



## **Guest Column**

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### **Health or Hospital District: what's the difference?**

In response to a letter in the Daily News, I hope to clarify the differences between the Galveston County Health District (GCHD) and a hospital (taxing) district being discussed to address the healthcare crisis in Galveston County resulting from Hurricane Ike and subsequent changes in services at UTMB.

First of all, GCHD is formed under a specific state law which allows multiple local governments to join together in forming a non-taxing district to provide public health services. GCHD is basically a health department that serves multiple local governments – the county and its 13 cities – overseen by appointed, policy-making boards of health. One board oversees the 4C's clinics and another board for all other services. See [www.gchd.org/boards/boardindex.htm](http://www.gchd.org/boards/boardindex.htm)

GCHD services include Community Health Programs, such as immunizations, STD/HIV/TB prevention, health education, WIC, etc.; Environmental Health Programs, such as restaurant inspections, air & water pollution control, etc.; and also various contract services, such as EMS and animal control, for several cities and the unincorporated parts of the county. For a complete description of GCHD services visit [www.gchd.org](http://www.gchd.org).

Finally, GCHD oversees two county/federally-funded clinics, called 4C's clinics, which provide "primary care" to any Galveston county resident at a discounted rate based on financial screenings. These clinics may see any county resident, but most patients are the working uninsured and the indigent.

**What is missing now, post-IKE, is specialty care for the uninsured.** 4C's patients now have few to no options when referred to see a specialist, such as an orthopedist, surgeon, neurologist, obstetrician, dermatologist, or many others. The main reason for lack of specialty care is the lack of funding for it.

A hospital district would establish a source of funding for specialty care. Galveston County currently does NOT have a hospital district.

Compared to a "health" district, a "hospital" district, like the Harris County Hospital District, is formed under a completely different state law in the Texas Health and Safety Code. This law allows residents of one or more local governments to vote for or against the creation of a hospital district, which would provide medical care funds for residents at a minimum of 100% of poverty. The hospital district could also include funds for EMS ambulance services.

Funding a hospital district with sales taxes rather than property taxes would bring in dollars from tourists and all residents. Doing so, however, first requires the state legislature to allow this option in Galveston County. If allowed, this would still require a general election to be held.

GCHD has an existing infrastructure which can reduce the cost of establishing a completely new one for a hospital district. If Galveston County had a hospital district, there would be a direct relationship between GCHD and its' operations.

For example, the 4C's clinics would continue to provide primary care. If eligible 4C's patients needed specialty care, funds from a hospital district could pay any specialists that agreed to see them. Previously mentioned GCHD services could also compliment the operations of a hospital district.

In Galveston County, many discussions have centered on what kind of hospital district would work for our county and what the hospital district might look like. Ideas include: setting eligibility at state law minimum of 100% poverty; not operating a hospital but rather paying the bills of any hospital or specialist that would agree to participate; including funds for EMS services, and establishing a board to oversee the hospital district funds and policies.

A hospital district, if proposed, would clearly be a decision of the voters. For those who directly witness the tragic and sad stories of sick residents needing specialty care, the benefits are numerous. As a public health authority, a hospital district could be a "safety net" – an investment to assure that infectious and communicable diseases don't go unidentified and undiagnosed, thereby increasing the risk of disease outbreaks, preventable deaths, and other public health threats. Additionally, a hospital district that pays for specialty care would

help decrease the cost of emergency care, as untreated conditions worsen to the point of an emergency room visit.

Health care in Galveston County has changed drastically and the future is uncertain. I welcome the opportunity to further explore long-term solutions for the economic security and well-being of Galveston County & Cities.

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