

- SUBJECT:** Indigent health care by public hospitals and hospital districts
- COMMITTEE:** Public Health — committee substitute recommended
- VOTE:** 6 ayes — Gray, Capelo, Glaze, Hilderbran, Maxey, Uresti
0 nays
3 absent — Coleman, Delisi, McClendon
- WITNESSES:** For — Gina Oglesbee, Nacogdoches County Hospital District
Against — None
- BACKGROUND:** The indigent health care responsibilities of counties and public hospitals are defined under the Indigent Health Care and Treatment Act (Health and Safety Code, chpt. 61). The act requires counties and public hospitals to establish indigent health care programs that conform to certain minimum standards for eligibility, covered services, and payment responsibilities.
- Counties, public hospitals and hospital districts are not responsible for the care of indigent residents of another county or an area served by a public hospital or hospital district.
- Health providers must follow specified notification procedures to counties in order to be reimbursed for care to indigent residents. They must notify a county of the delivery of health care to a patient the provider suspects is eligible for the county's indigent care program by telephone as soon as possible or by mail within three working days after the provider determines the patient's county of residence.
- Health care providers and counties often are entangled in disputes over whether a patient is an eligible county resident for indigent health care coverage and whether the county has been given sufficient time and information to authorize the delivery of health care services to an indigent resident.

DIGEST: CSHB 2565 would authorize public hospitals and hospital districts to require indigent patients who they suspect are eligible for coverage under a county indigent health care program in an adjacent county to provide necessary information to establish the eligibility of the patient. The hospitals also could require the patient to authorize the release of any information relating to the patient to permit the hospital to submit a claim.

Hospitals and other health care providers would have to notify a county of the delivery of health care to a patient the provider suspected was eligible for the county's indigent care program by telephone within 72 hours or by mail within five working days after the provider determines the patient's county of residence.

TDH also would be required to study the feasibility of requiring or permitting a county, public hospital, or hospital district to issue a uniform identification card to eligible indigent care program residents.

The bill would take immediate effect if finally passed by a two-thirds record vote of the membership of each house.

NOTES: Provisions identical to those in HB 2565 were included in HB 1398 by Coleman, which passed the House on May 6 and was considered by the Senate Finance Committee in a public hearing on May 12.