

- SUBJECT:** Eligibility criteria for indigent health care for legal permanent residents
- COMMITTEE:** Public Health — favorable, without amendment
- VOTE:** 7 ayes — Kolkhorst, S. Davis, S. King, Laubenberg, Schwertner, Truitt, Zerwas
- 2 nays — Coleman, V. Gonzales
- 2 absent — Naishtat, Alvarado
- WITNESSES:** For — Candy Blair, Collin County Indigent Program; Cheryl Williams, Collin County Commissioners Court; (*Registered, but did not testify:* Ann Hettinger, Concerned Women for America)
- Against — (*Registered, but did not testify:* Kristian Aguilar, Mexican American Legal Defense and Education Fund; Jennifer Allmon, The Texas Catholic Conference The Roman Catholic Bishops of Texas; Ana Bernal; Selene Dominguez; Maria De La Luz Martinez; Esther Reyes)
- On — Jan Maberry, Texas Department of State Health Services
- BACKGROUND:** The Department of State Health Services (DSHS) is prohibited from adopting eligibility rules for the indigent health care program that would be more restrictive than the Temporary Assistance for Needy Families (TANF) Medicaid program.
- DIGEST:** HB 655 would amend Health and Safety Code, ch. 61 to revise eligibility criteria for the indigent health care program. In determining the eligibility of a sponsored alien for the program, DSHS would have to allow a county to include the income and resources of the applicant’s sponsor and co-sponsor. The bill would define “sponsored alien” as a person lawfully admitted to the U.S. for permanent residence who was sponsored by someone who signed an affidavit of support on his or her behalf.
- The bill would take immediate effect if finally passed by a two-thirds record vote of the membership of each house. Otherwise, it would take effect September 1, 2011.

SUPPORTERS
SAY:

HB 655 would permit counties to preserve their indigent care funds to care for the neediest individuals. The indigent care program is intended as a safety net that provides care for individuals with limited resources. While some legal permanent residents meet the low income threshold for eligibility, their sponsors may have the income and resources that could be used to pay for care. Since legal permanent residents should have a sponsor, or person who signed an affidavit of support for their entry into the U.S., their income and resources should be considered to determine eligibility.

HB 655 would establish criteria to allow counties to consider the income and resources of the legal permanent residents' sponsors in determining eligibility. The bill's permissive language does not require counties to check a sponsor's resources, so counties that encountered this problem could devise their own remedies.

OPPONENTS
SAY:

HB 655 would discourage low-income individuals with serious health conditions from seeking care. The county indigent health program provides access to care for people who are not eligible for Medicaid and cannot afford to pay for care. The bill would create an additional hurdle for eligibility that could delay treatment while the county tracked down sponsor information and assessed the sponsor's income and assets.

The bill also would reduce the enrollment of people who genuinely qualified for the program because they would be intimidated and overwhelmed by the process while dealing with their own ill health. This effectively would discourage individuals from seeking care early, forcing them to wait until a medical condition became critical. This would lead them to seek care in a more expensive setting like an emergency room, the costs of which would be passed on and funded by the local community. The community could end up paying for much more cost-effective care through the county indigent health care program.

HB 655 is unnecessary because the federal guidelines for Medicaid already require a sponsor's income and resources to be considered. DSHS has not reported any complaints about this issue, so this legislation would be largely symbolic.

NOTES:

The companion bill, SB 420 by Deuell, passed the Senate by 31-0 on the Local and Uncontested Calendar on April 7 and was reported favorably, without amendment, by the House Public Health Committee on April 13, making it eligible to be considered in lieu of HB 655.