

**THE HIGH COST OF HEALTH CARE SERVICES**

Providing health care to Americans, particularly the poor and uninsured, is an expensive business. In 2015, national health expenditures consumed 17.8% of the United States Gross Domestic Product, or \$3.2 trillion and is projected to grow at a rate of 5.6% per year from 2016-25 (Centers for Medicare and Medicaid Services [CMS], 2017b). Table 1 presents a variety of services rendered along with their associated costs:

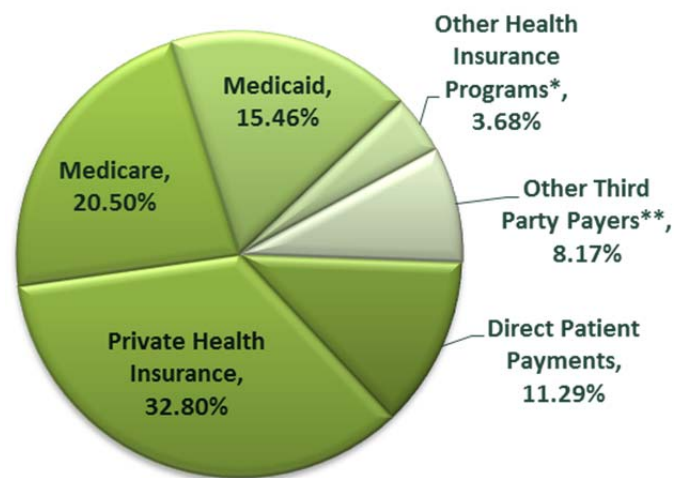
	\$ (billions)	%
Hospital Care	1,036	38
Physician/Clinical/ Professional Services	723	27
Drug & other Nondurables	384	14
Nursing Home Care	157	6
Dental Services	118	4
Home Health Care	89	3
Medical Durables	49	2
Other	163	6
<b>TOTAL</b>	<b>2,719</b>	<b>100</b>

(CMS, 2017b)

**PAYING FOR HEALTH CARE SERVICES**

The costs of providing all of these healthcare services are reimbursed using a variety of methods, ranging from private health insurance programs, consumer out-of-pocket expenses, government programs (such as Medicare, Medicaid, and the Children’s Health Insurance Program, known as CHIP), and uncompensated charity care given at hospitals and non-profit agencies. The distribution of expenditures appears in Figure 1.

FIGURE 1 NATIONAL HEALTH EXPENDITURES, 2015



\*Includes CHIP, Department of Defense, and Department of Veterans’ Affairs

\*\*Includes workers’ compensation, worksite health care, other private revenues, Indian Health Service, general assistance, maternal and child health, vocational rehabilitation, other federal programs, Substance Abuse and Mental Health Services Administration, other state and local programs, and school health (CMS, 2017b)

**HEALTH EXPENDITURE IN TEXAS**

Texas expended \$42.9 billion on health care, or 43.1% of Texas government spending in 2015. “A variety of state agencies and institutions support or directly administer numerous health services, including Medicaid, the Children’s Health Insurance Program (CHIP), mental health services, prison health care, health-related research, medical insurance for both active and retired state government employees, workers’ compensation and other programs (Texas Comptroller of Public Accounts, 2017). Table 2 provides a breakdown of expenditures by agency.

Agency	State Funds	Federal Funds	Other*	All Funds
Cancer Prevention and Research Institute of Texas	-	-	\$33.90	\$33.90
Employees Retirement System	\$1,355.50	\$292.50	\$252.90	\$1,900.90
State Office of Risk Management	\$22.40	\$5.00	\$3.10	\$30.50
Department of Aging and Disability Services	\$1,883.70	\$2,844.30	-	\$4,728.00
Department of Assistive and Rehabilitative Services	\$52.10	\$98.00	\$1.10	\$151.20
Department of Family Protective Services	\$6.70	\$0.10	-	\$6.80
Department of State Health Services	\$1,363.60	\$533.60	\$225.00	\$2,122.30
Health and Human Services Commission	\$10,435.30	\$14,940.80	-	\$25,376.10
Texas School for the Blind and Visually Impaired	\$6.30	\$0.70	-	\$7.00
Texas School for the Deaf	\$5.20	-	-	\$5.20
Teacher Retirement System of Texas	\$1,310.20	-	-	\$1,310.20
University of Texas System	\$436.00	-	\$436.50	\$872.40
Texas A&M University System	\$136.60	\$3.90	\$70.30	\$210.80
Health-Related Institutions of Higher Education**	-	-	-	\$5,041.50
Health-Related Research at Higher Education Institutions***	\$351.80	-	\$136.40	\$488.20
Texas Department of Criminal Justice	\$619.50	-	\$0.60	\$620.10
Texas Juvenile Justice Department	\$37.90	-	\$0.60	\$38.50
Texas Department of Agriculture	\$2.60	\$1.70	-	\$4.20
Texas Department of Transportation	\$1.90	-	-	\$2.70
<b>Total Health Care Expenditures</b>	<b>\$18,027.30</b>	<b>\$18,720.50</b>	<b>\$1,156.40</b>	<b>\$42,950.50</b>
*“Other” includes grants from private foundations, interagency contracts, trust funds, bond proceeds, local accounts held by higher education institutions, etc.				
**Expenditures are presented as “All Funds” since the method of finance detail was not available.				
*** “All Funds” does not include all research expenditures. The category includes state general revenue and state grants only.				
(Texas Comptroller of Public Accounts, 2017).				

**HEALTH CARE COVERAGE**

Over three-fourths of Texans (83%) maintain health insurance, most provided through an employer or a government program:

	United States 2015	Texas 2015
Employer	49%	48%
Non-Group	7%	7%
Medicaid	20%	16%
Medicare	14%	11%
Other Public	2%	3%
Uninsured	9%	16%

(Kaiser Family Foundation [KFF], 2017a)

In 2015 Texas had the highest rate of people without insurance in the country at 16% (KFF, 2017a).

The majority of uninsured Americans (87.2% in 2015) are of working age, from 18-64 years old.

While more than half of Texas’ unemployed lacked insurance, about one-quarter of working Texans also had little or no health insurance coverage (U.S. Census Bureau, 2017a). Decreased rates of employer-based health insurance coverage in Texas often occur due to a high percentage of small-sized businesses (who are less likely to offer coverage), part-time employment, high amounts of construction and farming jobs, and lower rates of unionization (Center for Public Policy Priorities [CPPP], 2011).

Those who lack employer or individual insurance policies often turn to government programs such as Medicare, Medicaid, and the Children’s Health Insurance Program for help. However, those programs have strict eligibility requirements that primarily serve the youngest, the oldest, those with families, and the neediest people.

**DETERMINING ELIGIBILITY FOR GOVERNMENT HEALTH INSURANCE PROGRAMS**

In order to determine financial eligibility for government programs serving the poor, including healthcare programs, the United States Department of Health and Human Services (HHS) (2017) provides yearly poverty guidelines, sometimes referred to as the federal poverty level (FPL). In 2017, the FPL is determined to be \$12,060 annual income for one person, or \$1,005 per month. The poverty threshold for a family of four is an annual income of \$24,600. Local poverty statistics include:

United States	15.5%
Texas	17.3%
Bandera County	13.0%
Bexar County	17.4%
Comal County	8.8%
Kendall County	7.8%
(U.S. Census Bureau, 2017c)	

**GOVERNMENT INSURANCE PROGRAMS**

*MEDICAID*

Medicaid primarily aids low-income people, including some elderly and individuals with disabilities. Medicaid eligibility is based upon stringent income requirements as well as other qualifiers such as age, disability, pregnancy, and citizenship status. Eligibility requirements for Texas Medicaid in 2017 included: pregnant women with incomes below 203% of the FPL; infants at 203% FPL; children 1-5 at 149% FPL; children 6-18 at 138% FPL; and working parents at 18% FPL (KFF, 2017bc). In December 2016, Texas Medicaid covered 4.08 million people, most of whom (78%) were less than 21 years old (Texas Health and Human Services Commission [HHSC], n.d.b). The most recent local enrollment statistics are:

Bandera County	1,876
Bexar County	277,082
Comal County	9,223
Kendall County	380
(HHSC, n.d.b)	

*CHILDREN’S HEALTH INSURANCE PROGRAM (CHIP)*

The State CHIP expands the scope of Medicaid’s health insurance specifically to children and pregnant women whose families earn too much to qualify for Medicaid, but still fall within the scope of the federal poverty level. There were 386,176 Texans enrolled in CHIP in December 2016 (HHSC, n.d.b). “Spending for Medicaid and CHIP totaled \$30.3 billion in 2015, or 70 percent of all state government health care spending” (Texas Comptroller of Public Accounts, 2017).

*MEDICARE*

Medicare, unlike the previous programs, is not based on income. In 2015 there were 3.6 million Texas Medicare recipients. It primarily serves those over 65 (84% of Texas recipients), but also covers younger people who are disabled or who experience end-stage renal disease. In 2016, Medicare enrollment included 25% of the population of Bandera County; 14% of Bexar County; 21% of Comal County, and 26% of Kendall County (CMS, 2017a; U.S. Census Bureau, 2017b&d).

*AFFORDABLE CARE ACT (ACA) IN TEXAS*

Although many insured Texans benefitted from ACA provisions such as the removal of lifetime limits on health benefits, ending discrimination for pre-existing conditions, and the expansion of mental health and substance use disorder benefits, there is still a “Coverage Gap” into which many fall. “Because the ACA envisioned low-income people receiving coverage through Medicaid, it does not provide financial assistance to people below poverty for other coverage options. As a result, in states that do not expand Medicaid, many adults fall into a “coverage gap” of having incomes above Medicaid eligibility limits but below the lower limit for Marketplace premium tax credits” (Garfield and Damico, 2016).

Texas legislators chose not to accept federal funding to expand the Medicaid program. As a result, there are almost one million Texans who still cannot afford health insurance:

- Able-bodied adults are not eligible for Medicaid regardless of income

- Working parents with incomes above \$4,000 per year (18% of FPL for a family of three) do not qualify for Medicaid
- Adults with incomes up to 138% of FPL do not qualify for financial assistance under ACA because the ACA expanded Medicaid to adults up to 138% of FPL but made the expansion optional for states

(CPPP, 2016)

There were 684,000 uninsured Texans in the “coverage gap” in 2016 (Garfield and Damico, 2016).

**HOSPITAL OWNERSHIP**

There are three types of acute care hospital ownership:

- *Public hospitals* – city, county, or state-operated facilities
- *Nonprofit hospitals* – operated by not-for-profit organizations such as religious organizations, community hospitals
- *For-profit hospitals* – operated by an individual, partnership, or profit-making corporation

In Texas, approximately 54% of hospitals are for-profit, 28% are nonprofit, and 18% are public. In the KCF counties of interest there were 26 acute care hospitals as of December 2016 (Texas Department of State Health Services [DSHS], 2017):

- Bexar County
  - 20 For-profit (FP)
  - 2 Public (P)
    - University Hospital
    - Texas Center for Infectious Disease
  - Two Nonprofit (NP) –
    - CHRISTUS Santa Rosa Medical Center
    - Children’s Hospital of San Antonio
- Comal County – Two for-profit
- Bandera and Kendall counties have no acute care hospitals

(DSHS, 2017)

**UNCOMPENSATED HEALTH CARE**

Uncompensated care refers to the amount of services for which no payment is received either from the patient or from third-party payers (such as insurance) and is comprised of the sum of bad debt charges (uncollectible charges resulting from the extension of credit)

and charity charges (charges attributable to charity care that do not include bad debt charges, contractual allowances, or discounts) (DSHS, 2013c). In 2011, Texas public hospitals reported 65.4% of uncompensated care as charity charges while for-profit hospitals reported 69.5% of uncompensated care as bad debt. Charity charges for nonprofit hospitals nearly quadrupled “between 2002 and 2011 increasing from \$1.25 billion to \$4.98 billion” (DSHS, 2013c, p15).

For 2012, three Bexar County hospitals were listed in the top 20 for highest amounts of uncompensated health care in Texas. These included the public University Hospital (\$552 million) and two for-profit hospitals, Baptist Medical Center (\$1 billion) and Methodist Hospital (\$199 million) (DSHS, 2013a). The following table lists the five Bexar County hospitals with the highest amount of uncompensated care:

Hospital	Owner	Bad Debt Charges	Charity Charges	Total Uncompensated Charges
Baptist Medical Ctr	FP	\$1,126,009,149	\$63,569,362	\$1,189,578,511
University Hospital	P	\$81,710,523	\$470,637,069	\$552,347,592
Methodist Hospital	FP	\$97,587,520	\$101,359,393	\$198,946,913
CHRISTUS Santa Rosa	NP	\$40,673,606	\$145,246,862	\$185,920,468
Southwest General	FP	\$37,410,926	\$11,334,426	\$48,745,352

(DSHS, 2013a)

Despite the availability of government insurance programs, many Americans continue to struggle to access and pay for the healthcare services they need. As a result, Chapter 61 of the Texas Health and Safety Code **requires** county-run programs and **encourages** hospital districts and public hospitals to provide basic health care services to eligible indigent residents. Those basic health care services are considered to be:

- Medical Screenings
- Annual Physicals
- Inpatient/Outpatient Hospital Services



- Rural Health Clinics
- Laboratory/X-Ray Services
- Family Planning Services
- Physician Services
- Skilled Nursing Facility Services
- Up to 3 Prescription Drugs per Month  
(Texas Statutes, n.d.)

The Texas *Indigent Health Care and Treatment Act* defines the indigent as people with few to no assets and incomes below 21% of the FPL (Texas Statutes, n.d.). Currently, this is a person who maintains an annual income of \$2,532.60 or less, \$211.05 a month for a single person. However, Texas Counties may choose to increase the standard to up to 50% of the FPL to qualify for various programs sponsored by the County Indigent Health Care Program (Texas Statutes, n.d.).

Counties which spend more than 8% of their general tax revenue on indigent health services qualify to receive state assistance.

Unfortunately, the state assistance fund does not reimburse all of a county's expenditures. In fiscal year 2015, the state assistance fund only paid \$81,546.83 to 2 Texas counties, neither of which were in the KCF counties of interest (DSHS, 2016).

Many uninsured and indigent people who lack insurance resort to repeatedly using emergency rooms at local hospitals, resulting in high amounts of uncompensated costs. Of the 11 public health regions in Texas, health region 8 (which includes Bandera, Bexar, Comal, and Kendall Counties among others), had the highest rate of uncompensated health care as a percentage of gross patient revenue. The rate in Region 8 was 11.8%, slightly higher the state average rate of 9.5% (DSHS, 2013a).

To counteract the drain on emergency rooms, a variety of Bexar county health care organizations exist to serve as a safety net for the uninsured and indigent, to lower the costs of uncompensated care, and to ensure health care access to all people.

#### **HEALTH CARE SAFETY NET**

The health care safety net consists of a wide variety of providers delivering care to low-

income and other vulnerable populations, including the uninsured and those covered by Medicaid. Safety net providers include a variety of public and private hospitals, clinics and physicians who serve disadvantaged patients, with or without health insurance (Hall, 2010). Safety-net services are provided by public, private, non-profit, teaching, and rural hospitals, as well as federally qualified health centers (FQHC), Community-Oriented Primary Care Clinics (COPC), local health departments, and community health centers. In Texas, the indigent are served at 136 hospital districts, 19 public hospitals, and 143 county indigent care programs (CPPP, 2011). There are two FQHCs in the KCF counties of interest, CentroMed and CommuniCare, both in San Antonio (HHSC, 2016).

In Bexar County, the majority of services for the indigent are provided by CentroMed/El Centro del Barrio, CommuniCare, the Daughters of Charity, the Methodist Health Care Ministries, the Metropolitan Health District, Planned Parenthood, the San Antonio Christian Dental Clinic, and the University Health System (*Carelink*). The bulk of these organizations either accept private or government insurance, charge using a sliding scale based upon both income and family size for the uninsured, or are free of charge. The University of Texas Health Science Center also offers free student-run medical and dental clinics conducted at local non-profit agencies (University of Texas Health Science Center San Antonio, 2016). A brief description of some of the larger programs follows.

#### *CentroMed/El Centro del Barrio*

CentroMed, also known as El Centro del Barrio, is a 501(c)(3) non-profit Federally-Qualified Health Center (FQHC). This organization offers primary medical and dental care, pharmacies, and a wide variety of other mental health and educational health services at 23 sites throughout Bexar County and two sites in Comal County. In addition to primary care clinics, there are also clinics that specialize in care for the homeless, dentistry, and Woman, Infant, Child (WIC) programs (CentroMed, n.d.).

*Communicare Health Centers*

This organization is a federally-funded, non-profit community health system. It has nine clinic locations in Bexar County and one location in Kendall County. These centers provide primary medical care, obstetrical care, gynecological care, dental care, WIC services, behavioral health, and minor surgery. For individuals with no health insurance, the clinic supplies medical care on a sliding fee scale. Healthcare assistance is determined by income and family size according to the FPL (CommuniCare Health Centers, 2017).

*Carelink*

*Carelink* is a program carried out through the University Health System (UHS) to help indigent persons receive and afford better healthcare. This is a financial assistance program (not health insurance). The program is made available to all Bexar County residents who are not eligible for programs such as Medicare, Medicaid, or CHIP and meet income requirements. *Carelink's* basic function is to assist families in attaining the appropriate healthcare through the UHS, give discounted healthcare to those who qualify, and enlist families in a monthly payment program to ease the financial burden of healthcare (University Health System [UHS], 2017b). UHS operates 13 community clinics, five urgent-care clinics, and two school-based centers in addition to the Texas Diabetes Institute, four renal dialysis centers, and the University Hospital (UHS, 2017a).

*Methodist Healthcare Ministries*

Methodist Healthcare Ministries operates two primary care clinics: the Wesley Health & Wellness Center and the Bishop Ernest T. Dixon Clinic. Additionally, two school based clinics

provide medical and dental services to school-age children and their younger siblings. At the Wesley and Dixon Clinics, primary medical care and case management services are available to uninsured and underinsured. This organization also helps fund its partners in and out of Bexar County. Some organizations receiving funds include CentroMed, the CommuniCare Health Centers, the Daughters of Charity, and the Arthur Nagel Community Clinic in Bandera, TX (Methodist Healthcare Ministries, 2014).

*San Antonio Metropolitan Health District (Metro Health)*

Metro Health is responsible for providing public health programs in Bexar County including immunizations, clinical services, disease control, health education, and dental health. It currently maintains one immunization clinic, a sexually transmitted disease clinic, a tuberculosis clinic and ten WIC clinics (San Antonio Metropolitan Health District, 2017)

*Prescription Assistance*

Many of the healthcare clinics refer patients to Any Baby Can of San Antonio which provides an assistance program that serves to enable families without medical insurance, or the ability to afford the full cost of prescriptions, to apply for free or low-cost prescription drugs (Any Baby Can, 2013). CentroMed also offers assistance through pharmaceutical company programs (CentroMed, n.d.).

A detailed list of the organizations that provide health care to the uninsured/indigent, their services, and their location within Bexar County is provided on the next two pages of this research brief.

<b>TABLE 7 BEXAR COUNTY HEALTH CARE CLINICS SERVING LOW-INCOME AND/OR UNINSURED PERSONS</b>											
	<b>Clinic Name</b>	<b>Family Practice</b>	<b>Dental</b>	<b>Mental Health</b>	<b>WIC</b>	<b>Counseling</b>	<b>Health Education/ Nutrition</b>	<b>Pharmacy</b>	<b>Women's Health/ Family Planning</b>	<b>Pediatrics</b>	<b>Homeless</b>
<b>Downtown</b>											
1	CentroMed Santa Rosa	√		√			√				
2	CommuniCare East Campus	√	√	√					√	√	
3	CommuniCare Downtown Campus	√								√	
4	CommuniCare Metropolitan Women's Clinic								√		
5	CentroMed Sarah E. Davidson Clinic (at Haven for Hope)	√									√
6	Metro Health Immunization Center									√	
7	Metro Health District Main Office		√			√	√				
8	San Antonio Christian Dental Clinic		√								
9	University Health System (UHS) Robert B. Green Campus	√		√		√	√	√	√	√	
<b>North Central</b>											
10	CentroMed Respite Day Care Clinic	√									√
11	CentroMed Davidson House Respite Care Shelter Clinic	√									√
12	CentroMed Children's Shelter Clinic	√	√								√
13	Planned Parenthood On Ashby					√	√		√		
14	University Family Health Center (UFHC) -North	√		√		√	√			√	
15	UHS Kenwood Clinic (Dental by MetroHealth)	√	√						√	√	
16	UHS Medical Center Pavilion	√							√	√	
<b>North East</b>											
17	CentroMed Walzem Clinic	√	√	√		√			√		
18	CentroMed WIC Nutrition (Walzem)				√						
19	CommuniCare Hill Country Village Pediatrics						√			√	
20	Metro Health Rittiman Clinic				√						
21	UHS Eastside Clinic	√							√	√	
22	UHS Naco Perrin Clinic	√							√	√	
<b>North West</b>											
23	CommuniCare West Campus	√	√	√		√			√	√	
24	CommuniCare NorthWest Campus	√		√	√	√			√	√	
25	CommuniCare Shavano Park	√								√	
26	Metro Health Buena Vista Clinic				√						
27	Metro Health Callaghan Clinic				√						
28	Metro Health Marbach Clinic				√						
29	Planned Parenthood Medical Center Clinic					√	√		√		
30	Planned Parenthood Perrin Beitel Clinic					√	√		√		
31	Planned Parenthood Marbach Clinic					√	√		√		
32	UTHSC Dental School		√								
33	UFHC - Northwest	√									
34	UHS – Health for Women on Callaghan								√		
35	UHS Pavilion (Urgent care)									√	
<b>Continued on the next page</b>											

	<b>Clinic Name</b>	<b>Family Practice</b>	<b>Dental</b>	<b>Mental Health</b>	<b>WIC</b>	<b>Counseling</b>	<b>Health Education/ Nutrition</b>	<b>Pharmacy</b>	<b>Women's Health/ Family Planning</b>	<b>Pediatrics</b>	<b>Homeless</b>
<b>South East</b>											
36	CentroMed City Base Clinic	√								√	
37	Methodist Health Bishop Ernest T. Dixon Jr. Clinic	√				√	√				
38	Dorie Miller Clinic				√						
39	Pecan Valley Clinic				√						
40	Planned Parenthood Southeast Clinic					√	√		√		
41	UFHC - Southeast	√		√				√		√	
42	UHS South Flores Clinic	√							√	√	
<b>South West</b>											
43	CentroMed Ascot Family Resource Center	√	√	√		√		√	√		√
44	CentroMed Maria Castro Flores Clinic	√	√								√
45	CentroMed Palo Alto Clinic	√	√		√		√			√	
46	CentroMed South Park Dental Clinic		√								
47	CentroMed South Park Medical Clinic	√		√		√		√	√	√	
48	CentroMed Southside Clinic	√	√	√		√			√	√	
49	CentroMed WIC Clinic				√						
50	CommuniCare Las Palmas WIC				√						
51	CommuniCare Potranco Pediatrics	√					√			√	
52	Daughters of Charity El Carmen Wellness Center						√				
53	Daughters of Charity La Mision Family Health Care	√	√				√	√			
54	Methodist Health Wesley Health & Wellness Center	√	√			√	√				
55	UFHC - Southwest	√		√		√	√	√	√	√	
56	UHS Salinas Clinic	√							√	√	
57	UHS Zarzamora Clinic	√							√	√	
(CentroMed, n.d.; CommuniCare Health Centers, 2017; Daughters of Charity Services, 2014; Methodist Health Care Ministries, 2014; Planned Parenthood, 2017; San Antonio Christian Dental Clinic, n.d.; San Antonio Metropolitan Health District, 2017; University Health System, 2017a; University of Texas at San Antonio Dental School, n.d.)											



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