

VG Young School Seminar for Newly Elected County

Judge & Commissioners Seminar

January 11, 2023

The County Indigent Health Care Program (CIHCP) provides health care services to eligible residents through the counties, hospital districts, and public hospital districts



What is Chapter 61 of the Health & Safety Code

This Chapter is a "Statutory Obligation" of local Texas Governments to provide Health Care Coverage and may be cited as the "Indigent Health Care and Treatment Act."

Chapter 61 of the Health and Safety Code

- The Chapter was passed by the 1st Called Special Session of the Texas 69th Legislature (1985).
- It is intended to ensure that needy Texas residents, who do not qualify for other state or federal health care assistance programs, receive health care services through the County Indigent Health Care Program (CIHCP).

Texas Administrative Code, Title 25, Part 1, Chapter 14

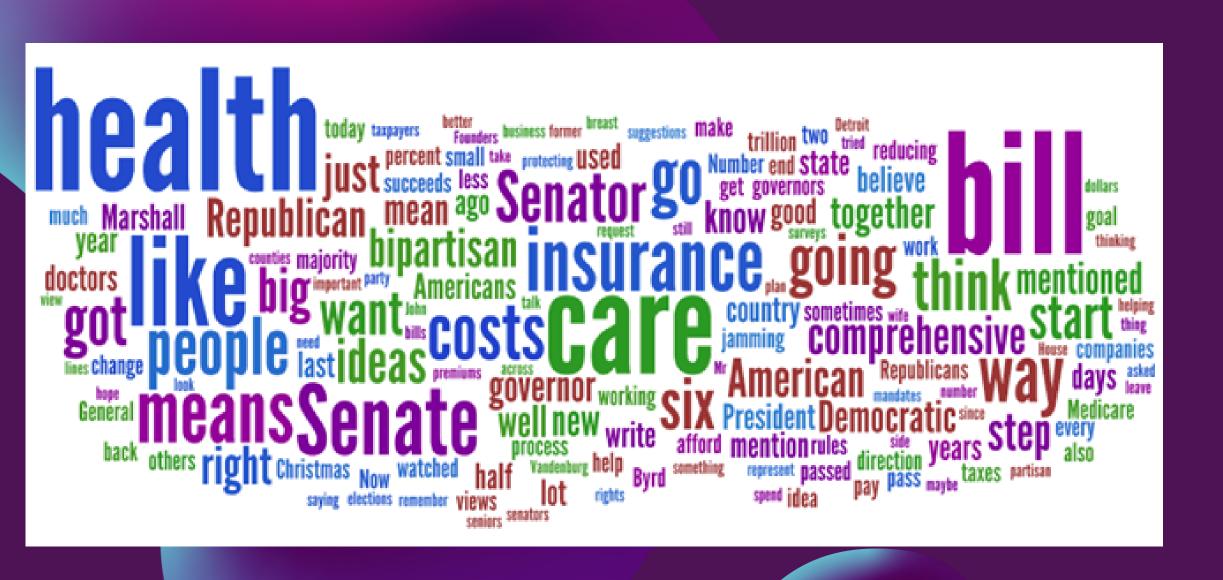
establishes the County Indigent Health Care Program (CIHCP) rules regarding program administration, determining eligibility, and providing services.

The Role of Texas Department of State Health Services (DSHS)

- Establishes minimum eligibility standards, documentation, and verification procedures that are consistent used to d determining CIHCP eligibility,
- DSHA <u>defines the basic and department-established</u> <u>optional health care services</u> in accordance with the TANF-Medicaid program,
- Establishes the p<u>ayment standards for basic and DSHS-</u>
 established optional health care services in accordance with
 the TANF-Medicaid program,

The Role of Texas Department of State Health Services (DSHS)....cont.

- Processes eligibility disputes between providers of health care assistance and governmental entities or hospital districts, and
- Administers the state assistance fund. Counties may qualify for state assistance funds when they exceed 8% of the county's general revenue tax levy (GRTL) for basic and DSHS-established optional health care services provided to eligible county residents.



143 Counties

142 Hospital Districs

18 Public Hospitals

Who does the CIHCP Cover?

Households who meet the criteria of

- income,
- residency,
- resource,
- household composition
- & who are not categorically eligible for the Texas Medicaid Program.

Indigent Health Care Basic Services

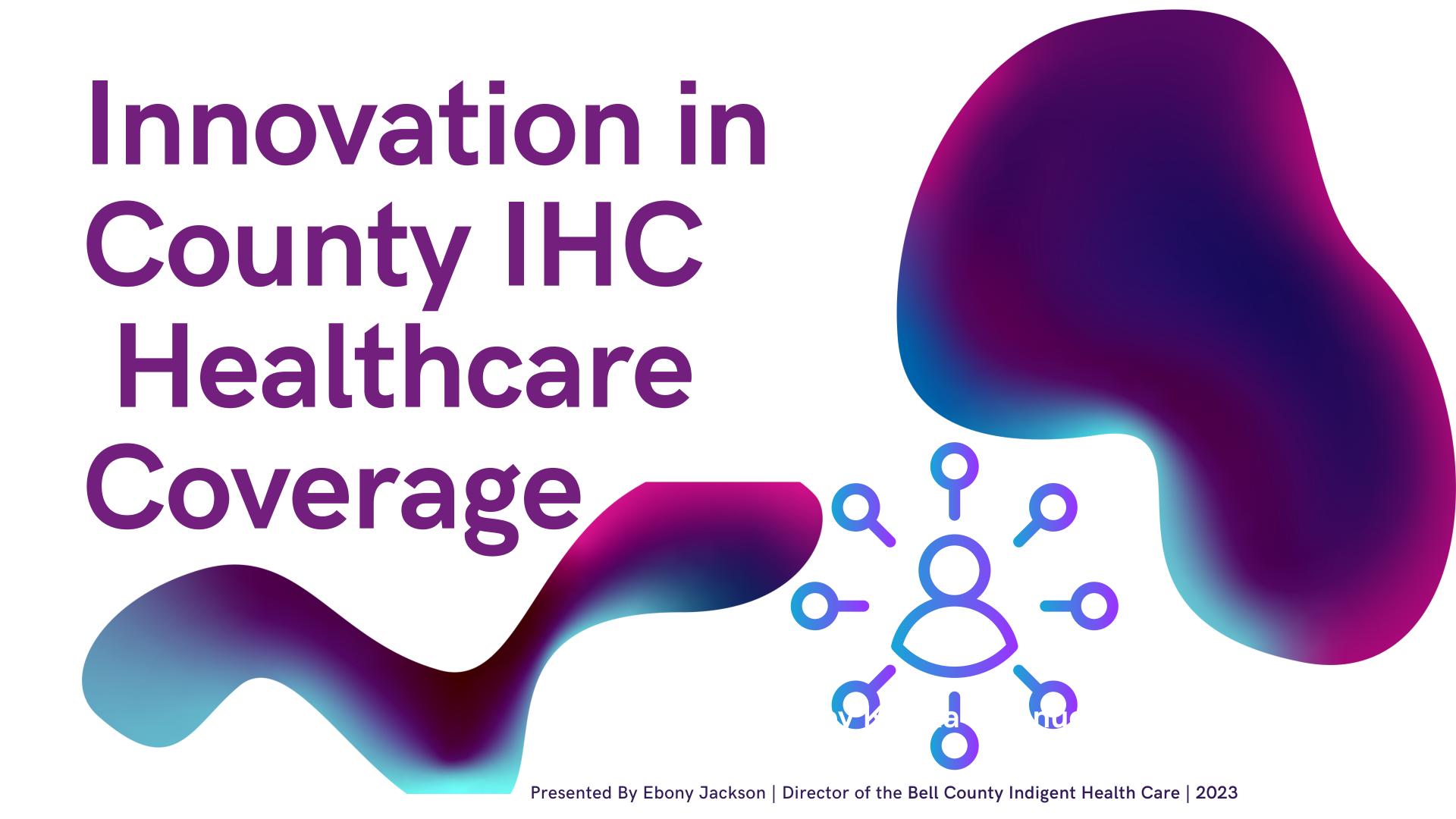
A county shall, in accordance with department rules adopted under Chapter 61 provide the following basic health care services:

- Immunizations
 Medical screening services.
- Annual Physical Examinations

- Laboratory and X-Ray Services
- Family Planning Services
- Physician Services
- Inpatient Hosptial Services Three Prscriptions per month
- Rural Health Clinics
- Outpatient Hosptial Services, Including Hospial-Based Surgical Center Services
- Skillled Nursing Facility
 Services

Optional Services

- ambulatory surgical center services;
- diabetic and colostomy medical supplies and equipment;
- durable medical equipment;
- home and community health care services;
- social work services;
- psychological counseling services;
- services provided by physician assistants, nurse practitioners, certified nurse midwives, clinical nurse specialists, and certified registered nurse anesthetists;
- dental care;
- vision care, including eyeglasses;
- services provided by federally qualified health centers, as defined by 42 U.S.C. Section 1396d(I)(2)(B);
- emergency medical services;
- physical and occupational therapy services; and
- any other appropriate health care service identified by department rule that may be determined to be cost-effective.





Indigent Health Program Challenges

Counties around the state of Texas experience various challenges that affect the way an IHC program administer services, such as:





County Budgets

services, paying Medicaid rates, last payor of resort.



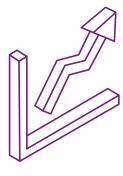


Social

Determinants

CONDITIONS THAT AFFECT ONES QUALITY OF LIFE

Optional Services, transportation, access to health foods, education, employment, Telehealth, and etc.



Reimbursements

MONEY REFUNDED TO THE **COUNTY THROUGH BCIHCP**

SSA Reimbursement, Claims,



Collaborations

COMMUNITY AGENCIES/RESOURCES

Building partnership with community-based organizations & Hospitals



Access to Care

PRIMARY & SPECIALTY CARE

Receive quality health care and timely medical services to live healthier lives. Access to care saves lives and money.



Fluid Adaptable

OPEN TO CHANGE

Improve patient care and outcomes and lowering costs. Counties should move away from the term "It's how it's always been done."

BELL COUNTY INDIGENT HEALTH CARE PROGRAM FY19 - FY22 BUDGET SAVINGS

Description	FY19	FY20	FY21	FY22
BCIHC Fiscal Year Expense	\$3,352,683.36	\$3,250,665.13	\$1,682,290.38	\$1,295,300.81
Rx Expenses	\$708,450.31	\$406,521.26	\$100,136.18	\$68,878.69
	County Savings	\$102,018.33	\$1,568,374.75	\$386,989.57

How did Bell County accomplish cost savings?

- First and foremost, Bell County exhausted its funding during the 2020 fiscal year.
- To lower cost Bell County realized it was time to **improve** and create a new innovative approach in providing access of care while saving county dollars.
 - It's how it's always been done...was not the answer.
- The Bell County reached with intent to partner with local organizations and institutions to better serve our community.
- Thus, the **Bell County Indigent Health Care Collaborative** which began September 2020.
- The efforts of the program allow eligible IHC participants to receive primary, non-emergency specialty care, and prescriptions at the nearest community clinic.
- Emergency and chronic health treatment is provided by Bell County local hospital by referral from the community clinics.



2022 NACo ACHIEVEMENT AWARD WINNER Bell County Indigent Health Care Collaborative BELL COUNTY, TEXAS



ABOUT THE PROGRAM

CATEGORY: Health

YEAR: 2022

Had the Bell County Indigent Health Care Collaborative only reduced costs to the lowest levels in more than a decade, it would have been considered a success. The fact that it accomplished this feat, while alleviating stress on hospitals and improving patient care, makes it a triumph. Since its inception, the Bell County Indigent Health Care (BCIHC) department had functioned in largely the same way: residents registered for the program, they received care in area hospitals (often Emergency Departments), and the county reimbursed the hospitals. This model of using Emergency Departments instead of traditional primary care was both more costly and less effective, as patients had no continuity of care. Through this collaborative, the county partnered with two community clinics, establishing them as the primary care providers for all BCIHC patients. To receive care, BCIHC patients must visit one of the clinics, where they receive both primary and specialty care, as well as prescription medications that the clinics are able to get deeply discounted through existing grants funds and prescription assistance programs (PAP). The results speak for themselves. Indigent Patients now receive more regular and preventative care, while costing the county less than half as much as two years

Resources and Links

Chapter 61 of the Health and Safety Code

https://statutes.capitol.texas.gov/Docs/HS/htm/HS.61.htm

County Indigent Health Care Program Handbook

https://www.hhs.texas.gov/handbooks/county-indigent-health-care-program-handbook

Texas Health and Human Services

https://www.dshs.texas.gov/

Collaborative Communities: Addressing Health Care Challenges Together

https://youtu.be/hfKJB57r8_8

"211" is a special "telephone number" in the United States designed to provide information and referrals to health and human services and other social assistance programs.



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