

Texans' Perspectives on and Experiences with Health Policy, Affordability, and Access

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Annual Texas Health Tracking Survey – 2023



EPISCOPAL HEALTH
FOUNDATION



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Executive Summary

The state of Texas continues to grow in size and diversity. Texas is the second most populous state in the nation and gained more new residents from July 2022 to July 2023 than any other state in the country.¹ With this increase in population, the priorities and top issues in the state may experience a shift. The Episcopal Health Foundation and SSRS conducted the sixth wave of the *Texas Health Tracking Survey* with a representative sample of Texas adult residents from October 18 through December 19, 2023 to understand opinions on state health policy and issues surrounding health care access and affordability.

As in previous years, support for expanding Medicaid to cover more low-income adults under the Affordable Care Act (ACA) is high with 71 percent of Texas adults in support of expansion. Favorability of the program is also high with 70 percent saying they are somewhat or very favorable of the Texas Medicaid program. While most Texans support the program and its expansion, most are also unsatisfied with how the state is currently handling health care for its most vulnerable residents. Seven in ten say the state is not doing enough to ensure low-income adults can get the health care they need. A majority also say the state is not doing enough for children (57%). About half say the state is not doing enough for pregnant women (50%) and immigrants (48%).

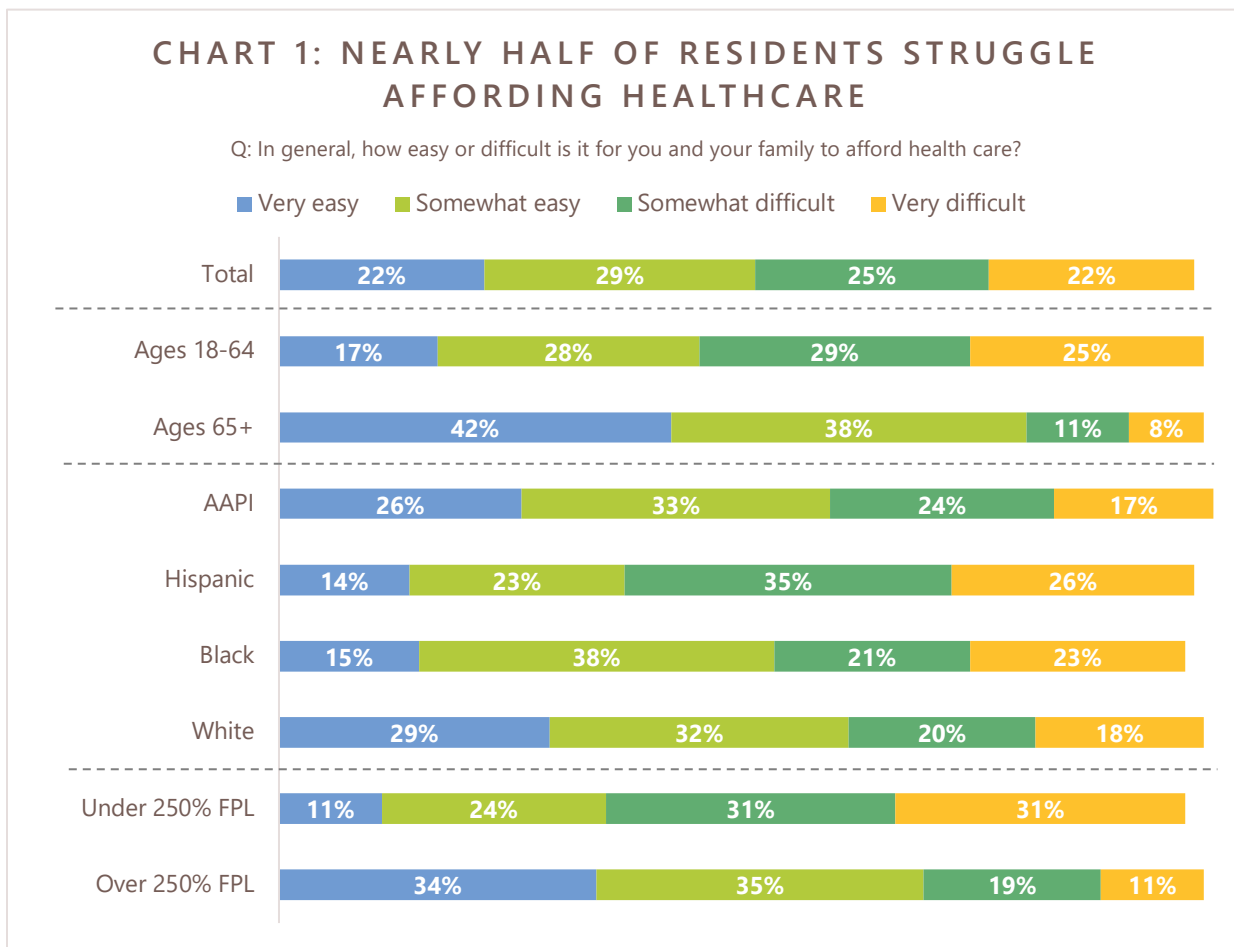
Nearly half of Texas adults have difficulty affording health care (47%) with significant disparities by race and ethnicity as well as household income and age. The high costs of medical care leads many to skip or postpone getting the healthcare they need. Overall, almost two-thirds of Texas adults have skipped or postponed some sort of health care because of the cost (64%) in the past 12 months.

¹ <https://www.census.gov/newsroom/press-releases/2023/population-trends-return-to-pre-pandemic-norms.html>

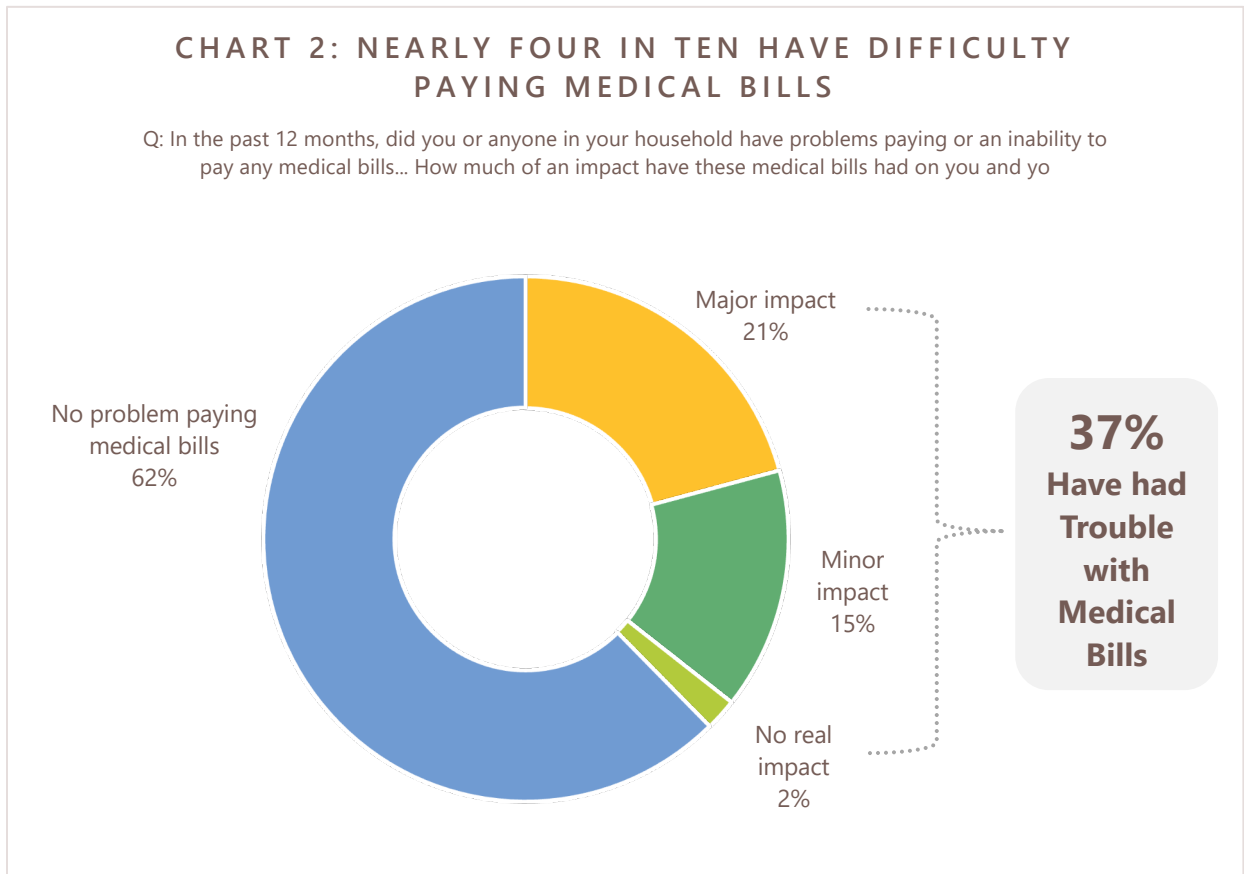
Health Care Access and Affordability

Difficulty Affording Health Care

Nearly half of Texans (47%) have difficulty affording health care with a one fifth saying it is very difficult (22%). Younger adults, those who are Hispanic, as well those with lower income levels are more likely to have difficulty affording health care. While only 19 percent of those age 65 or older have difficulty affording health care, half of those ages 18-64 report difficulty (53%). Similarly, 61 percent of Hispanics say it is difficult to afford health care compared to 38 percent of their non-Hispanic White and 44 percent of non-Hispanic Black counterparts. Finally, 62 percent of adults in households with incomes under 250% FPL say it is difficult to afford health care. This is more than double the number of adults with household incomes of 250% FPL or more who struggle to afford health care (30%) (chart 1).

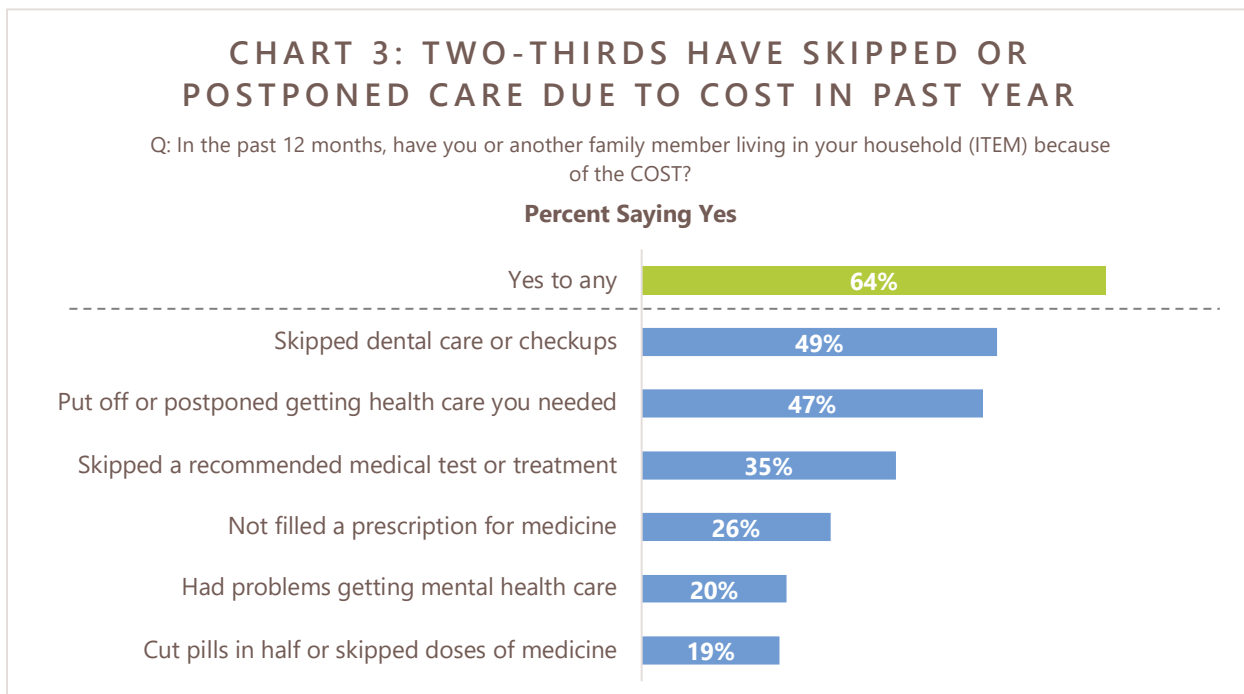


A similar pattern is present for inability to pay medical bills. Nearly, four in ten Texas adults say they have had problems paying medical bills in the past 12 months (37%) and one fifth (21%) say an inability to pay medical bills has had a major impact on them and their household. Younger adults, Black and Hispanic Texans, and those with lower income are more likely to say they have had trouble affording medical bills compared to their counterparts (chart 2).

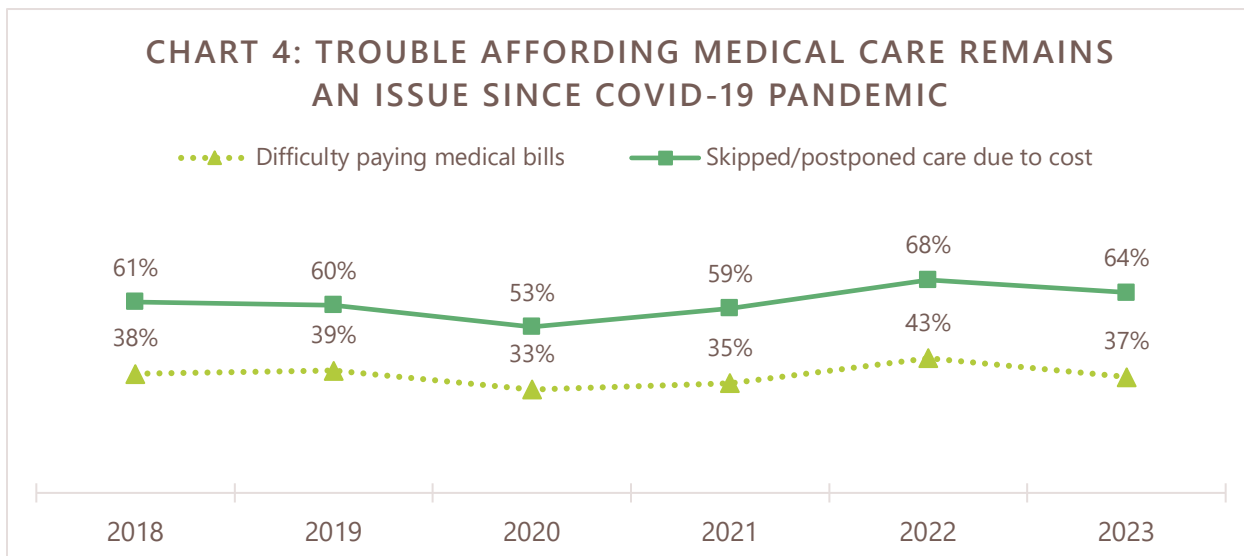


The high costs of medical care leads many to skip or postpone getting the healthcare they need. About half say they have skipped dental care or check-ups in the past 12 months due to the cost (49%). About half have also put off getting health care they need (47%). Thirty-five percent have skipped a recommended medical test or treatment due to the cost. A quarter say they have skipped getting a prescription filled due to the cost (26%). Finally, a fifth say they have cut pills in half or skipped doses (19%) or had problems getting mental health care (20%) because of the cost. Overall, almost two-thirds of Texas

adults have skipped or postponed some sort of health care because of the cost (64%) in the past 12 months (chart 3).



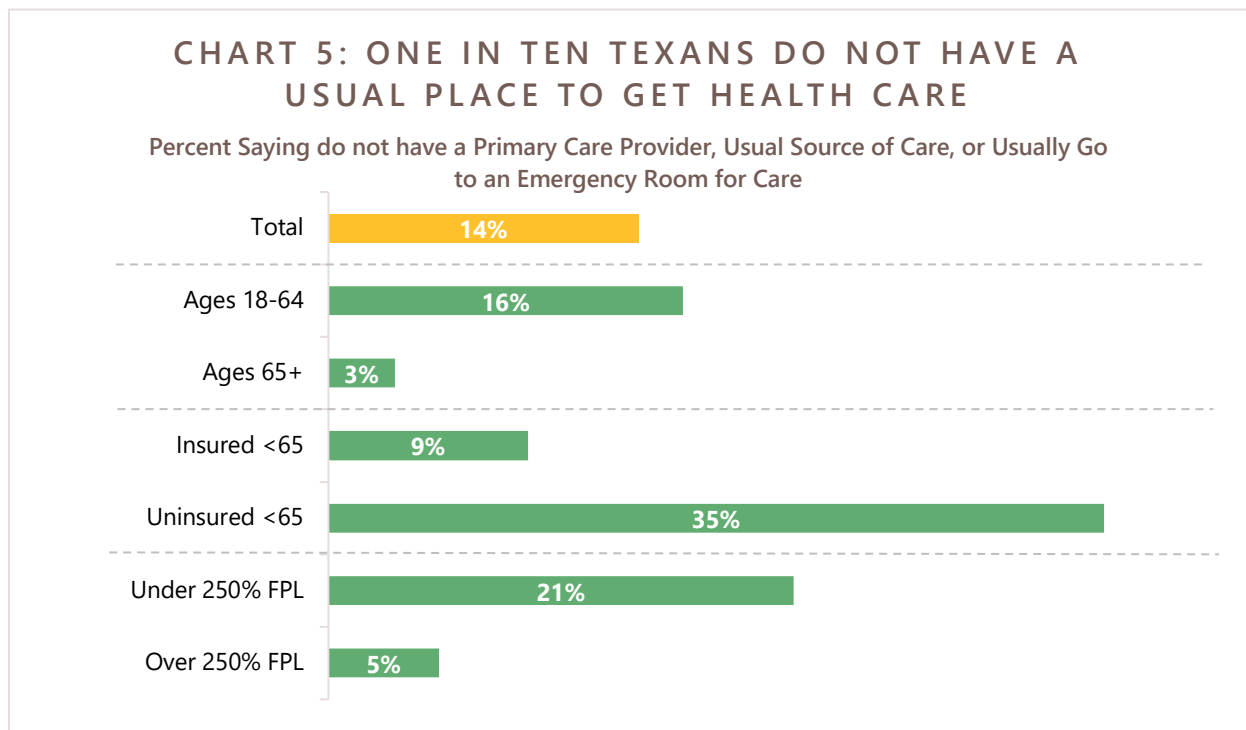
The number of Texans having trouble paying medical bills has fluctuated over time. In 2018 and 2019, just under two in five had this issue (38% in 2018; 39% in 2019). With the COVID-19 pandemic in 2020 and 2021, fewer were seeking medical care at all as residents avoided medical offices under stay-at-home orders. This may explain the lower levels of difficulty with medical bills in 2020 and 2021. But with most COVID-19 restrictions lifted in 2022, the number of



Texans struggling to afford their medical bills increased back to pre-pandemic levels and have stayed relatively consistent. There is a similar pattern for skipping and postponing medical care due to the cost in 2022 and 2023 (chart 4).

Usual Source of Care

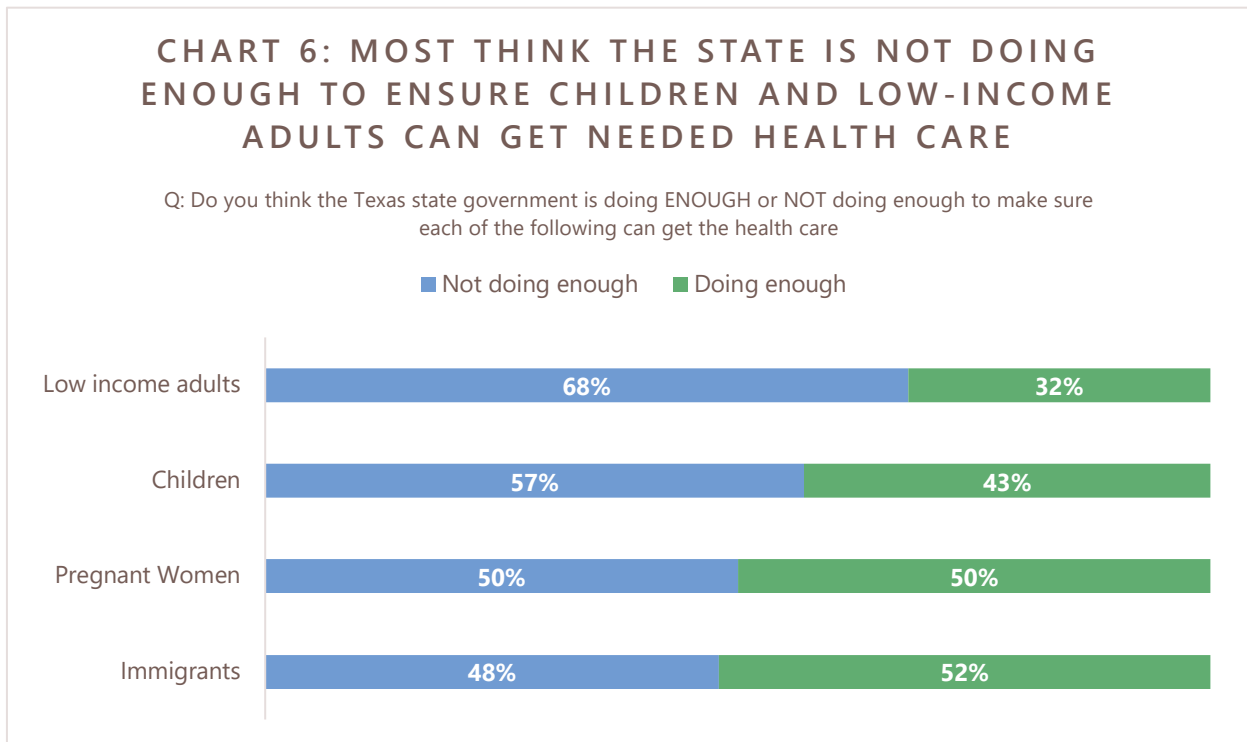
Fourteen percent of Texans do not have a primary care provider or usual place they go for health care. Over a third of those who are under age 65 and uninsured (35%) do not have a usual place of care compared to just 9 percent of those who are under age 65 and insured. While just 5 percent of those with household income of 250% FPL or more do not have a usual place of care, four times that amount with household incomes less than 250% FPL lack a usual place for health care (21%) (chart 5).



Medicaid and the Role of State Government in Health Care

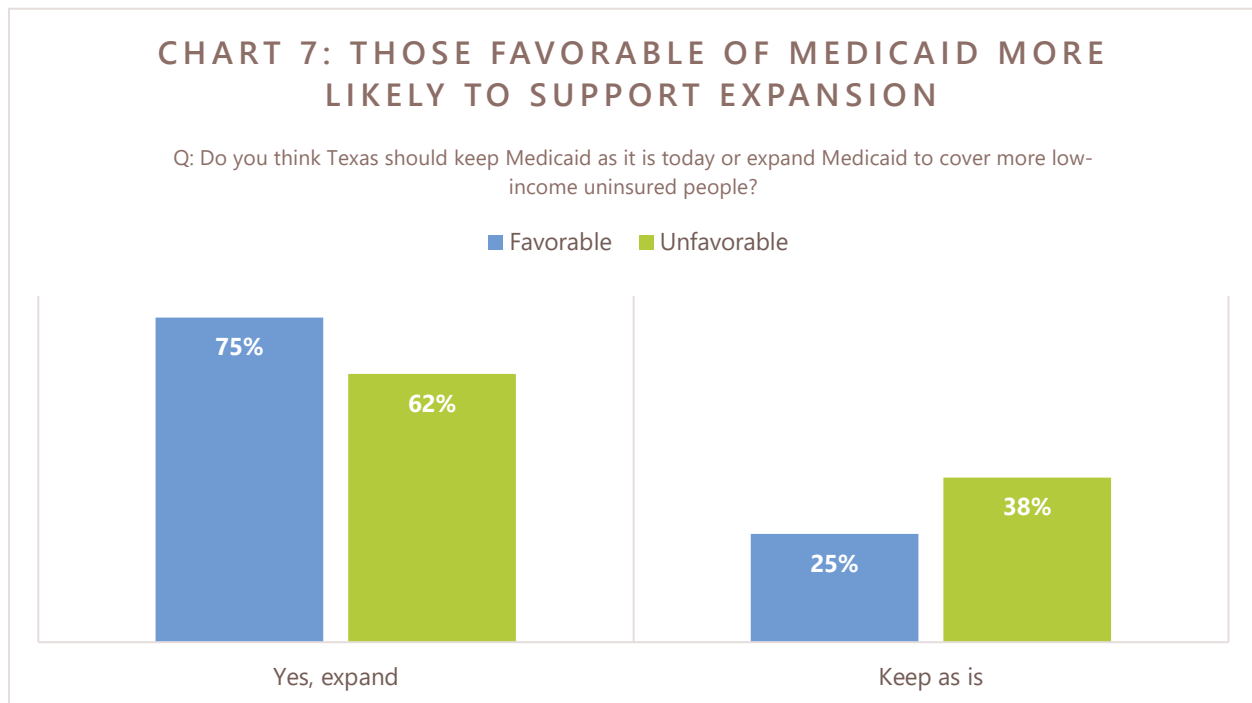
Texas is one of only ten states that has not expanded Medicaid coverage to include more low-income adults under the 2010 Affordable Care Act. However, residents have relatively favorable views of the program and its ability to help low-income people. About a quarter have a very favorable opinion of the program (23%) and 47 percent have a somewhat favorable opinion.

Moreover, 68 percent say the state is not doing enough to ensure low-income adults can get the health care they need (chart 6). A majority also think the state is not doing enough for children (57%) and about half say the state is not doing enough for pregnant women (50%) and immigrants (48%).



Additionally, there is a strong relationship between Medicaid favorability and support for expansion (chart 7). Overall, 71 percent support expanding Medicaid to cover more low-income uninsured people. Three quarters of those with a

favorable opinion of the program support Medicaid expansion (75%) compared to only 62 percent among those who have an unfavorable opinion.



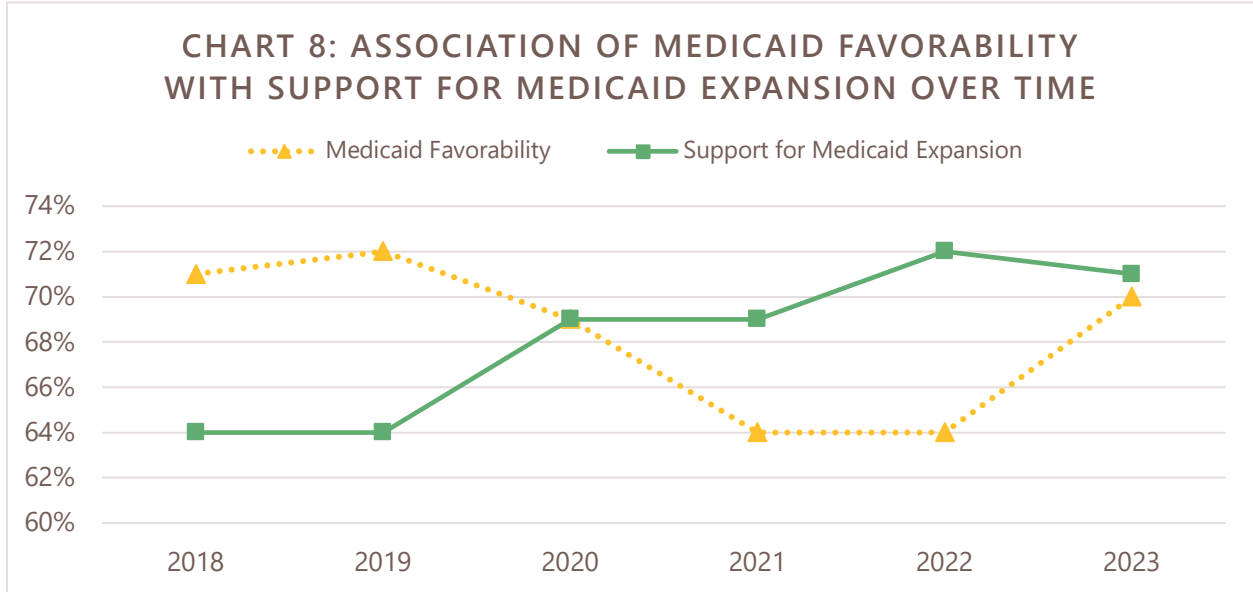
Medicaid Expansion Favorability Over Time

Since EHF began measuring Texas Medicaid favorability and support for expansion annually in 2018, opinions have continued to be positive. In 2018, 71 percent had a favorable view of the program. While favorability dipped slightly in 2021 and 2022 to 64 percent, it has increased in the most recent survey to 71 percent. Support for expanding Medicaid to cover more low-income individuals has also increased over the past six years with 64 percent supporting expansion in 2018 compared to 71 percent in 2023 (chart 8). When the COVID-19 pandemic began in 2020, eligibility checks for Medicaid enrollment were paused allowing individuals to be continuously enrolled and not dropped from coverage.

When the public health emergency ended in Spring 2023, Texas began disenrolling individuals. According to estimates from KFF, 1.7 million Texans have been disenrolled as of December 20, 2023 resulting in a seven percent decline in enrollment in the state.² The higher enrollment rates as a result of the

² <https://www.kff.org/report-section/medicaid-enrollment-and-unwinding-tracker-overview/>

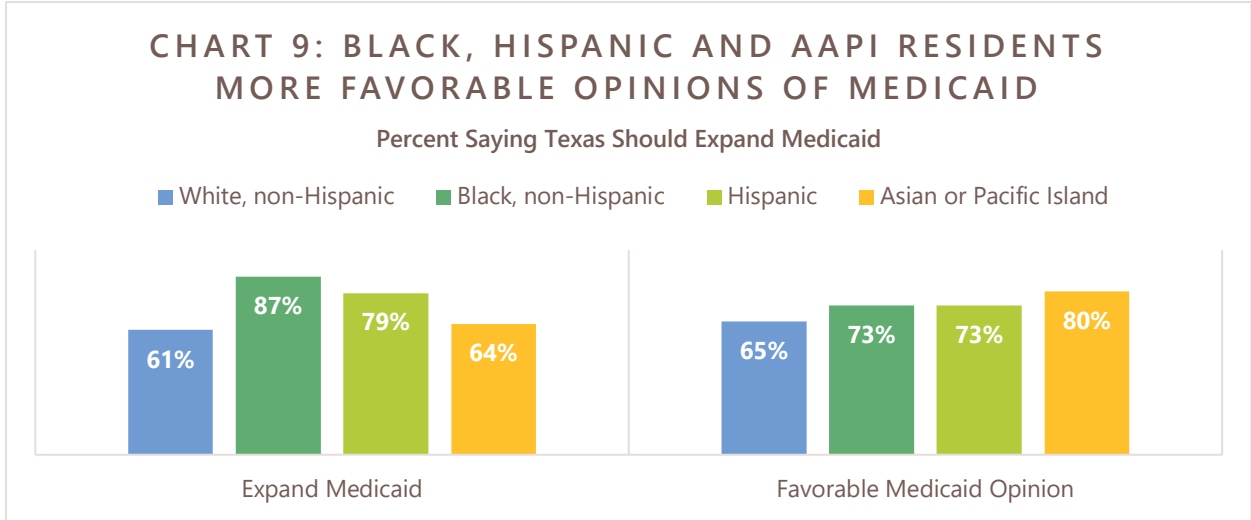
pandemic-era pause followed by the large number disenrollments may have impacted respondents experiences and views of the program resulting in more favorability and stabilizing support for expansion under the ACA.



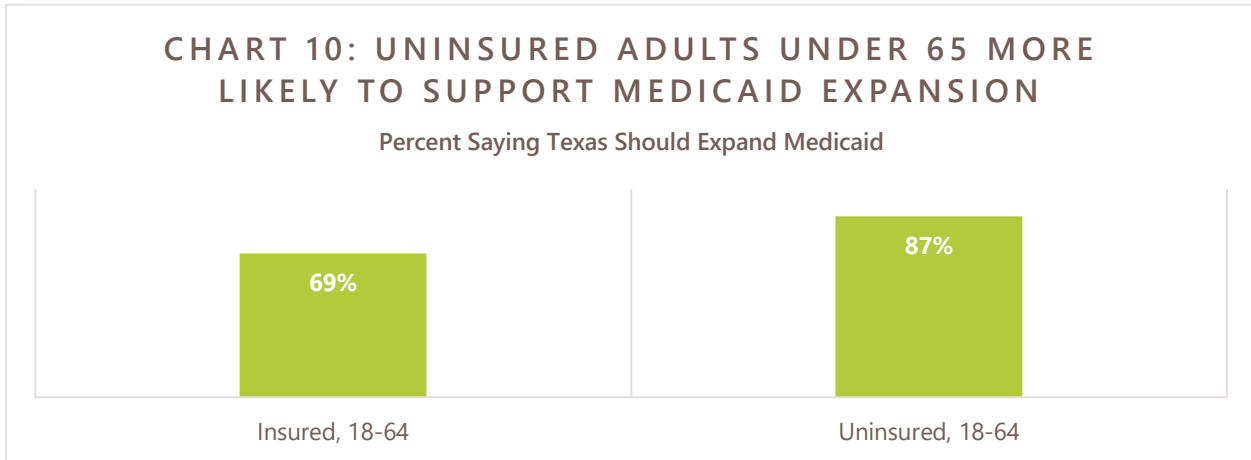
Differences By Key Demographic Factors

Overall, adults in households with lower income, Black and Hispanic adults, and nonelderly uninsured adults have more favorable opinions of Medicaid and are more likely to support expansion.

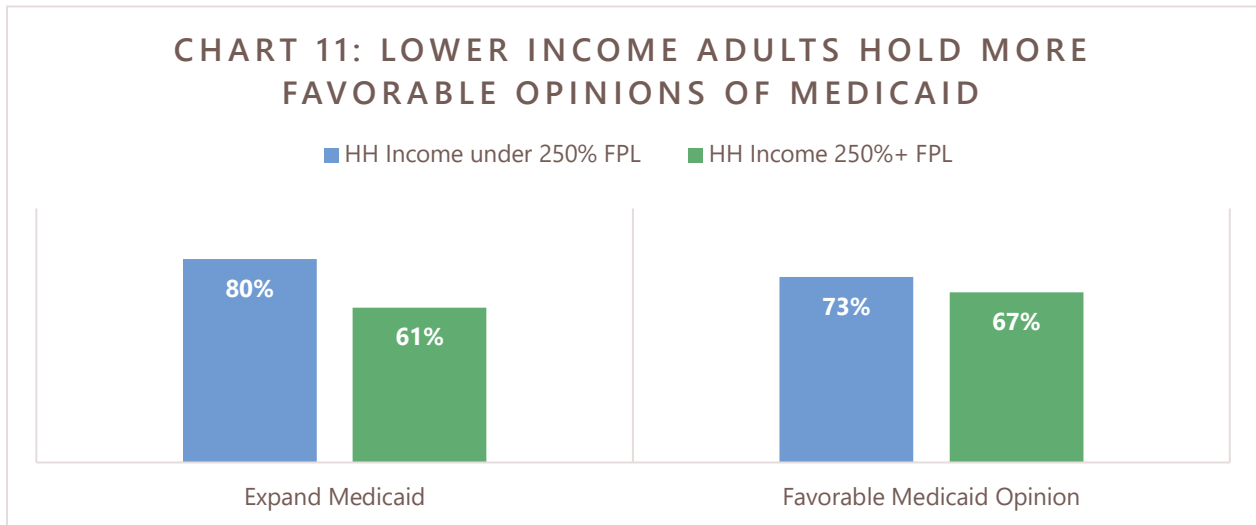
Medicaid favorability tends to be relatively high among racial and ethnic minority groups with 73 percent of Black residents, 73 percent of Hispanic residents and 80 percent of Asian and Pacific Island residents having very or somewhat favorable opinions of the program. Support for expansion is highest among Black (87%) and Hispanic (79%) residents. However, a majority of residents support expansion across race and ethnic groups (chart 9).



Additionally, those under 65 and uninsured are more likely to support Medicaid expansion (87%) than those under 65 and insured (69%) (chart 10). However, insured and uninsured adults under age 65 have similar levels of Medicaid favorability (73% uninsured 18-64; 67% insured 18-64).



Those with household incomes under 250% of the federal poverty line (FPL) have higher levels of favorability of Medicaid and also are more likely to support Medicaid expansion. Eighty percent of adults in households with income under 250% FPL support Medicaid expansion compared to 61 percent of those in households above this income threshold (chart 11).



About the Survey

SSRS conducted the *2023 Texas Health Tracking Survey* on behalf of the Episcopal Health Foundation (EHF) from October 18 through December 19, 2023. Similar studies have been fielded on behalf of the EHF since 2018. The 2023 survey was conducted online and by telephone with a representative sample of 1,956 Texas adults (age 18 or older). Interviews were administered in English ($n=1,843$), Spanish ($n=87$), Chinese ($n=19$) and Vietnamese ($n=7$). The sample includes 938 Texas adults reached through the SSRS Opinion Panel³ online ($n=875$) and by phone ($n=63$) as well as adult Texas residents reached through an address-based sample (ABS) and completed the survey online ($n=937$) or by phone ($n=81$).

Weighting is generally used in survey analysis to compensate for sample designs and patterns of non-response that might bias results. The survey data are weighted to match the sample demographics to estimates for the Texas adult population. The margin of sampling error for this study is +/- 3 percentage points for results based on the total sample.

About EHF

The [Episcopal Health Foundation \(EHF\)](#) is committed to transforming the health of our communities by going beyond the doctor's office. By providing millions of dollars in grants, working with congregations and community partners, and providing important research, we're supporting solutions that address the underlying causes of poor health in Texas. EHF was established in 2013, is based in Houston, and has more than \$1.2 billion in estimated assets. **#HealthNotJustHealthcare**

About SSRS

SSRS is a full-service public opinion and survey research firm with a dedicated team of critical thinkers. We have genuine enthusiasm for our work and a shared goal to connect people through research. SSRS solutions include groundbreaking approaches fit for purpose: the SSRS Opinion Panel and Omnibus, Encipher, additional online solutions, and custom research programs. Our research areas include Health Care and Health Policy, Public Opinion and Policy, Lifestyle, and Sports and Entertainment. SSRS projects include complex strategic and tactical initiatives in the US and more than 40 countries worldwide. Visit ssrs.com for more information.

³ <https://ssrs.com/ssrs-solutions/ssrs-opinion-panel/>