

September 6, 2019

Kenneth Cuccinelli
Acting Director
U.S. Citizenship and Immigration Services
U.S. Department of Homeland Security
20 Massachusetts Avenue, NW
Washington, DC 20529

Dear Acting Director Cuccinelli:

On behalf of the physician and medical student members of the American Medical Association (AMA), I am writing to strongly urge the U.S. Citizenship and Immigration Services (USCIS) to reverse its August 7, 2019 policy change that revoked its acceptance and adjudication of non-military deferred action requests at field offices. This change in policy needlessly endangers vulnerable children and families who are seeking medical deferments from deportation due to serious illnesses or life-saving medical treatments. While we welcome USCIS' announcement on September 2, 2019 that it will reopen non-military deferred action cases that were pending on August 7, 2019,¹ this preliminary corrective action falls far short of what is needed to protect the lives of those seeking asylum or to immigrate to the United States. As the largest professional association for physicians and the umbrella organization for state and national medical specialty societies, the AMA has been, and continues to be, deeply committed to ensuring the health and safety of all individuals regardless of immigration status.

USCIS has a long history of using deferred action, a form of prosecutorial discretion, to “provide limited relief to foreign nationals who do not qualify for other immigration benefits that are typically available to individuals in exigent circumstances.”² In recent years, this USCIS process has been used to account for the special circumstances of individuals suffering serious medical conditions. Medical deferred action in particular uses prosecutorial discretion to appropriately allow for USCIS to defer and deprioritize the deportation of an individual present in the United States while receiving medical treatment.³

The AMA believes that the discontinuation of medical deferred action will lead to the termination of needed care for vulnerable patients. This includes the termination of care and deportation of individuals receiving life-saving treatments, whose safety and continuity of care cannot be assured following abrupt deportation, within 33 days of receiving notice of the denial of their deferred action request. While USCIS has emphasized that persons impacted by the policy change may submit requests to U.S. Immigration and Customs Enforcement (ICE), we do not believe that this is a viable alternative. It is our understanding that ICE officials have indicated that ICE will not accept affirmative requests. Instead, ICE will adjudicate deferred action requests only from individuals who have already undergone deportation proceedings. Therefore, USCIS' policy change will force sick children and other vulnerable individuals to make the

¹ <https://www.uscis.gov/news/alerts/uscis-re-opens-previously-pending-deferral-requests>

² <https://www.dhs.gov/xlibrary/assets/cisomb-combined-dar.pdf>

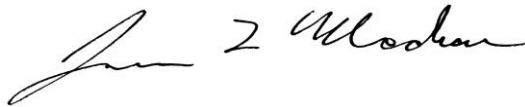
³ *Id.*

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impossible choice of either declining to seek life-saving medical care or risking deportation by voluntarily placing themselves in deportation proceedings and seeking the deferred action determination of an enforcement agency.

The AMA urges USCIS to rescind this policy and instead prioritize the continuity of care for children with serious medical conditions and other vulnerable individuals regardless of immigration status. If you have any questions, please contact Margaret Garikes, Vice President of Federal Affairs, at margaret.garikes@ama-assn.org or 202-789-7409.

Sincerely,

A handwritten signature in black ink, appearing to read "James L. Madara". The signature is written in a cursive style with a large initial "J" and a stylized "M".

James L. Madara, MD