

August 13, 2025

The Honorable Robert F. Kennedy, Jr.
Secretary
U.S. Department of Health and Human Services
200 Independence Ave SW
Washington, DC 20201

RE: Notice—Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA); Interpretation of “Federal Public Benefit” (Docket AHRQ-2025-0002)

Dear Secretary Kennedy:

The American Public Human Services Association (APHSA) as the bipartisan, national membership organization representing state, county, and city public human services agencies, submits the following comment in response to the notice, “Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA): Interpretation of ‘Federal Public Benefit.

First and foremost, we value HHS’s commitment to ensuring the integrity and consistency of federal programs. As key implementation partners, state and local human services agencies remain committed to meeting federal expectations while ensuring that services remain accessible, timely, and centered on the needs of individuals, children and families.

Our members work across human services systems to ensure families have access to the support they need to thrive through early childhood programs, child welfare services, and a wide range of safety-net and community-based programs. We appreciate HHS’s commitment to administering programs in accordance with federal law and with integrity. We respectfully ask for your consideration of concerns raised by our members, reflective of increased administrative obligations for state and local governments and the corresponding impact on individuals, children, and families served in early childhood programs, child welfare programs, mental health services, and the broader human services landscape due to the revised interpretation of PRWORA.

Background

The July 2025 notice expands the list of programs considered “Federal public benefits” to include human services programs such as Head Start, the Title IV-E Prevention Services Program, the Community Services Block Grant (CSBG), and many more. This shift comes more than 30 years after the enactment of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA), which originally established immigration-based

eligibility restrictions on Federal public benefits. Until now, the enumerated programs in the Notice have operated outside the scope of these requirements.

State and Local Impacts

APHSA members have shared several important questions and considerations for your review as you prepare forthcoming guidance. As the likely implementers of many of these changes, they are concerned about whose immigration status will need to be verified, the systems changes and training expenses that will need to support those verifications, and the overall impact on the children, families, and communities they serve.

First, as it relates to eligibility, several questions arise as to whose immigration status will need to be considered in determining eligibility for benefits. As our members think through implementation, the lack of clarity in this area presents a barrier to thoughtful planning. It is important to note that for many programs, state and local departments of human services do not have authority or established protocols for evaluating the status of individuals beyond the primary beneficiaries of our services.

Our members also have the need for clarity on whether verification requirements would apply only at the point of intake or necessitate ongoing monitoring of status changes, which would further strain administrative systems and frontline staff.

Additionally, many of these programs are delivered in partnerships with non-profits, schools, and community-based organizations. While we know that non-profit organizations are not legally required to conduct verification, other partners may also lack legal authority or technical infrastructure to verify immigration status. In the absence of clear operational guidance, these partners may face significant legal and compliance risks.

Second, our members want to elevate the implementation impacts on their existing resources and capacity. Human services agencies generally lack the infrastructure, policies, and workforce capacity to implement immigration verification requirements within these newly impacted programs. Implementing verification would require:

- Redesign of intake and eligibility processes
- Creation of secure data systems and modifications of existing IT systems that would be needed to integrate these new processes
- Development of new protocols and training for staff and providers
- Establishments of interagency coordination mechanisms

The changes in the Notice would require new financial investments in procurement, data privacy protocols, and system interoperability, and could take years to fully implement—especially without dedicated funding. Additionally, new staff will need to be hired and trained in many jurisdictions. This will be particularly challenging in smaller jurisdictions that lack both the administrative capacity and fiscal flexibility to absorb these new mandates.

Finally, many of our members have expressed concerns about the impact these changes will have on the clients and communities they serve. Many of the newly classified programs are designed to support the safety, development, and stability of individuals, children and families. They also reflect longstanding federal goals to promote health, education, permanency, and family-centered care. Applying new verification requirements to these programs without a careful understanding of how eligibility is defined and services are delivered may have the unintended consequence of reducing participation by eligible families, creating confusion at the local level, and disrupting access to stabilizing services that are essential to child and family well-being.

Recommendations

Given the scale of this policy shift and the operational implications for public human services systems, APHSA respectfully recommends HHS:

1. **Pause implementation** of the reinterpretation until sufficient guidance and infrastructure supports are in place.
2. **Provide program-specific guidance** to ensure consistent and practical implementation across jurisdictions.
3. **Clarify eligibility verification requirements.**
4. **Establish a phased implementation timeline** that allows for adequate system redesign, staff training and policy alignment.
5. **Offer technical assistance and capacity-building support** to states and localities to ensure successful compliance without disrupting essential services.
6. **Provide dedicated funding** to help state and local agencies update technology, adapt processes for eligibility determination, and manage increased administrative workload.

APHSA stands ready to support this effort by facilitating dialogue, providing technical insights from our membership, and helping shape implementation tools that reflect real-world practice. We'd welcome the opportunity to meet with you to discuss further and look forward to continued collaboration to advance our shared mission of strengthening the health and well-being of our nation's communities.

Respectfully,



Reggie Bicha

President and CEO