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August 13, 2025

Submitted via Regulations.gov

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

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

Dear Secretary Kennedy:

On behalf of the more than three million members of the National Education Association (NEA), we write in opposition to the harmful new interpretation the Department of Health and Human Services (HHS) is taking in regard to the definition of a “Federal public benefit” under the Personal Responsibility and Work Opportunity Reconciliation Act. NEA writes to specifically highlight and oppose the grave damage that this new interpretation will do as applied to Head Start, a critical early education program. We urge HHS to withdraw this notice.

NEA champions early childhood education programs in public schools for children from birth through age eight and we have long recognized the value of quality early childhood education programs in preparing young children to enter school ready to learn.<sup>1</sup> “Children who participate in high-quality, developmentally appropriate, culturally responsive prekindergarten programs perform better academically and exhibit better cognitive and social skills—on both a short-term and long-term basis—than similar children who do not participate in such programs.”<sup>2</sup> NEA members see and experience every day the myriad ways quality early childhood education programs help the educational attainment of their students which is why NEA opposes HHS’ attempt to limit the ability of all low-income children to access Head Start programs.

## **Background**

The Department of Health and Human Services’ (HHS) is adopting a change in nearly 30 years of legal interpretation that will affect immigrant children’s ability to access Head Start and potentially will impose burdensome new requirements on local school districts who frequently run Head Start programs. The 1996 Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA)

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<sup>1</sup> See NEA Resolution B-1 (adopted 1975, amended in 2022).

<sup>2</sup> NEA 2003 Policy Statement on Kindergarten and Prekindergarten.

made an array of federal public benefit programs available only to “qualified immigrants,” subject to certain exceptions. Qualified immigrants are defined as those with Lawful Permanent Resident Status, refugees, persons granted asylum, certain immigrants from Cuba, Haiti and Pacific Island nations, certain survivors of domestic violence and trafficking, and other specific categories. Other immigrants who are lawfully present are excluded from this definition, including individuals with Temporary Protected Status, people with nonimmigrant visas, and individuals granted deferred action, including Deferred Action for Childhood Arrivals (DACA). Thus, restricting access to programs only to “qualified immigrants” under PRWORA harms not only undocumented immigrants, but also some lawfully present individuals.

In 1998, HHS adopted an interpretation of the term “Federal public benefit” to explain which Department programs met the definition and would be limited to qualified immigrants (1998 Notice). The 1998 Notice included programs such as Medicare, Medicaid, Temporary Assistance for Needy Families, and a range of cash-assistance programs as programs only open to qualified immigrants while programs that were deemed to serve the broader community, such as Head Start, were open to all immigrants. The notice provided a reasoned interpretation of the statutory definition to explain the manner in which these programs were identified and was the interpretation of HHS for twenty-seven years.

On July 14, 2025, the Department issued a new interpretation that reclassified Head Start and 12 other programs as restricted Federal public benefits (2025 Notice). This reinterpretation effectively makes certain children ineligible for Head Start on the basis of their immigration status for the first time since the program’s founding. Eligibility for Head Start is determined by several factors, including family income, homelessness, foster care status, or disability; immigration status is not a condition of enrollment or eligibility for Head Start under the statute or its implementing regulations. This significant change in eligibility must go through the regular notice and public comment rulemaking process and is a violation of the Head Start Act which clearly states that the HHS Secretary “shall by regulation prescribe eligibility for the participation of persons in Head Start programs.” 42 U.S.C. § 9840. This violation of the Head Start Act is reason enough for HHS to withdraw the 2025 notice.

In addition to the unlawfulness of the 2025 notice, limiting access to Head Start will have negative effects in our nation’s public schools and will negatively impact the health and welfare of not only immigrant populations, but communities as a whole. This reinterpretation of the definition of “Federal public benefit” in PRWORA of 1996 contravenes nearly three decades of established policy and will cause great harm to children, will hinder the educational environment in schools across the nation by decreasing school readiness, and will create administrative burdens and costs that detract from state and local governments and school district’s ability to educate all children. We urge HHS to withdraw this notice.

## **Head Start**

In 1965, Congress created Head Start to “promote the school readiness of low-income children by enhancing their cognitive, social, and emotional development,” through early childhood education and the provision of health, nutritional, social, and other needed services. 42 U.S.C. § 9831. Head Start provides comprehensive early learning, health, nutrition, and family support services for children from under-resourced families in every state and congressional district. Since its inception Head Start—and subsequently, Early Head Start for infants and toddlers—has transformed the lives

of more than 40 million children and families living in poverty.<sup>3</sup> Today, more than 1,700 Head Start programs exist across the country and are supported by more than a quarter of a million educators committed to student well-being. Head Start programs are designed to promote school readiness for children from birth to age 5 in under-resourced communities by nurturing every aspect of a child's development (the "whole child").

Head Start programs provide services including: early learning (preparing children academically, socially, and emotionally to succeed in school); health and nutrition (ensuring children have healthy meals, health screenings, and necessary referrals); and family well-being opportunities (supporting family goals and access to resources).

The benefits of Head Start are well-documented and long-lasting. Head Start significantly improves the health, educational outcomes, and financial prospects of participating families. Children who participate in the program are more socially and academically prepared for later grades, more likely to graduate from high school and attend college, and more likely to have positive health outcomes. The return on investment is undeniable, saving taxpayers money over time by reducing the need for remedial education, health care, and public assistance. Improving children's school readiness through high-quality early education services helps improve outcomes throughout school while early intervention services, developmental screenings, and access to preventive pediatric care help reduce the need for special education services later on. Some specific benefits of the Head Start program include:

- Improved social skills, impulse control, and approaches to learning. Head Start children also decrease their problem behaviors, such as aggression and hyperactivity.<sup>4</sup>
- Obese, overweight, or underweight children who participate in Head Start have a significantly healthier BMI by kindergarten compared to children not enrolled in Head Start, both those receiving and not receiving Medicaid.<sup>5</sup>
- Mortality rates for 5- to 9-year-old children who attended Head Start are 33% to 50% lower than the rates for comparable children who were not enrolled in Head Start.<sup>6</sup>
- Compared with children in parental care, Head Start children performed considerably better on cognitive and social-emotional measures in kindergarten and had fewer attention problems and exhibited fewer negative behaviors.<sup>7</sup>

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<sup>3</sup> *Head Start Program Facts: Fiscal Year 2023*, Department of Health & Human Services. (February 27, 2025), <https://www.headstart.gov/program-data/article/head-start-program-facts-fiscal-year-2023>

<sup>4</sup> Aikens, N., Kopack Klein, A., Tarullo, L., and West, J. (2013). *Getting ready for kindergarten: Children's progress during Head Start. FACES 2009 report*. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services, <https://files.eric.ed.gov/fulltext/ED580354.pdf>.

<sup>5</sup> Lumeng, J., Kaciroti, N., Sutrza, J., Krusky, A.M., Miller, A. L., Peterson, K. E., Lipton, R., & Reischl, T.M. (2015). *Changes in Body Mass Index Associated with Head Start Participation*. *Pediatrics*, 135(2): 1-8. <https://publications.aap.org/pediatrics/article-abstract/135/2/e449/33425/Changes-in-Body-Mass-Index-Associated-With-Head?redirectedFrom=fulltext>.

<sup>6</sup> Jens Ludwig & Douglas L Miller, 2007. "Does Head Start Improve Children's Life Chances? Evidence from a Regression Discontinuity Design," *The Quarterly Journal of Economics*, MIT Press, vol. 122(1), pages 159-208.

<sup>7</sup> Zhai, F., Brooks-Gunn, J., & Waldfogel, J. (2011). Head Start and urban children's school readiness: A birth cohort study in 18 cities. *Developmental Psychology*, 47, 134-152. <https://pmc.ncbi.nlm.nih.gov/articles/PMC3050648/pdf/nihms273531.pdf>

- Head Start children have a higher likelihood of graduating high school, attending college, and receiving a post-secondary degree, license, or certification.<sup>8</sup>
- Head Start parents invest more time in learning activities with their children, and non-resident fathers spend more days per month with their children.<sup>9</sup>

Head Start is a cornerstone of America’s commitment to children, families, and public education. It represents the belief that every child—regardless of race, place, background, or ability—deserves a fair start and a real chance to reach their full potential. Head Start ensures that children are prepared for K-12 education, and the sudden change excluding certain lawful and undocumented children from participating in this critical program has created uncertainty for numerous families and confusion for local school districts and state and local governments who administer Head Start programs.

### **Verification Requirements are Burdensome and will Deter Enrollment**

While PRWORA exempts nonprofit charitable organizations from verification requirements, it does not exempt state and local governments; many Head Start programs are run by state and local governments as well as public school districts. Any new requirements for state and local governments, including public school districts, to verify eligibility for programs newly deemed to be Federal public benefits such as Head Start would be an unfunded mandate and force them to develop new policies, technology, and training procedures. Prior to the enactment of H.R. 1, state budgets were already facing increasing fiscal stressors. Now that the Administration’s policies have slashed federal funding to states and will shift further costs to states for Medicaid and SNAP, any new requirements would be even more unaffordable; this will impact public school budgets and the education provided to all students.<sup>10</sup>

In addition, the 2025 notice offers no implementation guidance to Head Start agencies and declares the interpretation is effective immediately. HHS also notes that verification requirements under PRWORA remain unchanged. This has caused confusion amongst local school districts and state and local governments that administer the program, including whether the verification requirements apply just to the child enrolling in the program or also include the child’s parents/guardians.

New verification requirements will also result in deterrence of participation among all families. All families seeking to enroll their children will face additional paperwork and those with barriers to accessing documents, including families experiencing homelessness, children in foster care, families in rural areas, families with low incomes who are unable to pay the fees associated with accessing documentation, and families that work long hours and cannot access administrative offices during business hours will have difficulty demonstrating their eligibility for Head Start. The families that benefit most from Head Start will now face the most difficulty in accessing the program.

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<sup>8</sup> Bauer, L. and D. W. Schanzenbach. (2016) The Long-Term Impact of the Head Start Program. The Hamilton Project, the Brookings Institution.

[https://www.hamiltonproject.org/assets/files/long\\_term\\_impact\\_of\\_head\\_start\\_program.pdf](https://www.hamiltonproject.org/assets/files/long_term_impact_of_head_start_program.pdf)

<sup>9</sup> Gelber, A, and A. Isen. National Bureau of Economic Research. (2011, December). Children's Schooling and Parents' Behavior: Evidence from the Head Start Impact Study (Working Paper No. 17704). Cambridge, MA.

<https://www.sciencedirect.com/science/article/abs/pii/S0047272713000339>

<sup>10</sup> Wesley Tharpe, *Roundup: State Budgets Increasingly Strained as House, Senate Republican Plans Would Impose Major Costs*, Center on Budget and Policies Priorities. (June 24, 2025), <https://www.cbpp.org/research/state-budget-and-tax/roundup-state-budgets-increasingly-strained-as-house-senate>

## **A 30-Day Comment Period and No Delay in Implementation is Insufficient**

HHS makes this notice effective immediately and only provides 30 days for comments. For a revision of nearly 30 years of precedent potentially impacting hundreds of recipients of federal funding across many programs, including 1,700 Head Start programs across the country, this lack of time for public input is deeply inadequate. Together, the programs impacted by this notice comprise over \$27 billion in federal funding. HHS should pause implementation of this reinterpretation immediately and allow for a full stakeholder engagement process including a proper notice and comment period.

### **Conclusion**

NEA urges HHS to withdraw this notice and not proceed with any further guidance, regulations or other changes in interpreting PRWORA. If you have any questions about anything in the comments or the materials, please contact me or Lubna Alam, NEA Office of General Counsel, at [lalam@nea.org](mailto:lalam@nea.org).

Sincerely,

A handwritten signature in black ink that reads "Daaiyah Bilal-Threats". The signature is written in a cursive style with a long horizontal line extending to the right.

Daaiyah Bilal-Threats  
Senior Director, Education Policy and Implementation Center  
National Education Association