IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF COLUMBIA

DOMINGO ARREGUIN GOMEZ et al.,

Plaintiffs.

Civil Action No. 1:20-cv-01419

v.

DONALD J. TRUMP, President of the United States of America et al.,

Defendants.

DECLARATION OF ALEX NOWRASTEH

- I, **Alex Nowrasteh**, hereby submit this declaration pursuant to 28 U.S.C. § 1746 and declare as follows:
- 1. I am the Director of Immigration Studies at the Cato Institute where, among other things, we produce original research on how immigration affects the economy, culture, security, politics, and society broadly. Most of our immigration-related research focuses on the United States, but we also research the effects of immigration policies in other countries. The goal of immigration research at the Cato Institute is to promote a better understanding of the benefits and costs of immigration and to highlight how a lightly regulated and minimally restrictive immigration policy is consistent with the principles of individual liberty, free markets, limited government, and peace.
- 2. I hold a Master of Science degree in Economic History from the London School of Economics, and my academic research for the past five years has focused on how immigrants have affected the economic institutions in the countries where they settle, whether they affect terrorism, and how immigrants affect the housing market in major American cities. I have published numerous peer-reviewed publications in academic journals such as *The World Bank Economic Review*, the *Journal of Economic Behavior and Organization*, *Economic Affairs*, the *Fletcher*

Security Review, and the Journal of Bioeconomics. I have also published numerous policy reports at the Cato Institute that present new information and findings about how immigrants affect the United States. My body of research has been cited hundreds of times in peer-reviewed academic journals and thousands of times in the media. I also appear regularly on Fox News, MSNBC, Bloomberg, NPR, CSPAN, and numerous television and radio stations across the United States to discuss immigration and economic policy.

- 3. I am familiar with Presidential Proclamation 10014, entitled "Proclamation Suspending Entry of Immigrants Who Present Risk to the U.S. Labor Market During the Economic Recovery Following the COVID-19 Outbreak," signed by President Trump on April 22, 2020 (the "April Proclamation"). The April Proclamation suspended the entry of immigrants to the United States through all categories of family-, employment-, and diversity-based immigrant visas, barring certain exceptions, for 60 days, primarily on the ground that "[t]here is no way to protect already disadvantaged and unemployed Americans from the threat of competition for scarce jobs from new lawful permanent residents by directing those new residents to particular economic sectors with a demonstrated need not met by the existing labor supply."
- 4. I am also familiar with Presidential Proclamation 10052, entitled "Proclamation Suspending Entry of Aliens Who Present a Risk to the U.S. Labor Market Following the Coronavirus Outbreak," signed by President Trump on June 22, 2020, as amended by Presidential Proclamation 10054, signed by President Trump on June 29, 2020 (the "June Proclamation," and, together with the April Proclamation, the "Proclamations"). The June Proclamation extended the April Proclamation's entry suspension for immigrants through the end of this calendar year, December 31, 2020. It also suspended the entry of most non-immigrant workers on H-1B, H-2B, L-1, and certain J-1 visas through the end of this calendar year. The June Proclamation justified

these entry suspensions on the grounds that there are not "sufficient alternative means to protect unemployed Americans from the threat of competition for scarce jobs from new lawful permanent residents," and that "the present admission of workers within [the H-1B, H-2B, L-1, and J-1] nonimmigrant visa categories also poses a risk of displacing and disadvantaging United States workers during the current recovery."

5. The assumption underlying both Proclamations—that immigrants and foreign-born workers "displace" and "disadvantage" United States workers, especially during a time of economic contraction—is economically baseless and counterproductive.

6. The United States is experiencing what amounts to a national natural disaster, like an earthquake or a hurricane. While unemployment in the United States has spiked, the cause is clear: it's the pandemic, not the immigrants. The pandemic is preventing both foreign workers and Americans from working most jobs involving person-to-person contact. Once the pandemic subsides, people will return to restaurants, hotels, gyms, and movie theaters, and those employers will demand both U.S. and foreign workers again. Economic data bear this out: workers who say that they were on temporary layoff account for 96 percent of the increase in unemployment from January to the peak in April 2020. By June, the number of unemployed had already fallen by nearly 2.6 million. 2

¹ April: U.S. Bureau of Labor Statistics, *Unemployed persons by reason for unemployment* (April 2020),

https://web.archive.org/web/20200527071945/https://www.bls.gov/news.release/empsit.t11.htm; January: U.S. Bureau of Labor Statistics, *Unemployed persons by reason for unemployment* (January 2020),

https://web.archive.org/web/20200214193959/https://www.bls.gov/news.release/empsit.t11.htm.

² June: U.S. Bureau of Labor Statistics, *Unemployed persons by reason for unemployment* (June 2020),

https://web.archive.org/web/20200708011920/https://www.bls.gov/news.release/empsit.t11.htm.

- 7. The pandemic is thus not unlike other natural disasters that severely but temporarily affect the job market. After Hurricane Katrina in 2005, for example, unemployment in New Orleans spiked to 15.1 percent nearly as much as it has in the states hardest hit by COVID-19.³ When the storm passed, foreign workers poured into the state and rebuilt much of New Orleans.⁴ Five months later, New Orleans' unemployment rate had fallen below the pre-storm level.⁵
- 8. In severely restricting most legal immigration—particularly the immigration of highly skilled workers, the Proclamations are actually counterproductive to their stated goal of protecting United States workers and aiding the post-COVID economic recovery. These highly skilled workers would fill positions for which there are no United States workers immediately available, and participate in the economy as consumers of goods, services, and real estate.
- 9. For example, the **L-1 program** allows multinationals to bring key employees—either managers and executives, or employees with specialized knowledge of the sponsoring company's business operations or products—to the United States. This has been an essential visa program for businesses looking to invest or expand in the United States because intracompany transfers have firm-specific human capital, which is knowledge about how that specific firm operates internally, that is more valuable to the firm than similarly-skilled workers who don't know about how the individual firm functions internally. Much like skills learned in technical education, firm-specific human capital is very valuable, but it can only be learned on the job. New workers require much

³ U.S. Bureau of Labor Statistics, *Databases, Tables & Calculators by Subject - Local Area Unemployment Statistics*, https://www.bls.gov/data/#unemployment.

⁴ Richard Gonzales, *Latinos Get Little Thanks For Rebuilding New Orleans*, NPR (Dec. 10, 2011, 8:02 AM), https://www.npr.org/2011/12/10/143390961/latinos-get-little-credit-for-rebuilding-new-orleans.

⁵ U.S. Bureau of Labor Statistics, *Databases, Tables & Calculators by Subject - Local Area Unemployment Statistics*, https://www.bls.gov/data/#unemployment.

time to accrue firm-specific human capital before they can be productive employees. Suspending the L-1 visa program for the rest of the year—with the possibility of further extensions — dissuades investment in the United States because multinational companies will not be able to bring in trusted and experienced employees with firm-specific human capital to help establish, expand, and further develop operations here. This will slow job growth in this country going forward because it raises the cost for multinational firms to expand within the United States. According to the Congressional Research Service, the L-1 "is considered a visa category essential to retaining and expanding international businesses in the United States." And in a letter to President Trump in May 2020, the U.S. Chamber of Commerce and hundreds of businesses wrote that restricting the L-1 visa was a "significant concern" because it "plays a direct role in supporting job creation and job retention in the United States, as well as expanding U.S. advanced manufacturing, continuing U.S.-centered research and development, increasing exports from the U.S., and encouraging foreign direct investment into the U.S."

10. The **H-1B program** allows businesses to hire foreign workers in "specialty occupations" which generally require at least a college degree. H-1B workers are disproportionately employed in information technology and computer science jobs, which are essential during a time when many United States workers are transitioning to remote employment. Preliminary research has found

⁶ Ruth Wasem, *Temporary Professional, Managerial, and Skilled Foreign Workers: Policy and Trends*, Congressional Research Service Report No. R43735 (Jan. 13, 2016), https://fas.org/sgp/crs/homesec/R43735.pdf.

⁷ Letter from 324 employers and trade, industry, and higher education associations and groups across the American economy focused on the high-skilled workforce to President Donald J. Trump, Secretary of State Michael Pompeo, Secretary of Labor Eugene Scalia, and Acting Secretary of Homeland Security Chad Wolf (May 21, 2020), https://www.semiconductors.org/wp-content/uploads/2020/05/324-Signatory-Business-Letter-to-President-and-Secretaries-Nonimmigrant-Visa-Facts-5-21-2020.pdf.

that "the ability to work remotely has reduced the risk of job loss early in the [Covid-19] crisis by 32 to 53 percent."

11. Although the June Proclamation states that "more than 20 million United States workers lost their jobs in key industries where employers are requesting H-1B and L workers to fill positions," it is impossible to evaluate this assertion empirically because the Proclamation does not list the industries it considers to be "key."

12. More importantly, however, employers cannot use the H-1B and L visa programs to hire any workers they wish to from a given *industry*. They can only hire someone seeking to work in a *specific type of job or occupation*. The Department of Labor, for example, sets the wage rate for an H-1B visa sponsorship application based on the occupation of the sponsored worker, not the average wages for the entire industry. There is thus a glaring mismatch between the statistic cited in the June Proclamation and its entry suspension on H-1B and L workers: That U.S. workers may have lost jobs in unspecified *industries* does not show that any significant percentage of those workers were in the specific kinds of *jobs* for which employers are seeking to sponsor H-1B and L visas.

13. Indeed, if the administration had looked at key H-1B occupations, rather than key industries, the data would have revealed that from January to May 2020, total employment *increased* by about 185,000 in the top 20 H-1B occupations, which account for 85 percent of all

⁸ Adam Ozimek, *Safety In Remote Work*, Upwork.com, https://www.upwork.com/press/economics/safety-in-remote-work.

⁹ U.S. Dep't of Labor, Employee and Training Administration, *Prevailing Wage Determination Policy Guidance*, *Nonagricultural Immigration Programs*, https://www.foreignlaborcert.doleta.gov/pdf/NPWHC_Guidance_Revised_11_2009.pdf.

H-1B sponsorship requests.¹⁰ Unemployment in H-1B occupations generally has been falling since April, the most recent month for which we have been able to analyze the available data. There is, again, a mismatch: the June Proclamation is banning workers *who are still in demand*, in occupations that desperately demand workers in the United States, because workers in other occupations and industries have been temporarily displaced by a pandemic. Understood in context, the economic data refute the Proclamation's statement that H-1B and L-1 workers are contributing to the United States unemployment rate.

14. The **H-2B program** allows U.S. employers to hire seasonal nonagricultural workers. It requires sponsoring businesses to offer all jobs to unemployed United States workers before they can hire H-2B workers. It is therefore impossible for the limited number of H-2B workers allowed each year—a total of 66,000—to be responsible for the "17 million United States jobs" that the Proclamation states "were lost in industries in which employers are seeking to fill worker positions tied to H-2B nonimmigrant visas." For a job starting on June 24, H-2B recruitment of U.S. workers would have occurred between April 10 and June 3, a time when the unemployment rate was higher than it was in mid-June. ¹¹ Unemployed Americans already rejected 100 percent of the jobs for which H-2B workers are hired.

15. By suspending the H-2B program, the June Proclamation is preventing about 1,500 U.S. employers from filling desperately demanded positions that they could not fill with U.S workers,

¹⁰ Integrated Public Use Microdata Series, Current Population Survey, https://cps.ipums.org/cps/index.shtml, (last visited July 28, 2020).

¹¹ U.S. Dep't of Labor, Employee and Training Administration, *Foreign Labor Certification H-2B Temporary Non-Agricultural Program*, https://www.foreignlaborcert.doleta.gov/2015_H-2B_IFR.cfm (stating that a job order must be filed 75 days prior to the date of need); 20 C.F.R. § 655.40 (stating that referrals from a job order must be accepted until 21 days prior to the date of need).

forcing these employers to downsize or shift production techniques. The biggest crabmeat processor in Virginia, for example, is shuttering its plant because H-2B workers are not available. The goal during an economic recovery should be to help businesses get back to the pre-pandemic status quo as quickly as possible. But the longer that employers are unable to fill these temporary seasonal jobs—which they cannot fill with U.S. workers—the less demand will be created for other, better, permanent jobs in the economy, which will delay the recovery and hurt U.S. workers in other industries and sectors.

16. The **J-1 program** includes intern, trainee, teacher, camp counselor, au pair, and summer work/travel programs, and was created to "increase mutual understanding between the people of the United States and the people of other countries by means of educational and cultural exchange." The largest of the J-1 programs subject to the June Proclamation is the Summer Work/Travel Program, which allows foreign exchange students to come experience the country and work in temporary summer jobs in places like Ocean City, Maryland and Nantucket, Massachusetts. As with H-2B workers, U.S. businesses cannot hire and J-1 summer work/travel employees if doing so would "displace" a United States worker. Thus, while the Proclamation cites the high unemployment rates "for young Americans, who compete with certain J nonimmigrant visa applicants," the largest J-1 program—the Summer Work/Travel Program, which is capped at 109,000 participants and has averaged around 105,000 participants in recent years—is not causing young Americans to lose their jobs or contributing to the 29.9 percent unemployment rate for 16-

¹² Timothy Wheeler, *Fewer work visas, coronavirus deliver one-two punch to Bay's blue crab industry*, Bay Journal News Service (May 4, 2020, 2:30 PM), http://www.theprincegeorgejournal.com/news/fewer-work-visas-coronavirus-deliver-one-two-punch-to-bays-blue-crab-industry/.

¹³ Pub. L. No. 87-256, §101, Sept. 21, 1961, 75 Stat. 527 (1961), https://www.govinfo.gov/content/pkg/STATUTE-75/pdf/STATUTE-75-Pg527.pdf.

to 19-year-olds, or the 23.2 percent unemployment rate for 20- to 24-year-olds, cited by the Proclamation.

17. In addition, the Proclamation suspends the au pair and teacher programs at the exact time when U.S. workers are trying to figure out how they can work from home while simultaneously raising and educating their children safely. Moreover, research has shown that expanding childcare increases the productivity of U.S. workers, particularly women, which results in higher incomes. It is plainly and severely counterproductive to restrict entry of workers who could ease the childcare and educational burden that parents and schools are acutely experiencing as the beginning of the next school year looms.

18. Apart from the irrationalities that permeate the June Proclamation's non-immigrant visa restrictions, the fundamental premise justifying all the Proclamations' entry suspensions—that visa restrictions are necessary to protect U.S. jobs because foreign-born workers take jobs from Americans—is contradicted both by history and decades of economic research.

19. First, history shows us that the government's attempts to restrict legal immigration to combat recessions and high unemployment leads to disastrous results. President Herbert Hoover, for example, vastly reduced legal immigration in 1931 during the Great Depression, and orchestrated mass deportations of approximately a half million Mexican workers. But rigorous economic research establishes that these actions had, at best, no effect, and at worst, a negative effect on the U.S. wages and job opportunities.¹⁴

¹⁴ Jongkwan Lee, et al., *The Employment Effects on Mexican Repatriations: Evidence From The 1930's* (Nat'l Bureau of Econ. Research, Working Paper No. 23885, 2017), https://www.nber.org/papers/w23885.pdf; *see also* Francisco E. Balderrama & Raymond Rodríguez, *Decade of Betrayal: Mexican Repatriation in the 1930s* (UNM Press, 2006).

20. Similarly, in 1964, Congress terminated the "Bracero" agreements between the United States and Mexico and began excluding manual laborers from Mexico, with the goal of improving wages and employment for domestic farm workers by reducing the total size of the workforce in the United States—exactly the same justification used by both Proclamations. Peer reviewed economic research, however, found that ending lower-skilled migration for farm workers had little measurable effect on the labor market for Americans who worked in those occupations—except to slow wage growth. Farmers chose to use more expensive machines to harvest crops, and altered the crops they planted, instead of raising wages.

21. History also provides very strong empirical evidence of the inverse: Even an extraordinarily massive infusion of foreign workers—far beyond the flows the United States is experiencing now—does not increase unemployment *even during a recession*. In 1980, when the country was in recession with unemployment climbing, the so-called Mariel Boatlift resulted in 125,000 Cuban refugees arriving in Miami, increasing the city's labor force by 7 percent in six months. This would be like 23 million immigrants coming to the United States in six months today. Although both Miami and the rest of the country had increasing unemployment rates due to the recession, the Mariel boatlift had *no impact* on Miami's unemployment rate, which fared no differently than the unemployment rates in other cities. ¹⁶

22. Second, theory and empirical economic research have soundly debunked the "lump of labor fallacy," *i.e.*, the fundamental misconception that there is a fixed amount of work in a society,

¹⁵ Michael Clemens, et al., *Immigration Restrictions as Active Labor Market Policy: Evidence from the Mexican Bracero Exclusion*, 108(6) Am. Econ. Rev. 1468, 1468-1487 (2018), https://pubs.aeaweb.org/doi/pdfplus/10.1257/aer.20170765.

¹⁶ Michael Clemens & Jennifer Hunt, *The Labor Market Effects of Refugee Waves: Reconciling Conflicting Results*, 72 ILR Rev. 818, 818-857 (2019), https://journals.sagepub.com/doi/abs/10.1177/0019793918824597.

such that any job held by an immigrant or foreign-born worker could be held by a United States citizen. There is also little evidence of the so-called "displacement effect," where immigrants and foreign-born workers push native-born United States workers out of the labor market. The number of jobs available depends on myriad economic factors and is never stable. Economic research has never established that immigration and foreign-born workers have any significant negative impact on the jobs available to U.S. workers in the U.S. labor market—even in extreme cases like the Mariel Boatlift. To the extent the so-called displacement effect is ever observed in practice—which is seldom—it is very small and less than a one-for-one change.¹⁷

23. Furthermore, there is ample evidence that immigrants slightly raise the relative wages of native-born Americans, which would not occur if there was substantial displacement or competition between immigrants and native-born Americans. ¹⁸ This effect occurs because immigrants and native-born Americans have different skills, disparate levels of English fluency, and different levels of productivity. Thus, immigrants and native-born workers are complements in the labor market, not substitutes. However, immigrants are substitutes with other immigrants in the labor market, which is why there is significant evidence that immigrants do tend to lower the relative wages *of other immigrant workers*.

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¹⁷ Giovanni Peri & Vasil Yasenov, *The Labor Market Effects of a Refugee Wave: Applying the Synthetic Control Method to the Mariel Boatlift* (Nat'l Bureau of Econ. Research, Working Paper No. 21801, 2017), http://www.nber.org/papers/w21801; *see also* The Nat'l Acad. Of Scis., Eng'g., and Med., *The Economic and Fiscal Consequences of Immigration* 197-278 (The National Academies Press 2017), https://doi.org/10.17226/23550.

¹⁸ George Borjas, *Immigration Economics* 120 (2014); Gianmarco Ottaviano and Giovanni Peri, *Rethinking The Effect Of Immigration On Wages*, 10 J. of the Eur. Econ. Assoc. 152 tbl.6 (2012), https://onlinelibrary.wiley.com/doi/full/10.1111/j.1542-4774.2011.01052.x; Alex Nowrasteh, *Wage Effects Of Immigration Are Small*, CATO Inst. (Apr. 10, 2017, 12:15 PM), https://www.cato.org/blog/wage-effects-immigration-are-small.

24. The complementary effects of immigrant labor can be most directly observed in two areas. First, a huge percentage of H-1B workers work in IT, which has been essential in transitioning Americans to remote work. Without the contributions of these highly skilled foreign-born workers who specialize in IT and computer science, many Americans who can keep their jobs by working remotely would have been adding to the unemployment ranks. ¹⁹ Economic research has found that H-1B visas for Indians increased the global standard of living by approximately \$14.7 billion in 2010. About 96 percent of those economic gains accrued to the migrants themselves, but about 3 percent (\$431 million) accrued to Americans and 1 percent to Indians in India. Those benefits accrue annually. Much of the benefit was also provided by IT firms in India that grew, in part, due to returning IT workers from the United States as well as the general increase in computer science graduates spurred by U.S. demand for Indian technology workers. Those Indian IT firms, in turn, exported IT services to the United States and insourced workers. These positive economic effects would only grow in importance today with the increase in remote work, such that more H-1B workers may be necessary to help additional workers work from home.

25. Second, skilled American women spend more time working and less time on house and child care when there is a higher local population of lower-skilled immigrants.²⁰ Skilled American women specialize in their occupations and hire out home and child care services to immigrants, increasing incomes for both groups. Reducing the number of lower-skilled immigrant workers who

¹⁹ Gaurav Khanna & Nicolas Morales, *The IT Boom and Other Unintended Consequences of Chasing the American Dream* (Ctr. For Glob. Dev. Working Paper No. 460, Aug. 2017) https://www.cgdev.org/sites/default/files/it-boom-and-other-unintended-consequences-chasing-american-dream.pdf.

²⁰ Patricia Cortes & Jose Tessada, *Low-Skilled Immigration and the Labor Supply of Highly Skilled Woman*, 3 Am. Econ. Journal: Applied Econs. 88, 88-123 (July 2011), https://www.aeaweb.org/articles?id=10.1257/app.3.3.88.

can supply childcare services, such as those on the J-1 au pair program, will increase the opportunity cost for female employment and diminish the number of skilled American women who can remain in the workforce.

26. In addition, well established economic research demonstrates that in restricting the entry of highly skilled workers, such as "specialty occupation" workers through the H-1B visa program, the Proclamation will reduce innovation in the United States and cut American productivity, efficiency, and job growth. Many highly skilled foreign-born workers who come to the United States tend to specialize in engineering, computer science, or other "STEM" occupations, and economic research has established that "a 1 percentage point increase in the foreign STEM share of a city's total employment increased the wage growth of native college-educated labor by about 7-8 percentage points and the wage growth of non-college-educated natives by 3-4 percentage points."

27. Perhaps most importantly, all immigrants and foreign-born workers create jobs because they participate in the economy as consumers of goods and services. By reducing the number of consumers, and thus reducing demand, the Proclamations will reduce the number of employment opportunities, because employers won't have as many customers as they otherwise would. Recent research estimating this effect, based on data from 1980 to 2000, indicates that each immigrant creates 1.2 local jobs for local workers, with most of those jobs going to native workers—meaning that local workers *benefit* from the arrival of more immigrant consumers.²²

²¹ Giovanni Peri, Kevin Shih, & Chad Sparber, *STEM Workers, H-1B Visas, and Productivity in US Cities*, 33 J. of Labor Econs. S225, S225-S255 (July 2015), https://www.journals.uchicago.edu/doi/abs/10.1086/679061?mobileUi=0&journalCode=jole&.

²² Gihoon Hong & John McLaren, *Are Immigrants a Shot in the Arm for the Local Economy* (Nat'l Bureau of Econ. Research, Working Paper No. 21123, 2015), https://ideas.repec.org/p/nbr/nberwo/21123.html.

28. In a review of the academic literature on immigration, a panel of economists at the National Academies of Sciences, Engineering, and Medicine concluded that "immigration can lower native unemployment by reducing search costs for employers" and "entry of new workers through migration increases the likelihood of filling a vacant position quickly and thus reduces the net cost of posting new offers."²³ The panel wrote: "Though immigrants compete with natives for these additional jobs, the overall number of new positions employers choose to create is larger than the number of additional entrants to the labor market."

29. During the recovery, we want employers to reopen and begin hiring as quickly as possible. Preventing them from filling open positions—in many cases, positions for which they cannot find willing and qualified U.S. workers—delays their ability to expand production and create more jobs that would aid the post-COVID recovery. Immigration and the entry of foreign-born workers through the H, J, and L programs create jobs. By discouraging foreign investment and blocking both desperately demanded workers and the consumers who would fuel demand and the economic recovery, the Proclamations will undermine job growth and hurt the economy.

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The Nat'l Acad. Of Scis., Eng'g., and Med., *The Economic and Fiscal Consequences of Immigration* 165-196 (The National Academies Press 2017), https://www.nap.edu/read/23550/chapter/8?term=unemployment#194.

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Executed on July 30, 2020 at Herndon, Virginia

Alex Nowrasteh

IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF COLUMBIA

DOMINGO ARREGUIN GOMEZ, et al.,

Plaintiffs,

v.

Civil Action No. 1:20-cv-01419

DONALD J. TRUMP, President of the United States of America, et al.,

Defendants.

DECLARATION OF C. SCOTT CORLEY

- 1. I am the Executive Director of the Compete America Coalition, a coalition of companies and associations that focuses on the need for the United States to obtain and retain high-skilled domestic and international talent in order for American employers to continue to innovate and create jobs in the United States. Compete America members have collaborated for over 20 years to work with successive administrations and Congress to promote the global mobility of talent, protect the integrity of the employment-based high-skilled immigration system, and enhance the education and training of domestic talent. The facts set forth in this declaration are based on my personal knowledge and, if called to testify to their truth, I could and would competently do so.
- 2. In mid-May 2020, while President Trump was considering whether the April 22 Presidential Proclamation should be amended to include a nonimmigrant visa ban, Compete America prepared a letter and Appendix presenting data points and information on high-skilled nonimmigrants. The letter, for consideration by the Trump administration, was drafted to explain why foreign professionals coming to the United States on nonimmigrant visas are key to industries currently keeping our economy operating and keeping an increasing number (according to the Bureau of Labor Statistics) of Americans employed, and why these sectors and their employees, including nonimmigrant visa holders, will be absolutely critical to President

Trump's plan for economic recovery for the remainder of calendar year 2020. Compete America member associations then asked other employers and industry associations and other peer groups across the country to consider co-signing the letter.

- 3. The final <u>letter and Appendix with sourced facts</u> was co-signed by 324 employers and trade, industry, and higher education associations and groups across the US economy focused on the high-skilled workforce and described how highly skilled foreign professionals play an essential role in American prosperity, our success as a nation of innovators, and US worker employment and opportunity. We urged the President to avoid outcomes, even for temporary periods, that restrict employment-authorization terms, conditions, or processing of nonimmigrants.
- 4. The view of the 324 signatories was that presidential decisions restricting nonimmigrant visa usage "are likely to result in unintended consequences and may cause substantial economic uncertainty if we have to recalibrate our personnel based on country of birth." For example, many US firms across sectors base R&D in the US but conduct those efforts without regard to national borders, with American staff collaborating with testing or engineering centers around the world. Often final product testing or production rollout in the U.S. necessitates teams of high-skilled professionals, including individuals who must seek nonimmigrant visa issuance, gathering at various US facilities at specified times. Delays in product development, manufacturing, and other endeavors is inevitable and unavoidable when staffing is driven by nationality, sometimes at great cost.
- 5. On May 21, 2020, I sent the attached letter with Appendix to a number of White House staff and politically-appointed staff and officials explaining that artificial constraints to the high-skilled workforce are of great concern to the public.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on July 29, 2020.

By:

C. Scott Corley

May 21, 2020

The Honorable Donald J. Trump
President of the United States of America
The White House
Washington, DC 20500

The Honorable Secretary Michael Pompeo Department of State 2201 C Street, NW Washington, DC 20520

The Honorable Secretary Eugene Scalia Department of Labor 200 Constitution Avenue, NW Washington, DC 20210

The Honorable Acting Secretary Chad Wolf Department of Homeland Security Washington, DC 20528

Dear Mr. President and Honorable Secretaries,

The undersigned organizations, speaking for a variety of sectors and geographies across the American economy, and small, medium, and large employers, are writing about the importance of the high-skilled workforce to America's economic recovery. In particular, the undersigned represent employers that rely on a highly skilled, college-educated, science and engineering workforce, including nonimmigrant professionals, to innovate, produce, research, develop, and lead. At this critical juncture in our nation's history, the ability to continue to do so is in the national interest.

We urge you to avoid outcomes, even for temporary periods, that restrict employment-authorization terms, conditions, or processing of L-1, H-1B, F-1, or H-4 nonimmigrants. Constraints on our human capital are likely to result in unintended consequences and may cause substantial economic uncertainty if we have to recalibrate our personnel based on country of birth.

We join you in your continued commitment to protect the health and economic well-being of Americans, and hope our attached Appendix is helpful as you consider weighty judgments on how to navigate this important moment.

Respectfully submitted,

324 employers and trade, industry, and higher education associations and groups across the American economy focused on the high-skilled workforce (signatory list follows Appendix)

APPENDIX

Importance to the nation of the STEM workforce and avoiding artificial constraints to this workforce

IMPORTANCE OF THE COLLEGE-EDUCATED STEM WORKFORCE, INCLUDING NONIMMIGRANTS

STEM Jobs. It has been well-understood in the post-World War II era that the STEM workforce is of particular interest to all developed economies because of its central role in fostering innovation, economic competitiveness, and national security. The centrality of the STEM workforce across the American economy is evidenced by the fact that in the 21st century Americans with university STEM degrees are called upon to use their quantitative skills in finance, public administration, professional services, manufacturing, information, education, health care, transportation, and retail, in addition to high-tech, as the Census Bureau has explained. However, over the years, computer-related professional job openings have outstripped the availability of qualified Americans to fill those positions. For this reason, the Department of Homeland Security reports that 66% of all H-1B approvals are in computer-related occupations and, correspondingly, the Department of Labor reports that 60% of Permanent Labor Certifications approved to sponsor new green card holders are in the computer and mathematical occupations, with most such labor certifications filed on behalf of H-1B visa holders. Importantly, when Department of Labor wage data on H-1B workers is compiled, as the Cato Institute did for a May 2020 article, "the unequivocal takeaway from the data is that H-1B employers are, on average, paying a premium for many of their foreign workers." Today, the unemployment rate in computer occupations remains low, at about 2.8% through April 2020, according to a May 2020 analysis of government occupational level data.

Innovation. Foreign-born STEM professionals have had a positive impact on the American economy. As described in a July 2019 economic study on the impact of highly-skilled STEM immigration on the U.S. economy, the foreign-born share of STEM professionals in the United States increased from about 16% to 24% over the period 2000 to 2015 creating an estimated benefit of \$103 billion for American workers almost all "attributed to the generation of ideas associated with high-skilled STEM immigration which promotes the development of new technologies that increase the productivity and wages of U.S.-born workers." An economic report on global talent and U.S. immigration policy published in April 2020 highlights that when looking at the net global migration of inventors from 2000 to 2010 China and the United States are at opposite ends of the spectrum, where China receives virtually no immigrant inventors and instead possesses the largest number of natives moving to other countries to become inventors elsewhere. The United States dwarfs all other 26 advanced economies in the world in welcoming new inventors, with about ten times that of Germany, the next highest country. Indeed, economists from George Borjas in June 1986 (National Bureau of Economic Research) to those at the Census Bureau and George Mason University in February 2019 (IZA - Institute for Labor Economics) to William Kerr in April 2020 (Harvard Business School) have consistently found that for immigrants coming to America their propensity toward innovation, as well as entrepreneurship, is higher than for U.S.-born workers. We want to continue to harness that innovation and entrepreneurship for America and Americans, and we're sure the administration wants the same.

<u>Nonimmigrants</u>. Among the nonimmigrant classifications that play a role in providing access to this STEM workforce for American employers, three classifications have been most critical and have been tools in our toolbox for *decades*: the L-1, H-1B and F-1 nonimmigrant classifications.

Created by Congress in 1970, over the last 50 years the L-1 visa category has been available to facilitate international transfers of existing employees to the United States within related firms. A cornerstone of business operations for those that do business both in the United States and abroad has been the ability to transfer current staff that are managers, executives, and specialized knowledge personnel across national boundaries in order to harmonize operations, expand markets, service clients, and share knowledge.

- Established in the 1952 rewrite of the nation's immigration laws, for over 65 years the H-1 visa classification has existed to allow U.S. employers to hire professionals born outside our country. Since 1990, this category has been subject to numerical limits and a labor condition application, and the category has been designated as the H-1B visa.
- In <u>August 1947 the Department of Justice promulgated a regulation permitting "employment for practical training"</u> for international students, after completion of the student's regular course of study. For over *70* years, a program allowing such post-completion employment authorization for international students has continued, now through Department of Homeland Security regulations governing F-1 nonimmigrants.

The stability of America's workforce – including L-1, H-1B, and F-1 nonimmigrants – cannot be more important than at this very moment when the Trump administration and the entire nation look to our companies to reinforce the backbone of the national economy.

IMPORTANCE OF AVOIDING UNNECESSARY CHURN IN THE COLLEGE-EDUCATED STEM WORKFORCE, INCLUDING NONIMMIGRANTS

<u>Churn</u>. Economists define "churn" as hiring for replacement, which means that a prior worker, being replaced, left voluntarily or was terminated. Turnover may come about because employers grow and shrink, but more frequently because of churn. Separations in the employment relationship that occur based solely on changed agency policy choices governing nonimmigrant employment authorization create additional churn and result in inefficiency. Thus, at this critical juncture in our nation's economic life, creating government-mandated churn in our human capital creates significant risks because the ramifications of those decisions will quickly reach into our capacity and productivity.

<u>L-1</u>. Narrowing access to L-1 intracompany transfers is a significant concern as we respond to Covid-19 challenges, because appropriate use of the L-1 classification by employers plays a direct role in supporting job creation and job retention in the United States, as well as expanding U.S. advanced manufacturing, continuing U.S.-centered research and development, increasing exports from the U.S., and encouraging foreign direct investment into the U.S. Multinational companies, of the type that might qualify to use the L-1 category, employ about one-quarter of all U.S. private sector employees. The impact of business disruption to a group of firms that play such an outsized role in the economy is significant.

With regard to U.S.-based R&D, an economist at the Wharton School of the University of Pennsylvania assessed Department of Commerce data in a February 2020 study and found restrictive high-skilled immigration policies encouraged multinational companies to off-shore R&D efforts. As the Wharton economist explains, "From a nationalistic perspective, this is problematic; if skilled foreign-born workers are at a U.S. firm's foreign affiliate instead of in the U.S., the innovative spillovers that they generate will go to another country instead." The National Science Foundation's 2020 reports show that the U.S. performs one-quarter of global STEM R&D, the largest percentage for any single nation; that STEM R&D performed in the U.S. increased sharply in 2017, up 10% when compared to 2015 and 34% higher than 2010; that 73% of all development research in the U.S. is performed by private sector businesses; and that U.S. multinational firms are responsible for 80% of such private R&D in the U.S. Changing long-standing immigration policies risks many unintended consequences, including disruption of these positive trends.

<u>H-1B</u>. Temporarily or indefinitely eliminating or reducing the H-1B program or discouraging its use would not create or leave more jobs for U.S. natives *and* would risk reducing growth and productivity. The <u>University of Chicago did a survey in February 2017 through its Initiative on Global Markets</u> (IGM Forum), asking its panel of economists from Yale, MIT, Princeton, Berkeley, Harvard, and Stanford about the following premise: "If the U.S. significantly lowers the number of H-1B visas now, employment for American workers will rise materially over the next four years." None (0) of the economists agreed with the premise, 81% disagreed, 19% were

uncertain. A May 2017 economic study on firm dynamics and immigration found that completely eliminating the H-1B category would ultimately result in a 3.7% decrease in GDP. An August 2018 economic study on the relationship between H-1B visa petitions and the entry of new products and exit of outdated products (product reallocation) concluded that firm-level analysis shows H-1B visa petitions are associated with higher rates of product reallocation. Generating product reallocation is one measure to identify where smaller, incremental innovations are occurring. In a seminal economic evaluation of H-1B visas and productivity in 219 American cities, published in the Journal of Labor Economics in July 2015, economists concluded that their simulations showed an increase of H-1B visa holders in a city explained increased productivity. Specifically, the economists found that "foreign STEM growth explained between one-third and one-half of the average Total Factor Productivity growth during the period" 1990 to 2010. It seems the Trump administration should not initiate a realignment of the H-1B category to respond to a downturn in the economy, especially because history shows us that H-1B demand from employers is tightly connected to market forces.¹

OPT. As the number of U.S. postsecondary STEM degrees attained by F-1 nonimmigrants has steadily grown, the Optional Practical Training (OPT) program, to include the STEM OPT extension, has correspondingly become a significant pipeline for the U.S. STEM workforce. As explained by CRS in November 2019, from school year 88-89 (the earliest year for which annual data are available) to school year 16-17 (the most recent year for which data are available) there has been a 315% increase in STEM degrees awarded in the U.S. to foreign students, most of which is at the graduate level. When the Business Roundtable of American CEOs (BRT) partnered with the Interindustry Forecasting Project of the University of Maryland (Inforum) to assess the OPT program the resulting December 2018 report showed a negative impact to the U.S. economy should OPT participation be reduced. The BRT-Inforum modeling showed, among other things, a loss of 443,000 jobs over a decade, including 225,000 jobs held by native-born workers. Relatedly, an economist's study in March 2019, analyzing unemployment among STEM workers in 102 metro areas, concluded that unemployment rates are lower in areas with larger numbers of F-1 nonimmigrants doing OPT as a share of workers in STEM occupations. When the Niskanen Center reported on its OPT research in March 2019 its data suggest that 10 additional OPT participants working in a core-based statistical area (CBSAs are aggregated metropolitan areas) leads to 5 additional patents originating in that CBSA. The economic risk of taking steps that might dilute the utility of OPT as a pipeline is further highlighted by a policy brief from October 2018 that illustrated that 22% of America's billion-dollar start-ups had at least one immigrant founder that first came to the U.S. as an international student.

<u>H-4</u>. Lastly, we draw attention to H-4 dependent spouses of the H-1B professionals we are sponsoring for green card status. These H-4 visa holders are permitted to work when they are waiting in long immigrant visa backlogs after the sponsoring employers have completed all legal hurdles to classify the H-1B professional as an immigrant. <u>Economists conducted a cost-benefit analysis in April 2019 on whether H-4 spousal work authorization rules should be rescinded</u>, and found that rescinding the H-4 employment authorization regulation would cost the U.S. economy some \$7.5 billion including loss of employment for American workers employed by the 2% of H-4 workers that have started their own businesses and employ 5 workers on average. The same economists found that 66% of employed H-4 visa holders held a job in a core STEM field, another 16% in business, finance, or management, and another 8% were health care professionals or health care support workers.

¹ The *only* three fiscal years *since FY1997* where cap-subject H-1B petitions did not exceed the numerical limit at some time prior to the end of the fiscal year were FY2000, 2001 and 2002, years for which Congress had temporarily increased the H-1B cap to 195,000 in response to the dotcom explosion. Because the new numbers became available only as the dotcom bubble burst, cap-subject H-1B fillings in those three fiscal years were 163,600, 79,100, and 78,000 respectively – with decreasing numbers, well under the cap in each successive year. Similarly, following the 2008 great recession, H-1B fillings were significantly down such that the numerical limits were *not* met in April (H-1B cap-subject fillings are made in April for the government's fiscal year beginning October 1 of that calendar year). The so-called "regular cap" of 65,000 H-1B petitions was met in December 2009, January 2011, November 2011, and June 2012 for, respectively, FY2010, 2011, 2012, and 2013. When the economy is stronger, numerical H-1B limits are met in April, as in calendar years 2008 and 2009 (for FY2009 and 2010) and calendar years 2014 to the present (for FY2015 to 2021).

SIGNATORIES

1871 – Chicago's Technology & Entrepreneurship Center Ceva Logistics

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Adex Medical Staffing, LLC Chr. Hansen, Inc.

Adobe Cisco Systems Inc.

Advanced Polymer Coatings Citadel Drilling

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Minnesota High Tech Association (MHTA)

Illinois Technology Association (ITA) Mokuni LLC

iLogic inc Montana High-Tech Business Alliance

Information Technology Industry Council Monzlapur New York

InfoTech Resources MUEngineers, Inc.

Insight Venture Management LLC NAFSA: Association of International Educators

Instacart NAM Info Inc

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Integrated Automation Systems, LLC NationsBenefits LLC

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IPEX Global Inc Nevada Technology Association

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Jantzen Brands Corporation New Jersey Tech Council (NJTC)

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Jyve Corporation New York Tech Alliance

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North Carolina Technology Association (NC TECH)

Northern Virginia Technology Council

Solution BI US Corp.

Nova Credit Inc. Sony Corporation of America

Novita Communications SPACO-Inc

Nuvia, Inc Spectrum Health System

NXP Semiconductors Square

Ohio IT Association Starburst Accelerator LLC Okta Sterling Software, Inc.

ON Semiconductor Stoll America Knitting Machinery, Inc.

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PayPal Tamp Bay Tech
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Philadelphia Alliance for Capital and Technologies (PACT)

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Postmates Tech Birmingham PreciseLED.INC Tech Collective

Pronix Tech Council of Central Pennsylvania

Tech Rochester

PVH Corp (Phillips-Van Heusen Corporation)

Quergy, Inc.

Tech San Diego

Tech Titans

Tech:NVC

quadric.io Inc Tech:NYC Quallcom, Inc. TechLauderdale

R.H. Chen Engineering TechNet

Region Technologies Inc TechNexus Venture Collaborative

Remedy Analytics, Inc.

Technology Association of Georgia (TAG)

Tillster, Inc.

Remitly Technology Association of Iowa (TAI)

Ricoh Printing Systems America, Inc. Technology Association of Louisville Kentucky (TALK)

Roanoke-Blacksburg Technology Council

Roblox Corporation

Technology Association of Oregon (TAO)

Technology Council of North Dakota

Rollbar, Inc. Technology Councils of America (TECNA)

Salesforce TechPoint SAMSON Controls, Inc. Tekion

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SEBA International LLC
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Semex USA, Inc.

Slack Technologies Turo SLK America, Inc. Twitter

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U.S. Chamber of Commerce Wisconsin Technology Council (WTC)

Utah Technology Council Woodbridge Group V Plus O Communications Workday, Inc.

VEB Solutions, Inc. World Fresh Produce Inc.

Venture Home Solar LLC Worldwide ERC

VigiLanz Corporation WorldWide HealthStaff Solutions Ltd.

VMWare Xero

Voss USA Inc. YOOBIC Inc. Waymo Zillow

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Webber, LLC (a Ferrovial company) ZOLLER Inc

West Coast Consulting Zoom Video Communications, Inc.

Wi-Tronix, LLC Zymergen, Inc.

IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF COLUMBIA

DOMINGO ARREGUIN GOMEZ, et al.,

Plaintiffs.

Civil Action No. 1:20-cv-01419

DONALD J. TRUMP, President of the United States of America et al.,

Defendants.

DECLARATION OF CHAD SPARBER

- I, Chad Sparber, hereby submit this declaration pursuant to 28 U.S.C. § 1746 and declare as follows:
- 1. I am the W. Bradford Wiley Chair in International Economics at Colgate University. My research focuses on the causes and consequences of U.S. immigration. I have a Ph.D. in economics from the University of California - Davis and a B.A. in economics from Western Washington University.
- 2. I have published numerous papers in respected peer-reviewed publications such as the Review of Economics and Statistics, the American Economic Journal: Applied Economics, European Economic Review, the Journal of Labor Economics, the Journal of Urban Economics, and the Journal of Development Economics, and my published body of work has been cited thousands of times by other researchers.
- 3. Since 2009, I have been an external Research Fellow at the Centre for Research and Analysis of Migration at University College London. In addition, I have been a Research Fellow at the IZA Institute of Labor Economics since 2017.

- 4. I am familiar with Presidential Proclamation 10014, signed by President Trump on April 22, 2020, (the "April Proclamation") and Presidential Proclamation 10052, signed by President Trump on June 22, 2020, as amended by Presidential Proclamation 10054, signed by President Trump on June 29, 2020 (the "June Proclamation," and together with the April Proclamation, the "Proclamations").
- 5. The June Proclamation states that "under the extraordinary circumstances of the economic contraction resulting from the COVID-19 outbreak, certain nonimmigrant visa programs authorizing such employment pose an unusual threat to the employment of American workers." This view is flatly contradicted by well-established economic research. In fact, my own research over the years demonstrates that restrictions on foreign workers, especially high-skilled professionals such as those who enter the United States on H-1B and L-1 visas, will reduce long-term economic growth while failing to increase the employment of Americans.
- 6. My research on the highly skilled workers who work in the United States under the H-1B program, for example, shows that the suspension of H-1B visas will ultimately have a significant negative impact on the American economy. The H-1B program allows high-skilled foreign-born workers in specialty occupations to work temporarily in the United States. Although the H-1B program is quite small—fewer than 139,000 new H-1B petitions were approved in 2019²—these

¹ See e.g., Giovani Peri & Chad Sparber, Presidential Executive Actions Halting High Skilled Immigration Hurt the US Economy, Global Migration Center (July 2020), https://globalmigration.ucdavis.edu/presidential-executive-actions-halting-high-skilled-immigration-hurt-us-economy; Giovanni Peri, Kevin Shih, & Chad Sparber, STEM Workers, H-1B Visas, and Productivity in US Cities, 33 J. of Lab. Econ. S225 (2015), http://giovanniperi.ucdavis.edu/uploads/5/6/8/2/56826033/stem-workers.pdf; see also Nat'l Acad. Of Scis., Eng'g., & Med., The Economic and Fiscal Consequences of Immigration (The National Academies Press 2017), https://www.nap.edu/read/23550/chapter/9.

² U.S. Dep't of Homeland Sec., Characteristics of H-1B Specialty Occupation Workers, (Mar. 2020),

workers contribute in outsize ways. They are largely concentrated in science, technology, engineering, and mathematics (STEM) fields such as computer science³—areas that are fundamental drivers of economic growth.⁴ The accepted consensus of economists and social scientists is that the infusion of human capital provided by high-skilled immigrants, such as those admitted through the H-1B program, has boosted the nation's capacity for innovation and technological change.⁵ Research has shown, for example, that a one percentage point rise in the share of immigrant college graduates in the population increased patents per capita by 9-18 percent and accounted for up to a third of the growth in patenting per capita during the 1990s. ⁶ These high-skilled workers contribute to human and physical capital formation, entrepreneurship, and innovation, all of which are essential to long-run sustained economic growth.⁷

https://www.uscis.gov/sites/default/files/document/reports/Characteristics_of_Specialty_Occupat ion_Workers_H-1B_Fiscal_Year_2019.pdf.

 $^{^3}$ Id.

⁴ Peri, Shih, & Sparber, *supra* note 1,; *see also* Giovanni Peri & Chad Sparber, *Highly Educated Immigrants and Native Occupational Choice*, 50 Indus. Rel.: A J. OF ECON. & SOC. 385 (2011) [hereinafter Peri & Sparber, Highly Educated], https://papers.ssrn.com/sol3/papers.cfm?abstract_id=1874552; Zvi Griliches, *The Search for R&D Spillovers*, 94 Scandinavian J. of Econ. S29 (1992); *see also* Charles I. Jones, *Sources of U.S. economic growth in a world of ideas*, 92 Am. ECON. REV. 220, https://pubs.aeaweb.org/doi/pdfplus/10.1257/000282802760015685 (estimating that 50 percent of U.S. total factor productivity growth in recent decades is attributable to science engineers).

⁵Nat'l Acad. Of Scis., Eng'g., & Med., supra note 1.

⁶ Jennifer Hunt & Marjolaine Gauthier-Loiselle, *How Much Does Immigration Boost Innovation?*, 2 AM, ECON, J. 31 (2010), https://pubs.aeaweb.org/doi/pdfplus/10.1257/mac.2.2.31.

⁷ Peri, Shih, & Sparber, *supra* note 1 (noting that "when considered as a source of technological innovation, foreign STEM workers may credibly generate large productivity and wage increases.").

- 7. These same observations would also apply to the L-1 visa program, which (like the H-1B program) enables professional, highly skilled workers with specialized knowledge of their sponsoring employers' businesses or products to transfer from overseas offices to offices in the United States. Like H-1Bs, L-1 workers are highly educated, highly skilled professionals who tend to have a positive impact on the United States job market because they provide critical onthe-ground leadership for multinational employers seeking to invest in their U.S. affiliates. They are already employed and on the payrolls of their companies while working overseas, and they are coming to the United States to enhance the productivity of their company's U.S. operations and workers.
- 8. Economic research establishes that foreign-born workers are, on average, more likely to innovate and start new businesses than native-born workers. Between 1976 and 2012, for instance, immigrant inventors produced roughly 23 percent of all patents—more than a 40 percent increase relative to their share of the U.S.-based inventor population—and generated 25 percent of the aggregate economic value created by patents produced by publicly traded companies—an increase of 47 percent relative to their share of the inventor population working in publicly traded companies. Highly skilled immigrants who come to the United States are

⁸ Hunt & Gauthier-Loiselle, *supra* note 6, at 31 (finding that immigrants patent at double the rate of native-born Americans because they are more likely to hold science and engineering degrees); Hunt (2011, 2015); Peri, Shih and Sparber, *supra* note 1; William Kerr & William F. Lincoln, *The Supply Side of Innovation: H-1B Visa Reforms and U.S. Ethnic Invention*, 28 J. OF LAB. ECON. 473 (2010) (finding that a 10 percent increase in the employment of H-1B workers is associated with 3 percent higher growth in patenting rates for H-1B dependent firms).

⁹ Shar Bernstein, Rebecca Diamond, Timothy James McQuade, & Beatriz Pousada, *The Contribution of High-Skilled Immigrants to Innovation in the United States*, Stanford Graduate School of Business, https://www.gsb.stanford.edu/faculty-research/working-papers/contribution-high-skilled-immigrants-innovation-united-states (finding that 30 percent of total U.S. innovative output can be ascribed to immigrants).

economically driven and comfortable with taking risks. ¹⁰ The requirements of the United States' visa programs constrain who is eligible, consistent with the design of these programs to facilitate the entry of workers with skills useful to the United States economy. And with respect to the H-1B program specifically, U.S. companies and employers who seek to hire highly-skilled specialty workers necessarily engage in a highly selective process, seeking out foreign workers to enter the country and contribute their specialized skills to specific business needs. Their contributions to the United States' universities, companies, and laboratories, in the form of innovation and diversity of perspective and experience, ultimately boost the U.S. economy. ¹¹

9. Well-established economic research also shows that the entry of highly-skilled foreign-born workers allows the United States to produce, innovate, and grow at a faster rate because of important differences in the occupations, college majors, and skill specialization between native and foreign workers. Multiple well-respected papers demonstrate that among high-skilled workers, foreign-born workers tend to specialize in quantitative skills and STEM fields, whereas

¹⁰ David Jaeger et al., *Direct Evidence on Risk Attitudes and Migration*, 92 Rev of Econ. and Stats. 684 (2010); Massimo Anelli, Gaetano Basso, Giuseppe Ippedico, & Giovanni Peri, *Does Immigration Drain Entrepreneurs?*, IZA Inst. of Lab. Econ. (2020), http://ftp.iza.org/dp13390.pdf.

¹¹ Bernstein, *supra* note 9 (finding that despite immigrants only making up 16 percent of inventors, they are responsible for 30 percent of aggregate U.S. innovation since 1976, with their indirect spillover effects, such as accounting for more than twice their direct productivity contribution).

¹² See Peri & Sparber, Highly Educated, supra note 4; Pia M. Orrenius & Madeline Zavodny, Does Immigration affect whether U.S. natives major in science and engineering?, 33 J. OF LAB. ECON. S79 (2015), https://www.journals.uchicago.edu/doi/10.1086/676660; Kevin Shih, Labor Market Openness, H-1B Visa Policy, and the Scale of International Student Enrollment in the US, 54 Econ. Inquiry 121 (2016); Kevin Shih, Do international students crowd-out or cross-subsidize Americans in higher education?, 156 J. of Pub. Econ. 170 (2017); Marigee Bacolod & Marcos A. Rangel, Economic Assimilation and Skill Acquisition: Evidence From the Occupational Sorting of Childhood Immigrants, 54 Demography 571 (2017); Gary C. Lin, High-Skilled Immigration and Native Task Specialization in U.S. Cities, 77 REGIONAL SCI. & URBAN ECON. 289.

native-born workers specialize in communication and social skills.¹³ Visa programs for highly-skilled workers enrich the set of available skills in the United States, which in turn is associated with greater productivity and innovation potential.

10. As a counterpoint, research examining prior H-1B restrictions shows that a reduction in H-1B workers has a direct negative impact on the economy. Some of my recent research, for instance, shows that when the fiscal-year cap of 195,000 H-1B workers expired and reverted to 65,000 H-1B workers in 2004, per the American Competitiveness in the 21st Century Act, the employment of such workers declined 16 to 26 percent relative to what would have occurred if business demand, rather than a legislative limit, determined hiring outcomes. ¹⁴ These declines, moreover, were concentrated at the ends of the wage distribution, which is most troubling at the high end: it implies that H-1B restrictions particularly hindered the employment of the highest ability foreign-born workers. ¹⁵ My ongoing research is finding that employers using the H-1B program have experienced reduced total employment, sales, profits, market value, and research

¹³ Peri, Shih, & Sparber, supra note 1; Giovanni Peri, Kevin Shih, & Chad Sparber, Foreign and Native Skilled Workers: What Can We Learn from H-1B Lotteries? (Nat'l Bureau of Econ. Research, Working Paper No. No. 21175, 2015); see also, e.g., Peri & Sparber, Highly Educated, supra note 4 (finding that when the foreign-born proportion of highly educated employment within an occupation rises, native employees with graduate degrees choose new occupations with less analytical and more communicative content); Peri & Sparber, Task Specialization, Immigration & Wages, 1 Am. Econ. J.: Applied Econ. 135 (2009) [hereinafter Peri & Sparber, Immigration & Wages] (finding, based on four decades of decennial census data, that a one percentage-point increase in the foreign-born share of less-educated workers is associated with a 0.34 percent increase in the relative supply of communication versus manual tasks among native-born workers).

¹⁴ Anna Maria Mayda, Franscesc Ortega, Giovanni Peri, Kevin Shih, & Chad Sparber, *The Effect of the H-1B Quota on Employment and Selection of Foreign-Born Labor*, 108 EUR. ECON. REV. 105 (2018).

¹⁵ *Id.*

and development compared to non-users since 2014 due to tight rationing of the H-1B program and lottery allocation of H-1B status.

and disadvantage U.S. workers, the vast majority of peer-reviewed economics research does not find systematic job displacement following the inflow of highly skilled foreign workers. ¹⁶

Indeed, nearly all of the relevant research of which I am aware demonstrates that foreign-born workers, especially the highly skilled ones permitted entry through the H-1B and L-1 visas, generate local opportunities for firms and United States workers that do not translate into a decline in United States employment or wages. ¹⁷ In 2015, for example, based on a study period of 1980 to 2010, I found that a rise in foreign-born STEM workers by 1 percentage point of a city's total employment increased the real wages of college-educated natives by 7 to 8 percent and those of non-college-educated natives by 3 to 4 percent. ¹⁸ The literature reflects that the observed skill differences and complementarities between native-born and foreign-born workers are a key reason for this phenomenon. ¹⁹ Most, if not all, of the papers that do find displacement

¹⁶ See, e.g., Gianmarco Ottaviano & Giovanni Peri, Rethinking The Effect Of Immigration On Wages, 10 J. of the Eur. Econ. Assoc. 152 tbl.6 (2012), https://onlinelibrary.wiley.com/doi/full/10.1111/j.1542-4774.2011.01052.x; Peri & Sparber, Immigration & Wages, supra note 13.

¹⁷ Ottaviano & Peri, *supra* note 16; Peri & Sparber, Immigration & Wages, *supra* note 13; Nat'l Acad. Of Scis., Eng'g., & Med., *supra* note 1.

¹⁸ Peri, Shih, & Sparber, *supra* note 1. During the study period of 1980 to 2010, college-educated STEM workers grew from 2.4 percent of total employment to 3.2 percent over the period, and foreign-born workers were responsible for more than 80 percent of this growth. *Id.*

¹⁹ Peri & Sparber, Immigration & Wages, *supra* note 13; Peri & Sparber, Highly Educated, *supra* note 4; Giovanni Peri, Kevin Shih, & Chad Sparber, Foreign STEM Workers and Native Wages and Employment in US Cities, Nat'l Bureau of Econ. Res (2014).

effects use small datasets and/or analyze very narrowly defined and specialized labor markets.

This type of work underestimates system-wide general equilibrium effects. That is, they do not reflect how immigration affects broader populations or the economy as a whole.²⁰

12. Innovation carried out by foreign-born workers also serves to increase the productivity of the American workforce, raising economic growth. This is because foreign nationals who work in specialties such as science and engineering who come work on H-1B status create new technologies that generate positive production externalities and are responsible for half of long-run productivity growth in the United States. Research has established, for instance, immigrants account for 30 percent of the total U.S. innovation over the past four decades, 73 percent of which is due to immigrants' indirect impacts on raising the innovation output of native inventors. The growth fueled by highly skilled foreign-born workers is crucial to enhancing income per capita and wages, and hence for sustaining better conditions for large parts of the United States economy. Numerous empirical studies have validated the point that high-skilled foreign-born workers are responsible for a large share of United States economic growth because

²⁰ See, e.g., George Borjas & Kirk Doran, *The Collapse of the Soviet Union and the Productivity of American Mathematicians*, HKS Faculty Research Working Paper Series RWP12-004, John F. Kennedy School of Gov't, Harvard Univ. (2012) (finding that an influx of approximately 336 Soviet mathematicians after the fall of the Soviet Union displaced some U.S. mathematicians); Kirk Doran, Alexander Gelber & Adam Isen, *The Effects of High-Skilled Immigration Policy on Firms: Evidence from H-1B Visa Lotteries*, (Nat'l Bureau of Econ. Research, Working Paper No. 20668, 2014) (finding displacement effects based on a very small dataset from the H-1B lotteries during the onset of the recession in 2006 and 2007).

²¹ Jones, *supra* note 2; Nat'l Acad. Of Scis., Eng'g., & Med., *supra* note 1.

²² Bernstein, *supra* note 9 (finding that more than two-thirds of the contribution of immigrants to United States innovation has been due to the way in which immigrants make United States nativeborn workers substantially more productive themselves).

such workers specialize in STEM work.²³ My own research has shown that inflows of foreign STEM workers explain between 30 and 50 percent of the aggregate productivity growth that took place in the United States between 1990 and 2010.²⁴ Moreover, by attracting and hiring high-skilled foreign-born workers, U.S. cities and local economies can feed a virtuous cycle of increased growth and more opportunities for U.S. workers. There is strong evidence that one high-skilled job generates a "local multiplier," attracting other jobs rather than displacing them.²⁵

13. The June Proclamation's severe restrictions on high-skilled foreign-born workers would cause the U.S. economy to miss out on significant growth opportunities. This causes particular alarm among economists, including myself.²⁶ The world competes for global talent,²⁷ and the economic research establishes that lost technological and productivity growth in the United

²³ Kerr & Lincoln, *supra* note 8; William Kerr & William F. Lincoln, *Social Networks, Ethnicity, and Entrepreneurship,* (Nat'l Bureau of Econ. Research, Working Paper No.21597, 2016), https://www.nber.org/papers/w21597; Christian Gunadi, *An inquiry on the impact of highly-skilled STEM immigration on the U.S. Economy*, 61 Labour Econ. 101751 (2019).

²⁴ Peri, Shih & Sparber, *supra* note 1.

²⁵ Enrico Moretti, Local Multipliers, 100 Am. Econ. Rev.: Papers and Proceedings 373 (2010).

²⁶ Susan Cohen & Jennifer Hunt, By blocking visas for foreign workers, Trump is further hurting the US economy, CNN Business (June 26, 2020), https://www.cnn.com/2020/06/26/perspectives/work-visa-restrictions-us-economy/index.html; Peri & Sparber, supra note 1; Alex Nowrasteh, President Trump's Cancellation of Many Work Visas Will Hurt the American Economy, Cato Inst. (June 22, 2020, 8:23 PM), https://www.cato.org/blog/president-trumps-cancellation-many-work-visas-will-hurt-american-economy; Aarthi Swaminathan, Trump's latest visa restrictions could hold back economic recovery, experts say, Yahoo! Finance (June 30, 2020), https://finance.yahoo.com/news/visa-restrictions-could-hold-back-economic-recovery-experts-say-140401419.html; Stuart Anderson, New Trump H-1B Visa Restrictions Will Harm Companies, Forbes (June 23, 2020) https://www.forbes.com/sites/stuartanderson/2020/06/23/new-trump-h-1b-visa-restrictions-will-harm-companies/#430c9ee170e8.

²⁷ William Kerr, *The Gift of Global Talent: How Migration Shapes Business, Economy & Society* (Stanford Business Books, 1st ed. 2018).

States is likely to translate into the "off-shoring" of jobs as employers relocate to countries more hospitable to high-skilled immigration. ²⁸ In addition, my research has found that H-1B restrictions not only directly affect foreign workers; they also deter foreign students from coming to the United States, reducing both the overall quantity and quality of the foreign student population. This has grave short-term consequences, directly harming United States higher education as a "service export," as well as long-term consequences, reducing the number of foreign students who would otherwise seek to remain in the United States after graduation and contribute to the economy as innovative and entrepreneurial workers. ²⁹ Economists have described restrictions on H-1B and related skilled labor inflows as a form of "national suicide."

14. The primary comparable example of severe anti-immigrant policy adopted in the United States in response to economic contraction—the Hoover administration's program to repatriate Mexican seasonal farm workers during the Great Depression—is a case in point.³⁰ The program's massive deportations constituted one of the largest-ever policy experiments to improve the labor market for domestic farm workers by reducing the size of the workforce through the forced deportation of foreign-born farm workers—by some estimates, over 400,000

²⁸ Britta Glennon, How do Restrictions on High-Skilled Immigration Affect Offshoring? Evidence from the H-1B Program, Boatlift (Nat'l Bureau of Econ. Research, Working Paper No. 27538, 2020), https://www.nber.org/papers/w27538; William W. Olney & Dario Pozzol, The Impact of Immigration on Firm-Level Offshoring, IZA Inst. Of Labor Econ. (Apr. 2019), http://ftp.iza.org/dp11480.pdf; Gianmarco Ottaviano, Giovanni Peri & Greg C. Wright, Immigration, Offshoring, and American Jobs, 103 Am. Econ. Rev. 1925 (2013).

²⁹ Shih 2016, supra note 12; Takao Kato & Chad Sparber, Quotas and Quality, The Effect of H-1B Visa Restrictions on the Pool of Prospective Undergraduate Students from Abroad, 95 Rev. of Econ. and Stats 109 (2013).

³⁰ Francisco E. Balderrama & Raymond Rodríguez, *Decade of Betrayal: Mexican Repatriation in the 1930s* (UNM Press, 2006).

Mexican laborers, or nearly third of the Mexican population in the United States at that time, equivalent to about 1 percent of the total 1930 labor force.³¹ A recent analysis found that these forced deportations contributed to the decimation of economies close to the Mexican border by reducing the employment of native incumbent workers and resulting in a downgrading of their skills and compensation.³² Instead of the positive labor market effects that were intended to be a straightforward consequence of the program, the result was to hurt job opportunities for native-born farm workers, in the midst of a severe economic and labor-market downturn. I would expect the same dynamic to play out in the present circumstances if the Proclamations were to remain in place.

15. In sum, the short-term economic recovery from the COVID-19 pandemic, as well as the prospects for long-run economic growth in the United States, would be significantly dampened without the contributions of high-skilled immigrants. By restricting H-1B workers and other highly skilled professionals, the Proclamations not only bar many of the "best and brightest," but will also prompt many such individuals to choose to avoid the United States altogether. The benefits of their innovation, entrepreneurship, and human capital will go to other countries and other economies. The Proclamations' immigration restrictions will also dampen the consumer demand that would rejuvenate the economy once the worst of the COVID-19 pandemic has passed. The Proclamations will therefore likely have negative short-run effects and particularly dire long-term implications by depriving the United States of skills and talents that would have helped the economic recovery.

³¹ Jongkwan Lee, Giovanni Peri & Vasil Yasenov, *The Labor Market Effects of Mexican Repatriations: Longitudinal Evidence from the 1930s*, IZA Inst. Of Labor Econ. (Oct. 2019), http://ftp.iza.org/dp12689.pdf.

³² Id.; see also Balderrama, supra note 30.

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct. Executed on 31 July 2020 at Hamilton, New York.

Chad Sparber

IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF COLUMBIA

DOMINGO ARREGUIN GOMEZ,

Plaintiffs.

Civil Action No. 1:20-cv-01419

v.

DONALD J. TRUMP, President of the United States of America et al.,

Defendants.

DECLARATION OF GIOVANNI PERI

- I, Giovanni Peri, hereby submit this declaration pursuant to 28 U.S.C. § 1746 and declare as follows:
- 1. I am a Professor of Economics at the University of California, Davis. I chaired the Economics Department from 2015 to 2019. I founded the UC Davis Global Migration Center, an interdisciplinary research group focusing on international migrations, and I continue to serve as its Director.
- 2. My research focuses on labor economics with a specific emphasis on the economics of international migration. I have published hundreds of academic papers and my collective body of research has been cited tens of thousands of times. I am also the Editor of the *Journal of the European Economic Association* and serve on the editorial boards of several other academic journals in economics.
- 3. I hold a Ph.D. in Economics from the University of California, Berkeley and a Doctoral Degree in Economics from Bocconi University, Milano. I have been a Senior Fellow at the Brookings Institution from 2014 to 2016, and a Visiting Scholar at the Federal Reserve Bank of

San Francisco in 2010. I am currently a Research Associate of the National Bureau of Economic Research.

- 4. I am familiar with Presidential Proclamation 10014, signed by President Trump on April 22, 2020, (the "April Proclamation") and Presidential Proclamation 10052, signed by President Trump on June 22, 2020, as amended by Presidential Proclamation 10054, signed by President Trump on June 29, 2020 (the "June Proclamation," and together with the April Proclamation, the "Proclamations").
- 5. The April Proclamation suspended the entry of most immigrants to the United States, unless they met certain exceptions, for 60 days. It principally justified this entry suspension on the ground that "there is no way to protect already disadvantaged and unemployed Americans from the threat of competition for scarce jobs from new lawful permanent residents by directing those new residents to particular economic sectors with a demonstrated need not met by the existing labor supply."
- 6. The June Proclamation has extended the April Proclamation's entry suspension on immigrants through the end of this year, stating that there are "[in]sufficient means to protect unemployed Americans from the threat of competition for scarce jobs from new lawful permanent residents," and that "the United States faces a potentially protracted economic recovery with persistently high unemployment if labor supply outpaces labor demand."
- 7. The notion that inflows of immigrants threaten domestic jobs is contrary to the results of a very large body of established and accepted economic research, including my own. Such a view is rooted in a simplified, static model of labor demand and supply that assumes, erroneously, that immigration increases the supply of some workers while everything else in the economy remains fixed. In reality, however, the U.S. economy is dynamic, shedding and creating hundreds of

thousands of jobs every month. The most accurate way to gauge the net impact of immigration on such an economy is to analyze all the economic effects produced over time, including how firms and local economies respond to immigrant inflows by expanding, investing, adjusting product specialization, adopting efficient technologies, and creating new businesses. Data show that, on net, immigrants expand the U.S. economy's productive capacity, stimulate investment, increase aggregate demand and promote specialization that in the long run boosts productivity. There is no evidence that these effects take place at the expense of jobs or wages for workers born in the United States. In fact, extensive economic research shows that immigration strengthens the US economy in multiple ways.

8. My research over the past two decades has consistently shown that immigrants have no significant negative impact on overall employment levels of native-born United States workers;³

¹ See e.g., Giovanni Peri, Kevin Shih, & Chad Sparber, STEM Workers, H-1B Visas, and Productivity in US Cities, 33 J. of Lab. Econ. S225 (2015), http://giovanniperi.ucdavis.edu/uploads/5/6/8/2/56826033/stem-workers.pdf.; Giovanni Peri, The effect of immigration on productivity: Evidence from U.S. states, 94 Rev. of Econ. and Stats. 348 (2012).

² See Nat'l Acad. Of Scis., Eng'g., & Med., The Economic and Fiscal Consequences of Immigration 266 (The National Academies Press 2017) ("[M]any studies conclude that, economy wide, the impact of immigration on average wages and employment is small"); see also Giovanni Peri & Vasil Yasenov, The Labor Market Effects of a Refugee Wave: Applying the Synthetic Control Method to the Mariel Boatlift (Nat'l Bureau of Econ. Research, Working Paper No. 21801, 2015), http://www.nber.org/papers/w21801.

³ See e.g., Gianmarco Ottaviano & Giovanni Peri, Rethinking the Gains from Immigration: Theory and Evidence from the U.S. (Nat'l Bureau of Econ. Research, Working Paper No. 11672, 2005), https://www.nber.org/papers/w11672.pdf; Gianmarco Ottaviano & Giovanni Peri, Immigration and national wages: Clarifying the theory and the empirics (Nat'l Bureau of Econ. Research, Working Paper No. 14188, 2008), https://www.nber.org/papers/w14188.pdf; Gianmarco Ottaviano & Giovanni Peri, Rethinking the effect of immigration on wages, 10 J. of The Eur. Econ. Assoc. 152 (2012) [hereinafter Ottaviano & Peri, Rethinking]; Ethan Lewis & Giovanni Peri, Immigration and the Economy of Cities and Regions, in Handbook of Regional and Urban Economics 625 (2015); Giovanni Peri, Immigrants, productivity, and labor markets, 30 J. of Econ. Perspectives 3 (2016), https://pubs.aeaweb.org/doi/pdfplus/10.1257/jep.30.4.3.

that high-skilled immigration in particular has a positive impact on employment and wages for United States workers;⁴ and that there has been a strong positive correlation between the growth of immigrants, as a share of the population, and the growth of wages paid to United States workers.⁵ Moreover, because overall immigration to the United States has become more concentrated among highly skilled workers from 2000 to 2020, the positive effects of immigration to the United States, and particularly the contribution of high-skilled workers, have become even more pronounced.⁶

9. Immigrants have no significant negative impact on overall employment levels of native-born United States workers. By systematically analyzing how immigrants affect total output, income per worker, and employment over short and long time horizons, I have found that the economy absorbs immigrants by expanding job opportunities and increasing the number of firms rather than by displacing United States workers.⁷ A fifty-state empirical analysis of nearly five decades of data reveals that immigrants have a one-for-one impact on total employment, *i.e.*, each

⁴ Giovanni Peri, Kevin Shih, & Chad Sparber, *Foreign STEM Workers and Native Wages and Employment in U.S. Cities* (Nat'l Bureau of Econ. Research, Working Paper No. 20093, 2014), http://www.nber.org/papers/w20093.pdf?new_window=1, Ottaviano & Peri, Rethinking, *supra* note 3.

⁵ Giovanni Peri & Vasil Yasenov, *Immigration in local US economies was associated with strong native wage growth for 40 years*, Global Migration Center, Mar. 2020, https://globalmigration.ucdavis.edu/immigration-local-us-economies-was-associated-strongnative-wage-growth-40-years.

⁶ Giovanni Peri, 20 Years of Declining Immigration and the Disappearance of Low Skilled Immigrants, Global Migration Center, Mar. 2020, https://globalmigration.ucdavis.edu/20-years-declining-immigration-and-disappearance-low-skilled-immigrants; Peri, Shih, & Sparber, supra note 1.

⁷ Giovanni Peri, *The Effect Of Immigration On Productivity: Evidence From U.S. States* (Nat'l Bureau of Econ. Research, Working Paper No.15507, 2009), https://www.nber.org/papers/w15507.

immigrant increases employment by one unit, without "crowding out" any native-born workers; immigrants therefore increase the size of the local economy and do not compete for jobs with native-born workers. The same research also shows that immigrants have a significant, positive effect on the total factor productivity of states, which drives a significant positive effect by immigration on gross state product (*i.e.*, a state's output) per worker. There is no evidence that immigrants crowd out U.S.-born workers in either the short or the long run. Data on U.S.-born worker employment from 1960 to the present imply at most small effects, with estimates never statistically different from zero. The size of the local economy and do not compete for jobs with native-born workers.

10. In addition, statistical analysis of state-level data shows that the presence of immigrants is associated with increased output per worker because immigrants stimulate investment and firm growth and promote specialization. ¹¹ It is a well-documented phenomenon that among both less-and more-educated workers, U.S.-born workers and immigrants tend to take different occupations,

⁸ *Id.* (finding that immigrants do not crowd-out employment of (or hours worked by) native-born workers, but simply add to total employment; that immigrants increase total factor productivity significantly; and that such efficiency gains are unskilled-biased, i.e., larger for less educated workers).

⁹ *Id*.

¹⁰ Giovanni Peri, *The Effect of Immigrants on U.S. Employment and Productivity*, FRBSF Economic Letter, Federal Reserve Bank of San Francisco, Aug. 30, 2010, https://www.frbsf.org/economic-research/publications/economic-letter/2010/august/effect-immigrants-us-employment-productivity/ [hereinafter Peri, Economic Letter]; The Nat'l Acad. Of Scis., Eng'g., and Med., *The Economic and Fiscal Consequences of Immigration*, section 5.7 ("[W]hen measured over a period of more than 10 years, the impact of immigration on the wages of natives overall is very small."); *id.* ("Most studies find little effect on immigration on the employment of natives.").

Giovanni Peri & Chad Sparber, *Task Specialization, Immigration & Wages*, 1 AM. ECON. J.: APPLIED ECON. 135 (2009) [hereinafter Peri & Sparber, Immigration & Wages]; Nat'l Acad. Of Scis., Eng'g., and Med., *supra* note 1 at 264 ("[Immigrants influence the rate of innovation in the economy... more specifically, high-skilled immigrants raise patenting per capita, which is likely to boost productivity and per capita economic growth.").

and even specialize in different job tasks within the same industries and specific businesses. ¹² My research demonstrates, for example, that when immigration of less-educated, foreign-born workers increases the supply of manual labor, native-born workers specialize and find not only employment, but also higher wages, in occupations more intensive in language skills and less intensive in physical skills. ¹³ This results in specialization and productive complementarities, which ultimately produces efficiency and productivity gains and boosts income per worker. ¹⁴ I have found that total immigration in the United States from 1990 to 2007 was associated with a 6.6 to 9.9 percent increase in real income per worker. ¹⁵

11. High-skilled immigration has a positive impact on employment and wages for U.S. workers. It is well established that technological progress is a key driver of productivity growth and ultimately of economic growth. Because immigrants in recent decades have become more concentrated in technology-related occupations requiring high education and skill levels, they have contributed to productivity efficiency gains in the United States by increasing innovation per capita, thus boosting economic growth per capita. ¹⁶ I have found, for example, that "a 1 percentage

¹² Peri & Sparber, Immigration & Wages, *supra* note 11.

¹³ *Id.* (finding that a one percentage-point increase in the foreign-born share of less-educated workers is associated with a 0.34 percent increase in the relative supply of communication versus manual tasks among native-born workers, and that this relative increase is primarily achieved through a rise in the supply of language skills, rather than a fall in the supply of native-born physical labor).

¹⁴ Ethan G. Lewis, *Immigrant-Native Substitutability: The Role of Language Ability* (Nat'l Bureau of Econ. Research, Working Paper No. 17609, 2011), https://www.nber.org/papers/w17609; Peri, Economic Letter, *supra* note 10.

¹⁵ *Id*.

¹⁶ Sari Pekkala Kerr, William Kerr, Caglar Özden & Christopher Parsons, *Global Talent Flows*, 30 J. of Econ. Perspectives 83 (2016)

point increase in the foreign STEM share of a city's total employment increased the wage growth of native college-educated labor by about 7-8 percentage points and the wage growth of non-college educated natives by 3-4 percentage points." These figures indicate that STEM workers spur economic growth by increasing productivity, especially that of college educated workers.

12. My research has also revealed that high-skilled immigration has a positive impact on the wages and employment of both college-educated and less-educated United States workers for multiple reasons. First, as already noted, high-skilled immigrants are significant innovators which leads to job creation and job improvement. Second, high-skilled immigrants often complement rather than compete with high-skilled US workers, and they boost the productivity of native-born Americans on the local level when their skills differ from those of native-born Americans. For

https://www.aeaweb.org/articles?id=10.1257/jep.30.4.83; *see also* Nat'l Acad. Of Scis., Eng'g., and Med., *supra* note 1 at 279.

¹⁷ Peri, Shih, & Sparber, *supra* note 1.

¹⁸ Id.; Jennifer Hunt & Marjolaine Gauthier-Loiselle, How Much Does Immigration Boost Innovation?, 2 AM. ECON. J. 31 (2010), https://pubs.aeaweb.org/doi/pdfplus/10.1257/mac.2.2.31; Shai Bernstein, Rebecca Diamond, Timothy James McQuade, & Beatriz Pousada, The Contribution of High-Skilled Immigrants to Innovation in the United States, Stanford Graduate School of Business, https://www.gsb.stanford.edu/faculty-research/working-papers/contribution-high-skilled-immigrants-innovation-united-states; William Kerr & William F. Lincoln, The Supply Side of Innovation: H-1B Visa Reforms and U.S. Ethnic Invention, 28 J. OF LAB. ECON. 473 (2010), https://www.jstor.org/stable/10.1086/651934 (a ten percent increase in H-1B admissions is associated with 3 percent higher growth in patenting rates for H-1B dependent firms).

¹⁹ Giovanni Peri, *Immigrants' Complementarities and Native Wages: Evidence from California* (Nat'l Bureau of Econ. Research, Working Paper No. W12956, 2016), http://www.nber.org/papers/w12956.pdf [hereinafter Peri, Immigrants' Complementarities]; Giovanni Peri & Chad Sparber, Giovanni Peri & Chad Sparber, *Highly Educated Immigrants and Native Occupational Choice*, 50 Indus. Rel.: A J. OF ECON. & SOC. 385 (2011), https://papers.ssrn.com/sol3/papers.cfm?abstract_id=1874552; Lewis & Peri, *supra* note 3; *see also* Gaurav Khanna, *The IT Boom and Other Unintended Consequences of Chasing the American Dream*, SSRN (2017), https://papers.ssrn.com/sol3/papers.cfm?abstract_id=2968147 (finding that Indian information technology (IT) workers on the H-1B visa increased the wages of American workers by \$431 million in 2010).

example, high-skilled immigrants are more likely to work in tech, while high-skilled US workers are more likely to work in communications.²⁰ Finally, high-skilled immigrants create "spillover" effects that improve productivity, through their interactions with United States workers and the technologies they create that increase efficiency.²¹

13. There has been a strong positive correlation between the local growth of immigrants, as a share of the population, and the growth of wages paid to U.S. workers. Although immigration into the United States as a whole has declined over the past decade, there has nevertheless been large variation in the immigrant population in cities and states across the United States. My research has revealed that for approximately the past four decades, from 1980 to 2018, a local growth in the immigrant population has correlated with an increase in weekly wages across the labor markets in those localities—including both in the pre-recession years of 2000-2008 and throughout the recession and recovery of 2008-2018.²² In other words, cities with larger-than-average immigration rates experienced faster growth in the wages of native-born workers, while cities that had lower-than-average immigration rates (including cities with declining immigrant populations) experienced slower growth and/or declines in the wages of native-born workers.

14. Contrary to the frequently heard claims that immigrants depress wages and otherwise disadvantage United States workers, the net association between immigration and native wages

²⁰ Peri & Sparber, Immigration & Wages, *supra* note 11; Peri, Immigrants' Complementarities, *supra* note 19.

Nat'l Acad. Of Scis., Eng'g., and Med., *supra* note 1 at 254 (describing "spillover effects whereby technological progress is spurred through the creation and diffusion of knowledge and innovation"); *Id.* at 302 ("higher-skilled workers and inventors can generate knowledge spillover effects that enhance knowledge formation and the productivity of lower-skilled workers with whom they interact in production and job training.").

²² Peri & Yasenov, *supra* note 5.

has been very stable and positive, for each decade of the past forty years. Higher immigration has systematically gone hand in hand with higher economic success for native workers.

15. Immigrants play an additional important role during economic recessions. As they have significant higher internal mobility than the natives in the US, they tend to leave areas of low employment, especially during economic recession. Because foreign-born workers are more likely to make earnings-sensitive decisions to move towards areas where there is job creation, they reduce the unemployment in depressed areas and help fuel the employment growth in growing areas.²³

16. Because overall immigration to the United States has declined and become more concentrated among highly skilled workers from 2000 to 2020, the positive effects of immigration to the United States, and particularly the contribution of high-skilled workers, have become even more pronounced. There has been a significant recent decline in total net immigration relative to a period of peak immigration in the 1990s, and immigration has slowed as a driver of growth in the United States working-age population (ages 18-65).²⁴ In the 1990s, immigration was responsible for a 0.65 percent increase in the working-age population each year, but its contribution has declined by more than 60 percent to constitute only a 0.22 percent yearly growth over the 2010-2018 period.²⁵ As part of this decline, the net immigration rate among less-educated, low-skilled individuals has declined substantially since 2000. In the last decade, the net immigration of low-skilled workers has actually been negative (i.e., more people in this category are leaving the United States than entering): the group of workers with no high school degree has

²³ Brian C. Cadena and Brian K. Kovak, *Immigrants Equilibrate Local Labor Markets: Evidence from the Great Recession*, 8 AM. ECON. J.: APPLIED ECON. 257 8 (2016).

²⁴ Peri, *supra* note 6.

²⁵ *Id*.

shrunk in the 2010-2018 period by 0.5 percent per year because of the net outflow of that group from the United States.²⁶

17. The net immigration rate of highly educated, highly skilled workers, however, has *increased*, continuing to grow at a rate of 0.5 percent per year or more, thanks to net immigration.²⁷ As noted above, my research, as well as multiple other empirical studies, has shown that increased immigration of such workers have had a significant positive impact on U.S. jobs and wages.²⁸ Foreign skilled workers play a crucial role in increasing productivity and innovation, and hence, in the long-run growth of the economy.

18. The coronavirus has certainly caused a recession due to the collapse of sectors like hospitality, travel, and recreation; stay-at-home orders; and economic uncertainty. But none of these factors is related to immigration, which has also decreased significantly.²⁹ Moreover, layoffs

²⁶ *Id*.

²⁷ *Id*.

²⁸ Peri, Shih, & Sparber, *supra* note 4 (finding that a rise in the growth of foreign STEM by one percentage point of total employment increase growth in the wages of native college educated workers by a statistically significant 7-8 percentage points, and of wages of non-college educated workers by 3-4 percentage points); Peri, Shih, & Sparber, *supra* note 1; Giovanni Peri, Kevin Shih, & Chad Sparber, *Foreign and Native Skilled Workers: What Can We Learn from H-1B Lotteries?* (Nat'l Bureau of Econ. Research, Working Paper No. 21175, 2015), https://www.nber.org/papers/w21175; *see also* Kerr, *supra* note 16; Nat'l Acad. Of Scis., Eng'g., and Med., *supra* note 1 at 279. *See, e.g.*, Giovanni Peri, *Do Immigrant Workers Depress the Wages of Native Workers?*, IZA Inst. Of Labor Econ. (May 2016), http://wol.iza.org/articles/doimmigrant-workers-depress-the-wages-of-native-workers.

²⁹ Compare, e.g., U.S. Department of State – Bureau of Consular Affairs, U.S. Dep't of State, *Immigrant Visa Issuances By Foreign State of Chargeability or Place of Birth, March 2019* (FY2019), https://tinyurl.com/yxz4f8cn (37,618 immigrant visas issued by the State Department in March 2019); with *Immigrant Visa Issuances by Foreign State of Chargeability or Place of Birth*, U.S. Dep't of State, *Immigrant Visa Issuances By Foreign State of Chargeability or Place of Birth, March 2020 (FY2020)*, https://tinyurl.com/y6fgvg6m (24,383 immigrant visas issued by the State Department in March 2020).

and unemployment have affected both native-born workers and immigrants and other foreign-born workers. My research has found that immigrants are significantly overrepresented among "essential workers" who are considered to perform duties essential to the economy and society, and who are bearing the most extreme health risks during the global pandemic. Essential industries such as health care, food provision, and logistics have a larger-than-average dependence on immigrants and foreign-born workers—and the economic and social contributions of these individuals during this period of crisis are particularly evident. While the proclamation excepts from the ban foreigners currently involved in essential services, it increases uncertainty in visa processing because it is unclear whether and when workers will be granted an exception, which increases economic uncertainty for employers seeking to hire such workers. This uncertainty compounds the difficulties that U.S. employers are trying to manage, given that immigrant and non-immigrant visas for these essential workers are already limited in number, require significant and costly resource investment to sponsor, and are subject to slow processing times. In the processing times are subject to slow processing times.

19. My research has also shown that immigration has had virtually no effect on the national poverty level. Even in an analysis of "peak" immigration from 1990 to 2010, I could not find an increase in poverty rates, even for the most vulnerable, least-educated native-born population and with the most pessimistic parameter configuration, larger than one percent. Indeed, because of the positive effect of high skilled immigrants on the economy, immigration may have contributed to

³⁰ Giovanni Peri and Justin C. Wiltshire, *The Role of Immigrants as Essential Workers during the COVID-19 Pandemic*, The Global Migration Center (April 2020), https://globalmigration.ucdavis.edu/role-immigrants-essential-workers-during-covid-19-pandemic.

³¹ Giovanni Peri & Chad Sparber, *Presidential Executive Actions Halting High Skilled Immigration Hurt the US Economy*, The Global Migration Center (July 2020), https://globalmigration.ucdavis.edu/presidential-executive-actions-halting-high-skilled-immigration-hurt-us-economy.

the reduction of poverty in the period 2000-2010, which includes the Great Recession.³² My research found that immigration had a poverty-*reduction* effect between 0 and 0.51 percent for this time period.³³

20. By severely restricting immigration to the United States, particularly the immigration of high-skilled workers, the Proclamations will only serve to penalize the economic recovery.

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct. Executed on 07-30-2020 at Davis, CA.

Giovanni Peri

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³² Giovanni Peri, *The Impact of Immigration on Native Poverty through Labor Market Competition* (Nat'l Bureau of Econ. Research, Working Paper No. 17570, 2011), https://www.nber.org/papers/w17570.pdf.

 $^{^{33}}$ *Id*.

IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF COLUMBIA

DOMINGO ARREGUIN GOMEZ et al.,

Plaintiffs.

Civil Action No. 1:20-cv-01419

v.

DONALD J. TRUMP, President of the United States of America et al..

Defendants.

DECLARATION OF JENNIFER HUNT

- I, **Jennifer Hunt**, hereby submit this declaration pursuant to 28 U.S.C. § 1746 and declare as follows:
- 1. I am a Professor of Economics at Rutgers University. From 2013-2014, I served as the U.S. Department of Labor's Chief Economist. From 2014-2015, I served as Deputy Assistant Secretary for Microeconomic Analysis at the U.S. Department of the Treasury. Prior to joining Rutgers in 2011, I held positions at McGill University, the University of Montreal and Yale University. I have a Ph.D. in Economics from Harvard University and a Bachelor's degree in Electrical Engineering from the Massachusetts Institute of Technology. My current research focuses on the geographic spread of technology, immigration and wage inequality.
- 2. I am familiar with Presidential Proclamation 10014, signed by President Trump on April 22, 2020, (the "April Proclamation"); and Presidential Proclamation 10052, signed by President Trump on June 22, 2020, as amended by Presidential Proclamation 10054, signed by President Trump on June 29, 2020 (the "June Proclamation," and together with the April Proclamation, the "Proclamations").

- 3. The April Proclamation suspended the entry of most immigrants to the United States for 60 days. It justified this entry suspension principally on the ground that during the economic downturn caused by the COVID-19 pandemic, "there is no way to protect already disadvantaged and unemployed Americans from the threat of competition for scarce jobs from new lawful permanent residents by directing those new residents to particular economic sectors with a demonstrated need not met by the existing labor supply."
- 4. The June Proclamation extended the April Proclamation's entry suspension on immigrants through at least December 31, 2020, stating that there are "[in]sufficient means to protect unemployed Americans from the threat of competition for scarce jobs from new lawful permanent residents," and that "the United States faces a potentially protracted economic recovery with persistently high unemployment if labor supply outpaces labor demand."
- 5. Both Proclamations suffer from two fatal flaws. First, in seeking to restrict most immigration to the United States while a pandemic grips the entire globe, the Proclamations are ringing a fire alarm when there is, effectively, no fire. Although the Proclamations highlight "the impact of foreign workers on the United States labor market," the Proclamations ignore that immigration naturally declines during a recession, such as the one caused by the COVID-19 pandemic. When the United States experiences a recession, immigration slows because the

¹ For example, immigration slowed during the Great Recession. *See* Alan Berube, *Is Immigration Down in the U.S.?*, The New Republic, Sept. 22, 2009,

https://newrepublic.com/article/69596/immigration-down-the-us; Carol Morello & Dan Keating, *Number of Foreign-Born U.S. Residents Drops*, Wash. Post, Sept. 22, 2009,

https://www.washingtonpost.com/wp-dyn/content/article/2009/09/21/AR2009092103251.html; Demetrios Papademetriou & Aaron Terrazas, *Immigrants in the United States and the Current Economic Crisis*, Migration Policy Institute, (Apr. 1, 2009),

https://www.migrationpolicy.org/article/immigrants-united-states-and-current-economic-crisis; *accord* Pia Orrenius and Chloe Smith, *Without Immigration, U.S. Economy Will Struggle to Grow*, Federal Reserve Bank of Dallas, (April 9, 2020),

https://www.dallasfed.org/research/economics/2020/0409 (noting that "net international

number of jobs decreases and a significant benefit of immigrating to the United States evaporates for many immigrants. Consulate closures and travel restrictions imposed by many foreign governments and airlines in response to the COVID-19 pandemic have further served to prevent many immigrants from entering the United States. The State Department's data on immigrant visa issuance shows that even without the Proclamations in place, immigration to the United States has declined significantly: in March 2020, the State Department issued only 24,383 immigrant visas, compared to 37,618 immigrant visas issued in March 2019, or a 35 percent decrease.² In April 2020, which had normal visa processing for all but a week after the April Proclamation took effect at 11:59 pm ET on April 23, the State Department issued only 1,521 visas, compared to 38, 573 visas issued in April 2020—a 97 percent decrease, reflecting how severely the entire globe shut down in response to the COVID-19 pandemic.³ There are comparable declines for nonimmigrant visas.⁴

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migration fell by more than 40 percent between 2001 and 2010, a period that spanned two recessions"); Andrés Villareal, *Explaining the Decline in Mexico-U.S. Migration: The Effect of the Great Recession*, 51 DEMOGRAPHY 2203 (2014) (finding a decline in Mexico-U.S. migration from 2005 to 2012, with the largest declines occurring in economically active young men with low education, the demographic most affected by the Great Recession). /

² U.S. Dep't of State, *Immigrant Visa Issuances By Foreign State of Chargeability or Place of Birth, March 2019 (FY2019)*, https://tinyurl.com/yxz4f8cn; U.S. Dep't of State, *Immigrant Visa Issuances By Foreign State of Chargeability or Place of Birth, March 2020 (FY2020)*, https://tinyurl.com/y6fgvg6m.

³ U.S. Dep't of State, *Immigrant Visa Issuances By Foreign State of Chargeability or Place of Birth, April* 2019 (FY2019), https://tinyurl.com/y6ejte9l; U.S. Dep't of State, *Immigrant Visa Issuances By Foreign State of Chargeability or Place of Birth, April* 2020 (FY2020), https://tinyurl.com/yymyspkf.

⁴ U.S. Dep't of State, *Nonimmigrant Visa Issuances Nationality, March 2019 (FY2019)*, https://tinyurl.com/y4emq473; U.S. Dep't of State, *Nonimmigrant Visa Issuances Nationality, March 2020 (FY2020)*, https://tinyurl.com/yxv55rue; U.S. Dep't of State, *Nonimmigrant Visa Issuances Nationality, April 2019 (FY2019)*, https://tinyurl.com/yxr9s682; U.S. Dep't of State, *Nonimmigrant Visa Issuances Nationality, April 2020 (FY2020)*, https://tinyurl.com/yykhfkfo.

- 6. The Proclamations are therefore imposing immigration restrictions when none is actually necessary. Immigration has already decreased on its own, without changes in the United States' immigration policies. The problem, however, is that these restrictions will prevent immigration from rebounding when the worst of the pandemic has passed and an increase in immigration and the resulting growth in population would provide economic stimulus, as discussed in further detail below. In addition, workers banned from coming to the United States and prevented from taking job offers here may instead move permanently to another country, depriving the United States of their contributions. The short-term effects and benefits of the Proclamations are almost certainly near zero but once the pandemic starts receding, the longer-term effects of the Proclamation's immigration restrictions will almost certainly harm the country's economic recovery.
- 7. Second, both Proclamations rest on the false assumption that immigrants pose a threat to job opportunities for U.S. workers. Although this assumption often surfaces among immigration restrictionists as a justification for limiting immigration to the United States, the notion that inflows of immigrants threaten domestic jobs and the nation's economy has been thoroughly debunked by decades of established, peer-reviewed economic research. The Proclamations therefore rely on a faulty premise—that immigrants harm United States workers—to justify policies that will, in practice, actually harm the workers those policies are supposed to protect.
- 8. Indeed, in 2017, the National Academies of Sciences, Engineering, and Medicine ("NAS") published an exhaustive, 642-page Consensus Study Report entitled "The Economic and Fiscal Consequences of Immigration" (the "NAS Report"). The NAS Report, the product of three years of research and deliberation, represents the consensus of a panel of fourteen established, respected economists and sociologists across the policy and political spectrum, including myself, as well as "immigration sceptics" who favor immigration restriction, such as George Borjas. The report's

unanimous conclusion was that *immigration increases economic growth while having no negative impact on native employment and little or no impact on average native wages.*⁵ As a member of the expert panel that produced the NAS Report, I agree with its findings.

9. Importantly, it is the consensus of the NAS panel of experts that the inflow of foreign-born workers, through either non-immigrant or immigrant visas, is integral to the nation's economic growth.⁶ Such inflows supply workers, which increases GDP and have helped the United States avoid the problems facing stagnant economies created by purely demographic forces—in particular, an aging (and, in the case of Japan, a shrinking) workforce.⁷

10. Moreover, the infusion by high-skilled immigration of human capital has boosted the nation's capacity for innovation, entrepreneurship, and technological change. My own research has shown that a one percentage point increase in the immigrant college graduates' population share increased patents per capita by 9 to 18 percent. The NAS Report credited this research, as well as multiple other papers, for its conclusion that immigrants raise patenting per capita, which ultimately contributes to productivity growth. Indeed, a survey of 1,300 "High-impact"

⁵ The Nat'l Acad. Of Scis., Eng'g., and Med., *The Economic and Fiscal Consequences of Immigration* 5-6 (The National Academies Press 2017), https://doi.org/10.17226/23550.

⁶ *Id.* at 317.

⁷ *Id.* at 6.

⁸ *Id*.

⁹ Jennifer Hunt and Marjolaine Gauthier-Loiselle, *How Much Does Immigration Boost Innovation*?, 2 Am. Econ. J. 31, 31-56 (2010).

¹⁰ The Nat'l Acad. Of Scis., Eng'g., and Med., *supra* note 1, at 264-269; *see also* William Kerr & William F. Lincoln, *The Supply Side of Innovation: H-1B Visa Reforms and U.S. Ethnic Invention*, 28 J. of Labor Econ. 473, 473-508 (2010); Jennifer Hunt, *Which immigrants are most innovative and entrepreneurial? Distinctions by entry visa*, 29 J. of Labor Econ. 417(2011), https://www.journals.uchicago.edu/doi/abs/10.1086/659409.

technology firms and 2,000 founders across the United States reveals that 16 percent of firms have at least one immigrant founder;¹¹ immigrants have started 25 percent of new high tech companies with more than \$1 million in sales in 2006;¹² and immigrants represented 25 percent of founders of recent public venture-backed companies.¹³

11. The NAS Report therefore found that the contribution of immigrants to human and physical capital formation, entrepreneurship, and innovation play an important role in economic growth. Innovation carried out by immigrants also has the potential to increase the productivity of nativeborn workers, raising economic growth per capita. In short, the prospects for economic growth in the United States would be considerably dimmed without the contributions of high-skilled immigrants.¹⁴

12. The positive impact of immigrants is partly due to the fact that foreign workers in the visa categories are carefully selected and sponsored by their United States employers, who have committed to sponsoring workers who have proven themselves to be the best candidate for the job. Sponsoring a worker in any visa category, for an immigrant or non-immigrant visa, is an expensive and time-consuming endeavor, one that businesses undertake only after extensive cost-benefit

¹¹ David M. Hart, Zoltan J. Acs, & Spencer Tracy, *High-technology immigrant entrepreneurship in the U.S.*, 25 Econ. Dev. Q. 116 (2011).

¹² Vivek Wadhwa, AnnaLee Saxenian, Ben Rissing, & Gary Gereffi, U.C. Berkeley School of Information, *America's New Immigrant Entrepreneurs* (May 2016), http://people.ischool.berkeley.edu/~anno/Papers/Americas_new_immigrant_entrepreneurs_I.pdf.

¹³ Stuart Anderson and Michaela Platzer, National Venture Capital Association, *American Made: The Impact of Immigrant Entrepreneurs and Professionals on U.S. Competitiveness* (Feb. 2006), http://www.contentfirst.com/AmericanMade study.pdf.

¹⁴ The Nat'l Acad. Of Scis., Eng'g., and Med., *supra* note 1, at 317.

evaluations. This is true for visa programs for both highly skilled and lesser-skilled foreign-born workers.

13. The damage from freezing entries on H-1B visas is particularly clear. H-1B workers are largely concentrated in computer science, engineering, and science—areas that are fundamental drivers of economic growth.¹⁵ They file patents at nearly double the rate of native-born United States workers.¹⁶ Top scholars from around the world join the faculty of American universities on H-1B visas. And as more of us continue to work remotely, whether by choice or necessity, H-1Bs workers' contribution to filling the jobs that support and power online platforms takes on an even greater urgency, reflected in the unemployment rate of only 4.3 percent in computer occupations in June, compared to an overall unemployment rate of 11.2 for the country generally.¹⁷

14. Workers with L-1 intracompany transferee visas are also likely to be particularly productive because they are already working for the company that will employ them in the United States: the employer is in the best position to know how well an existing employee will fit an open job and maximize the employee's economic contribution. L-1 workers are professional, skilled workers whose United States roles require hard-earned, specialized understanding of their company's business operations and products.

¹⁵ The Nat'l Acad. Of Scis., Eng'g., and Med., *supra* note 1, at 249; see also Jones, C. (2002). Sources of U.S. economic growth in a world of ideas. *American Economic Review*, 92(1), 220-239.

¹⁶ Hunt, *supra* note 10.

¹⁷ U.S. Bureau of Labor Statistics, *Labor Force Statistics from the Current Population Survey*, (July 2, 2020), https://www.bls.gov/web/empsit/cpseea30.htm.

15. Less-skilled workers, such as those who would enter on H-2B visas, also contribute to the American economy by diversifying the skills of the workforce and thus increasing specialization and productivity. Most less-educated, less-skilled immigrants have do not have the language and communication skills of native-born workers. Their arrival therefore leads native-born workers in occupations favored by such immigrants to move into more language and communication-intensive occupations, mitigating negative wage effects and increasing the degree to which workers specialize in what they do best. Native-born workers in certain other occupations are complementary to less-skilled immigrant workers, because the skills of the different worker types must be combined to produce a good or service. This means that demand for native-born workers in these occupations increases with the arrival of low-skilled immigrants, and consequently their wage does too.

16. Suspending the entry of foreign workers on non-immigrant and immigrant visas, even as a temporary response to COVID-19 concerns, is a misguided move. There is simply no economic or evidentiary basis for the assertions in the Proclamations about foreign workers "pos[ing] a risk of displacing and disadvantaging United States workers." And banning hundreds of thousands of foreign workers hand-picked by their United States employers will not result in an equal number of job opportunities for United States workers. It will neither protect the American workforce nor jumpstart the economy.

17. Instead, the Proclamations will prevent immigration—and thus, the economy—from rebounding when the worst of Covid-19 has passed and increased population would provide

¹⁸ See Giovanni Peri & Chad Sparber, *Task Specialization, Immigration, and Wages*, 1 Am. Econ. J.: Applied Econ. 135 (2009),

 $http://giovanniperi.ucdavis.edu/uploads/5/6/8/2/56826033/peri_sparber_task_specialization_immigration_2010.pdf.$

economic stimulus. The Proclamations thus undermine their asserted goal of protecting the United States labor market and post-coronavirus economic recovery.

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct. Executed on July 30, 2020 at Sydney, Australia.

Jennifer Hunt

IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF COLUMBIA

DOMINGO ARREGUIN GOMEZ, et al.,

Plaintiffs,

v.

Civil Action No. 1:20-cv-01419

DONALD J. TRUMP, President of the United States of America, et al.,

Defendants.

DECLARATION OF LEIGHTON KU

- I, Leighton Ku, declare pursuant to 28 U.S.C. § 1746 that the following is true and correct:
- 1. My name is Leighton Ku. I have personal knowledge of and could testify in Court concerning the following statements of fact.
- 2. I am a Professor of Health Policy and Management and Director of the Center for Health Policy Research at the Milken Institute School of Public Health, George Washington University in Washington, DC. I have attached my Curriculum Vitae as Exhibit A to this Declaration.
- 3. I am a nationally-known health policy researcher with over 25 years of experience. I have conducted substantial research about immigrant health, and health care and costs. I have authored or co-authored more than a dozen articles and reports about immigrant health issues, including articles in peer-reviewed journals such as Health Affairs and American Journal of Public Health, as well as scholarly reports published by diverse non-profit organizations including the Social Science Research Network, the Migration Policy Institute, the Cato Institute and the Commonwealth Fund, as well as many more articles and reports on other subjects. I have testified before the U.S. Senate Finance Committee about immigrant health issues and provided analyses

and advice to state governments and non-governmental organizations in many states about immigrant health.

- 4. I have expertise in health and public policy and in quantitative data analysis. I have conducted quantitative analyses for most of my career, including analyses for a federal agency, two think tanks and now at a university. I have taught statistical analysis and research methods at the graduate school level for over 25 years, training hundreds of graduate students. I have authored or co-authored more than 90 papers in peer-reviewed journals and hundreds of other reports, most of which were quantitative analyses. I have consulted with the Congressional Budget Office and numerous federal and state agencies.
- 5. I provided expert declarations about the effects of terminating Deferred Action for Childhood Arrivals on health insurance coverage and states in *State of New York, et al. v Trump, et al.*¹ in November 2017 and in *State of Texas v. United States, et al. and Karla Perez, et al.* in June 2018. In September 2019, I provided three versions of an expert declaration regarding public health effects of the Department of Homeland Security's "public charge" rule in *La Clinica de la Raza, et al. v Donald Trump, et al.*, in the U.S. District Court, Northern District of California, *Make the Road, et al. v Kenneth Cucinelli, et al.* and in *State of New York, et al. v U.S. Department of Homeland Security* in the U.S. District Court, Southern District of New York. In May 2020, I provided an expert declaration on the impact of paid leave amid the coronavirus pandemic in *State*

¹ Declaration of Leighton Ku in *State of New York, et al. v Donald Trump, et al.* in U.S. District Court for the Eastern District of New York, Nov. 22, 2017.

² Declaration of Leighton Ku in *State of Texas v. United States of America, et al. and Karla Perez, et al., Defendant-Intervenor* in U.S. District Court for the Southern District of Texas, Brownsville Division, June 14, 2018.

of New York v. U.S. Dep't of Labor, et al.³ I have not provided testimony in any other court cases in the past four years.

- 6. I also have knowledge of health insurance and employment through my role as a voluntary (unpaid, appointed) Executive Board member for the District of Columbia's Health Benefits Exchange Authority, which governs the District's health insurance marketplace, formed under the federal ACA. This includes oversight of health insurance for small businesses as well as individual health insurance in the District of Columbia.
- 7. I have a PhD. in Health Policy from Boston University (1990) and Master of Public Health and Master of Science degrees from the University of California at Berkeley (1979). Prior to becoming a faculty member at George Washington University, I was on the staff of the Urban Institute and the Center on Budget and Policy Priorities.
- 8. I have been engaged by counsel for the Plaintiffs in this case to evaluate public health issues regarding Presidential Proclamation No. 10014 of April 22, 2020, *Proclamation Suspending Entry of Immigrants Who Present Risk to the U.S. Labor Market During the Economic Recovery Following the COVID-19 Outbreak* ("April Proclamation"), which was subsequently extended by Presidential Proclamation No. 10052 of June 22, 2020, *Proclamation Suspending Entry of Aliens Who Present a Risk to the U.S. Labor Market Following the Coronavirus Outbreak* ("June Proclamation"). The June Proclamation was subsequently amended by another Presidential Proclamation on June 29, 2020, *Proclamation on Amendment to Proclamation 10052*.

³ Declaration of Leighton Ku in *State of New York v. U.S. Dep't of Labor et al.* in U.S. District Court for the Eastern District of New York, May 5, 2020.

Summary

9. The April Proclamation, in suspending the entry of most immigrants to the United States, states that such a suspension is necessary in part because "introducing additional permanent residents when our healthcare resources are limited puts strain on the finite limits of our healthcare system at a time when we need to prioritize Americans and the existing immigrant population." Briefly, my research indicates that there is no data supporting this assertion. In fact, there is ample evidence that medical care utilization dropped sharply across the country beginning this spring. There is also compelling evidence that recent immigrants tend to use far fewer medical and health care resources than native-born residents. It is therefore doubtful that they pose a serious strain on health care in most areas and, to the extent they use health care, they may actually strengthen the financial status of many health care providers. The Proclamation will limit the ability of immigrant physicians and health professionals, who constitute a large—share of U.S. health professionals, to enter the nation to provide care for American patients in the United States. This could impair the availability of health care to many needy Americans.

Overview of the April and June Proclamations

- 10. The April Proclamation suspended the entry of most individuals seeking immigrant visas from abroad, including all family-based, employment-based, and diversity-based immigrant visas, for sixty days.
- 11. One of the April Proclamation's reasons for the suspension was an assertion that "introducing additional permanent residents when our healthcare resources are limited puts strain on the finite limits of our healthcare system at a time when we need to prioritize Americans and the existing immigrant population."

12. I found that the April Proclamation does not provide any evidence supporting the claim that new permanent residents place a serious strain on the nation's healthcare system.

13. The April Proclamation was set to expire by its own terms on June 22, 2020. On that same day, the President signed the June Proclamation, which amended the April Proclamation so that its entry suspension on immigrants would not expire until December 31, 2020, "and may be continued as necessary."

The Weak Basis for the April Proclamation's Healthcare Justification and the Lack of Analysis

14. The evidence refutes the notion that new permanent residents put "strain" on the United States healthcare system.

15. Most areas of the United States have had and continue to have an ample supply of medical care. This was true both when the President signed the April and June Proclamations and now, despite rising numbers of documented coronavirus cases across the country. In fact, most doctors' offices and hospitals are having serious problems because there has been a substantial *decline* in health care use in recent months during the COVID pandemic. Doctors want and need more medical patients to help make up for those losses. For example, one recent analysis noted that doctors' offices experienced as much as a 60% reduction in office visits in the first few months of the pandemic and hospitals expected to lose more than \$300 billion in 2020.⁴ While some areas of the country, such as Florida, Texas, Southern California and Arizona, have experienced increases in hospital admissions due to COVID-19 in late June and early July, the Centers for Disease Control and Prevention reported that, as of July 13, 2020, 63 percent of the nation's

⁴ David Blumenthal , Elizabeth J. Fowler , Melinda Abrams & Sara R. Collins, *Covid-19 — Implications for the Health Care System*, New Eng. J. of Med., July 22, 2020, https://www.nejm.org/doi/full/10.1056/NEJMsb2021088.

hospital beds were occupied and only 8 percent involved COVID-19 patients; the country's hospitals have significant additional patient care capacity.⁵ This is slightly below the average hospital occupancy rate of prior years. In the overwhelming majority of states, the number of patients hospitalized due to COVID-19 has fallen since April thru mid-July.⁶

16. I am not aware of any evidence that recent surges of COVID-19 infections were caused by infections being brought into the country by new permanent residents being allowed into the United States, the group sanctioned by the Presidential Proclamations. For many years, even before the proclamation was announced, new immigrants have been required to undergo a medical screening before they are admitted to the United States, and can be found inadmissible if they are found to "have a communicable disease of public health significance," such as COVID-19. (8 U.S.C. § 1182(a)(1)(A).)

17. Regrettably, Latinos, as well as African-Americans, have been infected with COVID-19 at higher rates than white non-Hispanic Americans. The Centers for Disease Control and Prevention has identified a number of factors that place minority populations at risk for higher infection: (a) discrimination, (b) limited health care access, (c) occupational differences (*e.g.*, working in lowwage essential jobs that expose them to the public, as compared to those who can work from home), (d) educational, income and wealth gaps, and (e) crowded housing.⁷ Immigration status is

⁵ Centers for Disease Control and Prevention, *Current Hospital Capacity Estimates – Snapshot*, https://www.cdc.gov/nhsn/covid19/report-patient-impact.html#anchor_1594392704 (last reviewed July 16, 2020).

⁶ Ctrs. for Disease Control and Prevention, *Percentage of Inpatient Beds Occupied by COVID-19 Patients – Change in 14 Day Period*, https://www.cdc.gov/nhsn/covid19/report-14day-change.html (last reviewed July 16, 2020).

⁷ Ctrs. for Disease Control and Prevention, *Health Equity Considerations and Racial and Ethnic Minority Groups*, https://www.cdc.gov/coronavirus/2019-ncov/community/health-equity/race-

not one of the major risk factors enumerated by CDC, although many immigrants have one or more of those risk factors too. I am not aware of any evidence that new permanent residents often bring COVID-19 into the U.S. with them.

18. Furthermore, there is no evidence that care for new permanent residents pose a serious strain on American health care resources. My analyses, described below, show that recent immigrants use a very small portion of total U.S. medical resources and do not pose a serious additional burden to the U.S. health care system. I examined data about adults 18 to 64 years old from the most recent data available on this subject, the 2017 Medical Expenditure Panel Survey (MEPS), conducted by the federal Agency for Healthcare Research and Quality. The MEPS survey is a nationally representative survey of the U.S. population about the use and cost of medical care; it is widely used by the Congressional Budget Office, Department of Health and Human Services and others to monitor health care use and costs.

19. The MEPS survey asks about care used by the overall U.S. population, including immigrants who entered the United States within the past five years, compared to those who are not recent immigrants (defined as those born in the United States and immigrants who have been here for longer than five years). MEPS does not provide further detail about legal status of surveyed individuals, so the recent immigrants captured in the survey include lawful permanent residents, naturalized citizens, those with temporary legal status, such as those with student or work visas, and undocumented immigrants. Recent permanent residents – the target of the Presidential Proclamations – should be a small share of the recent immigrants. As seen in Table

ethnicity.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fneed-extra-precautions%2Fracial-ethnic-minorities.html (last updated July 24, 2020).

1, immigrants who have been in the US for under five years are 1.3% of all the nonelderly adults in the nation.

20.

Table 1. Recent Immigrants (within Past 5 Years) as a Share of U.S. Population

	% Total
	Population
Not Recent Immigrant	98.7%
Recent Immigrant	1.3%

Source: Analysis of 2017 Medical Expenditure Panel Survey

21. The MEPS survey also shows that immigrants use relatively little medical care; their average medical expenditures per person are generally less than half the medical expenditures of those who are not recent immigrants, as seen in Table 2.

Table 2. Average Annual Medical Expenditures Per Person, 2017

	Average Medical I	Expenditures pe	r Person	
	Total Annual Expenditures	Inpatient Hospital	Emergency Department	Other Ambulatory Care
Not Recent Immigrant	\$4,728	\$1,022	\$214	\$1,328
Recent Immigrant	\$2,102	\$449	\$145	\$833

Source: Analysis of 2017 Medical Expenditure Panel Survey

22. When we combine the share of people who are recent immigrants (or not) with their average per person expenditures, we can compute the total share of U.S. medical expenditures that can be attributed to use by recent immigrants. As seen in Table 3, overall recent immigrants are responsible for 0.6 percent of total American medical expenses and less than 1 percent of various components of medical costs, such as inpatient hospital care, emergency department care and other ambulatory care (i.e., regular doctors' office and clinic care). If the data allowed me to further confine the analysis to recent permanent residents – the group that would be denied entry by the

President's Proclamations – the share of medical costs attributable to such individuals would be much smaller, just a fraction of the levels shown in Table 3. That is, the care provided to these immigrants does not pose any appreciable strain on American health care resources/

Table 3. Share of Total U.S. Medical Expenditures for Recent Immigrants, 2017

	Share of Total	US Medical	Expenditures	
	Total Annual Expenditures	Inpatient Hospital	Emergency Department	Other Ambulatory Care
Not Recent Immigrant	99.4%	99.4%	99.1%	99.2%
Recent Immigrant	0.6%	0.6%	0.9%	0.8%

Source: Analysis of 2017 Medical Expenditure Panel Survey

23. In summary, there is no evidentiary basis for the President's claim that newly arriving immigrants will strain the nation's healthcare system and prevent residents already here from receiving adequate care. The Administration has failed to provide evidence that it adequately developed analyses supporting its stated policy rationale.

The Proclamations Might Actually Harm Access to Health Care

24. The Presidential Proclamations could reduce access to health care for American citizens, particularly when taken in conjunction with other with other immigrant restriction policies supported by the Administration. It is important to recognize that about 28 percent of all physicians in the US are foreign-born immigrants, as are 26 percent of dentists, 16 percent of registered nurses 38 percent of home health aides, and many other health professionals.⁸ If the proclamation and related Administration policies limit the ability of immigrant health care

⁸ Jeanne Batalova, *Immigrant Health-Care Workers in the United States in 2018*, Migration Policy Institute (May 14, 2020). https://www.migrationpolicy.org/article/immigrant-health-careworkers-united-states-2018.

professionals to enter the US or simply discourages many from seeking to move here, there will be fewer immigrant health professionals available to care for many Americans. Immigrant health professionals often practice in underserved areas, including both inner cities and rural areas, or care for underserved populations where there is an inadequate supply of physicians or other health professionals. One report, for example, found that 20 million Americans live in communities where more than half of the doctors are immigrants.⁹

25. Signs already exist that fewer immigrants want to practice in the United States. For example, in order to become licensed to practice, immigrant physicians trained in medical schools outside the U.S. must first be certified by the Educational Commission for Foreign Medical Graduates (ECFMG) as having a medical knowledge that meets standards equivalent to US medical schools; only then can they apply for a American medical residency program that eventually permits licensure to practice medicine. (This standard also applies to Americans trained in non-US medical schools, such as medical schools in the Caribbean, but here we are only discussing foreign-born foreign medical graduates.) Although the total number of applicants for medical residencies have been rising in recent years, ECFMG data show that the number of immigrant physicians trained outside the US who applied for residencies fell by 6 percent (more

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⁹ American Immigration Council, Foreign-Trained Doctors are Critical to Serving Many U.S. Communities (Jan. 2018).

https://www.americanimmigrationcouncil.org/sites/default/files/research/foreign-trained_doctors_are_critical_to_serving_many_us_communities.pdf.

than 400) between 2017 and 2019.¹⁰ Anecdotal news reports cite the frustrations of immigrant physicians who feel recent policies are trying to drive them away.¹¹

26. The April and June proclamations appears to offer certain exemptions for health care personnel, but they are actually quite narrow. The exception in April Proclamation is limited to those who would perform research or other work related to COVID-19. There is no exception for healthcare professionals who would perform research and provide care in numerous other medical fields and specialties that are critical for public health. In the June proclamation, Section 4(a)(i) authorizes the Secretaries of State, Labor, and Homeland Security to "establish standards to define categories of aliens covered by section 3(b)(iv) of this proclamation, including those that: . . . are involved with the provision of medical care to individuals who have contracted COVID-19 and are currently hospitalized; [or] are involved with the provision of medical research at United States facilities to help the United States combat COVID-19." This exemption is also narrow and appears to apply only to those directly caring for COVID-19 patients in hospitals, not other patients. It may not be easy to define this group. For example, it is not necessarily clear if immigrant physicians coming to attend medical residency training will provide care for COVID-19 patients in hospitals as part of that training or if they are viewed as essential to that care. Other health care professionals, like nurses, dentists, or home health aides, appear to not quality for exemptions if they do not care for hospitalized patients and therefore are rejected from gaining permanent

¹⁰ Educational Commission for Foreign Medical Graduates. *ECFMG Fact Card* (2019) https://www.ecfmg.org/forms/factcard.pdf.

¹¹ Catherine Rampell. *It appears the Trump administration is doing all it can to drive away health professionals*, Wash. Post, April 23, 2020, https://www.washingtonpost.com/opinions/youd-think-trump-welcome-foreign-born-health-care-workers-right-now-youd-bewrong/2020/04/23/ed9bfb32-859f-11ea-ae26-989cfce1c7c7_story.html.

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residency. Thus, it is likely that trained physicians and other health professionals are already

experiencing problems getting visas that will enable them to provide care to American patients.

The Presidential Proclamations could have a harmful long-term effect on the ability or willingness

of immigrant health professionals to provide health care in the US. This would, in turn, have

negative long-term consequences for the United States healthcare system and the supply of labor

and talent necessary to provide health care for the country's population.

I hereby declare under penalty of perjury under the laws of Washington D.C. and the United

States that the foregoing is true and correct.

DATE: July 29, 2020

Leighton Ku, Ph.D., MPH

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Summary

Leighton Ku, PhD, MPH, is a professor of health policy and management at the George Washington University (GW). He is a nationally known health policy and health services scholar with more than 25 years of experience. He has examined topics such as national and state health reforms, access to care for low-income populations, Medicaid, preventive services, the health care safety net, cost and benefits of health services, and immigrant health. He has authored or co-authored more than 90 peer-reviewed articles and 200 policy briefs and other translational reports. He directs the Center for Health Policy Research, a multidisciplinary research center, which includes physicians, attorneys, economists, health management and policy experts and others, with more than 20 faculty and dozens of staff; it has a research portfolio in excess of \$25 million. He has been principal investigator for a large number of studies with support from the National Institutes of Health, Centers for Disease Control and Prevention, Centers for Medicare and Medicaid Services, the Commonwealth Fund and Robert Wood Johnson Foundation, and other sources. In the course of his career at GW, the Center on Budget and Policy Priorities and the Urban Institute, he has worked with federal and state executive and legislative agencies, health care organizations, advocates and others in research, technical assistance, strategic advice and advocacy. As a faculty, he has taught research methods and policy analysis at the graduate level for more than 25 years and guided numerous students through dissertations and other research. As a member of his community, he helped establish and guide the District of Columbia's Health Benefits Exchange Authority as a founding member of its Executive Board.

Education

1990	Ph.D., Health Policy, Boston University (Pew Health Policy Fellow in a joint program of
	Boston University and Brandeis University)
1979	M.P.H., Public Health, University of California, Berkeley
1979	M.S., Nutritional Sciences, University of California, Berkeley
1975	A.B. (honors), Biochemistry, Harvard College

Professional Background

2015 – present	Co-Director, PhD Health Policy Program. First at GW Trachtenberg School of Public Policy and Administration, now at Milken Institute School of Public Health.
2012 - present	Executive Board, District of Columbia Health Benefit Exchange Authority (voluntary position).
2008 - present	Director, Center for Health Policy Research, The George Washington University

2008 - present	Professor of Health Policy and Management (with tenure), Department of Health Policy and Management, Milken Institute School of Public Health, The George Washington University.
2015- 2016	Interim Chair, Department of Health Policy and Management
2000 - 2008	Senior Fellow, Center on Budget and Policy Priorities, Washington, DC
1992 - present	Professor in Public Policy and Public Administration, Trachtenberg School of Public Policy and Administration, The George Washington University. Secondary appointment. Began as Associate Professorial Lecturer.
1990 - 2000	Principal Research Associate. The Urban Institute, Washington, DC. Began as Research Associate I.
1989 - 1990	Research Manager, SysteMetrics/McGraw-Hill, Cambridge, MA.
1987 - 1989	Pew Health Policy Fellow, Health Policy Institute, Boston University and the Heller School, Brandeis University
1980 - 1987	Program Analyst, Office of Analysis and Evaluation and Supplemental Food Programs Division, Food and Nutrition Service, U.S. Dept. of Agriculture, Alexandria, VA and Washington, DC.
1975 - 1976	Registered Emergency Medical Technician, Dept. of Health and Hospitals, Boston, MA

<u>Publications Authored or Co-authored in Peer-Reviewed Journals</u>

[Aggregate measures of scholarly productivity: H-index = 47, I10-index = 125 (according to Google Scholar as of July 29, 2020]

Ku L, Brantley E. Conducting Evaluation Research for Policy and Legal Analysis in a Turbulent Policy Environment: The Example of Medicaid and SNAP Work Requirements. Forthcoming, <u>Sage Research Methods Cases: Medicine and Health</u>, June 25, 2020. <u>doi.org/10.4135/9781529743746</u> [username srmc_240620 password cases2020]

Brantley E, Pillai D, Ku L. Associations of Work Requirements and Supplemental Nutrition Assistance Program Participation by Race/Ethnicity and Disability Status, 2013-2017. <u>JAMA Network Open</u>, Jun. 26, 2020. 2020; 3(6):e205824. doi:10.1001/jamanetworkopen.2020.5824,

Brantley E, Ku L. The Consolidation of Primary Care Practices and the Implications for Medicaid and Uninsured Patients. Submitted for publication.

Ku L, Han X, Chen C, Vujicic M. Dental Education and Other Factors Associated with Medicaid Pediatric Dental Participation. Submitted for publication.

Han X, Ku L. Enhancing Staffing in Rural Community Health Centers Can Improve Behavioral Health Care. Health Affairs. 2019 Dec.; 38(12): 2061-68.

Wang X, Babb S, Xu X, Ku L, Glover-Kudon R, Armour B. Use of Cessation Treatments is Low among Medicaid Smokers Who Try to Quit. Submitted for publication.

Ku L, Brantley E, Pillai D. The Effect of Work Requirements on SNAP Enrollment and Benefits from 2013 to 2017. <u>American Journal of Public Health.</u> 2019 Oct.; 109(10): 1446-1451. https://ajph.aphapublications.org/doi/pdf/10.2105/AJPH.2019.305232

Behn M, Pace L, Ku L. The Trump Administration's Final Regulations Limit Insurance Coverage of Contraception. <u>Women's Health Issues</u>. 2019 Jan 7. p: S1049-3867. https://doi.org/10.1016/j.whi.2018.12.003

Han X, Pittman P, Erickson C, Mullan F, Ku L. Effect of the National Health Service Corps on Clinician Staffing and Patient Visits in Federally Qualified Health Centers. <u>Medical Care.</u> 2019 Dec, 57(12): 1002-7. 2019. DOI: 10.1097/MLR.0000000000001209.

Bruen BK, Ku L. The Effects of Community Health Center Care on Medical Expenditures for Children and Adults: Propensity Score Analyses. <u>Journal of Ambulatory Care Management</u>, 2019; 42(2): 128-37. https://journals.lww.com/ambulatorycaremanagement/Fulltext/2019/04000/The_Effects_of_Community_Health_Center_Care_on.8.aspx

Lantz P, Miller G, Ryhan C, Rosenbaum S, Ku L, Iovan S. "Pay for Success" Financing and Home-Based Multicomponent Childhood Asthma Interventions: Modeling Results from the Detroit Medicaid Population. <u>Milbank Quarterly</u>. 2018; 96(2): 272-99.

Brantley E, Greene J, Bruen B, Steinmetz E, Ku L. Policies Affecting Medicaid Beneficiaries' Smoking Cessation Behaviors. <u>Nicotine & Tobacco Research</u>, 2018. 21(4): 197-204.

Holla N, Brantley E, Ku L. Physicians' Recommendations to Medicaid Patients about Tobacco Cessation. <u>American Journal of Preventive Medicine</u>, Dec. 2018. 55(6): 762–769.

Ku L, Steinmetz E, Bysshe T, Bruen B. Crossing Boundaries: Medicaid and Public Health Collaborations to Help Smokers Quit, <u>Public Health Reports</u>, 2017 Feb, Vol. 132(2) 164-170.

Han X, Luo Q, Ku L. Medicaid Expansions and Increases in Grant Funding Increased the Capacity of Community Health Centers, <u>Health Affairs</u>, 2017 Jan.; 36 (1):49-56.

Lantz P, Rosenbaum S, Ku L, Iovan S. Pay for Success Initiatives in the U.S.: Potential and Challenges as a Strategy for Population Health Improvement, Health Affairs, 2016 Nov; 35:2053-2061

Pittman P, Masselink L, Bade L, Frogner B, Ku L. Determining Medical Staff Configurations in Community Health Centers: CEO Perspectives. <u>Journal of Healthcare Management</u>, 61(5): 364-77, Sept./Oct 2016.

Frogner B, Pittman P, Masselink L, Ku L. Do Years of Experience with EHRs Matter for Productivity in Community Health Centers? <u>Journal of Ambulatory Care Management</u>. 2017 Jan/Mar; 40(1): 36-47.

Ku L, Brantley E, Bysshe T, Steinmetz E, Bruen B. How Medicaid and Other Public Policies Affect Utilization of Tobacco Cessation. <u>Preventing Chronic Diseases</u>, 2016 Oct;13:160234. DOI: http://dx.doi.org/10.5888/pcd13.160234.2016.

Labarthe D. Goldstein L, Antman E, Arnett D, Fonarow G, Alberts M, Hayman L, Khera A, Sallis J, Daniels S, Sacco R, Li S, Ku L, Lantz P, Robinson J, Creager M, Van Horn L, Kris-Etherton P,

Bhatnagar A, Whitsel L. Evidence-Based Policy Making: Assessment of the American Heart Association's Strategic Policy Portfolio. <u>Circulation</u>, 2016 May 3; 133(18):e615-53.

Ku L. Letter: Treating Unhealthy Behaviors: The Author Replies. <u>Health Affairs</u>, 35(3):551, March 2016.

Bruen B, Steinmetz E, Bysshe T, Glassman P, Ku L. Care for Potentially Preventable Dental Conditions in Operating Rooms by Medicaid Children, <u>Journal of the American Dental Association</u>, 2016 Sept. :147(9):702-708 (cover story)

Ku L, Bysshe T, Steinmetz E, Bruen B. Health Reform, Medicaid Expansions and Women's Cancer Screening, Women's Health Issues, Feb. 2016. http://dx.doi.org/10.1016/j.whi.2016.01.0

August E, Steinmetz E, Gavin L, Rivera M, Pazol K, Moskosky S, Weik T, Ku L. Projecting the Unmet Need and Costs for Contraception Services after Health Care Reform, <u>American Journal of Public Health</u>. 106(2): 334–341, Feb. 2016. doi:10.2105/AJPH.2015.302928

Ku L Bruen B, Steinmetz E, Bysshe T. Medicaid Tobacco Cessation: Big Gaps Remain In Efforts To Get Smokers To Quit, Health Affairs, 35:62-70, Jan. 2016; doi:10.1377/hlthaff.2015.0756

Ku L. Capsule Commentary: Unauthorized Immigrants: Contributing to Medicare, But Left Out, <u>Journal of General Internal Medicine</u>, 31(1):100, Jan. 2016.

Ku L. Immigrants Face Barriers Both as Health Care Patients and Providers, <u>Harvard Health Policy Review</u>, 15(1):22-24, Fall 2015.

Jones E, Ku L. Sharing a Playbook: Integrated Care in Community Health Centers, <u>American Journal of Public Health.</u> 105(1). 2028-2034, October 2015, doi: 10.2105/AJPH.2015.302710

Jones E, Zur J, Rosenbaum S, Ku L. Opting Out of Medicaid Expansion: Impact on Encounters With Behavioral Health Specialty Staff in Community Health Centers. <u>Psychiatr Serv.</u> 2015 Dec 1;66(12):1277-82.

Zur J, Ku L. Factors Associated with Geographic Variation in Psychiatric Prescription Drug Expenditures among Medicaid Beneficiaries, <u>Journal of Behavioral Health Services & Research</u>, epub ahead of print July 24, 2015, doi: 10.1007/s11414-015-9471-x.

Ku L, Frogner B, Steinmetz E, Pittman P. Community Health Centers Use Diverse Staffing and Can Provide Lessons for Other Medical Practices, Health Affairs 34(1):95-103, Jan. 2015.

Jones E, Ku L, Smith S, Lardiere M. County Workforce, Reimbursement, and Organizational Factors Associated with Behavioral Health Capacity in Health Centers, <u>Journal of Behavior and Health Services Research</u>, 2014 Apr;41(2):125-39.

Bruen B, Ku L, Lu X, Shin P. No Evidence That Primary Care Physicians Offer Less Care To Medicaid, Community Health Center Or Uninsured Patients, <u>Health Affairs</u>, 32(9): 1624-30, Sept. 2013.

Ku L, Steinmetz E, Bruen, B. Continuous Eligibility Policies Stabilize Medicaid Coverage for Children and Could Be Extended to Adults with Similar Results, <u>Health Affairs</u>, 32(9): 1576-82, Sept. 2013.

Ku L, Sharac J, Bruen B, Thomas M, Norris L. Increased Use of Dental Services by Children Covered by Medicaid: 2000-2010 Medicare and Medicaid Research Review 3(3): E1-E12. July 2013. doi: http://dx.doi.org/10.5600/mmrr.003.03.b01

Levy A, Bruen B, Ku L. Health Care Reform and Women's Insurance Coverage for Breast and Cervical Cancer Screening. <u>Preventing Chronic Disease.</u> 9: 120069. Oct. 25, 2012. DOI: http://dx.doi.org/10.5888/pcd9.120069.

Levy A, Bruen B, Ku L. The Potential Employment Impact of Health Reform on Working-Age Adults With Disabilities, <u>Journal of Disability Studies</u>. 30 May 2012. DOI: 10.1177/1044207312446225

Willard R, Shah G, Leep C, Ku L. Impact of the 2008-2010 Economic Recession on Local Health Departments, <u>Journal of Public Health Management and Practice</u>, 18(2):106-114, Mar/Apr. 2012.

Richard P, West K, Ku L. The Return on Investment of a Medicaid Tobacco Cessation Program in Massachusetts <u>PLoS ONE</u>, 7(1): e29665, January 2012. doi: 10.1371/journal.pone.0029665. Available at http://www.plosone.org/article/info%3Adoi%2F10.1371%2Fjournal.pone.0029665

Rosenbaum S, Ku L, Lantz P, et al. Examining the Evidentiary Basis of Congress's Commerce Clause Power to Address Individuals' Health Insurance Status, <u>BNA's Health Care Policy Report</u>, Feb. 6, 2012, p 1-9.

Richard P, Ku L, Dor A, Tan E, Shin P, Rosenbaum S. Cost Savings Associated with the Use of Community Health Centers. Journal of Ambulatory Care Management, 35(1): 50-59. Jan-Mar. 2012.

Ku L, Jones E, Shin P, Burke FR, Long S. Safety-net providers after health care reform: lessons from Massachusetts Archives of Internal Medicine, 171(15): 1379-84, Aug. 8, 2011.

Bruen B, Ku L, Burke M, Buntin M. More Than Four in Five Office-Based Physicians Could Quality for Federal Electronic Health Record Incentives. <u>Health Affairs</u>, 30(3): 472-80, Mar. 2011.

Ku L, Jones K, Shin P, Bruen B, Hayes K. The States' Next Challenge — Securing Enough Primary Care for an Expanded Medicaid Population. <u>New England Journal of Medicine</u> 364(6):493-95, Feb. 10, 2011. Also supplementary appendix available at http://www.nejm.org/doi/suppl/10.1056/NEJMp1011623/suppl_file/nejmp1011623_appendix.pdf

Ku L Ready, Set, Plan, Implement. Executing Medicaid's Expansion. <u>Health Affairs</u>, 29(6): 1173-77, June 2010.

Ku L, Pervez F. Documenting Citizenship in Medicaid: The Struggle Between Ideology and Evidence, Journal of Health Politics, Policy and Law, 35(1): 5-28, February 2010.

Ku L. Medical and Dental Care Utilization and Expenditures Under Medicaid and Private Health Insurance, <u>Medical Care Research and Review</u>, 66(4):456-71, August 2009.

Ku L Health Insurance Coverage and Medical Expenditures for Immigrants and Native-Born Citizens in the United States, <u>American Journal of Public Health</u>, 99(7): 1322-28, July 2009.

Ku L, Broaddus M. Public and Private Health Insurance: Stacking Up the Costs, <u>Health Affairs</u>, 27(4):w318-327, June 2008. Also, Technical Appendix: Public and Private Health Insurance: Stacking Up the Costs, at http://content.healthaffairs.org/cgi/content/full/hlthaff.27.4.w318/DC2.

[Note between 2000 and 2008, I was working at the Center on Budget and Policy Priorities and was not principally working on refereed publications.]

Ku L Improving Health Insurance and Access to Care for Children in Immigrant Families, <u>Ambulatory Pediatrics</u>, 7(6):412-20, November 2007.

Ponce, N., Ku L, Cunningham W, Brown ER. Language Barriers to Health Care Access Among Medicare Beneficiaries, <u>Inquiry</u>, 43(1):66–76, Spring 2006.

Ku L, Flores G. Pay Now or Pay Later: Providing Interpreter Services In Health Care, <u>Health Affairs</u>, 24(2) 435-44, March/April 2005.

Park E, Ku L, Broaddus M, More Than 900,000 Children Will Lose Health Insurance Due to Reductions in Federal SCHIP Funding, <u>International Journal of Health Services</u>, 33(2), 2003.

Ku L. The Number of Americans Without Health Insurance Rose in 2001 and Appears to Be Continuing to Rise in 2002, <u>International Journal of Health Services</u>, 33(2), 2003.

Lessard G, Ku L. Gaps in Coverage for Children in Immigrant Families, <u>The Future of Children</u>, 13(1):101-115, Spring 2003.

Ku L, St. Louis M, Black C, Aral S, Turner C, Lindberg L, Sonenstein F. Risk Behaviors, Medical Care and Chlamydial Infection Among Young Men in the United States, <u>American Journal of Public Health</u>, 92(7): 1140-42, July 2002.

Ku L, Matani S. Left Out: Immigrants' Access to Health Care and Insurance, <u>Health Affairs</u>, 20(1):247-56, Jan./Feb. 2001.

Ku L, Ellwood M, Hoag S, Ormond B, Wooldridge J. The Evolution of Medicaid Managed Care Systems and Eligibility Expansions, <u>Health Care Financing Review</u>, 22(2):7-29, Winter 2000.

Coughlin T, Ku L, Kim J., Reforming the Medicaid Disproportionate Share Program in the 1990s, <u>Health Care Financing Review</u>, 22(2):137-58, Winter 2000.

Ku L, Coughlin T, Sliding Scale Premium Health Insurance Programs: Four States' Experience, <u>Inquiry</u>, 36(4):471-80, Winter 2000.

Lindberg L, Ku L, Sonenstein F, Adolescents' reports of reproductive health education, 1988 and 1995. Family Planning Perspectives, 32(5):220-6, Sept./Oct. 2000.

Porter L, Ku L. Use of Reproductive Health Services Among Young Men, 1995 <u>Journal of Adolescent Health</u>, 27(3):186-94, September 2000.

Bradner C, Ku L, Lindberg L. Older, but Not Wiser: How Do Men Get AIDS and Sexually Transmitted Disease Information after High School?, <u>Family Planning Perspectives</u>, 32(1):33-39, January/February 2000.

Lindberg L, Ku L, Sonenstein F. Adolescent Males' Combined Use of Condoms with Partners' Use of Female Contraceptive Methods, Maternal and Child Health Journal, 2(4): 201-9, Spring 1999.

Ku L, Sonenstein F, Lindberg L, Bradner C, Boggess S, Pleck J. Understanding Changes in Sexual Activity Among Young Metropolitan Men: 1979 to 1995, <u>Family Planning Perspectives</u>, 30(6): 256-62, November/ December 1998.

Ku L, Hoag S. Medicaid Managed Care and the Marketplace, <u>Inquiry</u>, 35(3):332-45, Fall 1998.

Ellwood MR, Ku L. Welfare and Immigration Reforms: Unintended Side Effects for Medicaid, <u>Health Affairs</u>, 17(3):137-51, May/June 1998.

Sonenstein F, Pleck J, Ku L, Lindberg L, Turner C. Changes in Sexual Behavior and Condom Use Among Teenaged Males: 1988 to 1995, <u>American Journal of Public Health</u>, 88(6):956-959, June 1998.

Turner C, Ku L, Rogers S, Lindberg L Pleck J, Sonenstein F. Adolescent Sexual Behavior, Drug Use and Violence: New Survey Technology Detects Elevated Prevalence Among U.S. Males, <u>Science</u>, 280:867-73, May 8, 1998.

Ku L, Sonenstein F, Turner C, Aral S, Black C, The Potential of Integrated Representative Surveys about STDs and Risk Behaviors, <u>Sexually Transmitted Diseases</u>, 24(5):299-309, May 1997.

Lindberg L, Sonenstein F, Ku L, Levine G, Young Men's Experience with Condom Breakage, <u>Family Planning Perspectives</u>, 29(3): 132-36, May/June 1997.

Pleck JH, Sonenstein F, Ku L. Black-white Differences in Adolescent Males' Substance Use: Are They Explained by Underreporting in Blacks?, Journal of Gender, Culture, and Health, 2, 247-265, 1997

Lindberg L, Sonenstein F, Ku L, Martinez G. Age Differences Between Minors Who Give Birth and Their Adult Partners, <u>Family Planning Perspectives</u>, 29(2):52-60, March/April 1997.

Sonenstein F, Ku L, Schulte M, Reproductive Health Care -- Patterns in a Changing Health Care Market, Western Journal of Medicine, 163(3 Suppl):7-14, September 1995.

Ku L, Coughlin T. Medicaid Disproportionate Share and Other Special Financing Programs, <u>Health Care Financing Review</u>, 16(3): 27-54, Spring 1995.

Holahan J, Coughlin T, Ku L, Lipson D, Rajan S. Insuring the Poor through Medicaid 1115 Waivers, Health Affairs, 14(1): 200-17, Spring 1995.

Coughlin T, Ku L, Holahan J, Heslam D, Winterbottom C. State Responses to the Medicaid Spending Crisis: 1988 to 1992, Journal of Health Politics, Policy and Law, 19(4):837-64, Winter 1994.

Ku L, Sonenstein F, Pleck J. The Dynamics of Young Men's Condom Use During and Between Relationships, Family Planning Perspectives, 26(6): 246-251, November/ December 1994.

Pleck J, Sonenstein F, Ku L. Attitudes Toward Male Roles: A Discriminant Validity Analysis, <u>Sex Roles</u>, 30(7/8):481-501, 1994.

Ku L, Sonenstein F, Pleck J. Factors Affecting First Intercourse Among Young Men, <u>Public Health</u> Reports, 108(6):680-94, November/December 1993.

Ku L, Sonenstein F, Pleck J. Neighborhood, Work and Family: Influences on the Premarital Behaviors of Adolescent Men, <u>Social Forces</u>, 72(2):479-503, December 1993.

Ku L, Sonenstein F, Pleck J. Young Men's Risk Behaviors for HIV Infection and Sexually Transmitted Diseases, 1988 through 1991, American Journal of Public Health, 83(11):1609-15, November 1993.

Pleck J, Sonenstein F, Ku L. Changes in Adolescent Males' Use of and Attitudes Towards Condoms: 1988-91, <u>Family Planning Perspectives</u>, 25(3):100-105, 117, May/June 1993.

Pleck J, Sonenstein F, Ku L. Masculine Ideology: Its Impact on Adolescent Males' Heterosexual Relationships, <u>Journal of Social Issues</u>, 49(3):11-30, 1993.

Ku L, Sonenstein F, Pleck J. The Association of AIDS Education and Sex Education with Sexual Behavior and Condom Use Among Teenage Men, <u>Family Planning Perspectives</u>, 24(3):100-106, May/June 1992 (erratum, <u>Family Planning Perspectives</u>, 25(1):36, January/February 1993).

Ku L, Sonenstein F, Pleck J, Patterns of HIV Risk and Preventive Behaviors Among Teenage Men, Public Health Reports, 107(2):131-38, March/April 1992.

Sonenstein F, Pleck J, Ku L, Levels of Sexual Activity Among Adolescent Males in the United States, Family Planning Perspectives, 23(4):162-67, July /August 1991.

Pleck J, Sonenstein F, Ku L, Adolescent Males' Condom Use: The Influence of Perceived Costs-Benefits on Consistency, <u>Journal of Marriage and the Family</u>, 53:733-45, August 1991.

Pleck J, Sonenstein F, Ku L, Contraceptive Attitudes and Intention to Use Condoms in Sexually Experienced and Inexperienced Adolescent Males, <u>Journal of Family Issues</u>, 11(3):294-312, Sept. 1990.

Ku L, Ellwood MR, Klemm J. Deciphering Medicaid Data: Issues and Needs, <u>Health Care Financing Review</u>, 1990 Annual Supplement, p. 35-45.

Ku L, Fisher D, Attitudes of Physicians Toward Health Care Cost Containment Policies, <u>HSR: Health Services Research</u>, 25(1):25-42, April 1990 (Part I).

Sonenstein F, Pleck J, Ku L. Sexual Activity, Condom Use and AIDS Awareness Among Adolescent Males, <u>Family Planning Perspectives</u>, 21(4):152-58, July/August 1989.

Branch L, Ku L. Transition Probabilities to Disability, Institutionalization and Death for the Elderly Over a Decade, Journal of Aging and Health, 1(3):370-408, August 1989.

Ku L. Early Prenatal Enrollment in the WIC Program, <u>Public Health Reports</u>, 104(3): 301-06, May/June 1989.

Ku L, Shapiro L, Crawford P, Huenemann R. Body Composition and Physical Activity in Eight Year Old Children, <u>American Journal of Clinical Nutrition</u>, 34(12):2770-75, 1981.

Persellin R, Ku L. Effects of Steroid Hormones on Human Polymorphonuclear Leukocyte Lysosomes, <u>Journal of Clinical Investigation</u>, 54(4):919-25, 1974.

Books Authored or Co-authored

Ku L, Lin M, Broaddus M, <u>Improving Children's Health: A Chartbook about the Roles of Medicaid and SCHIP:</u> 2007 Edition, Center on Budget and Policy Priorities, Jan. 2007.

Ku L, Nimalendran S. Improving Children's Health: A Chartbook About the Roles of Medicaid and

SCHIP, Center on Budget and Policy Priorities, Jan. 15. 2004

Coughlin T, Ku L, Holahan J, <u>Medicaid Since 1980: Costs, Coverage and the Shifting Alliance Between the Federal Government and the States</u>, Washington, DC: Urban Institute Press, 1994. (Selected by <u>Choice</u> as one of ten outstanding academic books for 1994.)

Sorensen, E, Bean F, Ku L, Zimmerman W, <u>Immigrant Categories and the U.S. Job Market: Do They Make a Difference?</u>, Urban Institute Report 92-1, Washington, DC: Urban Institute Press, 1992.

Articles or Chapters in Books (Refereed)

Ku L (contributor), <u>CCH;s Law, Explanation and Analysis of the Patient Protection and Affordable Care Act, Vol.1</u>, Commerce Clearinghouse, Wolters Kluwer, 2010.

Ku L. Changes in Immigrants' Use of Medicaid and Food Stamps: the Role of Eligibility and Other Factors, in <u>Immigrants and Welfare</u>, edited by Michael Fix, Russell Sage Foundation and Migration Policy Institute, 2009, p, 153-92.

Ku L, Papademetrios DG. Access to Health Care and Health Insurance: Immigrants and Immigration, in <u>Securing America's Future: U.S. Immigrant Integration Policy Reader</u>, M. Fix, editor, Migration Policy Institute, Feb. 2007.

Ku L. Prepared Statement. Insurance Coverage and Health Care Access for Immigrant Families, <u>Living Without Health Insurance</u>. Hearings of the Senate Committee on Finance, <u>United States Senate on Who's Uninsured and Why? And Solutions to the Problem</u>. March 13 and 15, 2001. S. Hrg 107-81. U.S. Govt Printing Office. Pg. 148-53.

https://books.google.com/books?id=ysrYaJZAew0C&pg=PA112&lpg=PA112&dq=Hearing+on+Who%27s+Uninsured+%26+Why?+%26+Solutions+to+the+Problem:+Charles+Grassley&source=bl&ots=l7enGHC7pB&sig=ACfU3U2m YwHwAYhqSNaVng1PWTFhFdgMQ&hl=en&sa=X&ved=2ahUKEwjJ0G55pznAhXvmOAKHTH2BYIQ6AEwAHoECAkQAQ#v=onepage&q=Hearing%20on%20Who's%20Uninsured%20%26%20Why%3F%20%26%20Solutions%20to%20the%20Problem%3A%20Charles%20Grassley&f=false

Sonenstein FL., Ellen J, Pleck J, Ku L. Taking Risks: Understanding Adolescents' Behavior, in <u>STDs in Adolescents: Challenges for the 21st Century</u>, edited by P. Hitchcock, et al. New York: Oxford University Press Inc.1999.

Ku L, Wooldridge J, Rajan S, Ellwood MR, Dubay L, Coughlin T, Hoag S, Wall S. The New Generation of Statewide Medicaid Managed Care Programs: State Health Reform Projects in Hawaii, Oklahoma, Rhode Island and Tennessee in <u>Remaking Medicaid: Managed Care for the Public Good</u>, edited by Steve Davidson and Steve Somers, San Francisco: Jossey-Bass, Inc., 1998, p. 147-78.

Wooldridge J, Ku L, Coughlin T, Dubay L., Ellwood MR, Rajan S, Hoag S, Reforming State Medicaid Programs: First Year Implementation Experiences from Three States, in <u>Contemporary Managed Care</u>, edited by Marsha Gold, Health Administration Press, pp. 211-26, 1998.

Sonenstein F, Ku L, Pleck J. Measuring Sexual Behavior Among Teenage Males in the U.S., in <u>Researching Sexual Behavior: Methodological Issues</u>, Bancroft, J., ed., Bloomington, IN: Indiana University Press, p. 87-105, 1997.

Turner, CF, Ku L, Sonenstein FL, Pleck JH, Impact of Audio-CASI on Reporting of Male-male Sexual Contacts: Preliminary Findings from the National Survey of Adolescent Males, in <u>Health Survey</u>

<u>Research Methods: Conference Proceedings</u>, Warnecke, R.B., ed., Hyattsville, MD: National Center for Health Statistics, p. 171-76, 1995.

Pleck J, Sonenstein F, Ku L, Problem Behaviors and Masculinity Ideology in Adolescent Males, in <u>Adolescent Problem Behaviors: Issues and Research</u>, R. Ketterlinus and M. Lamb, eds., Hillsdale, NJ: Erlbaum, 1994, p. 165-186.

Holahan J, Coughlin T, Ku L, Heslam D, Winterbottom C, Understanding the Recent Growth in Medicaid Spending, in <u>Medicaid Financing Crisis: Balancing Responsibilities, Priorities and Dollars</u>, D. Rowland, J. Feder and A. Salganicoff, eds., Washington, DC: AAAS Press, 1993, p. 23-44.

Sonenstein F, Pleck J, Ku L. Paternity Risk Among Adolescent Males in <u>Young Unwed Fathers:</u> <u>Changing Roles and Emerging Policies</u>, R. Lerman and T. Ooms, eds., Philadelphia, PA: Temple Univ. Press, p. 99-116, 1993.

Pleck J, Sonenstein F, Ku L. Masculine Ideology and Its Correlates in <u>Gender Issues in Contemporary Society</u>, S. Oskamp and M. Constanzo, eds., Claremont Symposium on Applied Social Psychology, Newbury Park: Sage Publications, p. 85-110, 1993.

<u>Translational and Other Reports, Briefs, Blogs and Publications</u>

Health Policy

[Note: Reports marked with [PR] went through an external peer-review process prior to release.]

Ku L. Estimates of Insurance Coverage and Delays in Medical Care for the Nation and District of Columbia, May 21 – June 16, 2020. For DC Health Benefits Exchange Authority. July 5, 2020. https://hbx.dc.gov/sites/default/files/dc/sites/hbx/event_content/attachments/Estimates%20of%20 Insurance%20Coverage%20and%20Delays%20in%20Medical%20Care_1.pdf

Ku L, Brantley E. Continuous Medicaid Eligibility for Children and Their Health. Association of Community Affiliated Plans. May 2020. https://www.communityplans.net/wp-content/uploads/2020/06/GW-continuous-eligibility-paper.pdf

Ku L, Brantley E. Widening Social and Health Inequalities During the COVID-19 Pandemic. *JAMA Health Forum*. June 10, 2020. <a href="https://jamanetwork.com/channels/health-forum/fullarticle/2767253?utm_source=silverchair&utm_medium=email&utm_campaign=article_alert-jhf&utm_content=olf&utm_term=061120

Ku, L. Declaration in Support of Plaintiffs, *New York vs. Department of Labor, et al.* (regarding regulations about paid sick and family leave under the Families First Coronavirus Response Act), United States District Court, Southern District of New York, May 4, 2020.

Ku L. Declaration in Support of Respondents, *Department of Homeland Security v New York, et al.* (regarding public charge rule and injunction). Supreme Court of the United States. April 10, 2020.

Ku L. Assessing the Presidential Proclamation on Visas and Health Insurance. *Health Affairs Blog*. Dec. 17, 2019. https://www.healthaffairs.org/do/10.1377/hblog20191217.16090/full/

Ku L. Declaration in Support of Plaintiffs' Motion for a Preliminary Injunction (regarding Presidential Proclamation on Visas and Health Insurance), *John Doe #1, et al. v Donald Trump, et al.* United States District Court, District of Oregon, filed November 8, 2019. (Cited in November 26 court decision)

Ku L. Brantley E. Indiana's Medicaid Work Requirements Program Is Expected to Cause Tens of Thousands to Lose Coverage. Oct. 28, 2019. https://www.commonwealthfund.org/blog/2019/indianas-medicaid-work-requirement-program-expected-cause-tens-thousands-lose-coverage

Ku L. Op-Ed: Medicaid Expansion Can and Does Expand Access to Care. Capitol Broadcasting Corporation. Oct. 16, 2019.

https://mail.google.com/mail/u/0/#inbox/WhctKJVZrXGHBvSwwqpStCWklCtsCQcFsLvZxSHCLmtRjLgFWhRBwPhHqtBqjxsksKdGFxqSimilar letter to the Editor, Raleigh News and Observer,. Oct. 16, 2019. https://www.newsobserver.com/opinion/letters-to-the-editor/article236193038.html

Ku L. New Evidence Demonstrating That the Public Charge Rule Will Harm Immigrant Families and Others. *Health Affairs Blog*. October 9, 2019. https://www.healthaffairs.org/do/10.1377/hblog20191008.70483/full/

Ku L. Declaration in Support of Plaintiffs' Motion for a Preliminary Injunction (regarding public charge regulation), *La Clinica de la Raza, et al. v. Donald Trump, et al.* United States District Court, Northern District of California, September 1, 2019. https://healthlaw.org/resource/declaration-of-leighton-ku-in-laclinica-de-la-raza-v-trump/. Similar declarations in *Make the Road New York, et al v Ken Cucinelli, et al.* United States District Court, Southern District of New York, Sept. 9, 2019. *State of New York, et al. v. U.S. Department of Homeland Security, et al.* United States District Court, Southern District of New York, Sept. 9, 2019. These declarations were filed again in subsequent appeals for these cases.

Ku L, Brantley E. Approved Medicaid Work Requirement Demonstration Projects in Nine States Could Cause About 600,000 to 800,000 Adults to Lose Medicaid Coverage. Commonwealth Fund. Blog. June 21, 2019. https://www.commonwealthfund.org/blog/2019/medicaid-work-requirements-nine-states-could-cause-600000-800000-adults-lose-coverage

Rosenbaum S, Rothenberg S, Velasquez M, Ku L, Brantley E. Are 1115 Medicaid Work Requirement Demonstrations Experimental Initiatives or a Way to Side-Step Congress? June 6, 2019. http://gwhpmmatters.com/blog-are-1115-medicaid-work-requirement-demonstrations-experimental-initiatives-or-way-side-step

Ku L, Brantley E. New Hampshire's Medicaid Work Requirements Could Cause More than 15,000 to Lose Coverage. Commonwealth Fund Blog. May 9, 2019. [PR] https://www.commonwealthfund.org/blog/2019/new-hampshires-medicaid-work-requirements-could-cause-coverage-loss

Chen CP, Ku, L, Regenstein M, Mullan F. Examining the Cost Effectiveness of Teaching Health Centers. Geiger Gibson / RCHN Community Health Foundation Research Collaborative. Policy Brief #58. March 2019. http://gwhpmmatters.com/sites/default/files/2019-03/Examining%20the%20Cost%20Effectiveness%20of%20Teaching%20Health%20Centers%20%28Chen%2C%20Ku%2C%20Regenstein%2C%20Mullan%29%20Mar%2021%2C%202019.pdf

Ku L, Brantley E. Proposed Work Requirements in Montana's Medicaid Program: An Update. Mar. 15, 2019, revised. https://mthcf.org/resources/report-medicaid-work-requirements/

Ku L (primary author) and many co-signers. Comment Letter to Food and Nutrition Service, USDA on Proposed Rule: Supplemental Nutrition Assistance Program: Requirements for Able-Bodied Adults without Dependents, RIN 0584-AE57, Submitted thru regulations.gov. March 15, 2019.

Ku L, Brantley E. Potential Effects of Work Requirements in Montana's Medicaid Program. Montana Healthcare Foundation. Feb. 13, 2019. https://mthcf.org/wp-content/uploads/2019/02/Potential-Effects-of-Work-Requirements-in-Montana% E2% 80% 99s-Medicaid-Program-Ku-Brantley-2-13-19.pdf.

Ku L, Brantley E. Updated Estimates of the Effects of Medicaid Work Requirements in Kentucky. GW Health Policy Matters. Jan. 4, 2019. http://gwhealthpolicymatters.com/sites/default/files/2019-01/Updated%20Estimates%20of%20the%20Effects%20of%20Medicaid%20Work%20Requirements%20in%20Kentucky%20%28Ku%2C%20Brantley%29%20GWHPMMatters%201-4-19.pdf

Ku L (primary author) and many co-signers. Comment Letter to US Department of Homeland Security: RIN 1615-AA22 "Inadmissibility on Public Charge Grounds". Dec. 9, 2018 Submitted thru regulations.gov.

Ku L, Sharac J, Gunsalus R, Shin P, Rosenbaum S. How Could the Public Charge Proposed Rule Affect Community Health Centers? Policy Brief # 55. Geiger Gibson RCHN Community Health Research Collaborative. Nov 2018.

https://publichealth.gwu.edu/sites/default/files/downloads/GGRCHN/Public%20Charge%20Brief.pdf

Ku L, Pillai D. The Economic Mobility of Immigrants: Public Charge Rules Could Foreclose Future Opportunities. Nov. 15, 2018. Social Science Research Network. http://ssrn.com/abstract=3285546 [This was in the top five downloaded reports about immigration for SSRN for late 2018.]

Ku L, Brantley E, Steinmetz E, Bruen B, Pillai D. Medicaid Work Requirements: Will They Help the Unemployed Get Jobs or Improve Health. Issue Brief. Commonwealth Fund. Nov. 2018 https://www.commonwealthfund.org/publications/issue-briefs/2018/nov/medicaid-work-requirements-will-they-help-jobs-health

Brantley E, Ku L. Arkansas' Early Experience with Work Requirements Signals Larger Losses to Come. Commonwealth Fund Blog. Oct. 31, 2018. https://www.commonwealthfund.org/blog/2018/arkansas-early-experience-work-requirements

Ku L (primary author). Brief of the *Amici Curiae* Public Health Scholars in Support of Plaintiff-Appellant the Commonwealth of Massachusetts. Filed in *Commonwealth of Massachusetts v. United States Department of Health and Human Services, et al.* to the US Court of Appeals for the First Circuit, Sept. 24, 2018.

Vyas A, Wood SF, Landry M, Masselink L, Mead H, Ku L. District of Columbia Family Planning Community Needs Assessment. Conducted by The George Washington University Milken Institute School of Public Health for Washington Area Women's Foundation, DC Family Planning Project. Sept. 2018. [PR] https://thewomensfoundation.org/2018/new-report-family-planning-community-needs-assessment/

Erikson C, Han X, Ku L, Pittman P. Contribution of the National Health Service Corps Providers and Alumni to Medicare Beneficiaries in 2015. GW Health Workforce Institute. Aug. 2018. https://user-niv7hdi.cld.bz/Contribution-of-the-NHSC-Providers-and-Recent-Alumni-to-Medicare-Beneficiaries-in-2015/2/

Brantley E, Ku L. A First Glance at Medicaid Work Requirements in Arkansas: More Than One-Quarter Did Not Meet Requirement. *Health Affairs Blog.* Aug. 13, 2018. https://www.healthaffairs.org/do/10.1377/hblog20180812.221535/full/

Ku L, Shin P, Sharac J, Rosenbaum S. Legacy Community Health Services v Smith: What are the National Implications for Community Health Centers and Their Communities? Geiger Gibson/RCHN Community Health Foundation Research Collaborative Policy Research Brief # 53. August 2018. https://www.rchnfoundation.org/wp-content/uploads/2018/08/Legacy-GG-IB-53_FINAL_8.2.pdf

Ku L. Blog: The District of Columbia Is Trying to Preserve Health Insurance Coverage; Congress Is Trying to Interfere. *Health Affairs Blog*. July 23, 2018. https://www.healthaffairs.org/do/10.1377/hblog20180722.933880/full/

Ku L. Blog: The New District of Columbia Policy to Protect Insurance Coverage. July 5, 2018. http://gwhealthpolicymatters.com/blog-new-district-columbia-policy-protect-insurance-coverage.

Ku L. Data About Contraceptive Needs in the U.S. After the Affordable Care Act. June 26, 2018. [PR] http://gwhealthpolicymatters.com/data-about-contraceptive-needs-us-after-affordable-care-act.

Ku L. Declaration about Public Health and Employment Effects of Terminating the Deferred Action for Childhood Arrivals (DACA) program. Filed in support of the Mexican American Legal Defense and Educational Fund and the state of New Jersey, intervenors, in *Texas v. United States* in suit in Federal District Court of Southern District of Texas, June 14, 2018.

Brantley E, Ku L. Work Requirements: SNAP Data Show Medicaid Losses Could Be Much Faster and Deeper Than Projected. *Health Affairs Blog*. April 12, 2018. https://www.healthaffairs.org/do/10.1377/hblog20180412.310199/full/

Ku L. What is the Evidence of the Effects of the ACA's Individual Mandate and of Its Repeal? DC Health Benefits Exchange Authority. Revised Feb. 12, 2018.

Ku L. It Makes More Sense to Strengthen SHOP Than to Expand Association Health Plans. Jan. 4, 2018. http://gwhealthpolicymatters.com/blog-it-makes-more-sense-strengthen-shop-expand-association-health-plans

Ku L, Steinmetz E. State Economic and Employment Losses If Community Health Center Funding Is Not Restored. Geiger Gibson/RCHN Community Health Foundation Research Collaborative Policy Research Brief # 51. Dec. 4, 2017. [PR]

 $\frac{https://publichealth.gwu.edu/sites/default/files/downloads/GGRCHN/State\%20Economic\%20and\%20Employment\%20Losses\%20if\%20CHC\%20Funding\%20is\%20Not%20Restored\%2051.pdf}{}$

Ku L. Declaration about Public Health Effects of Terminating the Deferred Action for Childhood Arrivals (DACA) program. Filed in support of the state of New York and other plaintiff states, *New York, et al. v. Trump* in suit in Federal District Court of Eastern New York, Nov. 22, 2017.

Ku L. May You Live in Interesting Times: The Challenges of Health Policy Analysis in a Turbulent Period. GW Health Policy Matters. Oct. 2, 2017. http://gwhealthpolicymatters.com/may-you-live-interesting-times-challenges-health-policy-analysis-turbulent-period-0

Ku L, Steinmetz E, Brantley E, Pillai D. The Graham-Cassidy Proposal Would Eliminate a Third of a Million Jobs, *To the Point*, The Commonwealth Fund, Sept. 26, 2017, [PR] available at:

http://www.commonwealthfund.org/publications/blog/2017/sep/graham-cassidy-job-loss. Methods appendix at http://www.commonwealthfund.org/~/media/files/publications/blog/2017/gc-methods-appendix_final.pdf

Ku L, Seiler N. Medicaid Expansions Help States Cope with the Opioid Epidemic. GW Dept of Health Policy and Management. July 25, 2017.

https://publichealth.gwu.edu/sites/default/files/images/Medicaid%20Expansions%20Help%20States%20Cope%20with%20the%20Opioid%20Epidemic%207-25-17%20report.pdf

Ku L. Cutting immigrants' access to health insurance would drive up costs for many Americans. *Washington Post*, Letter to the Editor. July 18, 2017.

Ku L, Steinmetz E, Brantley E, Holla N, Bruen B. The Better Care Reconciliation Act: Economic and Employment Consequences for States. Commonwealth Fund, July 6, 2017.[PR] http://www.commonwealthfund.org/publications/issue-briefs/2017/jul/bcra-economic-employment-consequences-states

Bruen BK, Ku L. Community Health Centers Reduce the Costs of Children's Health Care. Geiger Gibson / RCHN Community Health Foundation Research Collaborative Policy Research Brief # 48. June 22, 2017.

 $\frac{https://publichealth.gwu.edu/sites/default/files/downloads/GGRCHN/Brief\% 2048\% 20 Child\% 20 Cost\% 20}{Savings.pdf}$

Ku L, Steinmetz E, Brantley E, Holla N, Bruen B. The American Health Care Act: Economic and Employment Consequences for States. Commonwealth Fund, June 14, 2017. [PR] http://www.commonwealthfund.org/publications/issue-briefs/2017/jun/ahca-economic-and-employment-consequences

[Like the January 6th report, the June 14 and July 6 reports gained considerable interest and were widely cited by the media and by federal and state policy officials. This series of reports were among the most often downloaded reports for the Commonwealth Fund.]

Ku L, Paradise J, Thompson V. Data Note: Medicaid's Role in Providing Access to Preventive Care for Adults. Kaiser Commission for Medicaid and the Uninsured. May 17, 2017. [PR] http://kff.org/medicaid/issue-brief/data-note-medicaids-role-in-providing-access-to-preventive-care-for-adults/

Ku L In podcast: ACA Repeal Waves Goodbye to 3 Million Jobs and \$1.5 Trillion. The Working Life. May 10, 2017. http://www.workinglife.org/politics/episode-29-aca-repeal-waves-goodbye-to-3-million-jobs-1-5-trillion/

Ku L, Brantley E. Medicaid Work Requirements: Who's at Risk? *Health Affairs Blog*, April 12, 2017. http://healthaffairs.org/blog/2017/04/12/medicaid-work-requirements-whos-at-risk/

Ku L, Brantley E. Myths about the Medicaid Expansion and the "Able-Bodied." *Health Affairs Blog*, March 6, 2017. http://healthaffairs.org/blog/2017/03/06/myths-about-the-medicaid-expansion-and-the-able-bodied/

Ku L In podcast: The Financial Consequences of ACA Repeal. The Commonwealth Fund. Feb. 15, 2017. http://www.commonwealthfund.org/interactives-and-data/multimedia/podcasts/new-directions-in-health-care/the-impact-of-aca-repeal

Bennett J, Brown C, Ku L, Bruen B. The Economic, Fiscal and Employment Effects of Health Care Modernization in Oklahoma. State Chamber (of Commerce) Research Foundation. Feb. 1, 2017. [PR] http://www.okstatechamber.com/sites/www.okstatechamber.com/files/OK%20Study%20-%20REMI%20FINAL.pdf

Mitchell K. Interview with Leighton Ku. GW Expert: Repealing Obamacare Would Hurt Patients, Economy. GW Today. Jan. 17, 2017. https://gwtoday.gwu.edu/gw-expert-repealing-obamacare-would-hurt-patients-economy

Ku L Steinmetz E, Brantley E, Bruen B. Repealing Federal Health Reform: The Economic and Employment Consequences for States. Brief, Commonwealth Fund, Jan. 6, 2017. http://www.commonwealthfund.org/Publications/Issue-Briefs/2017/Jan/Repealing-Federal-Health-Reform [PR]

Ku L Steinmetz E, Brantley E, Bruen B. The Economic and Employment Consequences of Repealing Federal Health Reform: A 50 State Analysis. Milken Institute School of Public Health, George Washington University. Jan. 6, 2017.

https://publichealth.gwu.edu/sites/default/files/downloads/HPM/Repealing Federal Health Reform.pdf [PR]

[Note: The Jan. 6 reports were reported widely in numerous media including CBS, NBC, NPR, *Forbes*, *Fortune*, *the Atlantic*, etc. Findings were frequently cited by Congressmen and Senators in Congressional floor debates about repeal of the Affordable Care Act. One of the most popular Commonwealth Fund reports in 2017]

Ku L, Steinmetz E, Bruen B. Changes in Insurance Coverage and Cardiovascular Risk for U.S. Adults in States Expanding and Not Expanding Medicaid. Dec. 2016 George Washington University and American Heart Association. [PR]

 $\frac{https://publichealth.gwu.edu/sites/default/files/downloads/HPM/Americans\%\,20Cardiovascular\%\,20Risk\,\%\,20and\%\,20Changes\%\,20in\%\,20Health\%\,20Insurance\%\,20Coverage\%\,20Dec\%\,2016.pdf$

Ku L. DC Health Link Has Expanded Health Insurance Coverage in the District. DC Health Benefits Exchange Authority, Sept. 29, 2016 [no author listed] http://hbx.dc.gov/sites/default/files/dc/sites/hbx/publication/attachments/SurveyReportGainedCoverage% 20final.pdf

Ku L. Up in smoke: We'll spend billions tomorrow for not helping poor people quit smoking today, *The Conversation*. July 12, 2016. https://theconversation.com/up-in-smoke-well-spend-billions-tomorrow-for-not-helping-poor-people-quit-smoking-today-60686

Ku L. The Role of Medicaid In Pay For Success Models For Supportive Housing For Chronically Homeless Individuals: Opportunities And Challenges, Report to Office of the Assistant Secretary for Planning and Evaluation, HHS, under review. [PR]

Regenstein M, Jewers M, Nocella K, Goldberg D, Strasser J, Ku L, Mullan F. Cost Estimates for Training a Resident in a Teaching Health Center. Report to HRSA. GW Dept. of Health Policy and Management, Feb. 2016. [PR]

Lantz,P, Rosenbaum S., Ku L et al. Opportunities for Pay for Success Demonstrations in HHS Programs, Office of the Assistant Secretary for Planning and Evaluation, HHS, forthcoming. [PR]

Ku L, Steinmetz E, Bruen B., Bysshe T. Effects of the Affordable Care Act on Health Insurance Coverage of Americans at Risk of Cardiovascular Disease, Washington, DC: American Heart Association. Jan. 2016.

Ku L, Steinmetz, E, Bysshe T. Continuity of Medicaid Coverage in an Era of Transition, Washington, DC: Association of Community Affiliated Plans, Nov. 1, 2015. [PR]

Ku L, Bysshe T, Steinmetz E, Bruen B. Health Reform and the Implications for Cancer Screening. Report to American Cancer Society, Sept. 2015

Ku L, Bysshe T, Wu. X. The Changing Community Health Center Workforce: 2007-13, GW Health Workforce Research Center, Sept. 22, 2015. [PR] https://www.gwhwi.org/uploads/4/3/3/5/43358451/report_the_changing_community_health_cent_er__8-10-15_.pdf

Ku L, Mullan F, Serrano C, Barber Z, Shin P. Teaching Health Centers: A Promising Approach for Building Primary Care Workforce for the 21st Century. Geiger Gibson / RCHN Community Health Foundation Research Collaborative Policy Research Brief # 40, March 10, 2015. http://www.rchnfoundation.org/?p=4651

Rosenbaum S, Ku l, et al. (unnamed authors). *Amici Curiae* Brief Of Public Health Deans, Chairs, And Faculty And The American Public Health Association In Support Of Respondents to the Supreme Court of the United States re: *King v Burwell*. Jan. 28, 2015. [PR]

Ku L. Covering the Uninsured Through DC Health Link: Report on the First Year. DC Health Benefits Exchange Authority, Dec. 26, 2014. http://hbx.dc.gov/node/978322 [PR]

Ku L, Bruen B, Steinmetz E, Bysshe T. The Economic and Employment Costs of Not Expanding Medicaid in North Carolina: A County-Level Analysis. Dec. 2014. Cone Health Foundation and Kate B. Reynolds Charitable Trust. At www.ncmedicaidexpansion.com {PR]

Ku L, Bruen B, Steinmetz E, Brown C., Motamedi R, Stottlemyer C. Economic and Employment Effects of Expanding KanCare. Kansas Hospital Association, Nov. 2014 at http://www.kha-net.org/.

Steinmetz E, Bruen, B, Ku L. Children's Use of Dental Care in Medicaid: Federal Fiscal Years 2000 – 2012. Report to CMS, Oct. 2014. Posted at http://www.medicaid.gov/medicaid-chip-program-information/by-topics/benefits/dental-trends-2000-to-2012.pdf. [PR]

Stewart A, Cox M, Ku L. Health Insurance Benefits Advisors: Understanding Responsibilities, Regulations, Restrictions and Relevance in Implementing the Affordable Care Act. GW Dept of Health Policy, Sept. 2014. [PR]

Ku L Zur, J. Jones E, Shin P, Rosenbaum S. How Medicaid Expansions and Future Community Health Center Funding Will Shape Capacity to Meet the Nation's Primary Care Needs: A 2014 Update Geiger Gibson / RCHN Community Health Foundation Research Collaborative Policy Research Brief # 37, June 18, 2014. [PR]

Miller V, Ku L. The Impact of Government Transfer Programs on State and Regional Personal Incomes, Department of Health Policy Issue Brief, April 30, 2014.

Ku L. Strengthening Immigrants' Health Access: Current Opportunities GW Department of Health Policy

Issue Brief, Dec. 13, 2013. http://hsrc.himmelfarb.gwu.edu/sphhs_policy_briefs/29/

Ku L Zur, J. Jones E, Shin P, Rosenbaum S. How Medicaid Expansions and Future Community Health Center Funding Will Shape Capacity to Meet the Nation's Primary Care Needs Geiger Gibson / RCHN Community Health Foundation Research Collaborative Policy Research Brief # 34, Nov. 18. 2013

Paradise J, Rosenbaum S, Shin P, Sharac J, Alvarez C, Zur J, Ku L. Providing outreach and enrollment assistance: lessons learned from community health centers in Massachusetts. The Henry J. Kaiser Family Foundation. September 24, 2013. Available at: http://kff.org/health-reform/issue-brief/providing-outreach-and-enrollment-assistance-lessons-learned-from-community-health-centers-in-massachusetts/

Ku L, Steinmetz E. Bridging the Gap: Continuity and Quality of Coverage in Medicaid, Washington DC: Association of Community Affiliated Plans. Sept. 2013. [PR]

Ku L. The Bipartisan Senate Immigration Bill: Implications for Health Coverage and Health Access, GW Department of Health Policy, Aug. 8, 2013

Ku L. The Senate Immigration Bill's Impact on Health Care, blog posted at www.cmwf.org, Aug. 8, 2013. [PR]

Ku L. Comprehensive Immigration Reform and Health Care: CBO's Analysis of S. 744, Dept of Health Policy report, June 20, 2013. Also posted on *HealthReformGPS.org*.

Ku L. Explaining Recent Changes in CBO Projections of Health Insurance Coverage and Costs under the Affordable Care Act, Implementation Brief posted on www.*HealthReformGPS.org*, June 5, 2013.

Ku L. Medicaid Expansions Using Private Plans: The Role of Premium Assistance and Cost-Sharing, commentary in www.*HealthReformGPS*.org April 2013. http://www.healthreformgps.org/resources/medicaid-expansions-using-private-plans-the-role-of-premium-assistance-and-cost-sharing-2/

Ku L, Bruen B. Poor Immigrants Use Public Benefits At a Lower Rate than Poor Native-Born Citizens, *Economic Development Bulletin* No. 17, Washington, DC: Cato Institute. March 4, 2013 http://www.cato.org/sites/cato.org/files/pubs/pdf/edb17.pdf [PR]

Brown C, Motamedi R, Stottlemeyer C, Bruen B, Ku L. Economic and Employment Effects of Expanding Medicaid in Iowa, Regional Economic Models, Inc. and George Washington University. Prepared for Iowa Hospital Association. Mar. 2013.

http://blog.iowahospital.org/wp-content/uploads/2013/03/IA-Medicaid-Expansion-Econ-Full-Report.pdf

Brown C, Motamedi R, Stottlemeyer C, Bruen B, Ku L. Economic and Employment Effects of Expanding Medicaid in Arizona, Regional Economic Models, Inc. and George Washington University. Prepared for Arizona Hospital and Healthcare Association. Feb. 2013.

 $\underline{http://www.azhha.org/member_and_media_resources/documents/ArizonaMedicaidExpansionReportREM} \\ \underline{12-28-13_000.pdf}$

Brown C, Motamedi R, Stottlemeyer C, Bruen B, Ku L. Economic and Employment Effects of Expanding Medicaid in Arkansas, Regional Economic Models, Inc. and George Washington University. Prepared for Arkansas Hospital Association. Feb. 2013.

http://www.arkhospitals.org/Misc.%20Files/ReportBriefAppendix.pdf

- Brown, C., Motamedi, R., Stottlemeyer, C., Bruen B and Ku L. Economic and Employment Effects of Expanding Medicaid in Kansas, Regional Economic Models, Inc. and George Washington University. Prepared for Kansas Hospital Association. Feb. 2013. http://m.kha-net.org/communications/mediareleases/102615.aspx
- Ku L, Bruen B. The Use of Public Assistance Benefits by Citizens and Non-citizen Immigrants in the United States. Working Paper, Cato Institute, Feb. 2013. [PR]
- Ku L, Jewers M. Health Care for Immigrants: Policies and Current Issues. Migration Policy Institute, June 2013. www.migrationpolicy.org [PR]
- Ku L, Bruen B, and Steinmetz E. Task 9: Medicaid DSH Simulation: Final Report to the Office of the Assistant Secretary for Planning and Evaluation. Jan. 2013. [PR]
- Ku L, Bruen B, Steinmetz E Beeson T. Task 7: Medicaid DSH Analytic Report to the Office of the Assistant Secretary for Planning and Evaluation. Oct. 2012. [PR]
- Ku L Cartwright-Smith L, Sharac J, Steinmetz E, Lewis J, Shin P. Deteriorating Access to Women's Health Services in Texas: Potential Effects of the Women's Health Program Affiliate Rule, Geiger Gibson/RCHN CHF Research Collaborative Brief, Issue No. 31. October 11, 2012
- Ku L, Regenstein M, Shin P, Mead H, Levy A, Buchanan K, Byrne, F.. Coordinating and Integrating Care for Safety Net Patients: Lessons from Six Communities. George Washington University Dept. of Health Policy, May 21, 2012.
- Ku L, Levy A, Bruen B. The Potential Primary Care Crisis in Texas: A County-Based Analysis Report for Methodist Healthcare Ministries, April 2012.
- Ku L, Cunningham M, Goetz-Goldberg D., Darnell J, Hiller M.. Quality Incentives for Federally Qualified Health Centers, Rural Health Clinics and Free Clinics: A Report To Congress, report prepared for U.S. Department of Health and Human Services for submission to Congress, January 23, 2012. [PR]
- Ku L. Saving Money: The Massachusetts Medicaid Tobacco Cessation Benefit: A Policy Paper. Partnership for Prevention. Jan. 2012.
- http://www.prevent.org//data/images/roi%20policy%20paper a.pdf
- Ku L, Levy A, Lantz P, Pierre-Matthieu R. Options for CDC's Cancer Screening Programs: Implications of the Affordable Care Act. Report to the American Cancer Society and Centers for Disease Control and Prevention, Nov. 15, 2011. [PR]
- Ku L, Regenstein M., Shin P, Mead H, Levy A, Buchanan K, Byrne F. Coordinating and Integrating Care for Safety Net Patients: Lessons from Six Communities, Draft Report to the Commonwealth Fund, Sept. 2011. [PR]
- Ku L, Regenstein M., Shin P, Bruen B, Byrne FR. Improving the Integration and Coordination of Safety Net Health Providers Under Health Reform: Key Issues, Commonwealth Fund Pub 1552, Oct. 2011. Posted at http://www.commonwealthfund.org/~/media/Files/Publications/Issue%20Brief/2011/Oct/1552_Ku_promoting_integration_safetynet_providers_under_reform_ib.pdf [PR]
- Ku L, Shin P, Jones E, Bruen B. Transforming Community Health Centers into Patient-Centered Medical Homes: The Role of Payment Reform, Report to the Commonwealth Fund, Sept. 28, 2011. Posted at http://www.commonwealthfund.org/Publications/Fund-Reports/2011/Sep/Transforming-Community-

Health-Centers.aspx. [PR]

Ku L, Ferguson C. Medicaid Works: A Review of How Public Insurance Protects the Health and Finances of Low-Income Families and Individuals. First Focus and George Washington Univ. Dept. of Health Policy, June 2011.

Ku L. Medicaid in the Bull's Eye.: Blog posted at *Health Affairs* blog website. April 15, 2011. http://healthaffairs.org/blog/2011/04/15/medicaid-in-the-bulls-eye.

Rosenbaum S, Shin P, Ku L. Who Are the Health Center Patients Who Risk Losing Care Under the House of Representatives Proposed FY 2011 Spending Reductions? Issue No. 20. Geiger Gibson/RCHN Community Health Foundation Research Collaborative Feb 24, 2011.

Ku L, Richard P, Dor A, Tan E, Shin P, Rosenbaum S. Strengthening Primary Care to Bend the Cost Curve: The Expansion of Community Health Centers Through Health Reform, Brief No. 19. Geiger Gibson/RCHN Community Health Foundation Research Collaborative, June 30, 2010.

Ku L, Shin P, Bruen B. Can Health Care Investments Stimulate the Economy? Blog posted at *Health Affairs* blog website, March 16, 2010. http://healthaffairs.org/blog/2010/03/16/can-health-care-investments-stimulate-the-economy/

Shin P, Bruen B, Jones E, Ku L, Rosenbaum S. The Economic Stimulus: Gauging the Early Effects of ARRA Funding on Health Centers and Medically Underserved Populations and Communities, Brief No. 17. Geiger Gibson/RCHN Community Health Foundation Research Collaborative, Feb. 2010.

Shin P, Bruen B, Ku L, Mead KH, Regenstein M, Rosenbaum S, Buchanan K, Smith K. The Early Impact of ARRA on Community Health Centers: Analysis of HCQR2. Report to Health Resources and Services Administration, Rockville, MD. February 2010.

Ku L, Rosenbaum S, Shin P. Using Primary Care to Bend the Cost Curve: The Potential Impact of Health Center Expansion in Senate Reforms. Brief No. 16. Geiger Gibson/RCHN Community Health Foundation Research Collaborative, Oct 14, 2009.

Shin P, Ku L, Mauery R, Finnegan B, Rosenbaum S. Estimating the Economic Gains for States as a Result of Medicaid Coverage Expansions for Adults, Brief No. 15. Geiger Gibson/RCHN Community Health Foundation Research Collaborative, Oct 7, 2009.

Ku L, Richard P, Dor A, Tan E, Shin P, Rosenbaum S. Using Primary Care to Bend the Curve: Estimating the Impact of a Health Center Expansion on Health Care Costs. Brief No. 14. Geiger Gibson/RCHN Community Health Foundation Research Collaborative, Sep 1, 2009.

Ku L. Do Medicaid and CHIP Measure Errors Correctly?. Dept. of Health Policy, George Washington Univ. Aug. 4, 2009.

Ku L, Shin P, Rosenbaum S. Estimating the Effects of Health Reform on Health Centers' Capacity to Expand to New Medically Underserved Communities and Populations. Issue No. 11. Geiger Gibson/RCHN Community Health Foundation Research Collaborative, Washington, DC. Jul 23, 2009. Rosenbaum S, Jones E, Shin P and Ku L National Health Reform: How Will Medically Underserved Communities Fare? Geiger Gibson / RCHN Community Health Foundation Research Collaborative, Washington, DC. July 9, 2009.

- Ku L, MacTaggart P, Pervez F, Rosenbaum S. Improving Medicaid's Continuity and Quality of Care, Association for Community Affiliated Plans, July 2009. [PR]
- Finnegan B, Ku L, Shin P, Rosenbaum S. Boosting Health Information Technology in Medicaid: The Potential Effect of the American Recovery and Reinvestment Act. Geiger Gibson / RCHN Community Health Foundation Research Collaborative, Washington, DC. July 7, 2009.
- Ku L. Expanding Coverage for Low-income Americans: Medicaid or Health Insurance Exchanges? Blog posted at *Health Affairs* blog website, June 23, 2009. http://healthaffairs.org/blog/2009/06/23/expanding-coverage-for-low-income-americans-medicaid-of-health-insurance-exchanges/
- Shin P Ku L, Jones E, Finnegan B, Rosenbaum S. Financing Community Health Centers As Patient- And Community-Centered Medical Homes: A Primer, George Washington Univ., May 27, 2009. [PR]
- Ku L, Jones E, Finnegan B, Shin P, Rosenbaum S. Community Health Centers in the Midst of Massachusetts' Health Reform: How Is the Primary Care Safety Net Faring? Kaiser Commission on Medicaid and the Uninsured and Geiger Gibson Community Health Program. March 2009. [PR]
- Ku L. Restoring Medicaid and SCHIP Coverage to Legal Immigrant Children and Pregnant Women: Implications for Community Health and Health Care for Tomorrow's Citizens, Geiger Gibson/RCHN Community Health Foundation Research Brief #7, Jan. 13, 2009. https://www.rchnfoundation.org/wp-content/uploads/2013/02/GG-RCHN_No7.pdf
- Ku L, Feiden K. Examining the Health Consequences of the 2008-09 Recession, Rapid Public Health Policy Response Project, GW School of Public Health and Health Services, January 2009.
- Ku L. The Dial and the Dashboard: The Child Well-Being Index and Public Policy, prepared for the Foundation for Child Development, Jan. 2009.
- Jones E, Ku L, Lippi J, Whittington R, Rosenbaum S. Designation of Medically Underserved and Health Professional Shortage Areas: Analysis of the Public Comments on the Withdrawn Proposed Regulation. Geiger Gibson/RCHN Community Health Foundation Research Brief #5. September 2008.
- Shin P, Ku L, Jones E, Rosenbaum S. Grantee-Level Estimates Show that 31 Percent of All Health Centers would Fail to Meet Tier Two Status under HRSA's Proposed MUA/MUP/HPSA Designation Regulations. Geiger Gibson/RCHN Community Health Foundation Research Brief #3. May 2008.
- Shin P, Ku L, Jones E, Rosenbaum S. Analysis of the Proposed Rule on Designation of Medically Underserved Populations and Health Professional Shortage Areas, (report and highlights) Geiger Gibson/RCHN Community Health Foundation Research Collaborative, Department of Health Policy, The George Washington University, revised May 1, 2008.
- Ku L, Lindblom E. (authors not named) Expanding Children's Health Insurance and Raising Federal Tobacco Taxes Helps Low-Income Families, Joint Paper of the Center on Budget and Policy Priorities and the Campaign for Tobacco-Free Kids, Oct. 16, 2007.
- Ku L. 'Crowd-Out' Is Not the Same as Voluntarily Dropping Private Health Insurance for Public Program Coverage, Center on Budget and Policy Priorities, Sept. 27, 2007
- Greenstein R, Ku L (authors not named) Charge That Bipartisan SCHIP Compromise Bill Aids Undocumented Immigrants Is False, Center on Budget and Policy Priorities, Sept. 25, 2007.

Ku L. Collateral Damage: Children Can Lose Coverage When Their Parents Lose Health Insurance, Center on Budget and Policy Priorities, Sept. 17, 2007.

Ku L (author not named), More Americans, Including More Children, Now Lack Health Insurance, Center on Budget and Policy Priorities, Aug. 31, 2007.

Ku L, New Research Shows Simplifying Medicaid Can Reduce Children's Hospitalizations, Center on Budget and Policy Priorities, June 11, 2007.

Ku L, Comparing Public and Private Health Insurance for Children, Center on Budget and Policy Priorities, May 11, 2007.

Ku L, Reducing Disparities in Health Coverage for Legal Immigrant Children and Pregnant Women, Center on Budget and Policy Priorities, April 20, 2007.

Ku L, Census Revises Estimates of the Number of Uninsured People, Center on Budget and Policy Priorities, April 5, 2007.

Ku L, Schneider A, Solomon J, The Administration Again Proposes to Shift Federal Medicaid Costs to States, Center on Budget and Policy Priorities, Feb.14, 2007.

Ku L. Medicaid Costs Are Growing More Slowly Than Costs For Medicare or Private Insurance, Center on Budget and Policy Priorities, Nov. 13, 2006.

Ku L, Broaddus M. Coverage of Parents Helps Children, Too, Center on Budget and Policy Priorities, Oct. 20, 2006.

Ku L Paying for Language Services in Medicare: Preliminary Options & Recommendations, National Health Law Program and Center on Budget and Policy Priorities, Oct. 2006. (www.healthlaw.org/library.cfm?fa=detail&id=118637&appView=folder)

Ku L, Broaddus M. Is Medicaid Responsible for the Erosion of Employer-Based Health Coverage?, Center on Budget and Policy Priorities, Sept. 22, 2006.

Greenstein, R., Ku L and Dean, S. Survey Indicates House Bill Could Deny Voting Rights To Millions Of U.S. Citizens, Center on Budget and Policy Priorities, Sept. 22, 2006.

Ku L, Cohen Ross D, Broaddus M. Documenting Citizenship and Identity Using Data Matches: A Promising Strategy for State Medicaid Programs, Center on Budget and Policy Priorities, Sept. 1, 2006.

Ku L. Why Immigrants Lack Adequate Access to Health Care and Health Insurance, Migration Information Source, Migration Policy Institute, Sept. 2006. [PR](www.migrationinformation.org/Feature/display.cfm?id=417)

Kogan R, Ku L, et al. Budget Process Bill Would Result in Deep Cuts in Medicare and Medicaid, Center on Budget and Policy Priorities, Aug. 9, 2006.

Ku L. Revised Medicaid Documentation Requirement Jeopardizes Coverage for 1 To 2 Million Citizens, Center on Budget and Policy Priorities, July 13, 2006.

Ku L. Using Information Technology to Document Citizenship in Medicaid, Center on Budget and Policy Priorities, June 20, 2006.

Ku L. The Slowdown in Medicaid Expenditure Growth, Center on Budget and Policy Priorities, March 13, 2006.

Ku L, Broaddus M. New Requirement For Birth Certificates or Passports Could Threaten Medicaid Coverage For Vulnerable Beneficiaries: A State-By-State Analysis, Center on Budget and Policy Priorities, Revised Feb. 17, 2006.

Ku L Cohen Ross D. Broaddus M. Survey Indicates Deficit Reduction Act Jeopardizes Medicaid Coverage for 3 to 5 Million U.S. Citizens, Center on Budget and Policy Priorities, Revised Feb. 17, 2006.

Schneider A, Ku L, et al. Administration's Medicaid Proposals Would Shift Federal Costs to States, Center on Budget and Policy Priorities, Feb. 14, 2006.

Ku L, Cohen Ross D. New Medicaid Requirement Is Unnecessary and Could Impede Citizens' Coverage, Center on Budget and Policy Priorities, Revised Jan. 4, 2006.

Wachino V, Ku L, et al. Medicaid Provisions of House Reconciliation Bill Both Harmful and Unnecessary Senate Bill Achieves Larger Savings Without Reducing Access to Care, Center on Budget and Policy Priorities, Dec. 9, 2005

Ku L, Wachino V. Greenstein R. The House Reconciliation Bill's Provisions On Medicaid Co-Payments and Premiums: Are They Mild or Harsh? Center on Budget and Policy Priorities, Nov. 22, 2005.

Wachino V, Ku L, et al. An Analysis of The National Governors Association's Proposals For Short-Run Medicaid Reform Center on Budget and Policy Priorities, Oct. 14, 2005.

Ku L and Wachino V. Don't Shift Medicaid's Costs onto Those Who Can Least Afford Them <u>The Hill</u>, July 20, 2005.

Ku L. Medicaid: Improving Health, Saving Lives, Center on Budget and Policy Priorities, July 19, 2005.

Ku L. New Research Sheds Light on Risks from Increasing Medicaid Cost-Sharing and Reducing Medicaid Benefits, Center on Budget and Policy Priorities, July 18, 2005.

Ku L, Wachino V. Medicaid Commission Named By Secretary Leavitt Lacks Balance, Center on Budget and Policy Priorities, July 10, 2005

Ku L, Wachino V. Assessing The National Governors Association's Proposals To Allow Increases In Cost-Sharing Charges To Medicaid Beneficiaries, Center on Budget and Policy Priorities, July 7, 2005.

Ku L, Wachino.V. The Effect Of Increased Cost-Sharing In Medicaid: A Summary Of Research Findings, Center on Budget and Policy Priorities, Revised, July 7, 2005.

Ku L, Broaddus M. Out-Of-Pocket Medical Expenses For Medicaid Beneficiaries Are Substantial And Growing, Center on Budget and Policy Priorities, May 31, 2005.

Ku L, Solomon, J. Is Missouri's Medicaid Program Out-of-Step and Inefficient?, Center on Budget and Policy Priorities, April 4, 2005.

Wachino V, Schneider A, Ku L. Medicaid Budget Proposals Would Shift Costs To States And Be Likely To Cause Reductions In Health Coverage: Administration's Proposal Also Implies Cap On Federal Funding, Center on Budget and Policy Priorities, Feb. 18, 2005

Ku L, Broaddus M, Wachino, V.. Medicaid and SCHIP Protected Insurance Coverage for Millions of Low-Income Americans, Jan. 31, 2005

Ku L and Wachino V. The Potential Impact of Eliminating TennCare and Reverting to Medicaid: A Preliminary Analysis, Center on Budget and Policy Priorities, Nov. 15, 2004.

Ku L, Deschamps E, Hilman J. The Effects of Copayments on the Use of Medical Services and Prescription Drugs in Utah's Medicaid Program, Center on Budget and Policy Priorities, Nov. 2, 2004.

Ku L. Will the New TennCare Cutbacks Help Tennessee's Economy? Center on Budget and Policy Priorities, July 8, 2004.

Ku L, Nimalendran S. Losing Out: States Are Cutting 1.2 to 1.6 Million Low-Income People from Medicaid, SCHIP and Other State Health Insurance Programs, Center on Budget and Policy Priorities, Dec. 22, 2003.

Ku L, Broaddus M. Funding Health Coverage For Low-Income Children In Washington, Center on Budget and Policy Priorities, Nov. 10, 2003.

Ku L, Report Documents Growing Disparities in Health Care Coverage Between Immigrant and Citizen Children as Congress Debates Immigrant Care Legislation, Center on Budget and Policy Priorities, Oct. 14, 2003

Ku L. CDC Data Show Medicaid and SCHIP Played a Critical Counter-Cyclical Role in Strengthening Health Insurance Coverage during the Economic Downturn, Center on Budget and Policy Priorities, Rev. Oct. 8, 2003.

Ku L. How Many Low-Income Medicare Beneficiaries In Each State Would Be Denied The Medicare Prescription Drug Benefit Under The Senate Drug Bill? Center on Budget and Policy Priorities, July 31, 2003.

Ku L. State Fiscal Relief Provides An Opportunity To Safeguard Medicaid Budgets, Center on Budget and Policy Priorities, June 4, 2003

Ku L, Charging the Poor More For Health Care: Cost-Sharing In Medicaid, Center on Budget and Policy Priorities, May 7, 2003.

Ku L, Fremstad S, Broaddus M. Noncitizens' Use Of Public Benefits Has Declined Since 1996, Center on Budget and Policy Priorities, April 14, 2003.

Nathanson M, Ku L. Proposed State Medicaid Cuts Would Jeopardize Health Insurance Coverage For 1.7 Million People: An Update, Center on Budget and Policy Priorities, Mar. 21, 2003.

Ku L, Shift In Costs From Medicare To Medicaid Is A Principal Reason For Rising State Medicaid Expenditures, Center on Budget and Policy Priorities, March 3, 2003.

Ku L, The Medicaid-Medicare Link: State Medicaid Programs Are Shouldering A Greater Share of The Costs Of Care For Seniors And People With Disabilities, Center on Budget and Policy Priorities, Feb. 25, 2003.

Ku L, Broaddus M. Why Are States' Medicaid Expenditures Rising? Jan. 13, 2003.

Cohen-Ross D, Ku L. Quarterly Status Reporting Could Jeopardize The Health Coverage Of Hundreds Of Thousands Of Eligible Low-Income Californians, Center on Budget and Policy Priorities, Revised Dec. 23, 2002

Ku L, et al., Proposed State Medicaid Cuts Would Jeopardize Health Insurance Coverage for One Million People, Center on Budget and Policy Priorities, Dec. 23, 2002.

Ku L, Cohen-Ross D. <u>Staying Covered: The Importance of Retaining Health Insurance Coverage for Low-income Families</u>, Commonwealth Fund, Dec. 2002. (One of the most frequently downloaded Commonwealth Fund reports in 2006.) [PR]

Ku L, New CDC Data Show the Importance of Sustaining Medicaid and SCHIP Coverage as Private Health Insurance Erodes in 2002, Center on Budget and Policy Priorities, Revised Oct. 8, 2002.

Ku L, Cohen-Ross D, Nathanson M. State Medicaid Cutbacks and the Federal Role In Providing Fiscal Relief to States, Center on Budget and Policy Priorities, Revised. Aug. 8, 2002

Ku L, Park E., Improving Transitional Medicaid to Promote Work and Strengthen Health Insurance Coverage, Center on Budget and Policy Priorities, April 29, 2002.

Capps R, Ku L, et al. How Are Immigrants Faring After Welfare Reform? Preliminary Evidence from Los Angeles County and New York City, Report to the Office of the Assistant Secretary for Planning and Evaluation, Dept. of Health and Human Services, March 2002. Available at http://aspe.hhs.gov/hsp/immigrants-faring02/index.htm. [PR]

Broaddus M, et al. Expanding Family Coverage: States' Medicaid Eligibility Policies for Working Families in the Year 2000, Center on Budget and Policy Priorities, Revised Feb. 2002.

Ku L, Park E, Administration's Regulation to Reduce Medicaid Upper Payment Limit Would Further Worsen State Budget Crises, Center on Budget and Policy Priorities, Dec. 11, 2001.

Ku L, Park E. Federal Aid to State Medicaid Programs Is Falling While the Economy Weakens, Center on Budget and Policy Priorities, Oct. 6, 2001.

Ku L, Rothbaum E. Many States Are Considering Medicaid Cutbacks in the Midst of the Economic Downturn, Center on Budget and Policy Priorities, October 26, 2001.

Park E, Ku L, Health Care Provisions of House Ways And Means Committee Stimulus Package Offer Little Help for the Health Insurance Needs of Unemployed Workers, Center on Budget and Policy Priorities, Oct. 19, 2001.

Park E, Ku L, Temporary Medicaid Improvements As Part of a Stimulus Package, Center on Budget and Policy Priorities, Oct. 9, 2001.

Ku L, Counting the Uninsured: A Guide for the Perplexed, Center on Budget and Policy Priorities, Sept. 21, 2001

Park E, Ku L. Administration Medicaid and SCHIP Waiver Policy Encourages States to Scale Back Benefits Significantly and Increase Cost-Sharing for Low-Income Beneficiaries, Center on Budget and Policy Priorities, August 15, 2001.

Ku L, Guyer J. Medicaid Spending: Rising Again But Not to Crisis Levels, Center on Budget and Policy Priorities, April 20, 2001.

Broaddus M, Ku L. Nearly 95 Percent of Low-Income Uninsured Children Now Are Eligible for Medicaid or SCHIP, Center on Budget and Policy Priorities, Dec. 6, 2000. 12/6/00

Ku L, Freilich A., Caring for Immigrants: Health Care Safety Nets in Los Angeles, New York, Miami and Houston, Kaiser Commission on Medicaid and the Uninsured, Feb. 2001.

Holahan J, Ku L, Pohl M.. Is Immigration Responsible for the Growth in the Number of Uninsured People? Kaiser Commission on Medicaid and the Uninsured, March 2001.

Ku L, Blaney S. Health Coverage for Legal Immigrant Children: New Census Data Highlight Importance of Restoring Medicaid and SCHIP Coverage, Center on Budget and Policy Priorities, Revised. Oct. 10, 2000.

Ormond B, Ku L and Bruen B. Engine of Change or One Force among Many? Section 1115 Demonstration Projects and Trends in Medicaid Expenditures (Baltimore, MD: Health Care Financing Administration, February 2001).

Ku L, Limiting Abuses of Medicaid Financing: HCFA's Plan to Regulate the Medicaid Upper Payment Limit, Center on Budget and Policy Priorities, Sept. 27, 2000.

Ku L, Broaddus M. The Importance of Family-Based Insurance Expansions: New Research on the Effects of State Health Reforms, Center on Budget and Policy Priorities, September 5, 2000.

Ku L, Matani S. Immigrants' Access to Health Care and Insurance on the Cusp of Welfare Reform, Assessing the New Federalism Discussion Paper 00-03, Washington, DC: The Urban Institute, June 2000.

Ku L, Garrett B. How Welfare Reform and Economic Factors Affected Medicaid Participation: 1984-96, Assessing the New Federalism Discussion Paper 00-01, Washington, DC: The Urban Institute, February 2000.

Ku L, Ellwood MR, Hoag S, Ormond B, Wooldridge J. The Evolution of Medicaid Managed Care Systems and Eligibility Expansions in Section 1115 Projects. Final report to the Health Care Financing Administration, from the Urban Institute and Mathematica Policy Research, Inc., May 2000. [PR]

Coughlin T, Ku L, Kim, J., Reforming the Medicaid Disproportionate Share Program in the 1990s, Assessing the New Federalism, The Urban Institute, Discussion Paper 99-14, (joint release with Commonwealth Fund), 1999. [PR]

Ku L, Bruen B. The Continuing Decline in Medicaid Coverage, Assessing the New Federalism Brief A-37, The Urban Institute, December 1999.

Ku L, Ullman F, Almeida R, What Counts? Determining Medicaid and CHIP Eligibility for Children, Assessing the New Federalism Discussion Paper 99-05, Washington, DC: The Urban Institute, 1999.

Ku L, Hoag S. Medicaid Managed Care and the Marketplace: State Health Reforms in Hawaii, Oklahoma, Rhode Island and Tennessee, Report to the Health Care Financing Administration from the Urban Institute and Mathematica Policy Research, February 1998.

Ku L, Kessler B. The Number and Cost of Immigrants on Medicaid: National and State Estimates, Report to the Office of the Assistant Secretary for Planning and Evaluation from the Urban Institute, December 1997. [PR]

Ku L, Berkowitz, A., Ullman F, Regenstein M. Health Policy for Low-Income People in Mississippi, Assessing the New Federalism, Washington, DC: The Urban Institute, December 1997. [PR]

Nichols L, Ku L, Norton S, Wall S. Health Policy for Low-Income People in Washington Assessing the New Federalism, Washington, DC: The Urban Institute, November 1997. [PR]

Ku L, Wall S. The Implementation of Oklahoma's Medicaid Reform Program: SoonerCare, Report to the Health Care Financing Administration from the Urban Institute and Mathematica Policy Research, October 1997. [PR]

Ku L, Coughlin T, The Use of Sliding Scale Premiums in Subsidized Insurance Programs, Urban Institute Working Paper, March 1997. [PR]

Ku L, Coughlin T, How the New Welfare Reform Law Affects Medicaid, Assessing New Federalism Policy Brief No. A-7, the Urban Institute, February 1997. [PR]

Wooldridge J., Ku L, Coughlin T, Dubay L, Ellwood MR, Rajan S, Hoag S., Reforming State Medicaid Programs: First Year Implementation Experiences from Three States, Mathematica Policy Research, January 1997. [PR]

Wooldridge J, Ku L, Coughlin T, Dubay L, Ellwood MR, Rajan S, Hoag S. Implementing State Health Care Reform: What Have We Learned from the First Year? The First Annual Report of the Evaluation of Health Reform in Five States. Report to the Health Care Financing Administration, from Mathematica Policy Research Inc. and the Urban Institute, December 1996. [PR]

Ku L, Wade M, Dodds S. How Cost-Reimbursement Affected Patients, Health Centers and Medicaid: The Federally Qualified Health Center Program, Report to the Health Care Financing Administration, from the Urban Institute and Mathematica Policy Research, Inc., August 1996.

Long S, Ciemnecki A, Coughlin T, Kenney G, Ku L, Mitchell J, Rajan S, Rosenbach M, Thornton C, Wade M, Zuckerman S. Designing an Evaluation of the Medicaid Health Reform Demonstrations, Report to the Health Care Financing Administration, from the Urban Institute, Center for Health Economics Research and Mathematica Policy Research, Inc., Feb. 1996.

Holahan J, Coughlin T, Liu K, Ku L, Kuntz C, Wade M, Wall S. Cutting Medicaid Spending in Response to Budget Caps, Report to the Kaiser Commission on the Future of Medicaid, Sept. 1995. [PR]

Wade M, Ku L, Dodds S. (1995). The Impact of the Medicaid FQHC Program on Center Users, FQHCs and the Medicaid Program, Urban Institute Working Paper 06428-03, May 1995.

Ku L, Coughlin T. Medicaid Disproportionate Share and Related Programs: A Fiscal Dilemma for the States and the Federal Government, Report to the Kaiser Commission on the Future of Medicaid from the Urban Institute, December 1994.

Holahan J, Coughlin T, Ku L, Lipson D, Rajan S. Increasing Insurance Coverage through Medicaid Waiver Programs, Urban Institute Working Paper 06433-005-01, November 1994.

Rajan S, Coughlin T, Ku L, Holahan J, Lipson, D. Increasing Insurance Coverage through Medicaid Waiver Programs: Case Studies, Urban Institute Working Paper 06433-005-02, November 1994.

Ku L, Publicly Supported Family Planning in the United States: Financing of Family Planning Services. Report to the Kaiser Family Foundation, The Urban Institute, June 1993.

Holahan J, Coughlin T, Ku L, Heslam D, Winterbottom C, The States' Response to Medicaid Financing Crisis: Case Studies Report, Health Policy Center Report 6272-02, The Urban Institute, December 1992 (revised).

Sonenstein F, Ku L, Juffras J, Cohen B. Promising Prevention Programs for Children, Report to the United Way of America, The Urban Institute, March 1991.

Ellwood MR, Ku L. Summary and Policy Recommendations: Studies on Health Care Services to Severely Disabled Children, Report Submitted to the Office of the Assistant Secretary for Planning and Evaluation, DHHS, Lexington, MA: SysteMetrics/McGraw-Hill, August 1990.

Ku L, Who's Paying the Big Bills?: Very High Cost Pediatric Hospitalizations in California in 1987, Report to Office of the Assistant Secretary for Planning and Evaluation, DHHS, Lexington, MA: SysteMetrics/McGraw-Hill, August 1990.

Sonenstein F, Ku L, Adams EK, Orloff T. <u>Potential Research Strategies to Evaluate the Effect of Transitional Medicaid and Child Care Benefits</u>, Report to the Office of the Assistant Secretary for Planning and Evaluation, DHHS, Lexington, MA: SysteMetrics/McGraw-Hill, May 1990.

HIV/AIDS and Reproductive Health

Lindberg L, Ku L, Sonenstein F. Minor Mothers and Adult Fathers: Age Differences Between Teen Mothers and Their Partners, Urban Institute Working Paper, 1996.

Sonenstein FL., Pleck JH, Ku L. Why Young Men Don't Use Condoms: Factors Related to Consistency of Utilization, Sexuality and American Policy Seminar Series, Kaiser Family Foundation and American Enterprise Institute for Public Policy Research, Washington, D.C., May 1995.

Ku L and the NSAM Study Team, Preliminary Results of the Pretest for the National Survey of Adolescent Males, Report to the Centers for Disease Control and Prevention and the National Institute for Child Health and Human Development, November 1994.

Ku L, Levine G, Sonenstein F, State STD Reporting Rules and Research Surveys, Report to the Centers for Disease Control and Prevention, September 1994.

Sonenstein F, Pleck J, Ku L, The Male Side of the Equation, TEC Networks, 33:3-4, June 1992.

Sonenstein F, Pleck J, Ku L, <u>Influences on Adolescent Male Premarital Sexual Behavior</u>, Final Report to the Office of Population Affairs, DHHS from Urban Institute, May 1992.

Sonenstein F, Pleck J, Ku L, Sex and Contraception Among Adolescent Males, <u>TEC Networks</u>, 29:1-3, June 1991.

Sonenstein F, Pleck J, Calhoun C, Ku L, <u>1988 National Survey of Adolescent Males: A User's Guide to the Machine Readable Files and Documentation</u>, Data Set G6, Data Archives on Adolescent Pregnancy and Pregnancy Prevention, Los Altos, CA: Sociometrics Corp, 1991.

Sonenstein F, Pleck J, Calhoun C, Ku L, <u>Determinants of Contraceptive Use by Adolescent Males</u>, Final Report to the National Institute for Child Health and Human Development, Urban Institute, February 1991.

Food and Nutrition Policy

Ku L, Debating WIC, The Public Interest, 135: 108-12, Spring 1999. [PR]

Ku L, Cohen B, Pindus N. Full Funding for WIC: A Policy Review, Washington, DC: Urban Institute Press, 1994.

Ku L, Long S, Brayfield A. and others, <u>Low-Income Children's Nutritional Needs and Participation in USDA's Food Assistance Programs</u>. Final Report to the Food and Nutrition Service, USDA from the Urban Institute, September 1993.

Ku L, Institutional Participation in the National School Lunch and Breakfast Programs, Final Report to the Food and Nutrition Service, USDA from the Urban Institute, March 1993.

Ku L, Reported Meal Production Costs and Reimbursement Rates in the National School Lunch Program, Draft Report to the Food and Nutrition Service, USDA from the Urban Institute, April 1992.

Ku L, Brayfield A, and others, Evaluation of Low-Income Children's Nutritional Needs and Participation in USDA's Food Assistance Programs: Conceptual Assessment. Report to Food and Nutrition Service, USDA from the Urban Institute, February 1992.

Ku L, McKearn M. Effects of the Temporary Emergency Food Assistance Program (TEFAP) on Displacement of Commercial Sales, (with the Economic Research Service and Mathematica Policy Research), Report to Congress, U.S. Dept. of Agriculture, August 1987.* [PR]

Ku L, Dalrymple R., Differences Between SIPP and Food and Nutrition Service Program Data on Child Nutrition and WIC Program Participation, <u>Survey of Income and Program Participation (SIPP) Working Papers</u>, No. 8707, Bureau of the Census, May 1987.

Ku L, Nutritional Research Relating to Infant Feeding in the WIC Program, Report to the Assistant Secretary for Food and Consumer Services, June 1986.*

Richman L, Hidelbaugh T, McMahon-Cox N, Ku L, Dayton CM, Goodrich N. <u>Study of WIC Participant and Program Characteristics</u>, Report to Congress, Food and Nutrition Service, U.S. Dept. of Agriculture (with Ebon Research Systems and Abt Associates Inc.), April 1986. [PR]

Ku L, Abbot J, Forchheimer M. <u>The Feasibility, Costs and Impacts of a Universal School Lunch Program,</u> Draft Report to Congress, U.S. Dept. of Agriculture, June 1985.

Puma M, Ku L, Economic Analysis of the Temporary Emergency Food Assistance Program, Report to Congress, Food and Nutrition Service, U.S. Dept. of Agriculture, May 1985.* [PR]

Ku L, Nichols A. <u>Report on the Food Bank Demonstration Project</u>, Report to Congress, Food and Nutrition Service, U.S. Dept. of Agriculture, April 1984.* [PR]

* These reports were issued as official Agency or Department reports with no listed authors. In addition, Leighton Ku wrote numerous proposed and final regulations and legislative and budget reports while on the staff of the Food and Nutrition Service. In many cases, these were published in the Federal Register, Congressional Record and related Federal series.

Selected Presentations and Testimony

Ku L. Webinar: Health Policy Responses to Covid-19. George Washington Univ. April 9 2020.

Han X, Ku L. Enhancing Staffing in Rural Community Health Centers Can Improve Behavioral Health Care. Health Affairs press briefing, National Press Club, Washington DC, Dec. 4, 2019

Ku, L. Testimony: Economic and Employment Benefits of Expanding Medicaid in North Carolina. Field Hearing, North Carolina Assembly. Winston-Salem, NC. Aug. 16, 2019. Similar presentation at Field Hearing, North Carolina Legislature, Raleigh, NC, Oct. 1, 2019.

Ku L. Current Threats to Medicaid. Dialogue on Diversity. Unidos US. Washington, DC. June 26, 2019.

Ku, L, Rosenbaum S, Keith K, Blumberg L, Sidhu A. Health Policy Goes to Court: Collaborations of Law and Research. AcademyHealth Annual Research Conf. Washington, DC. June 2, 2019

Ku L, Brantley E, Pillai D. The Effects of SNAP Work Requirements in Reducing Participation and Benefits. AcademyHealth Annual Research Conf. Washington, DC. June 4, 2019

Brantley E, Pillai D, Ku L. Factors Affecting Enrollment in Public Programs. AcademyHealth Annual Research Conf. Washington, DC. June 2, 2019

Ku, L. Immigrants and American Health Policy. Boston College. Global Migration Conference: Inclusion and Exclusion. Boston MA April 12, 2019.

Ku, L. Medicaid Policy in the States. Scholars Strategy Network National Leadership Conference, Washington DC. Jan. 18, 2019.

Ku, L. Health Insurance Coverage for DC Latinos. DC Latino Health Leadership Symposium. Washington DC. Jan. 9, 2019.

Seiler N, Ku L. Medicaid's Role in Addressing the Opioid Crisis. GW seminar, Nov. 16, 2017.

Ku L. Medicaid: Addressing Tobacco & Opioid Addictions. Presentation at Addressing Addiction: Policy Prescriptions to Preventing Opiate Abuse and Tobacco Use. Health Policy Institute of Ohio, Columbus, OH, Sept. 26, 2017.

Ku L. Economic and Employment Effects of the Better Care Reconciliation Act. Testimony to the Maryland Legislative Health Insurance Coverage Protection Commission, Maryland House of Delegates, Annapolis, MD. Aug. 1, 2017. Similar presentation at REMI webinar, Aug. 2, 2017.

Ku L. Economic and Employment Effects of the American Health Care Act. Presentation at AcademyHealth Annual Research Conference, New Orleans, June 25, 2017. Similar presentations at

Policy in the Trump Era: National, State, and Regional Economic Impacts Conference, Hall of States, Washington, D.C. June 19, 2017 and at Medicaid Policy Conference, Council of State Governments, Washington, DC, June 29, 2017.

Ku L. Repealing Obamacare: Effects on the Health Workforce. Presentation at AcademyHealth Annual Research Conference, New Orleans, June 26, 2017.

Brantley E, Ku L. Promoting Tobacco Cessation: The Role of Medicaid and Other Policies. Poster at AcademyHealth Annual Research Conference, New Orleans, June 26, 2017.

Ku L. The Future of Medicaid. Conference on Obamacare After Obama. Southern Illinois Healthcare/Southern Illinois University School of Law. Springfield, IL, May 19, 2017.

Brantley E, Ku L. Linking Data to Uncover Medicaid's Role in Cessation. National Conference on Tobacco or Health, Austin TX, March 23, 2107.

Ku L. The Future of Medicaid and the Safety Net. Health Policy Expert Series. Milken Institute School of Public Health. March 21, 2017.

Ku L. Financial Consequences of ACA Repeal. Podcast, Feb. 15, 2017 http://www.commonwealthfund.org/interactives-and-data/multimedia/podcasts/new-directions-in-health-care/the-impact-of-aca-repeal

Ku L. Repealing Health Reform: Economic and Employment Consequences for States. REMI Seminar, Washington, DC. Jan. 27, 2016. Similar national webinar Feb. 1, 2017.

Ku L. Pay for Success Demonstrations of Supportive Housing for Chronically Homeless Individuals: The Role of Medicaid. Association for Public Policy and Management Research Conference, Washington, DC. Nov. 4, 2016.

Ku L. Immigrants and Community Health Centers. Pennsylvania Association of Community Health Centers, Lancaster PA. Oct. 12, 2016.

Ku L. Moving Medicaid Data Forward (discussant). Mathematica Policy Research, Washington, DC Oct. 11, 2016.

Ku L. Medicaid Can Do More to Help Smokers Quit, Michael Davis Lecture, University of Chicago, Oct. 4, 2016. Similar seminar at Univ. of Maryland, Sept. 15, 2016.

Ku L, Borkowski L. Publish or Perish: Advice for Publishing for Peer-Reviewed Journals in Health Policy. GW Department of Health Policy & Management seminar, Sept. 20, 2016.

Ku L . Family Planning, Health Reform and Potential Restrictions on Coverage or Access, presented at Contraception Challenged: Putting *Zubik v. Burwell* in Context, sponsored by National Family Planning and Reproductive Health Association meeting at Capitol Visitors Center, Washington, DC, June 7, 2016.

Ku L Russell T. et al. Debate on the Role of Public Programs in Care for the Poor. Benjamin Rush Institute, Washington, DC, April 1, 2016.

Brantley E, Ku L. Improved Access and Coverage Under The ACA: Are Immigrants at the Table?, presented at GW Research Day, March 30, 2016. (Won prize for best policy and practice research.)

Ku L. The Role of the Health Care Safety Net, Virginia Commonwealth University, Richmond, March 17, 2016.

- Ku L, Steinmetz E, Bysshe T. Medicaid Continuity of Coverage in an Era of Transition. Webinar for Association of Community-Affiliated Plans, Nov. 2, 2015.
- Ku L Bruen B, Steinmetz E, Bysshe T. Trends in Tobacco Cessation Among Medicaid Enrollees, presented at AcademyHealth Annual Research Meeting, Minneapolis, June 15, 2015.
- Ku L. Using Economic Impact Analysis in Medicaid Advocacy, presented at AcademyHealth Annual Research Meeting, Minneapolis, June 13, 2015.
- Ku L. The Translation of Health Services Research into Policy Related to the Affordable Care Act, Presented at American Association of Medical Colleges, March 20, 2015.
- Ku L. Policy and Market Pressures on Safety Net Providers, National Health Policy Conference, Feb. 10, 2015.
- Ku L. 'Economic and Employment Costs of Not Expanding Medicaid in North Carolina, Cone Health Foundation, Greensboro, NC, Jan. 9, 2015.
- Ku L . Health Reform: How Did We Get Here, What the Heck Is Going On and What Next? Keynote Address: Medical Librarians Association, Alexandria VA, Oct. 20, 2014.
- Ku L. Health Reform and the Safety Net. Testimony before Maryland Community Health Resources Commission. Annapolis, MD, Oct. 2, 2014.
- Ku L. Some Key Issues in Health Reform. Presented at American Association for the Advancement of Science Health Policy Affinity Group Meeting, Washington, DC July 24, 2014.
- Ku L, Curtis D. Barlow P. District of Columbia's Health Benefits Exchange at the Launch of a State-Based Exchange: Challenges and Lessons Learned Georgetown Law School Summer Session on Health Reform, July 23, 2014.
- Ku L. The Big Picture on Medicaid for State Legislators Presented at Council of State Governments. Medicaid Workshop for Health Leaders, Washington, DC June 20, 2014.
- Ku L, Frogner B, Steinmetz E, Pittman P. Many Paths to Primary Care: Flexible Staffing and Productivity in Community Health Centers, Presented at Annual Research Conference AcademyHealth, San Diego, CA, June 10, 2014.
- Ku L, Zur J., Jones E, Shin, P, Rosenbaum S. How Medicaid Expansions and Post-ACA Funding Will Affect Community Health Centers' Capacity. Presented at Annual Research Conference AcademyHealth, San Diego, CA, June 9, 2014.
- Ku L. Critical Issues for Community Health Centers, Alliance for Health Reform briefing, Commonwealth Fund, Washington, DC. May 16, 2014.
- Ku L. Immigrants' Health Access: At the Nexus of Welfare, Health and Immigration Reform, Keynote talk at Leadership Conference on Health Disparities, Harvard Medical School, Boston, MA May 6, 2014.
- Ku L. Wellness and the District of Columbia. District of Columbia Chamber of Commerce forum, Washington, DC, March 11, 2014.

- Ku L. Health Care for Immigrant Families: A National Overview. Congressional Health Justice Summit, Univ. of New Mexico Robert Wood Johnson Center for Health Policy, Albuquerque, NM, Sept. 7, 2013.
- Ku L. Health Reform: Promoting Cancer Prevention and Care. Talk to DC Citywide Navigators Network, Washington, DC, July 15, 2013.
- Ku L. Analyzing Policies to Promote Prevention and Health Reform. Seminar at the Centers for Disease Prevention and Promotion, Atlanta, GA. July 10, 2013.
- Ku L. Medicaid: Key Issues for State Legislators. Council on State Governments, Medicaid Workshop for Health Leaders, Washington, DC, June 22, 2013.
- Ku L, Steinmetz E. Improving Medicaid's Continuity of Care: An Update. Association of Community Plans Congressional Briefing, May 10, 2013.
- Ku L (with Brown C, Motamedi R, Stottlemeyer C, Bruen B) Economic and Employment Impacts of Medicaid Expansions. REMI Monthly Policy Seminar, Washington, DC, April 24, 2013.
- Ku L. Building Texas' Primary Care Workforce, Legislative Briefing: Health Care Coverage Expansion & Primary Care Access in Texas, Center on Public Priorities and Methodist Healthcare Ministries, Texas Capitol, Austin, TX, Mar. 8, 2013
- Ku L, Jewers M. Health Care for Immigrants: Policies and Issues in a New Year. Presentation to Conference on After the Election: Policies Affecting Young Children of Immigrants, Migration Policy Institute, Washington, DC, Jan. 17, 2013.
- Ku L. Health Reform and the New Health Insurance Exchanges: Issues for Indiana Families, Indiana Family Impact Seminar at Indiana State Legislature, Nov. 19, 2012.
- Ku L. Pediatric Preventive Medical and Dental Care: The Role of Insurance and Poverty, AcademyHealth Annual Research Meeting, Orlando, FL, June 24, 2012.
- Ku L. A Medicaid Tobacco Cessation Benefit: Return on Investment, Webinar for Partnership for Prevention and Action to Quit, Feb. 8, 2012.
- Ku L. Safety Net Financing Issues, Webinar for National Workgroup on Integrating a Safety Net, National Academy for State Health Policy, Feb. 6, 2012
- Ku L. How Medicaid Helps Children: An Introduction. Briefing to Congressional Children's Health Caucus, Jan. 25, 2012
- Ku L. Market Access Webinar: Provider Access: Coordinating Medicaid & Exchanges: Continuity of Services & the Role of Safety Net Providers, Webinar for Center for Consumer Information and Insurance Oversight, Centers for Medicare & Medicaid Services, Dec. 15, 2011.
- Ku L. The Safety Net: An Evolving Landscape, Presented to Grantmakers in Health, Washington, DC. Nov. 3, 2011. [Similar talks in Orlando, FL to Blue Cross Blue Shield of Florida Foundation, Feb. 17, 2012 and in Williamsburg, VA to Williamsburg Community Health Foundation Apr. 3, 2012 and to Virginia Health Foundation, Nov. 13, 2012]
- Ku L. Open Access Publishing. Presented at forum for GW Medical Center faculty and staff, Oct. 24,

2011.

- Ku L, Levy A. Implications of Health Reform for CDC's Cancer Screening Programs: Preliminary Results, Presentation to National Breast and Cervical Cancer Early Detection Program and Colorectal Cancer Control Program Directors Meeting, Atlanta, GA, Oct. 21, 2011.
- Ku L. Coordinating Medicaid & Exchanges: Continuity of Services & the Role of Safety Net Providers, Presented to America's Health Insurance Plans, Washington, DC. Sept. 16, 2011.
- Ku L. The Potential Impact of Health Reform on CDC's Cancer Screening Programs: Preliminary Results, Presented to NBCCEDP Federal Advisory Committee Meeting, Atlanta, GA, Jun. 17, 2011. (Similar presentations to the American Cancer Society, Sept. 2011.)
- Ku L. Crystal Balls and Safety Nets: What Happens After Health Reform? Presented at AcademyHealth, Seattle, WA, June 2011.
- Ku L. Strengthening Primary Care to Bend the Cost Curve: Using Research to Inform U.S. Policy, International Community Health Center Conference, Toronto, Canada, June 2011
- Ku L. Integrating/Coordinating Care for Safety Net Providers: Issues and Local Examples, International Community Health Center Conference, Toronto, Canada, June 2011.
- Ku L. Health Reform: Federal Implementation and More Unanswered Questions Presented at American Society of Public Administration, Baltimore, MD, Mar. 14, 2011.
- Ku L. Key Issues in the Confusing World of Health Reform, Presented to Industrial College of the Armed Forces, National Defense University, Washington, DC, Feb. 25, 2011.
- Ku L. Reducing Disparities and Public Policy Conflicts, Institute of Medicine Workshop on Reducing Disparities in Life Expectancy, Washington, DC, Feb. 24, 2011.
- Ku L. Primary Care, Hospitalizations and Health Reform, American Enterprise Institute Workshop, Washington, DC, Feb. 17, 2011.
- Ku L. The Promise and Perils of Health Policy for Asians in the United States, Invited keynote talk at 4th International Asian Health and Wellbeing Conference, Univ. of Auckland, New Zealand, NZ, July 6, 2010. Similar talk at symposium sponsored by the New Zealand Office of Ethnic Affairs, Wellington, NZ, July 8, 2010.
- Ku L, Strengthening Primary Care to Bend the Cost Curve: The Expansion of Community Health Centers Through Health Reform, Briefing for Senate and House staff and media, convened by Sen. Bernie Sanders (VT), Russell Senate Office Building, June 30, 2010.
- Ku L. Ready, Set, Plan, Implement. Executing Medicaid's Expansion, *Health Affairs* Conference on Health Reform, Washington, DC, June 8, 2010.
- Ku L. Coordinating Care Among Safety Net Providers, Primary Care Forum, National Academy of State Health Policy, Alexandria, VA, June 2, 2010.
- Ku L. Title VI: The Role of Culturally Competent Communication in Reducing Ethnic and Racial Health Care Disparities, National Minority AIDS Education and Training Center Spring Symposium, Howard

Univ. May 29, 2010.

Ku L. American Health Reform as Massive Incrementalism, American Association for Budget and Program Analysis, Nov. 24, 2009.

Ku L. The Health Care Safety Net and Health Reform, National Academy of Public Administration, Conference on Health Care for the Future, Nov. 22, 2009.

Ku L. The Health of Latino Children, National Council of La Raza Symposium on Latino Children and Youth, Oct. 22, 2009.

Ku L. What the Obama Administration Will Mean for Child Health, AcademyHealth preconference session on Child Health, Chicago, IL June 2009.

Ku L. Immigrants and health reform, 6th Annual Immigration and Law Conference, Georgetown Univ. Law School, Migration Policy Institute and Catholic Legal Immigration Network, Washington, DC, June 24, 2009.

Ku L. From the Politics of No! to the Potential for Progress, invited keynote talk about immigrant policy and research to Society for Research in Child Development, Denver, CO, April 1, 2009.

Ku L. Strengthening the Primary Care Safety Net, National Association of Community Health Centers, Policy and Issues Conference, March 26, 2009.

Ku L. The Dial and the Dashboard: Assessing the Child Well-Being Index, Presentation to the Board of the Foundation for Child Development, March 3, 2009.

Ku L. Key Data Concerning Health Coverage for Legal Immigrant Children and Pregnant Women, invited presentation to Senate staff, Jan. 13, 2009.

Ku L. Comparing the Obama and McCain Health Plans, George Washington Univ. Medical School Alumni Conference, Sept. 27, 2008.

Ku L. The Future of Medicaid, Medicaid Congress, sponsored by Avalere Health and Health Affairs, Washington, DC, June 5, 2008.

Ku L. A Brief Appreciation of Health Advocates: Progress Made, Some Setbacks, Challenges Ahead, Public Interest Law Center of Philadelphia Conference, Philadelphia, PA, May 14, 2008.

Ku L. Financing Health Care Reform in New Jersey: Making Down Payments on Reform, Rutgers-AARP Conference, New Brunswick, NJ. Mar. 18, 2008

Ku L, Perez T, Lillie-Blanton M. Immigration and Health Care-What Are the Issues, Kaiser Family Foundation Health Cast, webcast interview March 12, 2008.

Ku L. How Research Might Affect SCHIP Reauthorization, Child Health Services Research Meeting at AcademyHealth, Orlando, FL, June 2, 2007.

Ku L. Immigrant Children and SCHIP Reauthorization, Capital Hill Briefing conducted by the Population Resource Center, April 20, 2007.

- Ku L. Health Policy and Think Tanks, Robert Wood Johnson Health Policy Fellows, Institute of Medicine, June 2006. Similar talk in other years.
- Ku L. Medicaid Reform and Mental Health, National Alliance for the Mentally Ill, Annual Conference, Austin, TX, June 20, 2005.
- Ku L. Cost-sharing in Medicaid and SCHIP: Research and Issues, National Association of State Medicaid Directors, Washington, DC, Nov. 18, 2004. Similar talk given to National Academy of State Health Policy, St. Louis, MO, Aug. 2, 2004.
- Ku L. Coverage of Poverty-Level Aged and Disabled in Mississippi's Medicaid Program, Testimony to Mississippi Senate Public Health and Welfare Committee, Aug. 24, 2004
- Ku L. Medicaid Managed Care Issues, Testimony to Georgia House of Representatives Appropriations Committee, March 2, 2004.
- Ku L. Medi-Cal Budget Issues, Testimony to Joint Hearing of California Senate Budget and Health and Human Services Committees, Feb. 26, 2003.
- Ku L .New Opportunities to Improve Health Care Access and Coverage, American College of Emergency Physicians, May 1, 2001.
- Ku L,. Medicaid DSH and UPL: Perplexing Issues, National Association of Public Hospitals Health Policy Fellows Conference, Washington, DC, Mar. 20, 2001.
- Ku L, Insurance Coverage and Health Care Access for Immigrant Families, Testimony Before the U.S. Senate Finance Committee, Washington, DC, March 13, 2001.
- Ku L. Increasing Health Insurance Coverage for Low-Income Families and Children, Insuring the Uninsured Project Conference, Sacramento, CA, Feb. 13, 2001.
- Ku L, Concerning the Healthy Families Program Parent Expansion Proposal, Testimony Before a Joint Hearing of the California Senate Health and Human Services and Insurance Committees and Budget and Fiscal Review Subcommittee # 3, Sacramento, CA, January 30, 2001.
- Ku L, Insurance Trends and Strategies for Covering the Uninsured, National Health Law Program Conference, Washington, DC, Dec. 3, 2000.
- Ku L, Improving Health Care Access and Coverage: New Opportunities for States in 2001, Midwest Leadership Conference, Council of State Governments, Minneapolis, MN, August 6, 2000.
- Ku L, Health Care for Immigrants: Recent Trends and Policy Issues, Alliance for Health Reform, Washington, DC, August 2, 2000. Similar talks in Miami at Florida Governor's Health Care Summit and in San Diego at California Program on Access to Care conference.
- Ku L, Matani S, Immigrants' Access to Health Care and Insurance on the Cusp of Welfare Reform, presented at Association for Health Services Research Conference, Los Angeles, CA, June 25, 2000.
- Ku L, Matani S. Immigrants and Health Care: Recent Trends and Issues, presented to the Association of Maternal and Child Health Programs meeting, Washington, DC, March 7, 2000.

- Ku L, Ellwood MR., Hoag S, Ormond B, Wooldridge J. Building a Newer Mousetrap: the Evolution of Medicaid Managed Care Systems and Eligibility Expansions in Section 1115 Projects, presented at American Public Health Association meeting, Chicago, IL, Nov. 10, 1999.
- Ku L. Young Men's Reproductive Health: Risk Behaviors and Medical Care", presented at D.C. Campaign to Prevent Teen Pregnancy Meeting, Washington, DC, Oct. 19, 1999.
- Ku L, Medicaid and Welfare Reform: Recent Data, presented at Getting Kids Covered Conference, sponsored by National Institute for Health Care Management and Health Resources and Services Administration, Washington, DC, Oct. 6, 1999.
- Ku L, Garrett B. How Welfare Reform and Economic Factors Affected Medicaid Participation, presented at Association for Health Services Research meeting, Chicago, IL, June 29, 1999.
- Ku L. Recent Factors Affecting Young Men's Condom Use, presented to conference sponsored by National Campaign to Prevent Teen Pregnancy and Advocates for Youth, Washington, DC, February 1999.
- Medicaid, Welfare Reform and CHIP: The Growing Gulf of Eligibility Between Children and Adults, presented to National Association of Public Hospitals and Health Systems, Washington, DC, and to Generations United, Washington, DC, September 1998.
- Ku L. Sliding Scale Premiums and Cost-Sharing: What the Research Shows presented at workshop on CHIP: Implementing Effective Programs and Understanding Their Impacts, Agency for Health Care Policy and Research User Liaison Program, Sanibel Island, FL, June 30, 1998.
- Ku L, Sonenstein F, Boggess S, Pleck J. Understanding Changes in Teenage Men's Sexual Activity: 1979 to 1995, presented at 1998 Population Association of America Meetings, Chicago, IL, April 4, 1998.
- Ku L. Welfare Reform, Immigrants and Medicaid presented at Annual Meeting of the Association of Maternal and Child Health Programs, Washington, DC, March 9, 1998. Similar talk presented at Association for Health Services Research Meeting, Washington, DC, June 23, 1998.
- Ku L. Medicaid Policy and Data Issues: An Overview presented to National Committee on Vital and Health Statistics, DHHS, September 29, 1997.
- Ku L. How Welfare Reform Will Affect Medicaid Coverage presented to National Ryan White Title IV Program Conference, Washington, DC, November 8, 1996.
- Ku L, Rajan S, Wooldridge J, Ellwood MR, Coughlin T, Dubay L. Using Section 1115 Demonstration Projects to Expand Medicaid Managed Care in Tennessee, Hawaii and Rhode Island, presented at Association of Public Policy and Management, Pittsburgh, Nov. 1, 1996.
- Ku L. The Federal-State Partnership in Medicaid: Is Divorce Inevitable or Would Therapy Be Enough? presented to Council of State Governments Conference on Managing the New Fiscal Federalism, Lexington, KY, May 10, 1996.
- Ku L. The Male Role in the Prevention of Teen Pregnancy, presented to the Human Services Committee, National Council of State Legislatures, Washington, DC, May 9, 1996

- Ku L. Implications of Converting Medicaid to a Block Grant with Budget Caps, presented to American Medical Association State Legislation Meeting, Aventura, FL, Jan. 1996 and to the American Psychiatric Association Public Policy Institute, Ft. Lauderdale, FL, March 1996.
- Ku L. Medicaid: Program Under Reconstruction, presented at Speaker's Forum at New York City Council, September 12, 1995.
- Ku L. State Health Reform Through Medicaid Section 1115 Waivers, presented at Pew Health Policy Conference, Chicago, IL, June 3, 1995.
- Ku L. Setting Premiums for Participants in Subsidized Insurance Programs, presented at Conference on the Federal-State Partnership for State Health Reform, sponsored by HCFA, the National Academy of State Health Policy and RTI, March 15, 1995.
- Ku L. Medicaid Disproportionate Share and Related Programs: A Fiscal Dilemma for the Federal Government and the States, with Teresa Coughlin, presented to the Kaiser Commission on the Future of Medicaid, November 13, 1994.
- Ku L. Full Funding for WIC: A Policy Review, with Barbara Cohen and Nancy Pindus, presented at Dirksen Senate Office Building, Washington, DC, in a panel hosted by the Center on Budget and Policy Priorities, Bread for the World, the Food Research and Action Center and the National Association of WIC Directors, May 5, 1994.
- Ku L. The Financing of Family Planning Services in the U.S., presented at the Institute of Medicine, National Academy of Sciences on February 15, 1994 and at the American Public Health Association meeting, San Francisco, CA, October 25, 1993.
- Ku L. Using SUDAAN to Adjust for Complex Survey Design in the National Survey of Adolescent Males, with John Marcotte and Karol Krotki, briefing at National Institute of Child Health and Human Development, Rockville, MD, April 2, 1992.
- Ku L. The Association of HIV/AIDS Education with Sexual Behavior and Condom Use Among Teenage Men in the United States with Freya Sonenstein and Joseph Pleck, presented at the Seventh International Conference on AIDS, Florence, Italy, June 1991.
- Ku L. Patterns of HIV-Related Risk and Preventive Behaviors Among Teenage Men in the United States, with Freya Sonenstein and Joseph Pleck, paper presented at the Sixth International Conference on AIDS, San Francisco, CA, June 23, 1990.
- Ku L. Trends in Teenage Childbearing, Pregnancy and Sexual Behavior, paper presented at the American Sociological Association Meeting, Washington, D.C., August 15, 1990.
- Ku L. Research Designs to Assess the Effect of WIC Participation by Pregnant Women on Reducing Neonatal Medicaid Costs, briefing to Congressional staff, February 1987.
- Ku L. Testimony about the Special Supplemental Food Program for Women, Infants and Children (WIC), with Frank Sasinowski, presented to House Education and Labor Committee on behalf of the American Public Health Association, March 1983.

<u>Media</u>

Leighton Ku has extensive experience with electronic and print media. He has been interviewed by ABC, NBC, CBS, Fox, PBS, National Public Radio, CNN, Bloomberg TV, BBC and other television or radio news broadcasts and webcasts. He has been quoted or his research has been cited in the *New York Times*, *Los Angeles Times, Washington Post, Wall Street Journal, USA Today, Christian Science Monitor, Congressional Record, Huffington Post, Forbes, Fortune, US News and World Report, Politico, The Hill, Buzzfeed*, and trade publications, such as *Modern Health Care, Nation's Health, CQ HealthBeat, Kaiser Health News*, etc. He has been an online contributor to the *Washington Post*. He was a regular panelist on a radio talk show about health policy, broadcast on WMAL in the Washington DC region. He has been cited as an expert by *PolitiFact* and related fact-checking sources.

Service and Honors

Member, Executive Board, District of Columbia Health Benefits Exchange Authority (2012-now) (The board governs the new health insurance exchange for the District of Columbia, based on the Patient Protection and Affordable Care Act. This is a voluntary, unpaid position, appointed by the Mayor and approved by the City Council. I was reappointed in 2018.) Chair of the Research Committee and the Information Technology Committee. Led working groups that developed the financial sustainability plan for the Exchange, dental plans, standardized benefit plans and changes required in light of threats to the Affordable Care Act.

One of three top reviewers of the year, Milbank Quarterly, December 2019

Social Science Research Network, one of five most downloaded papers in field, Oct-Dec. 2018.

Commonwealth Fund, two of the top ten most frequently downloaded reports (2017).

Commonwealth Fund, one of top ten most frequently downloaded reports (2006).

Award for promoting racial and economic justice, Mississippi Center for Justice, 2005

Service award from the National WIC Directors Association (2002).

Choice (the magazine of the American Library Association for academic publications), top ten academic books of the year (1994)

Pew Health Policy Fellow, Boston University and Brandeis University, 1987-1990.

Public Health Service traineeship, University of California, Berkeley, 1976-79.

Other Service

Submitted expert witness declaration in a federal lawsuit regarding the President's proclamation which would have denied visas to those without approved forms of health insurance, Declaration in Support of Plaintiffs' Motion for a Preliminary Injunction (regarding Presidential Proclamation on Visas and Health Insurance), *John Doe #1, et al. v Donald Trump, et al.* United States District Court, District of Oregon, filed November 8, 2019. [Resulted in an injunction prohibiting implementation of the visa denials.]

Submitted expert witness declaration in federal lawsuits on public charge regulations and health, including *La Clinica de la Raza, et al. v. Donald Trump, et al.* United States District Court, Northern District of California, September 1, 2019. *Make the Road New York, et al v Ken Cucinelli, et al.* United States District Court, Southern District of New York, Sept. 9, 2019. *State of New York, et al. v. U.S.*

Department of Homeland Security, et al. United States District Court, Southern District of New York, Sept. 9, 2019. [Resulted in injunctions prohibiting implementation of the public charge regulations.]

Helped develop and cosigned *amicus* briefs on behalf of public health scholars in key federal lawsuits, including *King v Burwell* (health insurance exchanges), *Stewart v Azar* (approval of Kentucky work requirement waiver, versions 1 and 2), *Gresham v Azar* (approval of Arkansas work requirements). *Texas v Azar* (constitutionality of ACA), *Philbrick v Azar* (approval of New Hampshire work requirement) and *Massachusetts v. US Dept of Health and Human Service* (contraceptive mandate).

Parliamentarian, Milken Institute School of Public Health, 2019

Member, Technical Expert Panel, AHRQ Panel on Future of Health Services Research, RAND, 2019.

Served as expert witness in federal lawsuits on immigration and health, including *State of Texas v United States and Perez* and *State of New York v Trump* (Deferred Action for Childhood Arrivals). 2018.

Co-Director, PhD Health Policy Program. First at GW Trachtenberg School of Public Policy and Administration, now at Milken Institute School of Public Health, 2015-now

Served as search committee member, chair, Department of Health Policy and Management, 2019 and 2020 and faculty, Dept. of Exercise and Nutrition Sciences, 2019.

Search committee, Associate Provost for Graduate Studies, George Washington Univ, 2019

Member, AcademyHealth/NCHS Health Policy Fellowship Program board. 2016-17.

Affiliated faculty, Jacobs Institute of Women's Health, 2015-now.

Advisory Board, Remaining Uninsured Access to Community Health Centers (REACH) Project, Univ. of California Los Angeles, 2015-17.

Member, DC Metro Tobacco Research and Instruction Consortium (MeTRIC). 2014- present

Member, Health Workforce Research Institute, GW, 2013-present.

Member, National Advisory Board, Public Policy Center of University of Iowa, 2014-18.

Chair/Vice Chair, Advocacy Interest Group, AcademyHealth, 2014-17.

Member, Advisory Committee on Non-Health Effects of the Affordable Care Act, Russell Sage Foundation, Dec. 2013.

Member, Technical Expert Group on the Affordable Care Act and the National Survey of Family Growth, National Center for Health Statistics, Centers for Disease Control and Prevention, Nov. 2013

Member, Steering Committee, GW Institute of Public Policy, 2013-now

Member, External Review Committee for Department of Family Science for the University of Maryland School of Public Health, 2012.

GW Faculty Senator, representing School of Public Health and Health Services, 2010-12.

Member of numerous University, School and Departmental committees. 2008-present.

Member or chair, numerous faculty and dean search committees, Milken Institute School of Public Health and School of Nursing, George Washington University. 2008-present.

National Institutes of Health, member of various grant review study sections (1996-now).

Invited reviewer. Committee on National Statistics. National Academy of Sciences. Databases for Estimating Health Insurance Coverage for Children. 2010-11.

Grant reviewer. Robert Wood Johnson Public Health and Law program. 2010.

Invited reviewer, Institute of Medicine report on family planning services in the U.S., 2009.

External reviewer for faculty promotion and tenure for Harvard School of Public Health, Harvard Medical School, Univ. of California at Los Angeles and at San Diego, Boston University, Baruch College, George Mason University, University of Maryland, University of Iowa, Kansas University, Portland State University, etc., 2008-present.

Submitted expert witness affidavits/declarations in federal, state and local lawsuits including: *Texas v United States* and *New York, et al. v. Trump* (Deferred Action for Childhood Arrivals), *Wood, et al. v. Betlach*, (Medicaid cost sharing), *Lozano v. City of Hazleton* (immigrant rights), *Spry, et al., v. Thompson* (Medicaid cost-sharing), *Dahl v. Goodno* (Medicaid cost-sharing), *Newton-Nations, et al., v. Rogers* (Medicaid cost-sharing) and *Alford v. County of San Diego* (cost-sharing for a local health program).

Board Member and Treasurer, Alliance for Fairness in Reforms to Medicaid (2002-2008)

Urban Institute, founding member, Institutional Review Board (1997-2000)

National Health Research Institute (Taiwan's NIH) grant reviewer (1999).

Urban Institute, member, Diversity Task Force (1995)

Pew Health Policy Fellow, Boston University and Brandeis University, 1987-1990.

Consultant Services

Consortium of law practices, including Justice Action Center, Paul Weiss, National Health Law Program and New York State Attorney General, 2019

Mexican American Legal Defense and Educational Fund, 2018

New Jersey State Attorney General, 2018

New York State Attorney General, 2017

First Hospital Foundation, Philadelphia PA, 2017

Wilmer Hale/Planned Parenthood Federation, 2017

Centers for Disease Control and Prevention, 2016

Professional Society Memberships and Service

AcademyHealth (formerly Association for Health Services Research), Program Selection Committees (multiple years), chair Advocacy Interest Group (2014-16).

American Public Health Association

Association of Public Policy and Management, Program Selection Committees (many years)

Editorial Peer Review Service

Associate editor, BMC Health Services Research, 2009 – 2013.

Reviewer for numerous journals, including *Health Affairs, New England Journal of Medicine, Journal of the American Medical Association, Milbank Quarterly, Pediatrics, American Journal of Public Health, Inquiry, Medical Care, HSR, Medicare and Medicaid Research Review, American Journal of Preventive Medicine, Family Planning Perspectives, Journal of Association of Public Policy and Management, Nicotine and Tobacco Research, Maternal and Child Health, Journal of Health Care for the Poor and Underserved, JAMA-Internal Medicine, Public Administration Review (1990 to now). In 2017, I reviewed 16 manuscripts for journals. External reviewer for RAND Corporation, National Academy of Science, Oxford Univ. Press, etc.*

Awarded as one of three top reviewers of the year, Milbank Quarterly, December 2019

Public Health Practice Portfolio

Member, Executive Board, District of Columbia Health Benefits Exchange Authority (2012-now). The board governs the new health insurance exchange for the District. (Nominated by the Mayor and appointed by the City Council; reappointed in 2017). Chair of the IT and Eligibility Committee, Research Committee and various working groups.

Member, Technical Expert Group, the Future of Health Services Research, for Agency for Healthcare Research and Quality, conducted by RAND. Jan. 2019.

Expert Advisor, Russell Sage Foundation. Non-health effects of the Affordable Care Act. (2013).

Expert Advisor, Revisions to the National Survey of Family Growth, National Center for Health Statistics, CDC (2013)

Member, Technical Advisory Committee for Monitoring the Impact of the Market Reform and Coverage Expansions of the Affordable Care Act, sponsored by ASPE. (2013)

Member, Technical Advisory Group for the Design of the Evaluation of the Medicaid Expansion Under the ACA, sponsored by ASPE (2012)

Member, National Workgroup on Integrating the Safety Net, National Academy of State Health Policy, July 2011 - 2013.

Member, National Advisory group for Iowa Safety Net Integration project, 2011-2013.

Foundation for Child Development, Selection Committee, Young Scholars Program, 2008-2015.

Foundation for Child Development, Advisory Committee, Child Well-Being Index, 2008-present

Member, National Advisory Board, Center on Social Disparities on Health, University of California at San Francisco, 2005-2008.

National Campaign to Prevent Teen Pregnancy, Member, Effective Programs and Research Task Force (2000)

Doctoral Students Mentored/Advised

Dissertations Completed

Prof. Peter Shin (chair)

Prof. Megan McHugh

Dr. Sarah Benatar

Dr. Emily Jones (chair)

Dr. Saqi Cho (chair)

Dr. DaShawn Groves (chair)

Dr. Heitor Werneck

Dr. Brad Finnegan (chair)

Dr. Maliha Ali

Dr. Christal Ramos

Dr. Qian (Eric) Luo

Dr. Bill Freeman

Dr. Serena Phillips

Dr. Julia Strasser

Dr. Kristal Vardaman (chair)*

Dr. Brian Bruen

Dr. Xinxin Han (chair)*

Dr. Jessica Sharac (chair)*

Dr. Nina Brown

Dr. Mariellen Jewers (chair)*

Dr. Leo Quigley (chair)*

Dr. Erin Brantley

Dr. Roberto Delhy

In Progress

Kyle Peplinski (chair)* Shin Nozaki Brent Sandmeyer (chair)

Chelsea Richwine

Drishti Pillai (chair)*

Rachel Landis

Other Student Advising

Co-Director, Health Policy PhD Program

Faculty advisor, MPH, health policy. Provide guidance to about a dozen MPH students per cohort. Faculty Advisor, GW Health Policy Student Association, 2016-now

^{*} I use the traditional term "chair," although alternative terminology is that I was the "director", the faculty who works most closely with the student and directs the dissertation. I have also served as the moderator for several others, sometimes called the "chair", who is not an official member of the dissertation or a reader/examiner and moderates the dissertation defense.