

COMPARISON OF TEXAS HOSPITAL
DISTRICT COSTS

Report to the Technical Advisory Committee

August 29, 2002

MORNINGSIDE
RESEARCH AND
CONSULTING, INC

www.morningsideresearch.com

COMPARISON OF TEXAS HOSPITAL DISTRICT COSTS

Report to the Technical Advisory Committee

August 29, 2002

Prepared by

Morningside Research and Consulting, Inc.
P.O. Box 4173
Austin, Texas 78765
Phone 512 302 4413 • Fax 512 302 4416
info@morningsideresearch.com
www.morningsideresearch.com

Every attempt was made to collect accurate and comprehensive data for this report. Please bring any omissions or errors to the attention of Morningside Research and Consulting, Inc. or to Patricia Hayes, Chair of the Technical Advisory Committee, so the information may be corrected and considered by the Technical Advisory Committee as they continue their work.

Table of Contents

I. Executive Summary	1	VI. Primary Care Community Health Clinics	14
II. Introduction.....	3	Summary	14
Background.....	3	Comparison	14
Methodology	3	Austin-San Marcos SMSA.....	15
III. Demographics	5	VII. Public Health Programs.....	16
IV. Budgets and Tax Rates	6	Summary	16
Hospital District Revenues and Expenditures	6	Comparison	16
Reliance on Property Tax Revenue	7	VIII. Inmate Health Services	18
Per Capita Spending	7	Summary	18
Net Patient Revenue.....	7	Comparison	18
Gross Patient Revenue, Payor Mix, and Uncompensated Care	7	IX. Mental Health Services	19
Charity Care	7	Summary	19
Payor Source.....	9	Comparison	19
V. Indigent Health Care Programs 10		X. Hospital-Based Services	21
Summary.....	10	XI. Subsidiary Health Plans	25
Program Descriptions	10	Summary	25
Bexar County Hospital District.....	10	Plan Descriptions.....	25
Dallas County Hospital District	11	Bexar County Hospital District.....	25
El Paso County Hospital District	11	Dallas County Hospital District	25
Harris County Hospital District	11	El Paso County Hospital District	25
Tarrant County Hospital District	12	Harris County Hospital District	25
Austin-San Marcos SMSA.....	12	Tarrant County Hospital District	25
Comparison.....	12	Comparison	26
Reimbursement from Surrounding Counties	13	XII. Relationship with Medical Schools	27
		Medical Liability	27

I. Executive Summary

Purpose. The purpose of this report is to compare the level of services and funding of five large, urban hospital districts with the services and funding provided by the City of Austin, Travis County, and the Brackenridge and Children’s Hospitals. The budgets, programs, and services of five hospital districts (Bexar County, Dallas County, El Paso County, Harris County, and Tarrant County) and the indigent health care services provided in Travis County and the four surrounding counties are described.

Demographics. The percent of the population that is uninsured in Travis County and the four surrounding counties is higher only than Tarrant County and is comparable to Dallas County. The percent of the population living in poverty (at or below 100 percent of the federal poverty level) in Travis County and the four surrounding counties is higher than three of the hospital district counties, but is lower than Bexar and El Paso. El Paso County has the highest percent of its population living in poverty and the highest percentage of uninsured residents. Percentages of residents without insurance range from 22.7 percent in Tarrant County to 32.6 percent in El Paso County.

Hospital District budget and revenues: Bexar County is the only hospital district with an operating deficit. The El Paso County Hospital District relies the least on property tax revenue (21 percent of total revenue) to fund its programs and services. The Harris and Tarrant county hospital districts have the lowest per capita spending with budgets that rely heavily on property tax revenue.

The hospital districts’ percentage of self-pay patients ranges from 35 percent in El Paso County to almost 50 percent in Harris County. Gross patient revenue from commercially insured patients ranges from 3.7 percent in Harris County to just over 18 percent in Tarrant County. Payor source information for the hospital districts is not comparable to that reported for Brackenridge and Children’s Hospital because the hospital districts include the community primary care clinics they operate, while the data for Brackenridge and Children’s Hospitals include only hospital-based services.

Uncompensated care: Brackenridge and Children’s Hospitals have the lowest uncompensated care as a percent of gross patient revenue even when the costs of the Medical Assistance Program (MAP) are included. This may be primarily because the eligibility levels for the MAP program are lower than all of the hospital districts except El Paso. Uncompensated care ranges from a high of 55 percent in Harris County to a low of 35.9 percent in Bexar County. Net patient revenue is relatively low in the Harris County and Tarrant County hospital districts because of high levels of uncompensated care in those counties.

Indigent health care. Each of the five hospital districts operates the indigent health care program for their county. Maximum eligibility ranges from 50 percent of the federal poverty level (FPL) in the El Paso County Hospital District to 250 percent in the Dallas and Harris county hospital districts. Patient responsibility for copayments and a portion of their total charges also vary.

Community health centers. All five of the hospital districts operate community health centers. The El Paso County Hospital District operates two clinics and the hospital districts in Tarrant and Harris counties each operate 11 clinics. The City of Austin and Travis County also operate 11 clinics.

Public health programs. Two hospital districts (in Dallas and Tarrant counties) fully fund the public health programs in the counties in which they are located. The hospital district in Bexar County provides partial funding.

Inmate health services. All of the hospital districts except El Paso administer and/or fund health services for inmates incarcerated in their counties.

Mental health services. All of the hospital districts except El Paso provide inpatient and outpatient mental health services. Only the Tarrant and El Paso county hospital districts provide funding for community mental health services outside of the hospital district.

Indicators of level of service. Of the five hospital districts included in this report, the districts in Dallas and Bexar counties consistently indicate a higher level of services as measured by the following, even though Bexar County has the highest percentage of uninsured residents after El Paso County. Dallas County has the second lowest percent of uninsured residents of the five hospital districts (Tarrant County is lowest).

- Bexar and Dallas have the highest total FY 2002 budgeted expenditures per uninsured resident
- Dallas has the highest uncompensated care expenditures per uninsured resident, Harris is second
- Tarrant has the highest indigent health care expenditures per uninsured resident, followed by Dallas
- Dallas has the highest ratio of staffed beds per uninsured resident, although the ratio is very similar to Bexar and El Paso
- Bexar has the highest expenditures for community health clinics per uninsured resident, followed by Dallas
- Dallas has the highest spending for inmate health services, followed by Bexar
- Bexar, with the third largest population of the five hospital districts, has the most total hospital-based inpatient and outpatient mental health visits, followed by Dallas and Tarrant.
- Bexar has the largest subsidiary health plan, Dallas has the second largest

The hospital districts in El Paso County and Harris County indicate a lower level of services as measured by the following:

- Harris has the lowest total FY 2002 budgeted expenditures per uninsured resident, El Paso is second lowest.
- Tarrant County has the lowest uncompensated care expenditures per uninsured resident, El Paso is second lowest.
- Tarrant has fewest staffed beds per uninsured resident, Harris is second
- El Paso has the lowest indigent health care expenditures per uninsured resident, Harris County is second lowest
- El Paso has the lowest expenditures for community health clinics per uninsured resident with only two clinics
- Harris and El Paso have little to no expenditures for public health and inmate health services
- Harris has the fewest hospital-based inpatient and outpatient mental health visits of the four hospital districts with those services, although Harris County has the largest population of the four districts
- Tarrant has the smallest subsidiary health plan, followed by Harris and El Paso

II. Introduction

Background

The Technical Advisory Committee (TAC) was created in the summer of 2001 by elected officials in the Austin-San Marcos Standard Metropolitan Statistical Area (SMSA) to advise the elected officials on the issues related to healthcare in the five-county region. The TAC subsequently identified the need to have “comprehensive, reliable data on current services and gaps” and to “understand current fund expenditures and gaps” in services in the five-county area and a report was released in June 2002 detailing the provision of health care services.

In order to compare the levels of health care services provided by hospital districts in Texas with the services provided in the five-county SMSA, the Technical Advisory Committee requested more detail about the programs and budgets of the hospital districts. This report describes the programs and budgets of five large, urban hospital districts and compares the level of service to that of Travis County and the four surrounding counties.

Methodology

The following five urban hospital districts were selected for review. The names in parenthesis are the names under which the hospital districts are doing business.

- Bexar County Hospital District (University Health System)
- Dallas County Hospital District (Parkland Health and Hospital System)
- El Paso County Hospital District (Thomason Hospital)
- Harris County Hospital District
- Tarrant County Hospital District (JPS Health Network)

First, the public relations offices in each hospital district were contacted to request available budget documents and financial statements. FY 2002 budget information was requested. The websites of each district were also reviewed for information.

Based on the information received, a customized list of questions was emailed to the appropriate contact person or persons in each hospital district requesting more detail about the funding and statistics of several programs within the hospital district. Follow-up calls were made as necessary to collect the information requested.

All five of the hospital districts responded to the requests for information, although the hospital districts provided differing levels of detail in their responses.

The budget offices in each county in which the five hospital districts are located were also contacted for information about the programs and services funded by the county governments rather than the hospital districts.

Also included in this report is information from the 2000 Annual American Hospital Association that reflects information reported by each hospital district.

Identifying comparable data

Each of the five hospital districts described in this report was created in the 1950s or 1960s and all five operate under Chapter 281 of the Texas Health and Safety Code, which governs the operations of hospital districts in Texas. In contrast, the responsibilities for indigent health care in Travis County are shared by the City of Austin, Travis County, and the Seton Healthcare Network, which leases and operates Brackenridge and Children's Hospitals.

Comparisons are difficult because of the number of variables that differ among the hospital districts (and in Travis County and the surrounding region): the rates of uninsurance and poverty in each county, property values which impact the tax rates and tax revenue in each district, the levels of services provided to the uninsured population, the size of the hospital or hospitals in each district, to name just a few. The report attempts to isolate some of the programs within the hospital districts to allow comparisons with the services provided within Travis County and the surrounding area.

Comparing hospital-based services. The largest portion of each hospital district budget is for hospital-based services. While some information is available for the number of people served through various hospital-based services and the types of services provided are available, the costs of each type of service is not available. Other information that is not readily available is the types of physician services available to hospital districts through their contracts with medical schools. As a result, few conclusions are drawn about hospital-based services.

III. Demographics

2000 Population, Poverty, and Uninsured Population

	Bexar County	Dallas County	El Paso County	Harris County	Tarrant County	Travis County	Austin/San Marcos SMSA
2000 Population	1,392,931	2,218,899	679,622	3,400,578	1,446,219	812,280	1,249,763
2000 % of population in poverty	18.5%	10.5%	25.8%	11.6%	10.2%	12.1%	12.1%
2000 Population in Poverty	255,550	230,836	199,821	385,942	157,460	79,305	127,780
2000 % Uninsured	28.3%	24.7%	32.6%	26.3%	22.7%	24.6%	23.9%
2000 Uninsured Population	349,043	499,970	231,534	812,628	325,556	147,461	231,396

Source: Population data from 2000 Census. Poverty and Uninsured data from Texas Health and Human Services Commission (please note that these data were calculated prior to the release of the 2000 Census so are based on population projections for 2000).

Of the counties shown in the table above, Bexar and El Paso counties have the highest percentage of residents living in poverty and residents who are uninsured. El Paso County has the largest percent of its population living in poverty (at or below 100 percent of the Federal Poverty Level (FPL)) and the largest percent of its population without health insurance. Although El Paso County has the smallest population of the counties shown, there are more uninsured individuals than in Tarrant or Travis counties and more individuals living in poverty than Travis County.

Travis County has a smaller population than all of the counties shown except El Paso and the fewest number of people living in poverty and the fewest number of people who do not have health insurance. Only Tarrant County has a smaller percent of uninsured residents than Travis County. The population of the Austin-San Marcos SMSA is similar to Bexar and Tarrant counties and has almost the same number of uninsured residents as El Paso County. The five-county SMSA has the fewest number of residents living in poverty compared to the other counties shown.

IV. Budgets and Tax Rates

Hospital District Revenues and Expenditures

Tax Rate, Revenues and Expenditures Hospital Districts and Brackenridge/Children's Hospital

Hospital District/Hospital	Bexar County (University Health System)	Dallas County (Parkland Health and Hospital System)	El Paso County (Thomason Hospital)	Harris County	Tarrant County (JPS Health Network)	Brackenridge/ Children's Hospital
Hospital District Tax Rate - 2001	0.244	0.254	0.1854	0.203	0.234	n/a
Hospital District Tax Rate - 2002	0.244	0.254	0.1854	0.19	0.234	n/a
Hospital District Revenues						
Fiscal Year	FY 2002	FY 2002	FY 2002	FY 2002	FY 2002	FY 2002
Tax Levy	\$ 124,078,000	\$ 310,236,000	\$ 36,346,435	\$ 315,600,000	\$ 170,557,000	n/a
Net Patient Revenue	\$ 199,372,000	\$ 245,766,000	\$ 122,904,345	\$ 196,500,000	\$ 96,427,000	\$ 226,165,000
Other operating Revenue	\$ 24,178,000	\$ 138,640,000	\$ 2,383,000	\$ 11,700,000	\$ 15,668,000	\$ 7,924,000
Tobacco Settlement	\$ 3,167,000	\$ 11,268,000	\$ 165,252	\$ 13,800,000	\$ 5,016,000	\$ 335,000
Disproportionate Share	\$ 20,954,000	\$ 37,618,000	\$ 14,500,000	\$ 50,500,000	\$ 22,000,000	\$ 4,130,000
Total Revenue	\$ 371,749,000	\$ 743,528,000	\$ 176,299,032	\$ 588,100,000	\$ 309,668,000	\$ 238,554,000
Property taxes as a % of total revenue	33%	42%	21%	54%	55%	n/a
Patient revenue as a % of total revenue	54%	33%	70%	33%	31%	95%
Total Expenses	\$ 393,871,000	\$ 626,261,873	\$ 176,299,032	\$ 563,996,000	\$ 303,188,000	\$ 233,836,000
Tax levy per capita	\$ 89	\$ 140	\$ 53	\$ 93	\$ 67	n/a
Tax levy per uninsured	\$ 355	\$ 621	\$ 157	\$ 388	\$ 296	n/a
Tax levy per individual in poverty	\$ 486	\$ 1,344	\$ 182	\$ 818	\$ 612	n/a
Expenditures per capita	\$ 283	\$ 282	\$ 259	\$ 166	\$ 210	\$ 288
Expenditures per uninsured	\$ 1,128	\$ 1,253	\$ 761	\$ 694	\$ 931	\$ 1,586
Expenditures per individual in poverty	\$ 1,541	\$ 2,713	\$ 882	\$ 1,461	\$ 1,925	\$ 2,949

Source: Documentation and staff from each organization.

Note: The property tax rates represent the amount taxed per \$100 of valuation. The Harris County Hospital District's fiscal year is from March 1 to February 28. The data show above for the Harris County Hospital District is budgeted FY 2002, which ended 2/28/02.

The maximum tax rate that a hospital district may levy is .75 and all of the hospital districts are well below that rate. The El Paso County Hospital District has the lowest tax rate and the lowest property tax revenue. The Bexar County Hospital District is the only entity shown in the table above that has an operating deficit, which is currently made up through reserve funds; the County Commissioners court has not approved a tax rate increase to address the deficit.

The revenues and expenditures in the chart above exclude premium revenue and expenditures for hospital district subsidiary health plans. Information about the health plans operated by the hospital districts is shown beginning on page 25.

Reliance on Property Tax Revenue

The El Paso Hospital District relies the least on property tax revenue to fund its programs and services while Tarrant County and Harris County are the most reliant on property tax revenue. The Harris and Tarrant County hospital districts have the lowest per capita spending with a budgets that rely most heavily on property tax revenue.

Per Capita Spending

While per capital spending is similar in the Bexar, Dallas, and El Paso county hospital districts, the other ratios differ. The budget expenditures per individual in poverty in the Tarrant, Harris and Dallas hospital districts is high because of the relatively low poverty rates in those counties. Spending in the El Paso County hospital district is low per uninsured resident and resident living in poverty because of the very high rates of uninsurance and poverty in those counties.

Net Patient Revenue

Charity care is one of the expenses deducted from gross patient revenue to determine net patient revenue. Charity care for the five hospital districts includes the indigent care programs operated by the districts as well as the unreimbursed costs of operating the community primary care health centers in each district. Net patient revenue is low in Harris and Tarrant counties because of very high uncompensated care in those districts (54 percent and 41 percent of gross patient revenue, respectively).

Brackenridge Hospital has higher net patient revenue than the five hospitals districts, which may be explained at least in part by the fact that Brackenridge has the lowest charity care among the entities shown above because Brackenridge charity care only includes hospital-based services; the City of Austin and Travis County fund the indigent health care program and the Community Health Centers in Travis County.

Gross Patient Revenue, Payor Mix, and Uncompensated Care

The table on the following page shows the gross patient revenue, payor mix, and uncompensated care provided by the hospital districts and Brackenridge Hospital.

Charity Care

Because the charity care expenses for the hospital districts include indigent health care programs and the community health centers, charity care for Brackenridge and Children's Hospital is lower than the five hospital districts. To provide a better comparison, the additional expenses paid from the City of Austin and Travis County general funds for indigent health care and the Community Health Centers are added to the charity care line item in the table below for Brackenridge to show charity care comparable to the hospital districts. However, even with these costs included, Brackenridge has the lowest percentage, primarily due to the higher eligibility guidelines for the indigent health care programs of the hospital districts. All of the hospital districts except El Paso provide services to the uninsured up to 200 and 250 percent of the federal poverty level. The indigent health care program administered by the City of Austin and funded by the City of Austin and Travis County provides services up to 100 percent of the federal poverty level unless the uninsured is elderly or disabled for whom services are provided up to 200 percent of the federal poverty level.

Charity Care v. Bad Debt. Hospitals differ in the way in which they report charity care versus bad debt. Some hospitals may consider indigent patients as self-paying and write off their unpaid charges as bad debt rather than charity care. Total uncompensated care provides the best comparison between the entities shown on the table below.

The El Paso County Hospital District reports the lowest percentage of charity care and that district has the most restrictive indigent health care program, limiting eligibility to just 50 percent of the federal poverty level. However, because of bad debt expenditures, total uncompensated care for the El Paso hospital district is comparable to the Bexar and Dallas county hospital districts.

**Gross Patient Revenue and Uncompensated Care
Hospital Districts and Brackenridge/Children's Hospital**

Hospital District/Hospital	Bexar County (University Health System)	Dallas County (Parkland Health and Hospital System)	El Paso County (Thomason Hospital)	Harris County	Tarrant County (JPS Health Network)	Brackenridge/ Children's Hospital
Gross Patient Revenue (GPR)	\$502,404,000	\$949,735,420	\$271,111,000	\$829,263,000	\$303,048,000	\$382,019,000
% of GPR by Payor Source						
Medicare FFS	17.9%	13.1%	12.3%	10.8%	9.3%	13.4%
Medicare managed care	0.5%	0.0%	0.0%	0.0%	0.6%	0.8%
Total Medicare	18.5%	13.1%	12.3%	10.8%	9.9%	14.2%
Medicaid FFS	15.3%	34.9%	28.6%	31.8%	22.2%	22.5%
Medicaid managed care	3.4%	3.5%	5.8%	4.4%	7.5%	6.9%
Total Medicaid	18.6%	38.4%	34.4%	36.3%	29.8%	29.4%
Other government	2.6%	1.5%	4.2%	3.2%	21.5%	8.3%
Self pay	45.2%	36.0%	35.4%	45.9%	16.4%	12.7%
Third party – managed care	6.8%	3.1%	0.1%	0.0%		31.3%
Other third party	8.3%	7.9%	13.7%	3.7%	18.2%	4.2%
Total third party	15.1%	11.0%	13.8%	3.7%	18.2%	35.5%
Other	0.0%	0.0%	0.0%	0.0%	4.2%	0.0%
Bad Debt Charges	\$ 13,826,000	\$ 76,958,000	\$ 47,875,000	\$ 144,347,000	\$ 12,000,000	\$ 25,528,000
Charity Care Charges	\$ 166,290,000	\$ 281,559,346	\$ 52,309,000	\$ 303,977,000	\$ 112,395,000	\$ 43,287,000
Total Uncompensated Care	\$ 180,116,000	\$ 358,517,346	\$ 100,184,000	\$ 448,324,000	\$ 124,395,000	\$ 68,815,000
Bad Debt as % of GPR	2.8%	8.1%	17.7%	17.4%	4.0%	6.7%
Charity Care as % of GPR	33.1%	29.6%	19.3%	36.7%	37.1%	11.3%
Uncompensated Care as % of GPR	35.9%	37.7%	37.0%	54.1%	41.0%	18.0%
City of Austin and Travis County General Fund Expenditures for Indigent Health Care	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 34,300,000
Comparable Uncompensated Care	\$ 180,116,000	\$ 358,517,346	\$ 100,184,000	\$ 448,324,000	\$ 124,395,000	\$ 103,115,000
Comparable Uncompensated Care as % of GPR	35.9%	37.7%	37.0%	54.1%	41.0%	27.0%
Comparable Uncompensated Care per capita	\$ 129	\$ 162	\$ 147	\$ 132	\$ 86	\$ 127
Comparable Uncompensated Care per uninsured	\$ 516	\$ 717	\$ 433	\$ 552	\$ 382	\$ 699
Comparable Uncompensated Care per poverty population	\$ 705	\$ 1,553	\$ 501	\$ 1,162	\$ 790	\$ 1,300

Source: Analysis based on data from the 2000 American Hospital Association Survey. Travis County and City of Austin indigent health care expenses are from the June 2002 Report to the Technical Advisory Committee.

Notes: Information for Brackenridge/Children's Hospital is not comparable to the hospital districts because the hospital districts include their indigent health care programs and community health clinics. Brackenridge/Children's Hospital data include only hospital-based services. Hospitals categorize charity care and bad differently (see explanation in text above), so the best comparison is total uncompensated care expenditures.

Payor Source

In the table above, the payor source data for Brackenridge/Children's Hospital does not include the community health clinics operated by the City of Austin and Travis County. The data shown, then is not comparable to the payor source data from each of the hospital districts, which does include the community health clinics operated by the hospital districts.

The hospital districts' percentage of self-pay patients ranges from 35 percent in El Paso County to almost 50 percent in Harris County. The Tarrant County hospital district reports only 16 percent self-pay patients, but their "other government" category shows 21.5 percent, much higher than the other hospital districts, suggesting that the Tarrant County hospital district may classify their indigent health care plan enrollees differently than the other hospital districts. Gross patient revenue from commercially insured patients ranges from 3.7 percent in Harris County to just over 18 percent in Tarrant County.

V. Indigent Health Care Programs

Summary

Each of the five hospital districts operates the indigent health care program for their county. The programs vary in each hospital district, with maximum eligibility ranging from 50 percent of the federal poverty level (FPL) in the El Paso County Hospital District to 250 percent in the Dallas and Harris hospital districts. Patient responsibility for copayments and a portion of their total charges also vary. The program in Bexar County is unique among the five districts in that it requires monthly payments from enrollees based on charges incurred with payments capped at a maximum liability level determined by formula. The other programs have copayments that differ by eligibility level. At the highest eligibility levels in the Dallas County Hospital District, enrollees make monthly payments toward their charges. At the highest eligibility level in Harris County, enrollees are responsible for half of their charges. All of the indigent health care programs require enrollees to be a resident of the county in which the hospital district is located.

The indigent health care programs allow enrollees to receive any of the health care services that are provided within the hospital district health care system. In some cases, the hospital district may contract out for services not provided within the hospital district and enrollees may access those services. The programs do not provide funding for services that enrollees receive outside of the hospital district systems with the exception of those services for which the hospital district has a contract. Enrollees are generally assigned a primary care provider at one of the hospital district's community primary care clinics. In Bexar County, the hospital district contracts with other community clinics outside the hospital district to increase capacity.

Program Descriptions

Bexar County Hospital District

The Carelink program of the Bexar County Hospital District covers individuals with incomes up to 200 percent of FPL, but those below 75 percent of FPL do not have to pay for the services they receive. Rather than using a copayment or premium payment system, Carelink enrollees are assessed a maximum payment liability using a formula that takes a percentage of their income and poverty level. The maximum liability is divided by 48 months and that is the amount the family must pay each month for four years. A family in the Carelink program does not have to pay any charges in excess of their maximum liability and their maximum liability does not exceed their actual charges.

Carelink patients may receive services at any of the University Health System facilities as well as other community clinics in the county operated by the University of Texas Health Science Center and five FQHC clinics in Bexar County. Carelink enrollees are eligible for any services provided by University Health Systems, including transplants. Carelink will not pay for any services received outside of University Health Systems facilities (except the clinics with which UHS has contracts), even for emergency care provided at another hospital because University Hospital was on diversion.

Dallas County Hospital District

The Parkland Healthplus program has three enrollment levels: 133 percent or less of FPL, 133 percent to 200 percent of FPL, and 200 percent to 250 percent of FPL. All of the services are the same at each level, but the copayments differ. At the 200-250 percent level, enrollees are required to make monthly payments (based on family size) for all billed charges. Enrollees pay the charges at the monthly rate for a period of four years.

Enrollees select a Primary Care Provider (PCP) at the community health clinic closest to their home and must receive services through the Parkland Health and Hospital System, which includes Parkland Memorial Hospital and the community health clinics. Enrollees may receive all services provided through the Parkland Health and Hospital System, including transplants, and services received at any other facility are not reimbursed.

El Paso County Hospital District

The El Paso County Hospital District funds services to indigent patients who are at or below 50 percent of the FPL. Thomason Hospital's charity care program provides additional assistance on a per visit basis to patients who are between 50 percent and 200 percent of FPL and to medically indigent patients up to 500 percent of the FPL. A patient is determined medically indigent based on income, family size and the balance of their medical bill. Enrollees are not necessarily restricted to the services provided with the hospital district. The hospital district has a contract with El Paso First Health Network, which arranges for enrollees to be provided necessary services at other sites. The Network determines eligibility for the program, administers the contract for services and the coordination of benefits and payments. Contracts for services outside of the hospital district generally follow Medicaid reimbursement rates.

In addition, the El Paso First Health Network (see page 25 for more information) serves as the third party administrator for the Community Voices program, which is funded by a grant from the Kellogg Foundation and a match from Thomason Hospital and is one of 13 similar programs across the country. The program began enrolling individuals in 1999 and provides primary health care services for enrollees aged 18 to 65 at 100 percent of the FPL and below. Community Voices focuses on linking enrollees to a medical home and pays for primary care and limited specialty care services. Community Voices does not cover emergency services, hospitalization, or pharmacy services, although Community Voices enrollees are automatically enrolled in the pharmacy plan at Thomason Hospital. The grant from the Kellogg Foundation will expire in June of 2003. Current funding allows Community Voices to enroll 7,000 individuals, but there is a waiting list of 2,000 individuals and other organizations in the community also maintain waiting lists for Community Voices. Community Voices enrollees may receive services from any provider in the network and are not limited to the services provided by the El Paso County Hospital District.

Harris County Hospital District

The Harris County Gold Card program has three levels of eligibility. Enrollees with incomes up to 100 percent of FPL are not responsible for their charges and have no copayments. Enrollees with incomes from 101 to 200 percent of FPL pay a copayment for all services. Enrollees with incomes from 201 to 250 percent of FPL are responsible for half of their charges. Enrollees are assigned a primary care physician at the community clinic closest to where they live. There are currently about 105,000 people enrolled in the program and there were over 1 million visits to the clinics by enrollees in FY 2001.

The hospital district is developing a new program that will be similar to the program in the Bexar County Hospital District.

Tarrant County Hospital District

The Tarrant County Hospital District has two levels of enrollment – 133 percent or less of FPL and from 133 percent to 200 percent of FPL. The upper limit of the program was expanded October 1, 2001 to 200 percent from 185 percent of FPL. The services provided at each level are the same, but the copayments are different. The program assigns enrollees to a primary care provider in a JPS Health Network facility. The program will not pay for any services outside the JPS Health Network. The program does not include obstetrical care.

Austin-San Marcos SMSA

Bastrop, Caldwell and Hays counties all provide the basic services up to 21 percent of the FPL as required by the Indigent Health Care Act. Williamson County provides the basic services required by state law up to 25 percent of the FPL. Travis County and the City of Austin far exceed the state requirements, serving up to 100 percent of the FPL for most uninsured residents, while the elderly and disabled up to 200 percent of the FPL are eligible for services.

Comparison

Indigent Health Care Programs Hospital Districts and Travis County FY 2002

Name of Program	Bexar County (University Health System)	Dallas County (Parkland Health and Hospital System)	El Paso County (Thomason Hospital)	Harris County	Tarrant County (JPS Health Network)	Travis County	
						Travis County	City of Austin
Budget	\$ 96,000,000	\$ 285,440,000	\$ 45,132,217	\$ 219,055,303	\$ 247,436,000	\$ 4,500,000	\$ 28,400,000
Eligibility	Up to 75% of FPL, no payment required. 76% up to 200%, monthly payment required	3 levels: Up to 133% of FPL, up to 200% of FPL, and up to 250% of FPL. Co-pay differ by level, highest level requires monthly payments.	Up to 50% of FPL. On a per visit basis: up to 200% and up to 500% if medically indigent	Up to 100% of FPL receive free services, up to 200% of FPL pay a co-pay, up to 250% of FPL are responsible for 1/2 of their medical charges.	2 programs: Up to 133% of FPL and up to 200% of FPL. Co-pay differs in each program.	Up to 100% or up to 200% if elderly or disabled.	
Current Enrollment # actively receiving services	55,000	78,951	48,196	105,000	29,000	21,274	
% of uninsured population enrolled	not available	64,451	not available	1,058,423	85-90% are active	not available	
\$ per individual in poverty	11%	34%	6%	32%	20%	14%	
\$ per uninsured	376	1,237	226	568	1,571	\$	415
\$ per enrollee	275	571	195	270	760	\$	223
	\$ 1,745	\$ 3,615	\$ 936	\$ 2,086	\$ 8,532	\$	1,546

Source: Documentation and staff from each organization. In Dallas, El Paso, and Tarrant counties, the Indigent Health Care Program budgets reflect the charity care expenditures for the hospital district. For Tarrant County, the FY 03 budgeted charity care expenses are shown.

The high per enrollee expenditures in Dallas and Tarrant County may indicate that the charity care budget for those two districts may cover more individuals than is reflected in the number of enrollees in the indigent health care programs.

**Indigent Health Care Programs
Austin-San Marcos SMSA**

	Direct Services	# Enrolled	# Received Services FY 2001	Eligibility Criteria
	FY 2002 Budget	FY 2002		
Bastrop County	\$347,538	117	Same as eligibles	At or below 21% FPL
Caldwell County	\$178,154	100	Same as eligibles	At or below 21% FPL
Hays County	\$355,525	65-75	Same as eligibles	At or below 21% FPL
Travis County*	\$3,477,326 (GF Only)	21,274 (FY 2001)	Not available	At or below 100% of FPL, 200% if elderly or disabled
City of Austin*	\$24,737,035 (GF Only)			
Williamson County	\$1,375,686	685	Same as eligibles	At or below 25% FPL

* Does not include budget for Community Health Centers except payments for services provided to MAP clients.

For Bastrop, Caldwell, Hays, and Williamson counties, the number shown as enrolled is similar to the number who actually receive health care services. For Travis County, the number of enrollees who actually received services is not available because the program tracks the unduplicated individuals receiving each type of service available, but individuals may receive services from more than one program.

Reimbursement from Surrounding Counties

Staff at all of the hospital districts indicated that they do attempt to collect payments from neighboring counties whose indigent residents have received services at a hospital district facility. However, they also indicated that because the level of the indigent health care programs in surrounding counties is often very low, few of the uninsured residents treated at hospital district facilities qualified for those programs.

The El Paso County Hospital District turns uninsured non-resident collections over to their collections agency which works with the county to qualify the patient for a program, such as Medicaid, that will pay for their care

VI. Primary Care Community Health Clinics

Summary

Each of the five hospital districts operates non-hospital-based primary care clinics located throughout the communities served by the hospital district. The clinics in each hospital district provide similar primary care services and accept Medicaid and Medicare and some accept commercial insurance. Most clinics serve as the medical home and primary care provider for individuals enrolled in the hospital district indigent health care program.

Only the clinics operated by the City of Austin and Travis County are known to be Federally Qualified Health Centers (FQHCs, also known as Community Health Centers). In order to qualify as an FQHC, a clinic must serve a medically underserved area or population. FQHCs receive cost-based reimbursement for Medicaid and Medicare, discounted pharmaceuticals, federal grant funding, and the ability to request medical liability coverage at no cost to the clinic. The Austin/Travis County Community Health Centers received FQHC grant funding for the first time in 2001. An FQHC must serve anyone in their service area, regardless of their ability to pay.

Comparison

Primary Care Community Health Clinics

Hospital District	Dallas County (Parkland Health and Hospital System)					Travis County	
	Bexar County (University Health System)	El Paso County (Thomason Hospital)	Harris County	Tarrant County (JPS Health Network)	Travis County	City of Austin	
Clinic Expenditures	\$ 35,171,000	\$ 36,575,669	\$ 2,012,209	\$ 48,707,178	\$ 17,640,518	\$ 1,700,000	\$ 16,200,000
\$ per capita	\$ 25	\$ 16	\$ 3	\$ 14	\$ 12	\$	\$ 22
\$ per uninsured	\$ 101	\$ 73	\$ 9	\$ 60	\$ 54	\$	\$ 121
\$ per individual in poverty	\$ 138	\$ 158	\$ 10	\$ 126	\$ 112	\$	\$ 226
Patient visits*	250,563	367,230	35,000	490,626	259,018	130,663	
\$ per patient visit	\$ 140	\$ 100	\$ 57	\$ 99	\$ 68	\$	\$ 137
Unduplicated Patients	not available	not available	not available	235,213	not available	43,544	
Clinic Sites	5	9	2	11	11	5	5
Women's Centers		3 stand-alone, others located in clinic sites			2 stand alone, 6 in other clinic sites		located in 2 clinic sites above
Dental Centers			1	1	1 stand alone, 5 in other clinic sites		1 stand alone, 2 in other clinic sites
Pharmacy		yes	yes	yes	4	yes	
laboratory		yes	yes	yes	yes	yes	
x-ray		yes		yes	yes	yes	
School-based health centers		10	no	6	4	program has been suspended	
HIVAIDS clinics				1	1 unit at the hospital	1	

*FY 2001, except Tavis County, which is Budgeted FY 2002.

Source: Documentation and staff from each organization.

Notes Hospital districts generally have two types of clinics: specialty clinics on the campus of the hospital and community clinics located elsewhere in the community. Only the community clinics are shown in the table above. All clinic expenditures are budgeted FY 2002 except Tarrant County, which is FY 2003. Information that is left blank was not received or not available at the time the report was completed.

Although the Bexar County Hospital District contracts with other community health clinics outside of the hospital district system, the information shown here includes only the information for the community health clinics operated by the hospital district. Of the hospital districts, the Bexar County Hospital

District has the highest expenditures per capita and per uninsured resident, while Dallas County has the highest expenditures per patient visit. The El Paso County Hospital District has the smallest system, with only two clinics and the lowest expenditures overall.

Austin-San Marcos SMSA

Travis County is the only county in the five county Austin-San Marcos SMSA that funds or operates primary health care clinics, with the exception of Hays County. Hays County provides about \$100,000 for primary health care services provided at the Hays County Family Clinic, operated by Central Texas Medical Associates, for a physician's assistant to provide primary health care services for indigent clients. The county plans to hire a physician to provide these services in the newly completed clinic in San Marcos. The Hays County Family Clinic had 4,460 patient visits in FY 2001.

VII. Public Health Programs

Summary

Two hospital districts, in Harris and El Paso counties, do not provide funding for public health programs. The El Paso County government provides \$2.8 million in funding to the joint city/county public health department. Harris County general funds provide \$16.6 million of the \$47.7 million budget for the Harris County Public Health Department. Houston and other cities in Harris County have their own public health departments and do not contribute to the Harris County Public Health Department..

Public health services are operated by the Dallas and Tarrant county governments, but are fully reimbursed by the hospital districts in those counties. For FY 2002, the Dallas County Hospital district will reimburse Dallas County \$4.7 million and the Tarrant County Hospital District will reimburse Tarrant County \$5.6 million.

The Bexar County hospital district provides \$395,000 to San Antonio MetroHealth for public health services provided in the unincorporated areas of Bexar County.

Each of the hospital districts have programs focused on prevention in addition to the public health expenditures shown in the table below.

Comparison

Public Health Programs		
Budgeted FY 2002		
	Hospital District Funding	County General Fund
Bexar County	\$395,000 to San Antonio MetroHealth for unincorporated areas of the county (may include environmental health)	\$0
Dallas County	\$4.7 M (excludes environmental health)	County provides services and is fully reimbursed by the hospital district
El Paso County	\$0	\$2.8 M (includes environmental health)
Harris County	\$0	\$16.6 M (includes environmental health)
Tarrant County	\$5.6 M (includes environmental health)	County provides services and is fully reimbursed by the hospital district

Public Health Programs (con't)		
Budgeted FY 2002		
	Hospital District Funding	County General Fund
Austin-San Marcos SMSA		
Bastrop County	n/a	\$0
Caldwell County	n/a	\$0
Hays County	n/a	\$652,225 (includes about \$100,000 for primary care services)
Travis County	n/a	\$900,000 (excludes environmental health)
City of Austin	n/a	\$3.4 M City of Austin (excludes environmental health)
Williamson County	n/a	\$1 M

Source: Documentation and staff from each organization.

VIII. Inmate Health Services

Summary

All of the hospital districts except El Paso County provide health services to inmates. In El Paso County these services are provided and funded by El Paso County at a cost of \$2,864,000. The county does receive about \$30,000 in reimbursement from tobacco settlement funds from the hospital district for these services.

In Bexar, Harris and Tarrant counties, all inmate health services are provided and funded by the hospital district. In Dallas County, the services are provided by the Dallas County government and are reimbursed by the hospital district.

Comparison

Inmate Health Services		
Budgeted FY 2002 (unless otherwise noted)		
	Hospital District Funding	County General Fund
Bexar County	\$7 M	\$0
Dallas County	\$8.1 M	County administers program and is reimbursed by the hospital district
El Paso County	\$30,000	\$2.864 M (reimbursed \$30,000 from hospital district from tobacco settlement funds)
Harris County	\$0	\$40 M (includes physical and mental health)
Tarrant County	\$4 M (includes mental health services)	\$0
Austin-San Marcos SMSA		
Bastrop County	n/a	\$200,000
Caldwell County	n/a	Not yet received
Hays County	n/a	\$127,000 (amended)
Travis County	n/a	\$6.4 M
City of Austin	n/a	\$0
Williamson County	n/a	\$892,000

Source: Documentation and staff from each organization.

IX. Mental Health Services

Summary

All of the hospital districts, with the exception of El Paso County, provide inpatient and outpatient psychiatric care.

The Bexar County Hospital District does not have any funds budgeted for community mental health services in FY 2002, but paid \$1.6 million in FY 2001 to the local mental health/mental retardation authority (MHMRA).

The Dallas County government provides \$4.4 million annually to Northstar and \$334,000 annually to the local mental health authority.

In El Paso County, the hospital district does not provide any services or funding for inpatient or outpatient mental health services. The El Paso County government budgets \$100,000 to the local MHMRA for services to inmates and for childhood intervention.

The Harris County hospital district has budgeted \$2,992,043 for mental health services provided by the hospital district, including inpatient and emergency services as well as outpatient services provided through a clinic at Ben Taub Hospital. The Harris County government provides \$21 million in general funds to the local MHMRA, which represents about 15 percent of the local MHMRA budget.

In Tarrant County, the hospital district reimburses the county \$605,000 for payments to the local MHMRA. The hospital district pays an additional \$1,060,000 to MHMR for total community mental health expenditures of \$1,665,000.

Comparison

The table below shows statistics for the inpatient, outpatient, and emergency mental health services provided by the five hospital districts. The El Paso County Hospital District and Brackenridge Hospital do not provide any mental health services. Only the Bexar County Hospital District reported providing chemical dependency services.

Inpatient and Outpatient Mental Health Services Provided by Hospitals

Hospital District/Hospital	Bexar County (University Health System)	Dallas County (Parkland Health and Hospital System)	El Paso County (Thomason Hospital)	Harris County	Tarrant County (JPS Health Network)	Brackenridge/ Children's Hospital
Psych <30 day admits	1,348	360		459	1,406	
Psych <30 day Discharges	1,374	360		494	1,358	
Psych <30 day IP Days	5,849	3,871		7,016	10,490	
Psych >30 days admits		11			n/a	
Psych >30 day Discharges		11			n/a	
Psych >30 day IP Days		385			n/a	
<i>Chem Dep Admits</i>						
<i>Chem Dep Discharges</i>						
<i>Chem Dep IP Days</i>						
Emergency Psych Visits	8,799	9,443		2,807	5,848	
Emergency Chem Dep Visits				n/a		
Clinic/Other Psych Visits	14,681	9,330		5,176	9,075	
Total Psych Visits	23,480	18,773		7,983	14,923	
Clinic/Other Chem Dep Visits	3,323			n/a		
Total Chem Dep Visits	3,323			n/a		

Source: 2000 American Hospital Association Annual Survey

In addition to the services provided within the hospital districts, the hospital districts and the counties in which they are located fund additional community mental health services as shown in the table below.

Outpatient Mental Health Services Budgeted FY 2002 (unless otherwise noted)		
	Hospital District Funding	County General Fund
Bexar County	\$0 FY 2002 \$1.6 M FY 2001	\$0
Dallas County	In-patient, ER, and one outpatient clinic	\$4.4 M to Northstar \$335,000 to MHA
El Paso County	\$0	\$100,000 to MHA
Harris County	In-patient, ER, and one outpatient clinic \$2,992,043 FY 2002	\$21 M to MHA
Tarrant County	\$1.2 M to MHMRA (excludes inmate mental health services) \$5.3M for services provided at the hospital district	\$0
Austin-San Marcos SMSA		
Bastrop County	n/a	\$8,000 (office space and telephone service provided for MHMRA)
Caldwell County	n/a	Not yet received
Hays County	n/a	Any mental health services are provided through public health program budget.
Travis County	n/a	\$2,240,615
City of Austin	n/a	\$1,941,968
Williamson County	n/a	\$63,000

Source: Budget documents and staff in each organization..

X. Hospital-Based Services

Information is not readily available from the hospital districts to discern the costs of the hospital-based services provided by the hospital district. The Harris County Hospital District was the only district that provided a program budget showing budgeted expenditures by the programs and services operated by the hospital district. The tables on the following pages show the magnitude of many of the services administered by the hospital districts, but not the costs.

The table below shows the number of staffed beds in each of the hospital districts and at Brackenridge Hospital.

Staffed Beds

Hospital District/Hospital	Bexar County (University Health System)	Dallas County (Parkland Health and Hospital System)	El Paso County (Thomason Hospital)	Harris County	Tarrant County (JPS Health Network)	Brackenridge/ Children's Hospital
Gen Med Surg Beds	148	393	129	384	91	138
Pedi Med Surg Beds	25		42	45	10	62
OB (Level)	3	3	3	3	3	3
OB Beds	37	151	57	124	40	42
Med Surg Int Care Beds	43	38	26	62	56	24
Cardiac Int Care Beds	18	11		8		
Neonatal Int Care Beds	20	56	15	33	35	28
Neonatal Intermediate Care Beds	15		19	64		
Pedi Int Care Beds	12			6		20
Burn Care Beds		27				
Other Special Care Beds	78		10	16		
Other Int Care (Type)				CCW		Intermediate Care
Other Int Care Beds	12			10		17
Physical Rehab Beds	25	14		25		
<i>Substance Abuse Beds</i>						
Psych Care Beds	28	18		20	44	
Skilled Nursing Care Beds				24	15	
<i>Intermed Nursing Care Beds</i>						
<i>Acute Long Term Beds</i>						
<i>Other Long Term Beds</i>						
Other Care Beds	11					
TOTAL STAFFED BEDS	472	708	298	821	291	331
Ratio of staffed beds to county population	2,951	3,134	2,281	4,142	4,970	2,454
Ratio of staffed beds to population living in poverty	541	326	671	470	541	240
Ratio of staffed beds to uninsured population	739	706	777	990	1,119	446
FY 2002 Expenses per staffed bed	\$ 834,472	\$ 884,551	\$ 591,607	\$ 686,962	\$ 1,018,467	\$ 706,453

Source: 2000 American Hospital Association Annual Survey. Note: Ratios indicate one staffed bed per x population. Items in italics in the left column indicate services that are not provided by any of the hospitals.

The table below shows the other services provided by each hospital/hospital district and includes additional statistics for the volume of services provided by each entity.

Hospital Activity Statistics

Hospital District/Hospital	Bexar County (University Health System)	Dallas County (Parkland Health and Hospital System)	El Paso County (Thomason Hospital)	Harris County	Tarrant County (JPS Health Network)	Brackenridge/ Children's Hospital
Staffed Bassinets	25	102	57	85	35	42
Births	3,069	15,258	5,792	11,019	5,270	3,436
Admits (excl Newborns)	19,881	41,679	13,469	40,443	13,977	16,403
Admits - Nursing Home Unit				267	248	
Inpatient Days	125,443	201,904	66,313	238,359	68,696	78,114
Inpatient Days - Nursing Home Unit				6,169	3,023	
Emergency Room Visits	67,408	119,542	53,936	186,839	69,931	105,226
Total Outpatient Visits	512,805	933,405	496,803	875,088	383,384	164,641
Inpatient Surgeries	9,447	6,752	4,328	16,780	3,283	5,373
Operating Rooms	19	18	10	14	8	16
Outpatient Surgeries	5,828	6,817	1,579	5,173	2,364	10,520
Deliveries	2,767	15,419	5,227	11,125	5,354	3,411
"Transferred To" Newborns	62	16	n/a	n/a	n/a	
"Transferred From" Newborns	15	33	n/a	n/a	n/a	33
Deliveries admitted to	325	1,266	978	562	337	349
<i>Mental Retardation Admits</i>						
<i>Mental Retardation Discharges</i>						
<i>Mental Retardation IP Days</i>						
Partial Hospital Admits					278	
Partial Hospital Discharges					278	
Partial Hospital IP Days					2,392	
Gen Med Surg IP Days	53,851	113,896	24,592	124,836	40,359	31,894
Pedi Med Surg IP Days	4,593		7,571	11,853	581	14,101
Cardiac Int Care IP Days	4,756	1,154		2,365		
Pedi Int Care IP Days	2,788			1,803		3,368
OB IP Days	7,062	41,006	13,885	26,774	13,426	10,232

Source: 2000 American Hospital Association Annual Survey. Items in italics in the left column indicate services that are not provided by any of the hospitals.

The tables on the next two pages indicate additional services that hospital districts provide.

Other Services Provided by Hospital Districts and Brackenridge Hospital

Hospital District/Hospital	Bexar County (University Health System)	Dallas County (Parkland Health and Hospital System)	El Paso County (Thomason Hospital)	Harris County	Tarrant County (JPS Health Network)	Brackenridge/ Children's Hospital
<i>Adult Day Care</i>						
<i>Substance Abuse Outpatient</i>						
Ambulance Services	Y					Y
Angioplasty	Y	Y		Y	Y	Y
Arthritis Treatment Center		Y				
<i>Assisted Living</i>						
Auxiliary	Y	Y			Y	Y
Birthing Room (LDR/LDRP)	Y	Y	Y	Y	Y	Y
Breast Cancer Screening/ Mammography	Y	Y	Y	Y	Y	Y
Cardiac Cath Lab	Y	Y	Y	Y	Y	Y
Case Mgmt	Y	Y	Y	Y	Y	Y
Children Wellness	Y					Y
<i>Chiropractic Services</i>						
Community Outreach	Y	Y	Y	Y	Y	Y
Complementary Med Services				Y	Y	Y
Crisis Prevention	Y	Y			Y	
Dental Services	Y	Y	Y	Y	Y	Y
Emergency Dept	Y	Y	Y	Y	Y	Y
Trauma Center Level	1	1	2	1	2	2
Trauma Center	Y	Y	Y	Y	Y	Y
Enabling Services	Y	Y			Y	Y
<i>Hospice</i>						
Pain Mgmt	Y		Y			
Palliative Care	Y					Y
Enrollment Assistance	Y	Y	Y		Y	Y
Extracorporeal Shock Wave Lithotripter (ESWL)		Y	Y		Y	
Fitness Center		Y	Y			
Freestanding Outpt Center	Y	Y	Y	Y	Y	
Geriatric Services	Y	Y		Y		Y
Health Fair	Y	Y	Y	Y	Y	Y
Health Info Center	Y	Y			Y	
Health Screenings	Y	Y	Y	Y	Y	Y
Hemodialysis	Y		Y	Y	Y	Y
HIV/AIDS Services	Y	Y	Y	Y	Y	Y
Home Health				Y	Y	
Hosp-based Outpt Services	Y	Y	Y	Y	Y	Y
<i>Meals on Wheels</i>						
Nutrition Program	Y	Y	Y	Y		Y

Source: 2000 American Hospital Association Annual Survey. Items in italics in the left column indicate services that are not provided by any of the hospitals.

Other Services Provided by Hospital Districts and Brackenridge Hospital (con't)

Hospital District/Hospital	Bexar County (University Health System)	Dallas County (Parkland Health and Hospital)	El Paso County (Thomason Hospital)	Harris County	Tarrant County (JPS Health Network)	Brackenridge/ Children's Hospital
Occupational Health	Y	Y	Y	Y	Y	Y
Oncology Service	Y	Y		Y	Y	Y
Open Heart Surgery	Y	Y		Y		Y
Outpatient Surgery	Y	Y	Y	Y	Y	Y
Patient Education Center	Y	Y	Y		Y	
Patient Representative	Y	Y	Y	Y	Y	Y
Physical Rehab OP	Y	Y	Y	Y		Y
Primary Care Dept	Y	Y	Y		Y	Y
Child/Adol Psych	Y			Y	Y	Y
Psych Consult - Liaison	Y	Y	Y	Y	Y	Y
Psych Education	Y	Y		Y	Y	
Psych Emergency	Y	Y		Y	Y	Y
Psych Geriatric	Y	Y		Y		
Psych Outpt	Y	Y		Y	Y	Y
Psych Partial Hospital				Y	Y	
Radiation Therapy	Y	Y		Y		
CT Scanner	Y	Y	Y	Y	Y	Y
Diagnostic Radioisotope	Y	Y	Y	Y	Y	Y
MRI	Y	Y	Y	Y	Y	Y
PET (Positron Emission Tomography)		Y				
SPECT	Y	Y	Y	Y		Y
Ultrasound	Y	Y	Y	Y	Y	Y
Reproductive Health	Y	Y	Y	Y		
<i>Retirement Housing</i>						
Sleep Center	Y					
Social Work Services	Y	Y	Y	Y	Y	Y
<i>Sports Medicine</i>						
Support Groups	Y	Y		Y	Y	Y
Teen Outreach Services		Y	Y	Y	Y	
Tobacco Trtmt/ Smoking Cessation	Y			Y	Y	
Transplant Services	Y	Y				Y
Transportation		Y	Y	Y	Y	
Urgent Care	Y	Y	Y		Y	Y
Volunteer Services	Y	Y	Y	Y	Y	Y
Women's Health Ctr/ Services	Y	Y		Y	Y	Y
HMO		Y	Y	Y		
PPO			Y			
<i>FFS Plan</i>						

Source: 2000 American Hospital Association Annual Survey. Items in italics in the left column indicate services that are not provided by any of the hospitals.

XI. Subsidiary Health Plans

Summary

All of the hospital districts have subsidiary health plans that may offer products for Medicaid, CHIP, hospital district employees, or commercial enrollees. The revenues and expenditures shown below for the health plan subsidiaries of the hospital districts are not included in the revenue and expenditures shown in the overall hospital district budgets on page 6.

Plan Descriptions

Bexar County Hospital District

The enrollment in the Bexar County Hospital District Community First Health Plans, Inc. products are roughly divided in thirds between the Medicaid HMO, the CHIP HMO, and the Commercial HMO plans. The commercial product enrolls hospital district employees in one of two plans: a closed network plan with a lower premium that offers services only within the hospital district system or an HMO that has a broader network. The commercial plan also enrolls employees from various organizations in the area. A new PPO created in January of 2002 has about 500 enrollees.

Dallas County Hospital District

Parkland Community Health Plan, Inc., has two HMO products: Healthfirst for Medicaid enrollees and KIDSfirst for CHIP enrollees, both offered in a six county area.

El Paso County Hospital District

El Paso First Health Plans covers 23,000 CHIP enrollees, which represents 88 percent of the CHIP enrollment in the area. The Plans added a Medicaid HMO in September 2001 that currently has 11,004 enrollees. The Plans also serves as the third party administrator of the Community Voices program described in more detail on page 11.

Harris County Hospital District

Community Health Choice, Inc., has one plan, an HMO for Medicaid enrollees.

Tarrant County Hospital District

Metrowest Health Plan, Inc., has a self-funded medical and dental PPO for hospital district employees that provides higher reimbursement for services received from within the hospital district system. In addition to administering the JPS Star Medicaid HMO, Metrowest is the claims administrator for a commercial dental plan and for the JPS Connections program, the hospital district's indigent health care program.

Comparison

Health Plan Subsidiaries Owned by Hospital Districts

Hospital District	Bexar County (University Health System)	Dallas County (Parkland Health and Hospital System)	El Paso County (Thomason Hospital)	Harris County	Tarrant County (JPS Health Network)
Health Plan	Community First Health Plans	Parkland Community Health Plan, Inc.	El Paso First Health Care Organization	Community Health Choice, Inc.	MetroWest Health Plan, Inc.
Products	Medicaid HMO, CHIP HMO, Commercial HMO and PPO	Healthfirst (Medicaid), KIDSfirst (CHIP)	CHIP, Premier Plan (Medicaid)	Medicaid	JPS Preferred Care (JPS Employees), JPS STAR (Medicaid)
Year	FY 2002	FY 2002		FY 2002	FY 2002 projected
Premium Revenue	\$ 143,302,000	\$ 83,227,200		\$ 26,736,911	\$ 15,843,000
Total Revenue	\$ 143,345,000	\$ 84,007,200	not provided	n/a	not provided
Expenditures	\$ 140,586,000	\$ 83,679,798		\$ 25,701,364	not provided
Enrollment	87,843	54,800	34,004	21,086	10,000
Coverage	8 counties	6 counties	not provided		6 counties

Source: Documentation and staff from each organization.

XII. Relationship with Medical Schools

Each of the five hospital districts has an affiliation agreement with a medical school to provide residents and physicians to staff the hospitals in the districts. In all cases, a payment is made by the hospital district to the medical school for the services provided by the medical schools. The chart below shows the expenditures made by each hospital district.

Expenditures for Medical School Contracts		
	Medical School(s)	Budgeted FY 2002 Payment
Bexar County Hospital District	UT Health Science Center at San Antonio	\$51.5 M
Dallas County Hospital District	UT Southwestern Medical School	\$62 M
El Paso County Hospital District	Texas Tech University Medical School	About \$9 M
Harris County Hospital District	Baylor College of Medicine and the UT-Houston Health Science Center	Baylor = \$51.3M UT = \$27.4M
Tarrant County Hospital District	UT Southwestern Medical School	Not provided

Source: Documentation and staff from each organization.

The physicians and residents provided by the medical schools may staff hospital specialty clinics and professors may serve as chairs of hospital departments. In some cases, the medical schools operate and staff their own community primary care clinics, independent of the hospital districts.

Medical Liability

As political subdivisions of the state of Texas, hospital districts are covered by Chapter 102 of the Civil Code that limits the payment by a hospital district for a tort claim to \$100,000 per person and \$300,000 per incident. All five hospital districts have a self-insurance fund for medical liability claims against the hospital.

The payments to medical schools from the Bexar, Dallas and Harris county hospital districts include the costs of medical malpractice liability insurance, at least for residents, that is provided by the medical schools. The budgeted expenses for the Harris County Hospital District, shown above, include \$2.9M to Baylor and \$590,782 to the University of Texas for malpractice insurance coverage. The budgeted expenses for the Bexar County Hospital District include \$2.6 M for malpractice insurance for residents from the medical school.

The El Paso Hospital District does not provide funding to the Texas Tech medical school for medical malpractice insurance, but requires in their contract with the medical school that the coverage be provided. It is unknown if the Tarrant County Hospital District provides medical malpractice insurance payments to medical school residents or physicians.