November 29, 2021

Andria Strano, Acting Chief  
Office of Policy and Strategy  
Division of Humanitarian Services  
U.S. Department of Homeland Security  
5900 Capital Gateway Drive  
Camp Springs, MD 20746

Re: Deferred Action for Childhood Arrivals, DHS Docket No. USCIS- 2021-0006

Dear Acting Chief Strano:

The AAMC (Association of American Medical Colleges) appreciates the opportunity to comment in support of the Deferred Action for Childhood Arrivals (DACA) policy in response to the Sept. 28 Department of Homeland Security (DHS) proposed rule (86 FR 53736). As noted in our Jan. 21 statement, we applaud the Administration’s efforts to preserve and fortify DACA, and now codifying it through this formal rulemaking process under the Administrative Procedure Act. We continue to urge Congress to enact a permanent pathway to citizenship for individuals with DACA status, including approximately 30,000 health professionals.

The AAMC is a nonprofit association dedicated to transforming health through medical education, health care, medical research, and community collaborations. Its members are all 155 accredited U.S. and 17 accredited Canadian medical schools; approximately 400 teaching hospitals and health systems, including Department of Veterans Affairs medical centers; and more than 70 academic societies. Through these institutions and organizations, the AAMC leads and serves America’s medical schools and teaching hospitals and the millions of individuals employed across academic medicine, including more than 186,000 full-time faculty members, 94,000 medical students, 145,000 resident physicians, and 60,000 graduate students and postdoctoral researchers in the biomedical sciences.

Medical school applicants and matriculants with DACA status continue to increase year after year, with more than 200 currently enrolled in medical school or completing their residency training. DACA and the corresponding work authorizations for the 30,000 health care providers enhance our nation’s health care capacity at a time we can ill-afford to lose valuable personnel. As 33 health professional education organizations presciently informed the Supreme Court in an October 2019 amicus brief:

The risk of a pandemic … continues to grow, since infectious diseases can spread around the globe in a matter of days due to increased urbanization and international travel. These conditions pose a threat to America’s health security—its preparedness for and ability to withstand incidents with public-health consequences. To ensure health security, the country needs a robust health workforce. Rescinding DACA, however, would deprive the public of domestically educated, well-trained, and otherwise qualified health care professionals who have been provided education in reliance on their ability to continue to work in the United States as health care professionals.
The COVID-19 pandemic has also pulled back the curtain on longstanding social, economic, and health inequities in the United States that providers participating in DACA can help address. Health professionals with DACA status encompass a diverse, multiethnic population, who are often bilingual and more likely to practice in underserved communities hit hardest by the pandemic.

The AAMC supports codifying current DACA policy to increase certainty for the program and its participants. Additionally, we urge the Administration to encourage Congress to pass a permanent pathway to citizenship for individuals with DACA status, such as the bipartisan Dream Act of 2021 (S. 264) or the House-passed American Dream and Promise Act of 2021 (H.R. 6). These bills would ensure that undocumented young people are able to continue their employment, education, training, and research in the health and other professions.

Regarding proposed changes from current practice and possible alternatives, the AAMC recommends the following:

- DHS should begin accepting new DACA applications.
- Work authorization should continue to be granted automatically and coincide with granting DACA status.
- DACA recipients should be eligible for Federal Student Aid benefits.
- All benefits afforded DACA recipients should carry over after a change of status to another immigration category.

The AAMC is dedicated to promoting a health and biomedical workforce that leads to improved care and health equity for all. To meet the current health care needs of patients across the country, immediate regulatory and legislative action is necessary to retain DACA, the 30,000 health professionals participating in the program, and the countless other frontline workers, especially during the COVID-19 national emergency. Thank you again for this proposed rule to preserve and fortify DACA for the benefit of these individuals and the country as a whole.

Sincerely,

Karen Fisher, JD
AAMC Chief Public Policy Officer