

THE HIGH COST OF HEALTH CARE SERVICES

Providing health care to Americans, particularly the poor and uninsured, is an expensive business. In 2018, national health expenditures consumed 17.7% of the United States Gross Domestic Product, or \$3.6 trillion, and is projected to grow at a rate of 5.5% per year from 2018-27 (Centers for Medicare and Medicaid Services [CMS], 2019). Table 1 presents a variety of services rendered along with their associated costs:

	\$ (billions)	%
Hospital Care	1,191.8	32.7
Physician/Clinical/ Professional Services	829.5	22.7
Drug & Other Nondurables	401.4	11
Nursing Home Care	168.5	4.6
Dental Services	135.6	3.7
Home Health Care	102.2	2.8
Durable Medical Equipment	54.9	1.5
Other Health, Residential & Personal Care	191.6	5.3
TOTAL	3,075.5	84.3

(CMS, 2019)
*remaining percentage of cost (15.7%) is from government administration, net cost of health insurance, and government public health activities

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 [CHIP]), and uncompensated charity care given at hospitals and non-profit agencies. The distribution of expenditures appears in Table 2:

	\$ (billions)	%
Out of pocket	375.6	10
Private Health Insurance	1,243	34
Medicare	750.2	21
Medicaid	597.4	16
Other health insurance programs*	138.3	4
Other third party payers, programs, and public health activity**	370.5	10
TOTAL	3,649.4	95

(CMS, 2019)
*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
*** Investment expenditures are not included

HEALTH EXPENDITURE IN TEXAS

Texas expended \$42.9 billion on health care, or 43.1% of Texas government spending in 2015. Agencies and institutions support Medicaid, 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” (Minton, Vela, & Wright, 2017). Table 3 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
Total Health Care Expenditures	\$18,027.30	\$18,720.50	\$1,156.40	\$42,950.50
*“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.				
(Minton, Vela, & Wright, 2017).				

HEALTH CARE COVERAGE

The U.S. Census Bureau (2020d) reported 82.3% of Texans had health insurance; meanwhile 91.1% of Americans had health insurance in 2018. The following chart compares the percentages of types of health insurance in Texas to the US:

	United States 2018	Texas 2018
Employer	49%	47%
Non-Group	6%	6%
Medicaid	20%	17%
Medicare	14%	10%
Other Public	1%	2%
Uninsured	9%	18%

(Kaiser Family Foundation [KFF], 2020)

Of Americans who are uninsured, the majority are of working age (19-64 years old). While

more than half of Texas’ unemployed lacked insurance, 21.1% of employed Texans were reported uninsured (U.S. Census Bureau, 2020d). “The high rate of the uninsured was in part due to the disproportionate increase in insurance costs relative to wage increase... People were further burdened by the practice of insurance companies denying coverage to those with disease called preexisting conditions” (Gong, Huey, Johnson, Curti, & Philips, 2017).

Those who lack employer or individual insurance policies often turn to government programs such as Medicare, Medicaid, and CHIP for help. However, those programs have strict eligibility requirements that primarily serve the youngest, the oldest, those with families, and those who have the most need.

DETERMINING ELIGIBILITY FOR GOVERNMENT HEALTH INSURANCE PROGRAMS

In order to determine financial eligibility for government programs serving the indigent, the United States Department of Health and Human Services (HHS) provides yearly poverty guidelines, referred to as the federal poverty level (FPL). The FPL for 2020 is \$12,760 annual income for one person and \$26,200 for a family of four (HHS, 2020). Levels of poverty nationally, at the state level, and in the KCF counties of interest include:

PERCENT OF TOTAL POPULATION IN POVERTY, 2018*	
United States	14.1%
Texas	15.5%
Bandera County	15.0%
Bexar County	16.3%
Comal County	8.2%
Kendall County	5.3%
(U.S. Census Bureau, n.d.)	
*Most recent data	

Notably, Bexar and Bandera County poverty levels are higher than the state and national levels.

GOVERNMENT INSURANCE PROGRAMS

MEDICAID

Medicaid primarily aids low-income people, including some elderly individuals 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 levels are highest among pregnant women and children (KFF, 2019). Texas Medicaid covered 4.02 million people in fiscal year 2018 (Texas Health and Human Services [TxHHS], n.d.). The most recent local enrollment statistics for the KCF counties of interest include:

MEDICAID ENROLLMENT FISCAL YEAR 2018	
Bandera County	2,217
Bexar County	301,822
Comal County	11,494
Kendall County	2,741
(TxHHS, n.d.)	

Healthcare Services Research Brief

CHILDREN’S HEALTH INSURANCE PROGRAM (CHIP)

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 are still at or below 200 percent of the FPL (Minton, Vela, & Wright, 2017). There were 410,419 Texans enrolled in CHIP in fiscal year 2018 (TxHHS, n.d.). “Spending for Medicaid and CHIP totaled \$30.3 billion in 2015, or 70 percent of all state government health care spending” (Minton, Vela, & Wright, 2017).

MEDICARE

Medicare, unlike the previous programs, is not based on income. It primarily serves those over 65, 12.6% of the Texas population, but also covers younger people who are disabled or who experience end-stage renal disease (U.S. Census Bureau, 2020c). In 2019, Texas had about 4.2 million Medicare recipients (eHealth, 2020). The following table displays Medicare enrollment in the KCF counties of interest:

MEDICARE ENROLLMENT 2018	
Bandera County	6,223
Bexar County	257,655
Comal County	25,614
Kendall County	8,212
(U.S. Census Bureau, 2020b)	

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. Across the U.S., 2.3 million people are in this coverage gap, with 33% of these individuals in Texas. “The ACA Medicaid expansion was designed to address the high uninsured rates among low-income adults, providing a coverage option for people with limited access to employer coverage and limited income to purchase coverage of their own” (Garfield, Orgera, and Damico, 2020).

Texas legislators chose not to accept federal funding to expand the Medicaid program, along with 14 other states as of January 2020 (Garfield, Orgera, and Damico, 2020). Of the 2.3 million adults that fell in the coverage gap in 2018, a third of them are in Texas, including:

- Able-bodied adults are not eligible for Medicaid regardless of income
- Working parents with incomes above \$4,000 per year (19% of FPL for a family of three) do not qualify for Medicaid (2016)
- Adults with incomes reaching 138% of the FPL, but are not covered due to Texas rejecting the Affordable Care Act Medicaid expansion.

(Center for Public Policy Priorities [CPPP], 2016.; KFF, 2020)

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 2017, approximately 66% of hospitals were for-profit, 27% were nonprofit, and 7% were public (Texas Department of State Health Services [DSHS], 2017). In the KCF counties of interest there were 26 acute care hospitals as of December 2016 (DSHS, 2018):

- Bexar County
 - 18 for-profit
 - 2 public –
 - University Hospital
 - Texas Center for Infectious Disease
 - 2 nonprofit –
 - CHRISTUS Santa Rosa Medical Center
 - Children’s Hospital of San Antonio
- Comal County
 - 3 for-profit
 - 1 non-profit
- Bandera and Kendall Counties – no acute care hospitals

(DSHS, 2018a)

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. Uncompensated care is comprised of the sum of bad debt charges, or services for which the hospital did not receive payment, and charity charges (charges attributable to charity care that do not include bad debt charges, contractual allowances, or discounts) (American Hospital Association [AHA], 2019).

The following table lists the five Bexar County hospitals with the highest amount of uncompensated care:

TOP FIVE HOSPITALS WITH UNCOMPENSATED HEALTH CARE CHARGES IN BEXAR COUNTY: 2016				
Hospital	Owner	Bad Debt Charges	Charity Charges	Total Uncompensated Charges
Baptist Medical Ctr	FP	\$1,932,849,524	\$67,307,005	\$2,000,156,529
University Hospital	P	\$136,750,936	\$503,650,279	\$640,356,215
Methodist Hospital	FP	\$85,826,166	\$92,358,940	\$178,185,106
CHRISTUS Santa Rosa: MedCenter	NP	\$40,232,638	\$73,681,016	\$113,913,654
Southwest General	FP	\$48,477,873	\$14,180,281	\$62,658,154

(DSHS, 2017)

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, amended by the Texas legislature through the Indigent Health Care and Treatment Act (1989), **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

The Texas Indigent Health Care and Treatment Act (1989) defines an indigent person as an individual with few to no assets and an income below 21% of the FPL. However, Texas counties “may use a less restrictive standard or eligibility” by incorporating “a net income eligibility level that is less than 50 percent of the FPL” (Indigent Health Care and Treatment Act, 1989, Sec. 61.023 & Sec. 61.028).

Counties that spend more than 8% of their general tax revenue on indigent health services qualify and notify the appropriate department in a timely manner to receive state assistance (Indigent Health Care and Treatment Act, 1989, Sec. 61.037).

Many uninsured and indigent people who lack insurance resort to repeatedly using emergency rooms at local hospitals, resulting in high amounts of uncompensated costs. Texas paid a total of \$6.8 billion in uncompensated healthcare in 2016 (TxHHS, 2019). This can likely be attributed to the high uninsured rate in Texas (17.7%) compared to the national rate (8.9%) (U.S. Census Bureau, 2020d).

HEALTH CARE SAFETY NET

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 access to health care for all people.

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 (Cunningham & Felland, 2013). 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. There are two large FQHCs in the KCF counties of interest, CentroMed and CommuniCare, both in San Antonio (DSHS, 2019).

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 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 FQHC. This organization offers primary medical and dental care, pharmacies, and a wide variety of other mental health and educational health services at 17 sites through-out Bexar County and 3 sites in Comal County. In addition to primary care clinics, there are also clinics that specialize in care for the homeless; dentistry; and Women, Infant, Child (WIC) programs (CentroMed, n.d.).

CommuniCare Health Centers

This organization is a federally-funded, non-profit community health system. It has twelve clinic locations in Bexar County and one location in Kendall County. These centers provide primary medical care, pediatric care, gynecological care, dental care, vision 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 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], 2020c). UHS operates 13 community clinics, 2 urgent-care clinics, 2 school-based centers, the Texas Diabetes Institute, 4 renal dialysis centers, and the University Hospital (UHS, 2020a).

Methodist Healthcare Ministries

Methodist Healthcare Ministries (MHM) is an organization dedicated to providing healthcare for uninsured and low-income families across 74 South Texas counties (Methodist Healthcare Ministries [MHM], n.d.a). It operates two primary care clinics: the Wesley Health & Wellness Center and the Dixon Health & Wellness Center. 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 the uninsured and underinsured (MHM, n.d.b). This organization also collaborates with similarly focused organizations and state government in the development of public policy (MHM, n.d.a).

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 two immunization clinics, a sexually transmitted disease clinic, a tuberculosis clinic, and ten WIC clinics (San Antonio Metropolitan Health District, 2020).

Prescription Assistance

Some organizations offer prescription assistance. Any Baby Can's Prescription Assistance Program (PAP) helps families without insurance or who are unable to afford the full cost of prescriptions apply for free or low-cost prescription drugs (Any Baby Can, 2018). CentroMed also offers assistance with acquiring affordable medications to its clinic patients 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.

TABLE 7 BEXAR COUNTY HEALTH CARE CLINICS SERVING LOW-INCOME AND/OR UNINSURED PERSONS											
	Clinic Name	Family Practice	Dental	Mental Health	WIC	Counseling	Health Education/ Nutrition	Pharmacy/Medicatio n Assistance	Women' s Health/ Family Planning	Pediatrics	Homeless
Downtown											
1	Buena Vista WIC Clinic				√						
2	CentroMed Santa Rosa	√		√		√	√				
3	CommuniCare East 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	Planned Parenthood – San Pedro					√	√		√		
9	San Antonio Christian Dental Clinic		√								√
10	UHS Robert B. Green Campus							√	√	√	
North Central											
11	University Family Health Center (UFHC) - North	√		√			√			√	
12	UHS Kenwood Clinic (Dental by MetroHealth)	√							√	√	
13	UHS Medical Center Pavilion							√		√	
North East											
14	CentroMed Noemi Galvan Eling Clinic (Walzem Clinic)	√	√	√					√	√	
15	CentroMed WIC Nutrition Program (Walzem)				√						
16	CentroMed Family First Clinic	√									
17	CommuniCare Hill Country Village Pediatrics						√			√	
18	Planned Parenthood Northeast Clinic					√	√		√		
19	Metro Health Rittiman WIC Clinic				√						
20	Robert L.M. Hilliard Center (UHS)	√		√					√	√	
21	UHS Naco Perrin Clinic	√			√				√	√	
North West											
22	CommuniCare West Campus	√	√	√					√	√	
23	CommuniCare Northwest Campus	√		√	√				√	√	
24	CommuniCare Shavano Park										
25	CommuniCare Leon Springs Campus			√			√		√	√	
26	CommuniCare Medical Center								√		
27	Metro Health Buena Vista Clinic				√						
28	Metro Health Callaghan Clinic				√						
29	Metro Health Marbach Clinic				√						
30	Metro Health Sabine WIC Clinic				√						
31	Planned Parenthood South Texas Medical Center Clinic					√	√		√		
32	Planned Parenthood Marbach Clinic					√	√		√		
33	UTHSCSA Dental School		√								
34	UFHC - Northwest	√		√						√	
35	UHS – Health for Women on Callaghan*								√		
Continued on the next page											

TABLE 7 BEXAR COUNTY HEALTH CARE CLINICS SERVING LOW-INCOME AND/OR UNINSURED PERSONS (CONTINUED)											
	Clinic Name	Family Practice	Dental	Mental Health	WIC	Counseling	Health Education/ Nutrition	Pharmacy/Medication Assistance	Women's Health/ Family	Pediatrics	Homeless
South East											
36	Methodist Health Dixon Health & Wellness Center	√	√	√		√	√	√	√	√	
37	Metro Health Pecan Valley WIC Clinic				√						
38	Planned Parenthood Southeast Clinic					√	√		√		
39	UFHC - Southeast	√		√				√		√	
40	UHS South Flores Clinic	√			√				√	√	
South West											
41	CentroMed Berto Guerra Jr. Clinic	√	√	√						√	
42	CentroMed Maria Castro Flores Clinic*	√	√								
43	CentroMed Palo Alto Clinic	√	√		√	√				√	
44	CentroMed South Park Dental Clinic		√								
45	CentroMed South Park Medical Clinic	√		√					√	√	
46	CentroMed Southside Medical Clinic	√	√	√		√			√	√	
47	CentroMed WIC Nutrition Program				√		√				
48	CentroMed Women's and Pediatric Clinic	√							√	√	
49	CommuniCare Las Palmas WIC						√		√		
50	CommuniCare Potranco Campus			√	√		√		√	√	
51	Metro Health Zarzamora WIC Clinic				√						
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, n.d.; Daughters of Charity Services, n.d.; MHM, n.d.b; Planned Parenthood, 2020.; San Antonio Christian Dental Clinic, 2019; San Antonio Metropolitan Health District, 2020; UHS, 2020b; University of Texas at San Antonio Dental School, n.d.) *Temporarily Closed **Limited Pharmacy											

REFERENCES

- American Hospital Association (AHA). (2019). *Uncompensated hospital care cost fact sheet*. Retrieved from <https://www.aha.org/system/files/2019-01/uncompensated-care-fact-sheet-jan-2019.pdf>
- Any Baby Can. (2018). *Prescription assistance*. Retrieved from <http://www.anybabycansa.org/services/prescription-assistance/>
- Center for Public Policy Priorities (CPPP). (2016). *What is the Texas coverage gap?* Retrieved from http://forabettertexas.org/images/HW_2016_WhatIsTheCoverageGap.ap.pdf
- Centers for Medicare and Medicaid Services (CMS). (2019). *NHE fact sheet: NHE tables*. Retrieved from <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/NationalHealthExpendData/NHE-Fact-Sheet.html>
- CentroMed. (n.d.). *Services*. Retrieved March 27, 2020, from <http://www.centromedsa.com/services.html>
- CommuniCare Health Centers. (n.d.). *Locations*. Retrieved March 27, 2020 from <https://www.communicaresa.org/home/>
- Cunningham, P., & Felland, L. (2013). *Environmental scan to identify major research questions and metrics for monitoring the effects of the Affordable Care Act on safety net hospitals*. Retrieved from <https://aspe.hhs.gov/report/environmental-scan-identify-major-research-questions-and-metrics-monitoring-effects-affordable-care-act-safety-net-hospitals/c-definition-safety-net-hospitals>
- Daughters of Charity Services. (n.d.). *Our programs*. Retrieved March 26, 2020, from <https://www.dcssa.org/our-programs/>
- eHealth Medicare. (2020). *Medicare in Texas*. Retrieved from <https://www.ehealthmedicare.com/medicare-by-state/texas-medicare-plans/>
- Garfield, R., Orgera, K., and Damico, A. (2020). *The coverage gap: Uninsured poor adults in states that do not expand Medicaid*. Retrieved from <http://kff.org/uninsured/issue-brief/the-coverage-gap-uninsured-poor-adults-in-states-that-do-not-expand-medicaid/>
- Gong, G., Huey, C., Johnson, C., Curti, D., Philips, B. (2017). *The health insurance gap after implementation of the affordable care act in Texas*. Retrieved from, <https://www.texmed.org/March17Journal/>
- Indigent Health Care and Treatment Act. Texas Health and Safety Code, ch. 678, § 61 (1989). Retrieved from <http://www.statutes.legis.state.tx.us/Docs/HS/htm/HS.61.htm#61.002>
- Kaiser Family Foundation (KFF). (2019). *Medicaid in Texas*. Retrieved from <http://files.kff.org/attachment/fact-sheet-medicaid-state-TX>
- Kaiser Family Foundation (KFF). (2020). *Health insurance coverage of the total population, 2018*. Retrieved from <https://www.kff.org/other/state-indicator/total-population/?currentTimeframe=0&sortModel=%7B%22colld%22:%22Location%22,%22sort%22:%22asc%22%7D>
- Kaiser Family Foundation (KFF). (2020). *The coverage gap: uninsured poor adults in states that do not expand Medicaid*. Retrieved from <https://www.kff.org/medicaid/issue-brief/the-coverage-gap-uninsured-poor-adults-in-states-that-do-not-expand-medicaid/>
- Methodist Healthcare Ministries (MHM). (n.d.a). *About*. Retrieved March 26, 2020, from <http://www.mhm.org/about>
- Methodist Healthcare Ministries (MHM). (n.d.b). *Clinics*. Retrieved March 27, 2020. Retrieved from <http://www.mhm.org/services/clinics>
- Minton, L., Vela, L., & Wright, B. (2017). *Counting the cost of Texas health care*. Retrieved from <https://comptroller.texas.gov/economy/fiscal-notes/2017/march/health-care.php>
- Planned Parenthood. (2020). *Health centers in Texas*. Retrieved from <https://www.plannedparenthood.org/health-center/TX>
- San Antonio Christian Dental Clinic. (2019). *Clinic overview*. Retrieved from <https://www.sachristiandental.org/free-dental-clinic/>
- San Antonio Metropolitan Health District. (2020). *About us*. Retrieved from <http://www.sanantonio.gov/Health/AboutUs>
- Texas Department of State Health Services (DSHS). (2017). *Charity care and selected financial data for Texas acute care hospitals by county, 2016*. Retrieved from <http://www.dshs.texas.gov/chs/hosp/Charity16.xls>
- Texas Department of State Health Services (DSHS). (2018). *Texas hospital reports online: Texas acute care hospital utilization report, 2016*. Retrieved from <http://www.dshs.state.tx.us/chs/hosp/hosp5/>
- Texas Department of State Health Services (DSHS). (2019). *Texas primary care office (TPCO): Federally qualified health centers*. Retrieved from <http://dshs.texas.gov/chpr/FQHCmain.shtm>
- Texas Health and Human Services (TxHHS). (n.d.). *Medicaid & CHIP enrollment: SFY 2018*. Retrieved March 27, 2020, from <https://hhs.texas.gov/about-hhs/records-statistics/data-statistics/healthcare-statistics>
- Texas Health and Human Services (TxHHS). (2019). *Texas Hospital Uncompensated Care Report*. Retrieved from <https://hhs.texas.gov/sites/default/files/documents/laws-regulations/reports-presentations/2018/ridr-10-hospital-uncompensated-care-report-dec-2018.pdf>
- United States Department of Health and Human Services (HHS). (2020). *Poverty guidelines*. Retrieved from <https://aspe.hhs.gov/poverty-guidelines>
- University Health System (UHS). (2020a). *About University Health System*. Retrieved from <http://www.universityhealthsystem.com/about-us>
- University Health System (UHS). (2020b). *Locations & directions*. Retrieved from <https://www.universityhealthsystem.com/locations>
- University Health System (UHS). (2020c). *What is CareLink?* Retrieved from <http://www.universityhealthsystem.com/patients/support/carelink>
- University of Texas Health Science Center San Antonio. (2016). *Student-run free clinics*. Retrieved from <http://som.uthscsa.edu/Alumni/Student-RunFreeClinics.asp>
- University of Texas Health Science Center San Antonio Dental School. (n.d.). *Our Clinics*. Retrieved March 27, 2020, from <https://www.uthscsa.edu/patient-care/dental/clinic-directory>
- U.S. Census Bureau. (2020a). *Poverty status in the past 12 months: 2018 American community survey 5-year estimates, Table S1701*. Retrieved from <https://data.census.gov/cedsci/table?q=United%20States>
- U.S. Census Bureau. (2020b). *Public health insurance coverage by type and selected characteristics: 2018 American community survey 5-year estimates, Table S2704*. Retrieved from <https://data.census.gov/cedsci/table?q=2018%20Medicare%20Coverage&g=0500000US48019,48029,48091,48259&tid=ACST5Y2018.S2704&y=2018&vintage=2018>
- U.S. Census Bureau. (2020c). *Quick facts: Population estimates: 2019*. Retrieved from <https://www.census.gov/quickfacts/table/PST045216/48>
- U.S. Census Bureau. (2020d). *Selected characteristics of health insurance coverage in the United States: 2018 American community survey 1-year estimates, Table S2701*. Retrieved from <https://data.census.gov/cedsci/table?q=s2701&hidePreview=false&tid=ACST1Y2018.S2701&vintage=2018>

