State Health System Performance: A Detailed Look at the Lone Star State
For a decade, the Commonwealth Fund has published an annual scorecard that assesses the performance of health systems in each state and the District of Columbia. The scorecard includes 80 indicators clustered into five dimensions: 1) access and affordability, 2) prevention and treatment, 3) avoidable hospital use and cost, 4) healthy lives, and 5) equity. The 2017 scorecard shows that Texas, the second most populous state, ranked 41 out of 51 (Figure 1).

To better understand the current Texas rankings compared to the US rankings, we took a deeper dive into the indicators in three dimensions: access and affordability; healthy lives; and equity. These three dimensions were chosen because their indicators are aligned with the primary interests of the Episcopal Health Foundation, including improving access to community-based primary care services and addressing the social determinants of health that impact Texans.

The data show that Texas’ highest ranking, #24 in healthy lives, places the state in the middle of the pack. The state’s rank of #44 in prevention and treatment places it in the bottom quintile. The state’s rock-bottom ranking of #51 in access and affordability, which weighted brought down the overall ranking, is likely due to the state’s high number and percentage of uninsured residents. As policymakers continue to debate healthcare reform options, this issue brief highlights challenges within the Texas health system that should help inform the discussion.
Access & Affordability Dimension

This dimension includes six indicators regarding rates of insurance coverage and costs of care. As shown in Figure 2 below, Texas performed particularly poorly on the two health insurance coverage indicators.

**Figure 2: Insurance Coverage and Cost of Care**

![Insurance Coverage and Cost of Care](image)

*Commonwealth Fund Scorecard on State Health System Performance, 2017*

As reported in previous research, several factors contribute to the high uninsurance rate in Texas. The high rate of uninsured Texans, as compared to other states, is the result of Texas’ comparatively restrictive Medicaid eligibility standards compounded by the decision not to expand Medicaid under the Affordable Care Act. Further, there are many uninsured Texans who are currently eligible to enroll in Medicaid or subsidized Affordable Care Act plans, but they have not done so.

**FIGURE 3: Cost Related Indicators**

![Cost Related Indicators](image)

*Commonwealth Fund Scorecard on State Health System Performance, 2017*

When looking at the cost related indicators, as shown in Figure 3 below, Texas fell well below the national average on all indicators. The high uninsurance rate in Texas is likely responsible for these results.
Healthy Lives Dimension

This dimension includes 11 indicators that measure mortality rates and health risk behaviors. The overall healthy lives ranking placed Texas #24 out of 51 which was the highest dimensional score for Texas.

Six of the indicators examine mortality rates including premature death rates, deaths from certain cancers, suicide, and infant mortality rates. Five of the indicators examine health risk factors such as self-reported health status and rates of smoking, overweight/obesity, and poor oral health outcomes. Positive rankings among a few of the indicators for adult smoking, suicide deaths, and adults with poor oral health account for the state’s relatively high score.

In contrast, Texas fared poorly on adult and childhood obesity indicators, ranking in the lowest quartile nationally. It is important to note that even though Texas is ranked near the bottom on this measure, obesity is a public health condition that is challenging the entire nation. Texas ranks lower than the United States average as shown in Figure 4 below.

**FIGURE 4: Obesity in Adults and Children**

![Chart showing obesity rates in children and adults in Texas and the United States](chart)

*Commonwealth Fund Scorecard on State Health System Performance, 2017*

Texas also ranked low (#38 of 51) on mortality amenable to health care, also likely attributable to the large percentage and number of uninsured Texans.
**Equity**

While sizeable differences exist in access, coverage, and quality of care between Texas and other states, significant gaps also exist between populations within the state. In Texas, some of the largest health disparities exist across income. For example, as shown in Figure 5, almost 1 in 4 non-elderly adults in Texas lacked healthcare coverage, but almost half of low-income adults were uninsured. When compared to the overall Texas rate, low-income adult Texans also had significantly higher rates of forgoing care due to cost, not receiving appropriate cancer screenings, and not having a usual source of care. Sixty percent of children in low-income households did not have a medical home compared to 48% of all children living in Texas.

**Figure 5. Low-Income Texans vs. Texas Overall by Indicator**

Disparities in Texas exist across race and ethnicity as well. Hispanics are the largest racial and ethnic group in Texas and experience significant barriers to accessing healthcare. Six in 10 Hispanic children do not have a medical home and almost half of Hispanic adults do not have a usual source of care—both rates being significantly higher than the Texas average. Hispanic adults are also more likely to be uninsured, more likely to avoid treatment due to cost, and less likely to receive appropriate cancer screenings. (Figure 6)
Figure 6. Hispanic Texas vs. Texas Overall by Indicator

Implications

As federal and state policymakers continue to contemplate the future of the Affordable Care Act, concrete policy measures need to be developed to increase healthcare coverage for both children and adults in the state. We encourage community members and organizations to engage health sector leaders, stakeholders, and policymakers to inform the policy and budgetary priorities at both the federal and state levels. To improve the health of all Texans, we need to work together to develop solutions that target improving access to preventive and primary care services and to address factors that shape community health outcomes.
THE EPISCOPAL HEALTH FOUNDATION (EHF) believes all Texans deserve to be healthy. EHF is committed to transform the health of our communities by going beyond just 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. EHF was established in 2013 and is based in Houston. With more than $1.2 billion in estimated assets, the Foundation operates as a supporting organization of the Episcopal Diocese of Texas and works across 57 Texas counties.

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Contact information can be found at: http://www.episcopalhealth.org

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