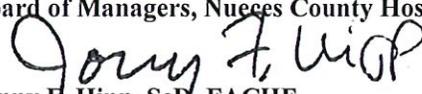


**NUECES COUNTY HOSPITAL DISTRICT
INDIGENT HEALTHCARE PROGRAM
POLICY AND PROCEDURE**

Date of Origin: January 1, 1999
Date of Revision: February 25, 2026
Date of Review: March 1, 2026

Authorized and Approved by:
Board of Managers, Nueces County Hospital District


Jonny F. Hipp, ScD, FACHE
Administrator/Board Secretary

Title: NUECES AID PROGRAM ELIGIBILITY GUIDELINES

Policy: NA002

I. POLICY

The Nueces County Hospital District is responsible for ensuring the provision of medically necessary healthcare services, in accordance with the state statute and as approved by the Board of Managers, to the needy and eligible residents of Nueces County. The District meets this responsibility through the administration of the Nueces Aid Program.

The Board of Managers for the Nueces County Hospital District has an ethical and statutory obligation to establish and maintain objective guidelines for use in determining an individual's eligibility for healthcare assistance through the Nueces Aid Program. To fulfill this obligation the Board of Managers will evaluate the eligibility guidelines annually and make recommendations for revision when indicated.

The Nueces County Hospital District will use the eligibility guidelines and related policies to complete an objective eligibility evaluation of all individuals applying for healthcare assistance. Three specific areas will be considered during the evaluation of the applicant's eligibility for healthcare assistance. The three areas are: residency in Nueces County, household resources and household size and income.

II. PURPOSE

The purpose of this policy is to establish written policies and guidelines which clearly and objectively state the means used to determine an applicant's eligibility for financial assistance through the Nueces Aid Program.

III. RESPONSIBILITY

The Quality Management Committee through the authority delegated by the Nueces County Hospital District Board of Managers, will provide direction and leadership in establishing and maintaining the guidelines used for determining eligibility for the Nueces Aid Program.

Nueces County Hospital District Board of Managers will consult with CHRISTUS Spohn Health System during review of the eligibility policy and guidelines recommended by the Quality Management Committee and either approve or disapprove the proposed guidelines.

IV. PROCEDURE

A. Qualifications for Financial Assistance

In accordance with the state statute, to receive healthcare assistance from the Nueces County Hospital District, an applicant must:

1. Provide evidence of residency in Nueces County;
2. Meet the household size and income guidelines; and
3. Meet the household resource guidelines;

Or

4. Be a Nueces County resident confined to a correctional facility operated by Nueces County and not the responsibility of another governmental service or agency.

B. Residency Policy and Guidelines

The Residency Policy and Guidelines are defined in **Attachment 1** to this policy.

C. Household Resource Policy and Guidelines

The Household Resource Policy and Guidelines are defined in **Attachment 2** to this policy.

D. Household Composition Policy and Guidelines

The Household Composition Policy and Guidelines are defined in **Attachment 3** to this policy.

E. Household Income Policy and Guidelines

The Household Income Policy and Guidelines are defined in **Attachment 4** to this policy.