

September 15, 2025

Social Security Administration
ATTN: Freedom of Information Officer
6401 Security Blvd.
G401 West High Rise
Baltimore, MD 21235
Also submitted via FOIA.gov

Centers for Medicare & Medicaid Services
ATTN: Freedom of Information Officer
Central Building, Room C5-11-06
7500 Security Boulevard
Baltimore, MD 21244
Also submitted via FOIA.gov

Re: Expedited FOIA Request

Dear SSA and CMS FOIA Officers:

Pursuant to the Freedom of Information Act (FOIA), 5 U.S.C. § 552, and implementing regulations of your agencies, the **Center for Medicare Advocacy (CMA)**, **Justice in Aging (JIA)**, the **National Immigration Law Center (NILC)**, and **Refugee Council USA (RCUSA)** (collectively “Requesters”) make the following request for records. We do not wish to inspect the records prior to production. This joint request is submitted to avoid duplicative requests and promote efficient processing while serving the public interest in transparency regarding the implementation of Medicare provisions of H.R. 1 affecting noncitizens.

Purpose of Request

Requesters seek information on the implementation of changes to Medicare eligibility and enrollment for noncitizens made by H.R. 1, enacted in July 2025.¹ Given the health and financial stakes involved, transparency regarding implementation is essential. Medicare enrollment and benefit access can be complex and confusing for older adults and people with disabilities. These barriers can be particularly acute for immigrants, who may have limited English proficiency and may be unfamiliar with complex federal benefit systems. Requesters are concerned that the absence of updated guidance and clear procedures for processing Medicare enrollments will harm the noncitizen communities they serve. Some lawfully present immigrants may face enrollment errors under the new law, potentially creating coverage gaps and unexpected financial liability when they seek medical care.² Eligible noncitizens may also be

¹ H.R. 1 (Public Law No. 119-21), also known as the “One Big Beautiful Bill Act.”

² See Justice in Aging, [Older Immigrants and Medicare](#), *Issue Brief*, at 3 (Sept. 2025).

deterred from enrolling in or accessing Medicare benefits due to confusion or fear about their status under the revised requirements.

Section 71201 of H.R.1, titled “Limiting Medicare Coverage of Certain Individuals,” amends the Medicare statute to restrict eligibility to U.S. Citizens, lawful permanent residents (green card holders), “Cuban and Haitian entrants” and “Compact of Free Association” (COFA) migrants. 42 U.S.C. § 1395mmm(a). Lawfully present immigrants who no longer meet Medicare’s eligibility criteria include people granted Temporary Protected Status, refugees and people granted asylum, trafficking and domestic violence survivors, and persons granted humanitarian parole.³ The law was immediately effective with regard to new Medicare enrollees. Individuals currently entitled to or enrolled in Medicare who do not meet the new eligibility criteria will be terminated from the program 18 months after the date of enactment of H.R. 1. 42 U.S.C § 1395mmm(b).

The Social Security Administration (SSA) is responsible for Medicare eligibility and enrollment functions, including verifying citizenship status requirements when applicable. *See, e.g.,* Social Security, Program Operations Manual System (POMS), HI 00801.061, GN 00303.800. Since the enactment of H.R. 1, entitlement to premium-free Medicare Part A Hospital Insurance based on “insured” status (work history) is available to a much narrower set of lawfully present immigrants than before.

Requesters seek records with the potential to shed light on SSA’s implementation of the above provisions of H.R. 1, including procedures for potentially eligible Medicare beneficiaries who, since July 4, 2025, are subject to the new citizenship requirements; and plans and procedures for identifying current beneficiaries who do not meet the new eligibility criteria and processing their termination from the program.

Requested Records

Requesters request that your agency produce the following records within twenty business days:

1. All formal or informal final instructions, training materials, guidance, manual provisions, recommendations, memoranda, and/or directives created, issued, or otherwise provided by your agency to its personnel regarding implementation of citizenship or “alien” status criteria codified at:
 - a. 42 U.S.C. § 1395mmm(a), applicable as of July 4, 2025 to individuals potentially eligible for Medicare.
 - b. 42 U.S.C. § 1395mmm(b), applicable to individuals currently enrolled or entitled to Medicare benefits.

2. All formal or informal final public-facing guidance, including web-based materials, telephone scripts, mailings, pamphlets, booklets, created, issued, or otherwise provided by your agency for an audience of Medicare beneficiaries or those who assist them, such as family members, State Health Insurance Assistance Program (SHIP) counselors, or other service providers, regarding the citizenship or “alien” status criteria codified at:
 - a. 42 U.S.C. § 1395mmm(a), applicable as of July 4, 2025 to individuals potentially eligible for Medicare.

³ *Id.*

- b. 42 U.S.C. § 1395mmm(b), applicable to individuals currently enrolled or entitled to Medicare benefits.
3. All formal or informal communications between your agency and other federal agencies regarding implementation of all of the eligibility restrictions in Section 71201 of H.R. 1, including but not limited to operational plans, implementation timelines, systems modifications or enhancements required to accommodate new eligibility verification functions, and any analysis or projections regarding anticipated impacts.
4. All formal or informal, published or unpublished, final impact assessments, reports, or analyses (including memoranda and other written products) prepared by or otherwise provided to your agency regarding the anticipated impact on Medicare beneficiary populations and anticipated impact on the government's administrative workload of Section 71201 of H.R. 1.
5. All formal or informal, published or unpublished, final memoranda, guidance, training materials, reports, assessments, instructions, or other materials addressing situations in which SSA erroneously enrolls an individual who is ineligible by reason of Section 71201 of H.R. 1 into the Medicare program on or after July 4, 2025, including any materials addressing situations in which the erroneously enrolled individual receives health care services covered and/or paid for by Medicare.
6. All requests for technical assistance from Congress, states, or municipalities to your agency regarding the exclusion of non-U.S. citizens from Medicare eligibility or enrollment; all communications between your agency and Congress, states, or municipalities regarding such requests; and all formal or informal final responses, including reports, summaries, and policies, prepared by your agency in response to such requests.
7. Records sufficient to identify the number of individuals currently enrolled or entitled to Medicare benefits who will be terminated, or who your agency estimates will be terminated, from the Medicare program 18 months from the date of H.R. 1's enactment.
8. All records projecting or estimating the number of individuals who are being excluded from enrollment into Medicare since July 4, 2025 due to the enactment of H.R. 1.

For parts 1-8 of this request, please provide all responsive materials from January 20, 2025 through the date the search is conducted.

In connection with their request for records, Requesters provide the following guidance regarding the scope of records sought and the search and processing of records.

- "Records" means all records as defined in 5 U.S.C. § 552(f)(2). Please search for all records regardless of format, including all paper records and all electronic records, audiotapes, videotapes, photographs, and graphical materials. This request includes, without limitation, all correspondence, memoranda of understanding, letters, emails, text

messages, calendar entries, facsimiles, voice mail messages, and transcripts, notes, minutes, or audio or video recordings of any meetings, telephone conversations, or discussions.

- Please search all locations and systems likely to contain responsive records, regardless of format, medium, or physical characteristics.
- Our request for records includes any attachments to those records or other materials enclosed with those records when they were previously transmitted. To the extent that an email is responsive to our request, our request includes all prior messages sent or received in that email chain, as well as any attachments to the email.
- Should any documents or portions of documents be withheld, please provide a *Vaughn* index of those documents, stating with specificity the description of the document to be withheld and the legal and factual grounds for the withholding. *Vaughn v. Rosen*, 484 F.2d 820 (D.C. Cir. 1973). The index must describe each document claimed as exempt with sufficient specificity “to permit a reasoned judgment as to whether the material is actually exempt under FOIA,” *Founding Church of Scientology v. Bell*, 603 F.2d 945, 949 (D.C. Cir. 1979), and “for each withholding it must discuss the consequences of disclosing the sought-after information.” *King v. U.S. Dep 't of Justice*, 830 F.2d 210, 223- 24 (D.C. Cir. 1987).
- In the event some portions of the requested records are properly exempt from disclosure, please disclose any reasonably segregable non-exempt portions of the requested records. If a request is denied in whole, please state specifically why it is not reasonable to segregate portions of the record for release.

For records available in electronic format, please email the documents to wkwok@medicareadvocacy.org. Please send all other requested records to:

Wey-Wey Kwok
Center for Medicare Advocacy
P.O. Box 350
Willimantic, CT 06226

All Requesters agree that responses may be sent to the above-listed contact at the Center for Medicare Advocacy, who is authorized to receive records on behalf of all requesting parties.

The Requesters

- **The Center for Medicare Advocacy (CMA)** is a national, non-profit organization whose mission is to advance access to comprehensive Medicare coverage and quality health care for older people and people with disabilities through legal analysis, education, and advocacy. It uses the information it gathers and analyzes to educate the public through its public website, e-mail Alerts (which are sent to approximately 28,000 individuals and organizations per week), issue briefs, webinars, and other platforms. Since its founding in 1986, CMA has worked extensively with individuals who are seeking access to health

benefits through Medicare. CMA also works with a range of organizations that provide assistance to older and disabled individuals who rely on Medicare.

- **Justice in Aging (JIA)** is a national legal advocacy organization with the mission of improving the lives of low-income older adults by securing access to affordable health care, housing, and economic security for older adults with limited resources. JIA conducts trainings and engages in advocacy regarding Medicare and Medicaid, provides technical assistance to attorneys and advocates across the country on how to address problems that arise under these programs, and advocates for strong consumer protections at both the state and federal level. JIA's email network has over 37,000 individuals.
- Founded in 1979, the **National Immigration Law Center (NILC)** is dedicated to defending and advancing the rights and opportunities of low-income immigrants and their families. NILC is one of the nation's leading substantive experts on immigrant eligibility and access to federal and state public benefits programs. For over 40 years, NILC has focused on issues that affect the well-being and economic security of low-income immigrants: health care and safety net programs; education and training; workers' rights; and other federal and state policies affecting immigrants. When necessary, NILC has successfully defended low-income immigrants and their families in litigation to protect their fundamental and constitutional rights. We believe that all people should have the opportunity to achieve their full human potential – regardless of their race, gender, immigration, or economic status.
- Since 2000, **Refugee Council USA (RCUSA)** has served as the only national coalition devoted to forcibly displaced people in the United States. RCUSA mobilizes expertise, ideas, and influence to protect the rights of forcibly displaced people and build more welcoming societies. RCUSA envisions a just world in which people forced to flee their homes have agency, access to safety, and opportunity to thrive. RCUSA consists of more than 40 member organizations, including the national resettlement agencies, direct service providers, and human rights organizations. RCUSA is a diverse coalition advocating for just and humane laws and policies, and the promotion of dialogue and communication among government, civil society, and those who need protection and welcome.

Each of the Requester organizations uses the information they gather to add to their expertise and educate the public about access to health care for immigrants through their websites, publications, briefs, and other materials and activities.

Request to Waive Fees

Requesters request a waiver of search, review, and duplication fees because disclosure of the requested records “is likely to contribute significantly to public understanding of the operations or activities of the government and is not primarily in the commercial interest of the requester.” 5 U.S.C. § 552(a)(4)(A)(iii). The subject of this request concerns the operations of the federal government, and the disclosures will likely contribute to a better understanding of relevant government procedures by the general public in a significant way. Moreover, the request is for non-commercial purposes. 20 C.F.R. § 402.85, 45 C.F.R. § 5.54.

The public has a significant interest in changes to health care law made by H.R. 1, including those that affect noncitizens.⁴ Records with the potential to shed light on this matter would contribute significantly to public understanding of plans for implementing H.R. 1's citizenship and immigration status criteria for new and current Medicare beneficiaries, procedures for identifying current beneficiaries who do not meet the new eligibility criteria and processing their termination from the program, training materials and guidance provided to SSA personnel regarding the new verification and termination processes, operational plans for the 18-month transition period for current beneficiaries, and any analyses or projections regarding the anticipated impact on beneficiary populations. This is specific information, directly connected to the missions and purposes of the Requesters that will help educate the public how H.R. 1 is affecting Medicare eligibility and enrollment for noncitizens. 20 C.F.R. § 402.85(b)(2)(iv).

As noted above, Requesters have a proven track record of compiling and disseminating information to the public about government operations and activities and will disseminate information obtained through this request to the public. As national non-profit organizations engaged in advocacy, education, and research covering both health care and immigration issues, Requesters have the knowledge and expertise to understand the information sought and to facilitate its public dissemination quickly and effectively. Thus, disclosure of the requested information will likely “contribute significantly to public understanding” of the federal government’s operations. 5 U.S.C. § 552(a)(4)(A)(iii). Moreover, Requesters’ “expertise in the subject area” and substantial “ability and intention to effectively convey information to the public” demonstrates that disclosure here will contribute to the understanding of a broad audience of individuals. 45 C.F.R. § 5.54(b)(2).

The request “is not primarily in the commercial interest of the requester.” 5 U.S.C. § 552(a)(4)(A)(iii). As a 501(c)(3) non-profits, Requesters do not have a commercial purpose. They have undertaken this work in the public interest, and the release of the information is not in Requesters’ commercial interest. Access to this information is crucial for the Requesters and the communities they serve to understand how the government is implementing provisions of H.R. 1 that have a direct impact on them and their access to health care.

Request for Expedited Processing

We request expedited processing of this FOIA request, which qualifies for such treatment pursuant to 20 C.F.R. § 402.65, 45 C.F.R. § 5.27 and 5 U.S.C. § 552(a)(6)(E). There is an “urgency to inform the public” concerning actual or alleged Federal Government activity as it relates to the implementation of Section 71201 of H.R. 1. There is also a “compelling need” for the requested information. 20 C.F.R. § 402.65(a). The requested information has a direct impact on coverage and payment for medically necessary health items and services. The Requesters have an immediate interest in knowing how the Medicare eligibility and enrollment process has changed and will be changing since H.R. 1 was enacted to best inform and assist the communities and individuals they serve.

⁴ For instance, CMA had over 1,700 registrants with participation from all 50 states for its recent webinar on H.R. 1, How New Health Care Cuts and Policies Impact You (Aug. 27, 2025). JIA had over 5,000 registrants on its recent webinar, Medicaid Cuts in H.R.1 – Updates for Aging Advocates (Aug. 13, 2025), and over 900 registrants on a separate webinar, Bird’s Eye View: Issues Impacting Older Immigrants in 2025 (Aug. 20, 2025).

Some of the H.R. 1 provisions about which we request information are already in effect as of July 4, 2025, yet there is still an absence of guidance and information. Medicare's annual open enrollment period, during which beneficiaries can make changes to their coverage options, runs from October 15 – December 7, 2025, followed by a general enrollment period from January 1 – March 31, 2026. It is critical that beneficiaries and their helpers understand how H.R. 1's changes are being implemented as these enrollment periods approach and occur. Without such knowledge, errors and confusion are likely to occur that may prevent people from obtaining necessary, even life-saving health care.

Furthermore, as noted above, Requesters are “primarily engaged in disseminating information to the public.” 45 C.F.R. § 5.27(b)(2); *see also* 20 C.F.R. § 402.65(a)(2). Dissemination of information about government activities, particularly with respect to the Medicare program and immigration, is a critical and substantial component of our missions.

In addition to prioritizing this request and expediting it, we ask that you strictly comply with the 20-day time limit established by FOIA. 5 U.S.C. § 552(a)(6)(A). Please be advised that once this 20-day period has expired, you are deemed to have constructively denied this request, and we will consider the internal appeals process to be constructively exhausted. *See, e.g., Citizens for Responsibility and Ethics in Washington v. Fed. Election Comm'n*, 711 F.3d 180, 190 (D.C. Cir. 2013).

As required by federal regulation, we hereby certify that the above information is true and correct to the best of our knowledge and belief. 20 C.F.R. § 402.65(b), 45 C.F.R. § 5.27(a). Please contact us at (860) 456-7790 or wkwok@medicareadvocacy.org if you have questions. Thank you for your assistance.

Sincerely,

A handwritten signature in black ink, appearing to read 'Wey-Wey Kwok', written in a cursive style.

Wey-Wey Kwok
Alice Bers
Center for Medicare Advocacy

On Behalf of the Requesters