

# LEGISLATIVE BUDGET BOARD

Austin, Texas

## FISCAL NOTE, 78TH LEGISLATIVE REGULAR SESSION

Revision 2

March 11, 2003

**TO:** Honorable Dianne White Delisi, Chair, House Committee on State Health Care Expenditures, Select

**FROM:** John Keel, Director, Legislative Budget Board

**IN RE: HB525** by Noriega (Relating to providing health care services without regard to a person's immigration status.), **As Introduced**

**No fiscal implication to the State is anticipated.**

The bill would amend Chapter 64, Health and Safety Code, to allow a municipality, county, or public hospital or a hospital district to use money from state or local sources to provide health care services and assistance to a person without regard to the person's immigration status. The bill would take effect immediately if it receives two-thirds vote in each house; otherwise, it would take effect September 1, 2003.

### Local Government Impact

There is currently no statute that allows hospitals and hospital districts to provide free or discounted preventative health care services to persons regardless of their immigration status. According to the Texas Hospital Association (THA) and several county hospitals contacted, under federal requirements, hospitals already provide free or discounted emergency medical services to persons regardless of immigration status. THA provided data on the estimated fiscal impact providing emergency services to illegal immigrants had on hospitals cumulatively statewide in 2001, indicating a cost of approximately \$290 million. This figure is based on an assumption that 18.2 percent of the uncompensated care provided through hospitals in Texas in 2001 was provided to illegal immigrants. The 18.2 percent was determined using US census figures and data from reports by the U.S. Immigration and Naturalization Service.

According to THA, the bill would have no additional fiscal impact to hospitals regarding treatment for emergency medical services. If, however, a hospital were to choose to provide other medical and hospital care services and assistance for free or a discount to illegal immigrants, additional costs would be incurred. Those costs would be determined by the number of immigrants seeking non-emergency health care services and the level of services required. THA anticipates some of the costs associated with non-emergency health care services could be offset by a savings in emergency care costs if fewer persons experienced emergencies by obtaining treatment sooner.

**Source Agencies:** 304 Comptroller Of Public Accounts, 501 Department Of Health

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