medicare> (Accessed 9/30/25.)
- 53 Ashley Henderson, Wilma Robinson, and Kenneth Finegold, "The Affordable Care Act and Latinos," Publication of the Department of Health and Humans Services, Office of the Assistant Secretary for Planning and Evaluation, 2012.
- 54 Alexander N. Ortega, Hector P. Rodriguez, and Arturo Vargas Bustamante, "Policy Dilemmas in Latino Health Care and Implementation of the Affordable Care Act," *Annual Reviews in Public Health*, Vol. 36, 525-544: 2015.
- 55 Thomas C Buchmueller and Helen G. Levy, "The ACA's Impact on Racial and Ethnic Disparities in Health Insurance Coverage and Access to Care," *Health Affairs*, Vol. 39, no. 3, (2020).
- 56 <https://www.pewresearch.org/short-reads/2020/06/17/americans-broadly-support-legal-status-for-immigrants-brought-to-the-u-s-illegally-as-children/>
- 57 <https://www.cms.gov/newsroom/fact-sheets/hhs-final-rule-clarifying-eligibility-deferred-action-childhood-arrivals-daca-recipients-and-certain>
- 58 Hispanic Federation, "New York State Hispanic/Latinx Health Action Agenda: Our Health – Our Future," 2022. <https://www.hispanicfederation.org/nys-hispanic-health-action-agenda-2022.pdf> (Accessed 5/2/25); Hispanic Health Council, *Maternal Health: Challenges and Realities for People of Color*. October, 2024.
- 59 https://www.cdc.gov/folic-acid/php/toolkit_hispanic/hispanic-women-and-folic-acid.html (Accessed 5/2/25)
- 60 <https://www.washingtonpost.com/politics/2024/11/11/abortion-pill-contraception-trump-term/> (Accessed 5/2/25)
- 61 <https://latino.ucla.edu/research/abortion-bans-latinas/> (Accessed 5/2/25)
- 62 This action may be advanced by executive action a la a recent CMS initiative, but would be better supported through legislative action. <https://www.cms.gov/newsroom/fact-sheets/enhancing-coverage-preventive-services-under-affordable-care-act-proposed-rules> (Accessed 5/2/25)
- 63 <https://www.washingtonpost.com/health/2024/10/23/infant-mortality-rate-dobbs-decision-abortion-bans> (Accessed 5/2/25) Meanwhile, states like Texas that have restricted abortion access are facing a growing shortage of OB-GYNs, comporting with a concomitant decline in independent clinics as funding depletes. <https://www.newyorker.com/magazine/2024/12/02/the-texas-ob-gyn-exodus> (Accessed 5/2/25), <https://www.theguardian.com/us-news/2024/dec/11/abortion-clinics-closing> (Accessed 5/2/25)

- 64 Hispanic Federation, "New York State Hispanic/Latinx Health Action Agenda: Our Health – Our Future," 2022. <https://www.hispanicfederation.org/nys-hispanic-health-action-agenda-2022.pdf> (Accessed 5/2/25.)
- 65 Particularly adolescent migrants: <https://www.theguardian.com/society/2024/oct/02/migration-adolescence-psychosis-risk-study> (Accessed 5/2/25.)
- 66 <https://www.theguardian.com/society/2024/oct/02/migration-adolescence-psychosis-risk-study> (Accessed 5/2/25.)
- 67 Including: Latinos Unidos Contra El Sida (LUCES): Founded in 1996, LUCES is an HIV/AIDS education and advocacy coalition that has been at the forefront of securing needed resources and policies to combat the disease. LUCES has also given birth to groundbreaking prevention initiatives such as National Latino AIDS Awareness Day and Latino HIV Testing Month. Likewise, Ser Saludable, an initiative that focuses on maintaining healthy lifestyles in the Latino communities by addressing disparities, increasing physical activities, providing access to vaccines, managing chronic diseases to increase overall quality of life, and more through assisting families with enrollment in Medicaid, Child Health Plus, and the ACA, as well as state level offices.
- 68 Including the provision of over 100k meals in 2024.
- 69 <https://www.cdc.gov/hiv/data-research/facts-stats/race-ethnicity.html> (Accessed 5/2/25)
- 70 <https://www.hispanicfederation.org/our-work/health/stop-hiv-aids/> (Accessed 5/2/25)
- 71 <https://minorityhealth.hhs.gov/hiv-aids-and-hispanic-americans> (Accessed 5/2/25)
- 72 Amy Clair, Emma Baker, and Meena Kumari, "Are Housing Circumstances Associated with Faster Epigenetic Aging?" *Journal of Epidemiological Community Health*, Vol. 78, 2024; Aarti C. Bhat, Andrew Fenelon, and David M. Almeida, "Housing Insecurity Pathways to Physiological and Epigenetic Manifestations of Health among Aging Adults: A Conceptual Model," *Frontiers in Public Health*, 2025.
- 73 Hispanic Federation, "New York State Hispanic/Latinx Health Action Agenda: Our Health – Our Future," 2022. <https://www.hispanicfederation.org/nys-hispanic-health-action-agenda-2022.pdf> (Accessed 5/2/25).
- 74 Thomas C Buchmueller and Helen G. Levy, "The ACA's Impact on Racial and Ethnic Disparities in Health Insurance Coverage and Access to Care," *Health Affairs*, Vol. 39, no. 3, (2020), pp 395-402; 397-398.
- 75 <https://www.medicaid.gov/medicaid/data-and-systems/downloads/macbis/2020-race-etncity-data-brf.pdf> (Accessed 5/2/25)
- 76 <https://aspe.hhs.gov/sites/default/files/documents/819559944370d2e8a24dc5bc38da6c7b/aspe-coverage-access-latinos-ib.pdf> (Accessed 5/2/25)
- 77 Henderson et al, "Health Insurance Coverage and Access to Care Among Latinos: Recent Trends and Key Challenges," *Office of Health Policy*, HP-202-1-22, Oct. 8, 2021.
- 78 Alcala, 58-59.
- 79 For instance, Buchmueller, 2020, ASPE, 2021, and Ortega, 2015.
- 80 Henderson et al, 3.
- 81 <https://minorityhealth.hhs.gov/infant-mortality-and-hispanic-americans>; (Accessed 5/2/25).
- 82 <https://www.cnn.com/2023/10/13/pregnant-latinas-face-greater-maternal-health-concerns.html> (Accessed 5/2/25)
- 83 <https://www.cdc.gov/nchs/data/hestat/maternal-mortality/2020/maternal-mortality-rates-2020.htm> (Accessed 5/2/25)
- 84 <https://minorityhealth.hhs.gov/infant-mortality-and-hispanic-americans> (Accessed 5/2/25)



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