



Data snapshot

Access to care for immigrants in Ohio

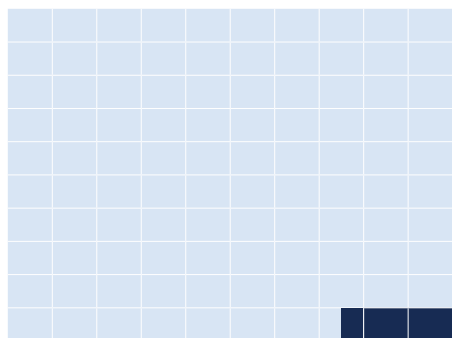
People who immigrated to the U.S. make up an important and growing share of Ohio's workforce, communities and economy. Despite these contributions, many immigrants remain uninsured because of barriers such as difficulties navigating the healthcare system, being ineligible for public health coverage, limited language access and cultural barriers.¹ These challenges limit access to preventive care, treatment and insurance coverage. Recent federal and state policy changes are likely to further reduce healthcare access for Ohioans who are immigrants.

Note

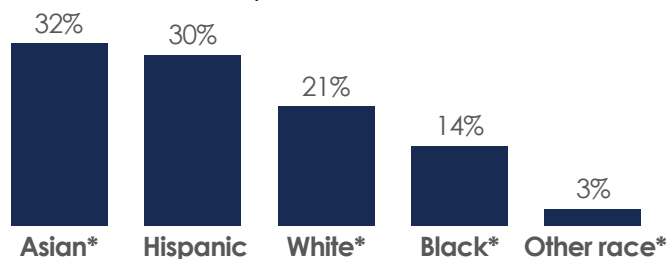
In this data snapshot, immigrant refers to anyone not born in the U.S. or its territories, but does not include individuals born abroad to a U.S. citizen. Noncitizens include both people who are documented and those who do not have documentation. Citizens includes both naturalized U.S. citizens and U.S. born citizens.

Demographics of immigrants in Ohio, 2023

In 2023, there were 289,665 noncitizens in Ohio, representing 2.5% of the population

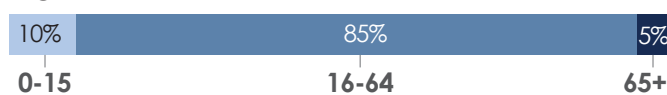


Race or ethnicity of noncitizens in Ohio



*Non-Hispanic

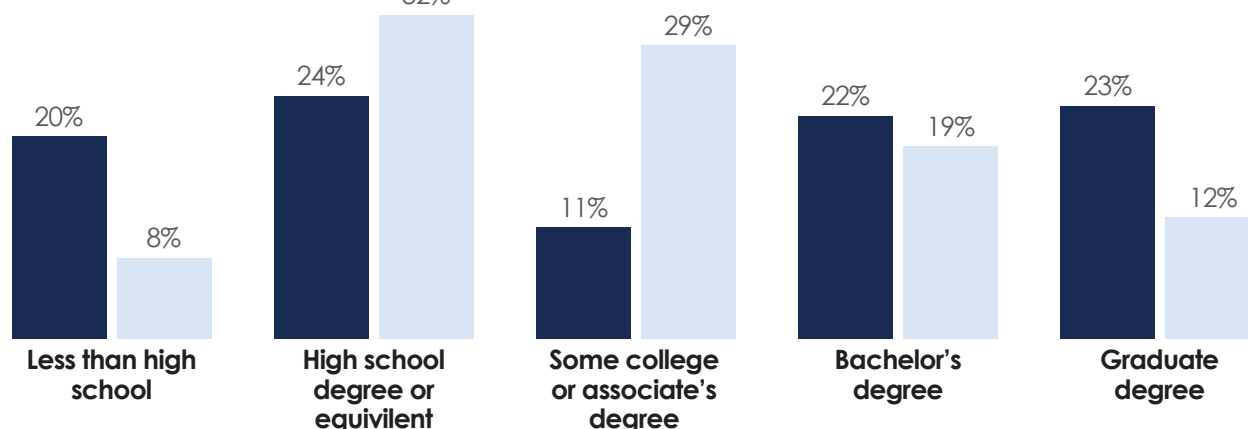
Age of noncitizens in Ohio



Source: American Community Survey, Public Use Microdata, 2023 1-year sample

Education attainment, age 25 and older, by citizenship status

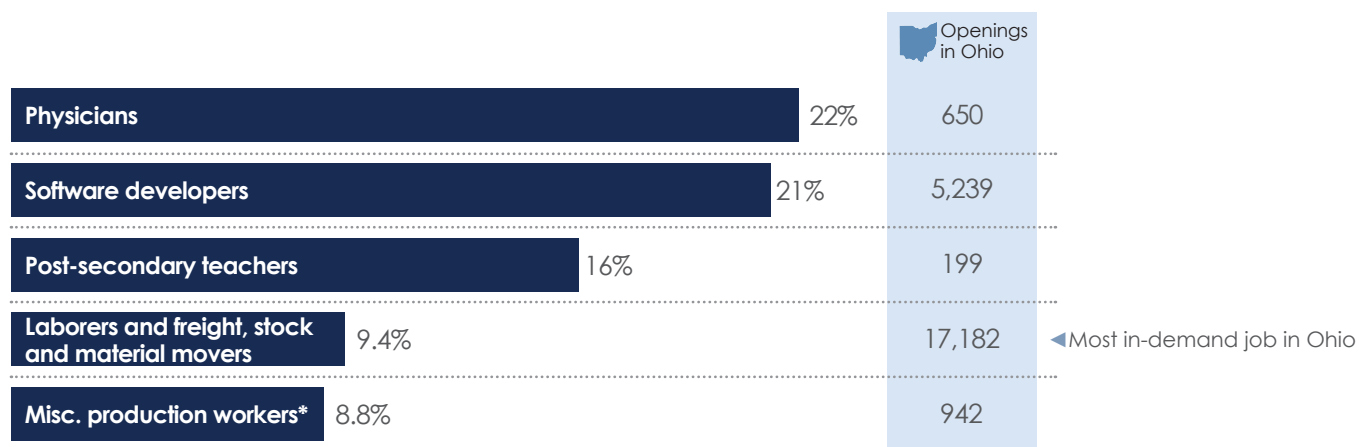
Ohioans who are citizens are more likely to have completed their education with a high school degree or some college, while those who are noncitizens are more likely to have a bachelor's or graduate degree



Source: American Community Survey, Public Use Microdata, 2023 1-year sample

Top occupations with highest share of workers who are immigrant in Ohio, 2023

More than **1 in 5** physicians and software developers and **1 in 6** post-secondary teachers (college professors) in Ohio are immigrants



*Includes equipment operator and tenders
Source: American immigration Council

Source: JobsOhio

Factors that hinder healthcare access for immigrants

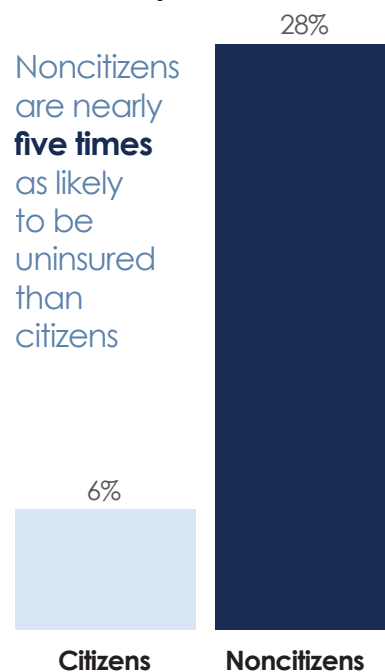
People who are noncitizens are much more likely to be uninsured than citizens. And children with at least one immigrant parent are less likely to receive preventive medical and dental care. Those children are also more likely to report one or more oral health problems.

Immigrants face significant healthcare access barriers, affordability challenges, language and cultural barriers, immigration-related fears and discrimination. These barriers are especially severe for individuals who are undocumented ², workers with low incomes and those with limited English proficiency, leading to delayed care, poorer health outcomes and financial strain.³

Barriers to healthcare services among immigrants	
Structural barriers	Cultural and personal barriers
<ul style="list-style-type: none"> Bureaucracy and complexity of healthcare system Lack of health insurance Healthcare cost Limited language interpreters Transportation challenges Information and communication challenges Long wait times Lack of integrated services and systems 	<ul style="list-style-type: none"> Cultural beliefs and trust Stigma and discrimination Awareness and language gaps Lack of social support Fear about immigration enforcement Lack of digital literacy

Sources: [Barriers and Facilitators of Access to Healthcare Among Immigrants with Disabilities \(NIH\)](#), [KFF](#), [Congress.gov](#), and [Commonwealth Fund](#)

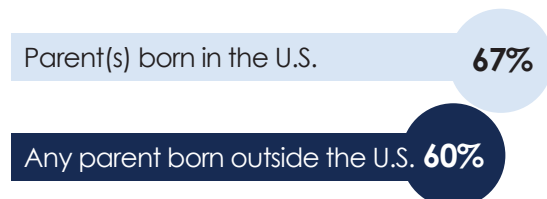
Percent uninsured, by citizenship, 2023



Source: American Community Survey, Public Use Microdata, 2023 1-year sample

Percent of children, age 0-17, who received both preventive medical and dental care in the past 12 months, 2022-2023

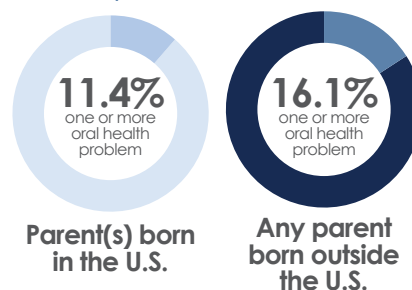
Children who have at least one immigrant parent are **less likely to have received preventive medical and dental care**



Source: Health Resources and Services Administration, National Survey of Children's Health

Percent of children, age 0-17, who have had oral health problems* in the past 12 months, 2022-2023

Children with immigrant parents are **over 40% more likely** to have had oral health problems



*Oral health problems include toothaches, bleeding gums or decayed teeth or cavities

Source: Health Resources and Services Administration, National Survey of Children's Health

Medicaid eligibility for noncitizens

According to [KFF](#), immigrants under 65 years old are less likely (19%) to be covered by Medicaid than U.S. born citizens (23%). In Ohio, Medicaid qualification for people who are immigrants varies greatly depending on citizenship status, immigration category and age:

- **Naturalized citizens** have the same eligibility as U.S. born citizens.
- **Documented immigrants** (e.g., green card holders, refugees, asylees) may qualify but face waiting periods. Recent federal policy changes will impact eligibility for this group in the coming years (see details on page 4).
- **Undocumented immigrants** are ineligible for federally funded health coverage, except for temporary emergency Medicaid coverage.

Immigrants who do not qualify for Medicaid based on their status can receive temporary emergency Medicaid. The U.S. spent 0.4% (\$3.8 billion) of its total Medicaid budget in federal fiscal year 2023 on emergency Medicaid.⁴ For most documented immigrants, federal law requires a five-year waiting period after obtaining qualified status before they can receive full Medicaid coverage.⁵

Why Medicaid eligibility rules matter for healthcare access

Because immigration status rules are complex, many immigrants who meet income requirements still cannot get full Medicaid coverage for years. This gap especially impacts working-age adults, leading to higher uninsured rates among immigrants compared to U.S.-born residents.⁶ Legally residing pregnant women and children have broader eligibility, but adults often remain uninsured, delaying preventive care and treatment.

Other sources for coverage and care

- **Employer-sponsored insurance:** Available if offered by the employer and affordable. Many immigrants remain uninsured because they work in jobs without health benefits.⁷
- **Marketplace plans (ACA):** Available to citizens and lawfully present immigrants (no waiting period for Marketplace enrollment). Undocumented immigrants are not eligible.
- **Safety-net providers:** Federally Qualified Health Centers, community health clinics and charity care programs offer services regardless of immigration status; however, some have income eligibility requirements.

Recent federal policy changes

Recent federal policy changes, including provisions in the federal reconciliation bill **HR 1**, will likely impact access to coverage for people who are immigrants. Among new federal policy are those related to:

- **Eligibility changes:** Some types of lawfully present immigrants, who may have been previously eligible for Medicaid or subsidized coverage through the federal health insurance marketplace, will no longer be eligible starting in 2027.
- **Emergency Medicaid.** Lower federal reimbursement for emergency Medicaid will increase Ohio's financial burden for emergency care to undocumented and some lawfully present immigrants, potentially reducing hospital capacity in immigrant communities.
- **Medicaid cost-sharing.** Mandatory cost-sharing (up to \$35 co-pays) for some non-preventive Medicaid services could deter people with lower incomes from seeking care.
- **Redetermination.** More frequent Medicaid eligibility redeterminations (every 6 months) could heighten the risk of coverage loss for immigrants due to paperwork barriers and language access issues.
- **Work requirements.** The introduction of federal work requirements for Medicaid could further reduce enrollment among immigrants, especially those facing employment instability or informal work arrangements.

Resources

- **Legal Aid:** Provides free or low-cost legal assistance on immigration, healthcare access, housing, employment and public benefits, helping immigrants navigate complex systems.
- **Ohio Asian American Health Coalition:** Works to ensure access to quality care for Asian American and Pacific Islander communities in Ohio.
- **Ohio Association of Community Health Centers (OACHC):** Directory of Federally Qualified Health Centers (FQHCs) across Ohio that provide care regardless of immigration status.
- **Ohio Commission on Minority Health:** Works, along with local organizations, to eliminate health disparities among minority populations in Ohio through community engagement, policy change, funding and culturally competent public health initiatives.
- **Ohio Department of Health Refugee Health Program:** Offers health screenings for refugees and certain humanitarian immigrants within 30 days after arrival.
- **Us Together:** An Ohio-based refugee and immigrant service organization that supports resettlement, integration and community building for those fleeing war, violence and extreme poverty.



About HPIO's healthcare access and affordability in Ohio series

This **series of HPIO publications** includes data and analysis about the current challenges facing working Ohioans and examines how recent policy changes, such as the federal **HR 1** (the federal reconciliation bill) and **HB 96** (the state budget bill) will impact access to care and affordability in Ohio.

Notes

1. Claire Heyison, Shelby Gonzales. States are providing affordable health coverage to people barred from certain health programs due to immigration status. Center on Budget and Policy Priorities, Feb. 1, 2024. <https://www.cbpp.org/research/immigration/states-are-providing-affordable-health-coverage-to-people-barred-from-certain>.
2. Martinez, O., Wu, E., Sandfort, T., Dodge, B., Carballo-Dieguez, A., Pinto, R., Rhodes, S. D., Moya, E., & Chavez-Baray, S. (2015). Evaluating the impact of immigration policies on health status among undocumented immigrants: a systematic review. *Journal of immigrant and minority health*, 17(3), 947–970. <https://doi.org/10.1007/s10903-013-9968-4>.
3. Hacker, K., Anies, M., Folb, B. L., & Zallman, L. (2015). Barriers to health care for undocumented immigrants: a literature review. *Risk management and healthcare policy*, 8, 175–183. <https://doi.org/10.2147/RMHP.S70173>.
4. Samantha Artiga, Dristhi Pillai, Jennifer Tolbert, Akash Pillai. 5 key facts about Immigrants and Medicaid. KFF, Feb. 19, 2025. <https://www.kff.org/racial-equity-and-health-policy/issue-brief/5-key-facts-about-immigrants-and-medicare/>.
5. "5 Key Facts About Immigrants and Medicaid" KFF, Feb. 19, 2025. <https://www.kff.org/racial-equity-and-health-policy/5-key-facts-about-immigrants-and-medicare/>.
6. Key facts on health coverage of immigrants. KFF, Jan. 12, 2025. <https://www.kff.org/racial-equity-and-health-policy/fact-sheet/key-facts-on-health-coverage-of-immigrants/>.
7. Akash Pillai, Dristhi Pillai, Samantha Artiga. State health coverage for immigrants and implications for health coverage and care. KFF, May 01, 2024. <https://www.kff.org/racial-equity-and-health-policy/issue-brief/state-health-coverage-for-immigrants-and-implications-for-health-coverage-and-care/>.