

# TEXAS RESIDENTS' VIEWS ON STATE AND NATIONAL HEALTH POLICY PRIORITIES

Selected Findings from the Episcopal Health Foundation  
2019 Texas Health Policy Survey

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**MARCH 2019**



EPISCOPAL HEALTH  
FOUNDATION



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Citation: Sim, S., Marks, E., Ben-Porath, E., Hachey, E., Su, J. (2019). *Texas Residents' Views on State and National Health Policy Priorities*. Retrieved from: <http://www.episcopalhealth.org/en/research/health-policy-research-reports>

## EXECUTIVE SUMMARY

Texas has the unique challenge of addressing health for a large, diverse population. From big cities to rural counties, Texans are diverse in income, race, ethnicity, and immigration status. The state has more uninsured residents than any other U.S. state. Together, these factors pose a serious challenge to policy makers across Texas. In the **2019 Texas Health Policy survey**, Episcopal Health Foundation and SSRS wanted to know Texans' opinions on a variety of state and national health policy issues. This is the second iteration of a public opinion study that was previously conducted by the Kaiser Family Foundation and the Episcopal Health Foundation in 2018.

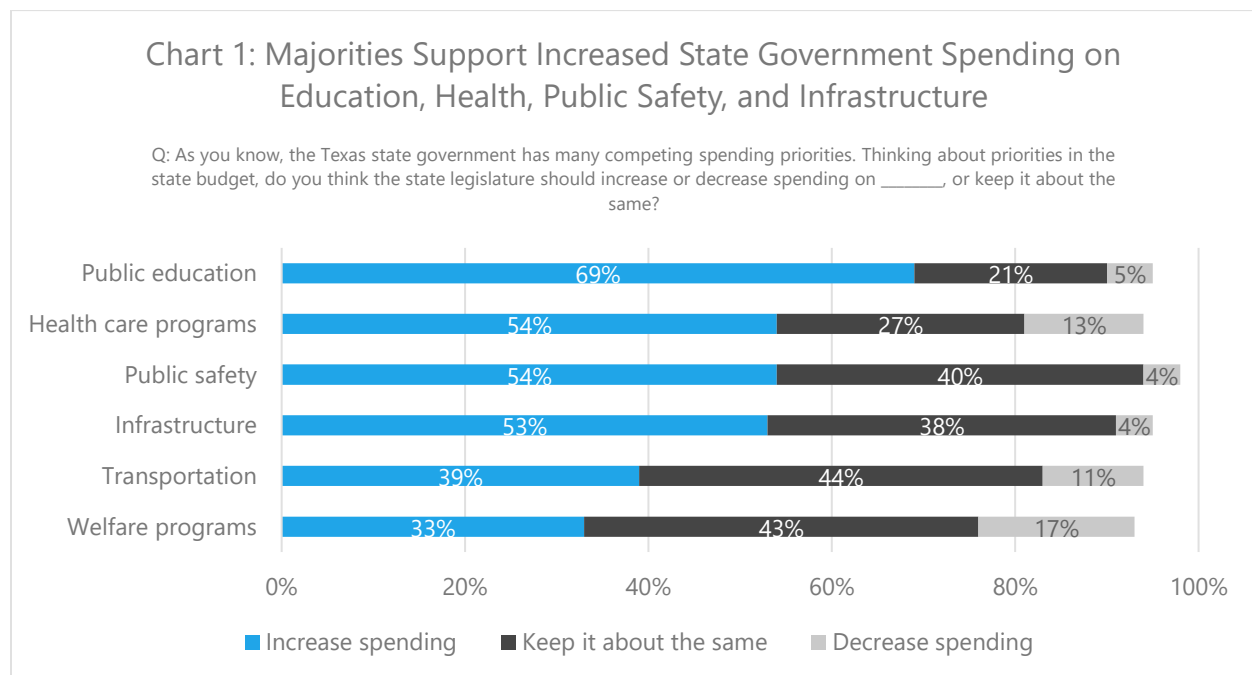
The new survey shows that Texans today say that health care is a priority and an overwhelming majority (91%) say they believe state government should play a role in making sure the health care system works well. Texans also voiced sweeping support for protections for people with pre-existing conditions. Nearly nine in 10 residents (88%) say they think health insurance companies should be required to provide coverage for people who have pre-existing health conditions.

When asked how the state government should prioritize its spending, more than half of Texans (54%) would support the state government increasing its spending on health care programs. The share of Texans who want increased state spending on health care is on par with those who want increased funding for public safety (54%) and infrastructure (53%), but less than the percentage who think the state should increase funding of public education (69%). When it comes to health priorities for the state legislature, the majority of Texans named lowering the cost of prescription drugs (60%), lowering the amount Texans spend on health care (59%), increasing access to health insurance (57%), increasing funding for mental health programs (53%), and reducing maternal mortality (51%) as top priorities.

Texans are evenly divided in their views of the Affordable Care Act (ACA). Many report a connection to Medicaid and seven in 10 Texans today have a favorable opinion of Medicaid. As in 2018, a majority of Texans (59%) say the state is not doing enough to make sure low-income adults are getting the health care they need. There is also widespread support for Medicaid expansion. When asked whether they think Texas should keep Medicaid as it is today or expand it to cover more low-income uninsured people, nearly two-thirds (64%) support expansion, compared with about a third who would rather keep the current program as is (31%).

## HEALTH CARE IS A SPENDING PRIORITY FOR TEXANS

The Texas state government has many competing fiscal responsibilities to consider each year, including health care, public education, infrastructure, welfare programs, and public safety. When asked how the state government should prioritize its spending, more than half of Texans (54%) would support the state government increasing its spending on health care programs. One in 10 residents (13%) say the state should decrease its spending on health care programs and about one quarter (27%) think state funding of health care programs should be kept at their current levels. The share of Texans who want increased state spending on health care is on par with those who want increased funding for public safety (54%), such as police and fire prevention services, and infrastructure (53%), such as maintaining roads and bridges, but significantly less than the share who think the state should increase funding of public education (69%). Transportation and welfare programs find less public support for increased funding, although four in 10 residents favor maintaining state funding for these two issues at their current levels (Chart 1).



Note: Some items asked of half sample. Don't know/Refused responses are not shown.

Current findings are unchanged from public sentiment on these issues in the 2018 survey. Increased funding for health care programs, public safety, and infrastructure still finds support among a majority and has not unseated calls for increased state spending for public education as the top funding priority for the Texas state legislature.

Demographically, some Texans are more likely than others to support increased state spending on health care programs, specifically women, young adults (age 18-29), black adults, Democrats, and those with at least some college education. Generally, most residents are opposed to the idea of reducing spending on health care, but Republicans (18%) and those with no college education (17%) are more likely than their counterparts to say there should be less state funding for health care programs. As was the case in the 2018 survey, white and Hispanic adults, Republicans, and those with no college education are more likely to be in favor of keeping state spending on health care programs at current levels (Table 1).

**Table 1: Views on State Spending for Health Care by Key Demographics**

	GENDER		AGE				RACE/ETHNICITY			PARTY ID			EDUCATION		
	M	F	18-29	30-49	50-64	65+	Wht.	Black	Hisp.	Dem	Ind	Rep	No coll.	Some coll.	Coll. grad
Increase	49%	60%	65%	52%	54%	47%	48%	70%	55%	71%	58%	38%	47%	57%	62%
Keep the same	30%	25%	23%	27%	26%	35%	31%	18%	28%	17%	28%	37%	31%	24%	24%
Decrease	15%	11%	8%	15%	16%	12%	13%	12%	14%	9%	9%	18%	17%	12%	8%
DK/Refused*	7%	4%	5%	6%	4%	7%	8%	1%	3%	2%	4%	7%	5%	6%	6%

\*Don't know/Refused

Since the May 2018 survey, support for increased state funding of health care programs has gone up among young residents age 18-29 and Hispanic adults. Compared with 2018, fewer seniors (age 65 or older) today (47%) want to see increased spending on health care programs and instead tend to favor maintaining current spending (35%) or decreasing it (12%), more so than they expressed about a year ago. Though not rising to the level of statistical significance, these figures illustrate a directional shift in opinion among seniors.

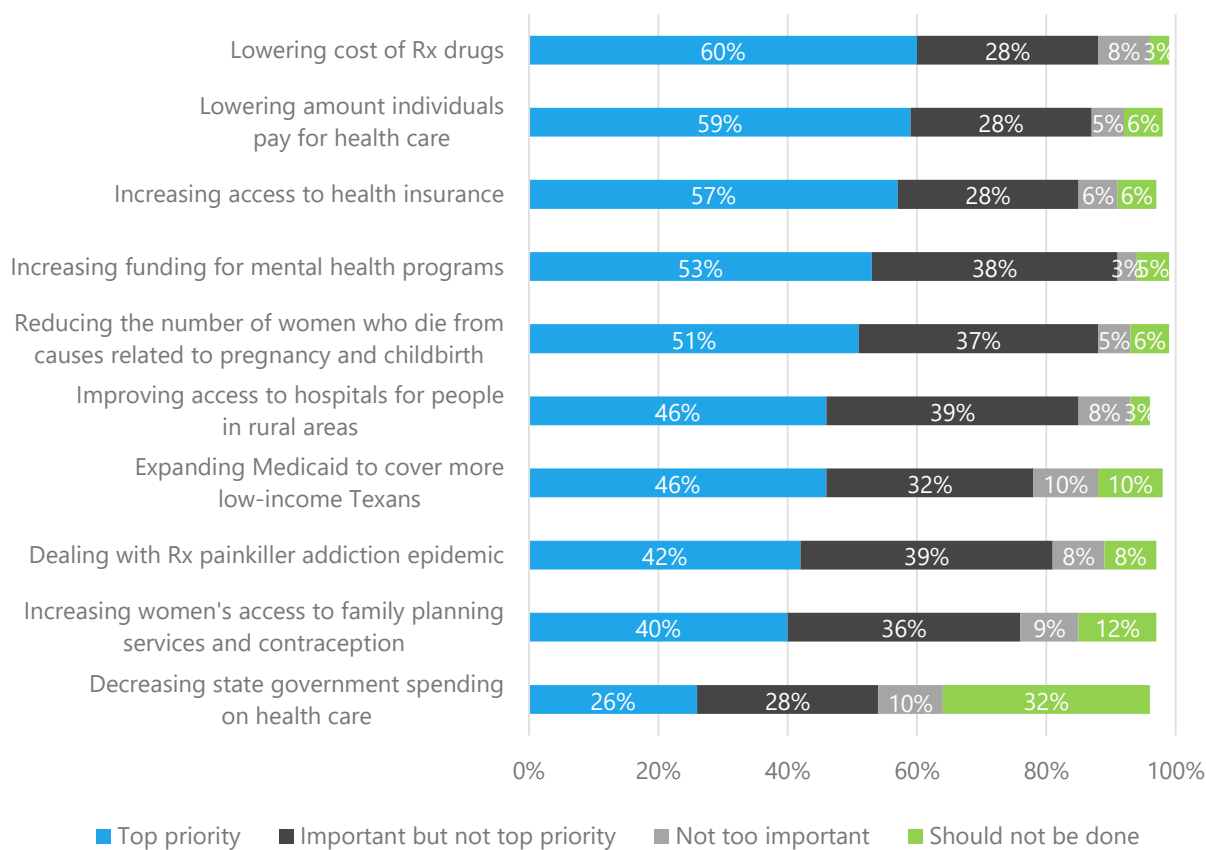
## TEXANS' VIEWS ON PRIORITIES FOR HEALTH CARE LEGISLATION

Texans were asked about different priorities for the state legislature when it comes to health care in the Lone Star State. At least half of adults viewed all issues as important, with all but one issue ranked as important by three-quarters or more Texans.

Tied for the most important are two cost-saving measures: lowering the cost of prescription drugs and lowering the amount individuals pay for health care, each rated by six in 10 adults as a top priority for the state legislature. Rounding out the top three is increasing access to health insurance (57% say it is a top priority). A majority of Texans also think it is a top priority for the state to focus on increasing funding for mental health programs (53%) and reducing maternal mortality (51%). Almost half say that improving access to hospitals for rural residents and expanding Medicaid is a top priority (46% each). Four in 10 Texans who say dealing with the state's prescription drug addiction epidemic (42%) or increasing women's access to family planning services and contraception (40%) are top priorities. Finally, just 26 percent of Texans say that decreasing state spending on health care should be a top priority for the state legislature. In contrast, 32 percent of Texans say the state should not decrease health care spending (Chart 2).

Chart 2: Lowering Costs and Increasing Access to Health Insurance are Top Health Priorities for Texans

Q: Should that be a top priority for the Texas legislature, important but not a top priority, not too important, or should it not be done?



Note: Some items asked of half sample. Don't know/Refused responses are not shown. Question wording abbreviated. See topline for full question wording.

There are some notable gender and income differences that emerge among Texans in this year's study about how they think the state legislature should juggle health care priorities. This year, women are more likely than men (65% v. 53%) to say that lowering the amount that individuals pay for health care should be a top priority for the state; no such gender divide was seen in the 2018 study. Women today are also more likely than men to consider lowering the cost of prescription drugs (66% v. 54%) to be a top priority, although they still were directionally more likely than men to hold this view in 2018 (59% v. 53%).

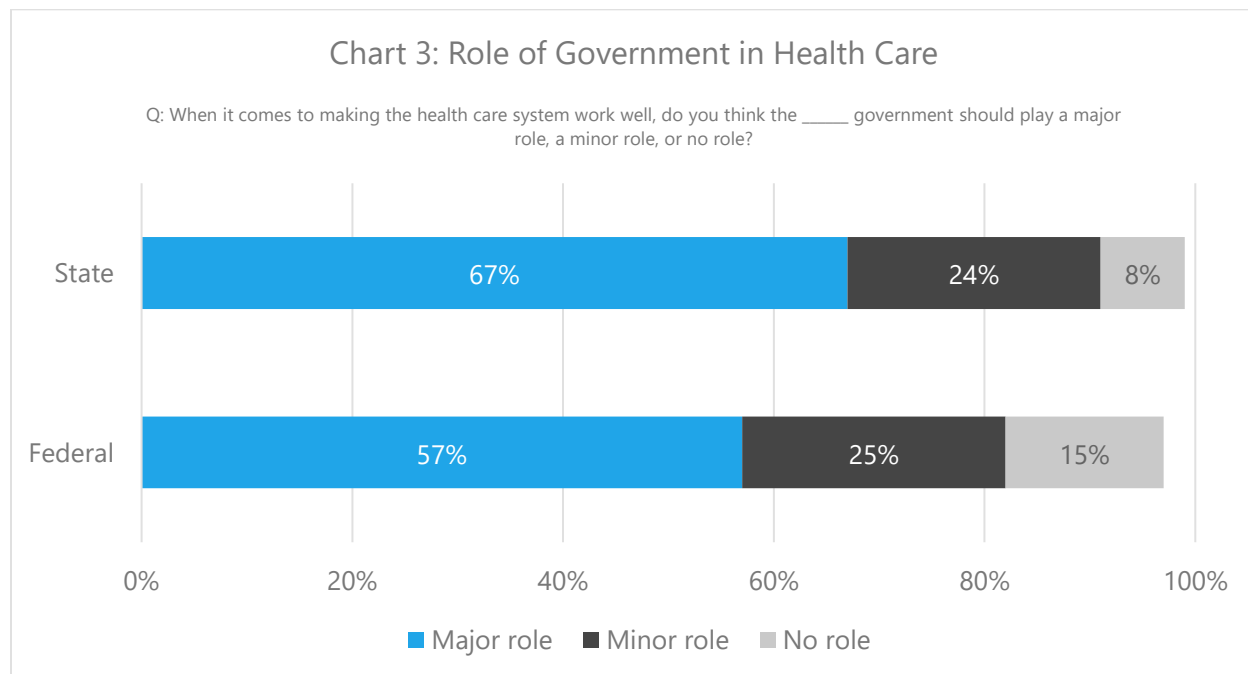
The 2019 survey also finds growth over the past year or so in the share of Texans with incomes below 138% FPL (Federal Poverty Level) who say lowering the amount individuals pay for health care (66%), increasing access to health insurance (64%), and increasing funding for mental health programs (60%) should be top priorities for the Texas state government (Table 2).

**Table 2: Views on Top Priorities Among Texans Below 138% FPL**

Texans below 138% FPL (n=169)	LOWERING AMOUNT INDIVIDUALS PAY FOR HEALTH CARE	INCREASING ACCESS TO HEALTH INSURANCE	INCREASING FUNDING FOR MENTAL HEALTH PROGRAMS
Top priority	66%	64%	60%
Important but not top priority	24%	27%	33%
Not too important	5%	3%	2%
Should not be done	4%	5%	5%
Don't know/Refused	1%	1%	*%

## VIEWS ON THE ROLE OF GOVERNMENT IN HEALTH CARE

Overall, strong majorities of Texans think that the state and federal governments have a role to play in making the health care system work. Eight in 10 (82%) say Washington should play a major or minor role in making sure the health care system works. Nine in 10 (91%) say the same of state governments, highlighting the public's view that a functioning health care system is an even more pertinent role for individual states than the federal government (Chart 3).



Note: Don't know/Refused responses are not shown.

Opinions on the role of government often correspond with partisanship, with Republicans more often of the belief that government should have a reduced role and Democrats more often of the belief that government has a large responsibility to serve the public's needs. When it comes to government and health care, the survey finds these partisan views are firmly in place. Three-quarters or more of Democrats say that the federal government (75%) or state government (79%) should play a major role in making the health care system work well, significantly higher than Republicans who say the same about Washington (34%) or state involvement (56%) (Table 3a). In contrast, Republicans are much more likely to be of the opinion that the federal government (29%) and state government (12%) should play no part in ensuring the proper functioning of the health care system.

Beyond political party affiliation, Texans differ by gender, age, race/ethnicity, immigrant status, and income level when it comes to their views about government's responsibility related to the health care system. Women, younger adults, black and Hispanic residents, foreign-born Texans, and lower-income residents are more likely to believe government's role in the health care system should be a major one (Tables 3a/3b).

**Table 3a: Views on Role of Government in Health Care System by Key Groups**

% who say government should play a major role	TOTAL	PARTY ID			GENDER		AGE			
		Dem	Ind	Rep	M	F	18- 29	30-49	50-64	65+
Federal	57%	75%	59%	34%	53%	62%	62%	59%	55%	51%
State	67%	79%	69%	56%	63%	71%	67%	68%	66%	65%

**Table 3b: Views on Role of Government in Health Care System by Key Groups (continued)**

% who say government should play a major role	TOTAL	RACE/ETHNICITY			IMMIGRANT STATUS		INCOME		
		White	Black	Hisp.	U.S. born	Foreign born	Below 138% FPL	138%-250+	250% +
Federal	57%	42%	72%	72%	52%	77%	73%	57%	46%
State	67%	58%	78%	77%	64%	77%	78%	73%	58%



## OVERWHELMING SUPPORT FOR COVERAGE OF PRE-EXISTING CONDITIONS

The vast majority of Texans stand behind one of the cornerstones of the Affordable Care Act: prohibiting health insurance companies from denying coverage for those with pre-existing conditions. Nearly nine in 10 residents (88%) say that health insurance companies should be required to provide insurance to people with pre-existing health conditions. One in 10 (10%) disagree, and a fraction (2%) did not answer the question.

**Table 4: Views on Coverage for Pre-Existing Conditions by All Texans and Key Groups**

	Total	PARTY ID			GENDER		RACE/ETHNICITY			CHRONIC CONDITION	
		Dem	Ind	Rep	M	F	White	Black	Hisp.	Yes	No
Should be required	88%	93%	89%	82%	84%	91%	85%	94%	88%	94%	86%
Should not be required	10%	6%	9%	16%	13%	7%	13%	3%	9%	5%	12%
DK/Refused*	2%	1%	2%	2%	3%	2%	2%	3%	3%	1%	2%

\*Don't know/Refused

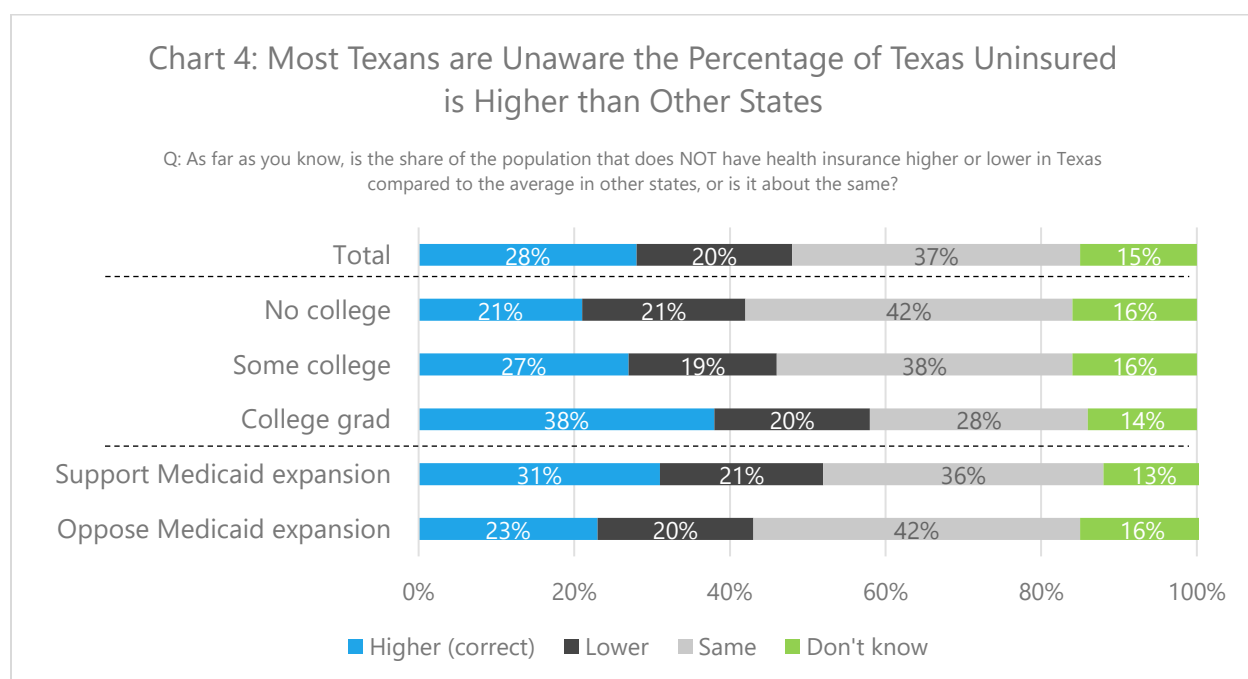
Pervasive support for protections for those with pre-existing conditions crosses party lines, though there is still a partisan tilt when it comes to this matter. Nine in 10 Democrats and independents (93% and 89% respectively) think health insurance companies should be required to cover persons with pre-existing conditions, compared with 82 percent of Republicans who share this opinion. In contrast, Republicans are more likely than either Democrats or independents to say that insurance companies should not be required to cover pre-existing conditions (16% v. 6% Democrats and 9% independents).

In addition to differences by political parties, the survey finds modest differences by gender, race/ethnicity, and self-reports of a chronic health condition. By a 91 percent to 84 percent margin, women are slightly more likely than men to say coverage of pre-existing conditions should be mandatory for health insurance companies. Black Texans are also more likely than white residents to hold this view (94% v. 85%), while Hispanics fall right in the middle with 88 percent in support of this tenet. Nearly all those with a chronic condition or disability (94%) think health insurance companies should be compelled to provide coverage for pre-existing conditions, compared with 86 percent of those without a chronic condition or disability (Table 4).

In spite of this smattering of minimal demographic differences, at least 75 percent or more of Texans across all backgrounds - political, social, economic, or otherwise - strongly favor mandating that pre-existing conditions be covered by all health insurance carriers.

## RATINGS OF STATE PERFORMANCE IN CARING FOR THE VULNERABLE

At 19.6% uninsured residents under age 65, the Lone Star State holds the designation of U.S. state with the largest uninsured nonelderly population,<sup>1</sup> highest among both states that have and have not expanded Medicaid. Texans in general are unaware of the fact that the state's share of uninsured people is higher compared to the average in other states. Fewer than three in 10 (28%) know that the uninsured population in Texas is higher compared to other states, 20 percent think it is lower in Texas, and a 37 percent plurality think Texas is about the same as the average in other states. These findings are similar to results from the 2018 survey.



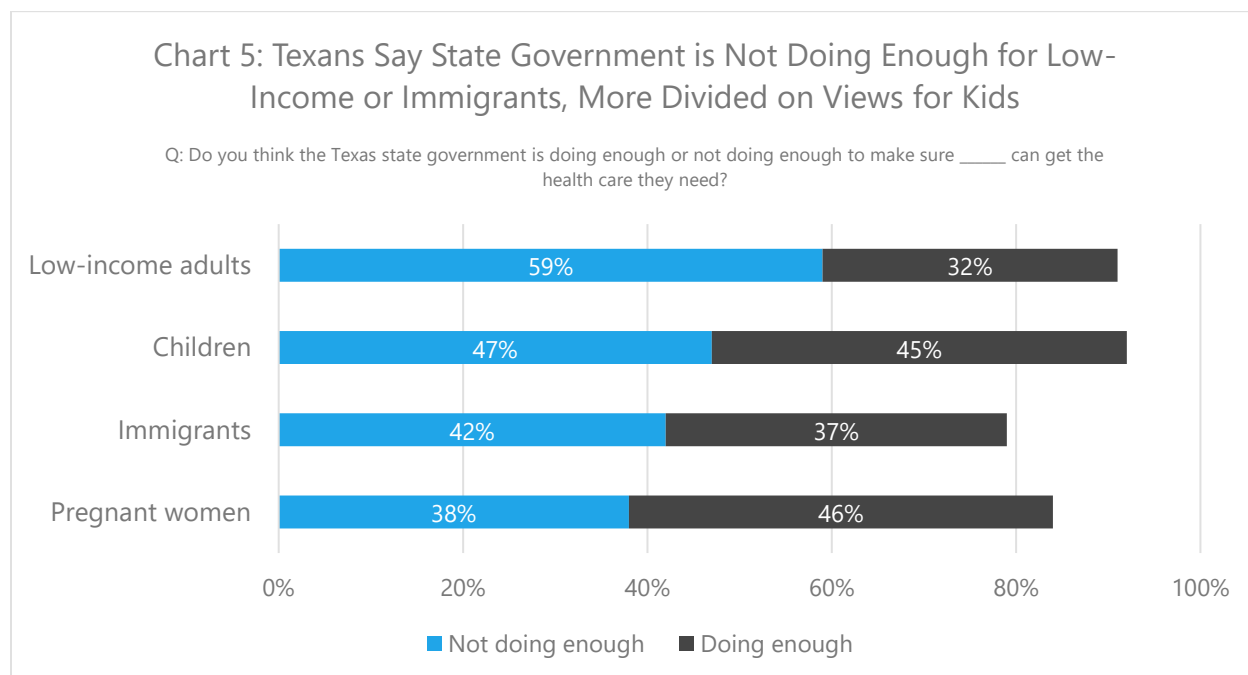
Note: Refused responses are not shown.

Though most adults do not know that Texas has a proportionally higher share of uninsured than other states, there are some adults who seem more knowledgeable than others on this measure. College graduates (38%) and those who support Medicaid expansion in Texas (31%) are more likely than their counterparts to identify correctly that the state has a higher amount of uninsured than other states (Chart 4).

Texans report health care is a top priority and most see state governments playing a role in ensuring that the health care system works overall. However, there are groups within the state that have been more vulnerable to gaps in the health care system in the past: low-income adults, children, pregnant women, and

<sup>1</sup> Kaiser Family Foundation's report "Key Facts about the Uninsured Population," estimates based on analysis of the 2017 American Community Survey: <https://www.kff.org/uninsured/fact-sheet/key-facts-about-the-uninsured-population/>

immigrants. When asked whether the Texas state government was doing enough or not doing enough to make sure certain groups get the health care they need, a sizable share says that the Texas government is not doing enough for low-income adults (59%), almost twice as many (32%) as those who say the state is doing enough. Four in 10 Texas adults (42%) also think the state is not doing enough to ensure proper health care for its immigrant population, slightly more than the 37 percent who think the government is doing enough. Texans are more evenly divided in their ratings of the state government in ensuring adequate access to health care for children (45% doing enough v. 47% not doing enough). Slightly less than half (46%) of Texans say the state is doing enough to make sure pregnant women get the health care they need, compared to 38 percent who say the state is not doing enough (Chart 5).



Note: "Doing too much" volunteered responses and Don't know/Refused responses are not shown.

There are a number of differences among Texans when it comes to opinions about how the state is doing in ensuring vulnerable populations have access to the health care they need. Most notably are the differences by race/ethnicity, education, and gender, as well as by party identification and opinions on Medicaid expansion.

**Table 5: Views on State Government's Performance in Getting Health Care to the Vulnerable**

% who say state government is not doing enough for...	GENDER		RACE/ETHNICITY			EDUCATION			PARTY ID			MEDICAID EXPANSION	
	M	F	Wht.	Black	Hisp.	No coll.	Some coll.	Coll. grad	Dem	Ind	Rep	Favor	Op-pose
Low-income adults	52%	65%	50%	81%	62%	63%	56%	56%	76%	61%	41%	73%	32%
Children	44%	49%	41%	69%	49%	48%	44%	50%	63%	49%	32%	57%	29%
Immigrants	36%	47%	29%	56%	54%	46%	35%	44%	62%	47%	16%	53%	21%
Pregnant women	39%	37%	33%	57%	39%	34%	36%	46%	53%	44%	19%	49%	19%

Women are more likely than men to think that the state government is not doing enough for low-income adults' and immigrants' health care needs. Black adults are more likely than white adults to say the state is not doing enough for any of these vulnerable populations. By education, a larger share of those without a college background (63%) think the Texas government is not doing enough for low-income adults, while a larger share of college graduates (46%) believe the health care of pregnant women has not received enough focus from the state. Across the board, Democrats are more likely than Republicans or independents to say the state is not doing enough for these groups. The same pattern is observed among those who support Medicaid expansion in the state, compared with those who do not (Table 5).

## TEXANS DIVIDED IN VIEWS OF AFFORDABLE CARE ACT, SHARP PARTISAN DIFFERENCES

When it comes to the Affordable Care Act, the health reform bill that was signed into law in 2010 and remains the law of the land when it comes to health care, Texans are more evenly divided in their views than adults nationally. Forty-seven percent of Texans have a favorable view of the Affordable Care Act, including 25 percent who view it very favorably. In contrast, 46 percent of Texans have an unfavorable opinion of the ACA, including 31 percent who view it very unfavorably. Nationally, one-half of U.S. adults have a favorable view of the health care law, 40 percent have an unfavorable view, and 10 percent did not answer the question, according to the January 2019 Health Tracking Poll conducted by the Kaiser Family Foundation.<sup>2</sup>

Unsurprisingly, opinions about the Affordable Care Act, often dubbed Obamacare, split sharply along party lines. Three-quarters of Democrats (75%) have either a very favorable opinion (41%) or somewhat favorable opinion (34%) of Obamacare. Republicans hold strongly unfavorable views of the ACA, with 63 percent

<sup>2</sup> KFF Health Tracking Poll – January 2019: The Public On Next Steps For The ACA And Proposals To Expand Coverage: <https://www.kff.org/health-reform/poll-finding/kff-health-tracking-poll-january-2019/>

saying their opinion of the 2010 health care law is very unfavorable and 18 percent rating it somewhat unfavorably. Independents are more divided in their views but break more favorably for Obama's landmark health care reform by a 51%-41% margin.

## MANY TEXANS TOUCHED BY MEDICAID, VIEW MEDICAID PROGRAM FAVORABLY

As one of 14 states that did not expand Medicaid under the Affordable Care Act, low-income adults in Texas are eligible for Medicaid only if they meet certain requirements, such as people with disabilities, pregnant women, and parents with very low incomes. About 4 million people are covered by Medicaid in Texas and nearly three-quarters (73%) are children.<sup>3</sup> According to analysis of Census data conducted by the Kaiser Family Foundation, 59 percent of Hispanic adults, 21 percent of white adults, and 16 percent of black adults in Texas are covered by Medicaid,<sup>4</sup> and 66 percent are families with at least one full-time worker (working 35 hours or more per week).<sup>5</sup>

Seven in 10 Texans overall (72%) report having any sort of personal connection to Medicaid, including 30 percent who have ever been personally covered by Medicaid, 15 percent who ever had a child covered by Medicaid, and 27 percent who have close friends or family ever covered by the program. Just over one-quarter (28%) have no connection to Medicaid or did not say.

Certain demographic groups within the state tend to report a connection to Medicaid at a higher rate than others, namely women, younger adults 18-29 and 30-49, black or Hispanic adults, lower-educated Texans, and those with very low incomes. Women (41%) and adults with incomes below 250 percent of the federal poverty level (40%) are among the largest share of Texans reporting ever being personally covered by Medicaid, followed by Hispanics (38%), those with no (37%) or some (32%) college education, and equal shares of those ages 18-29 (37%) and 30-49 (35%). Men, white adults, those with higher incomes, those with more education, and older Texans are less likely to have ever personally received Medicaid benefits. However, large proportions across all key demographic groups report having at least some connection to the Medicaid program, either a personal one or through someone close to them (Chart 6).

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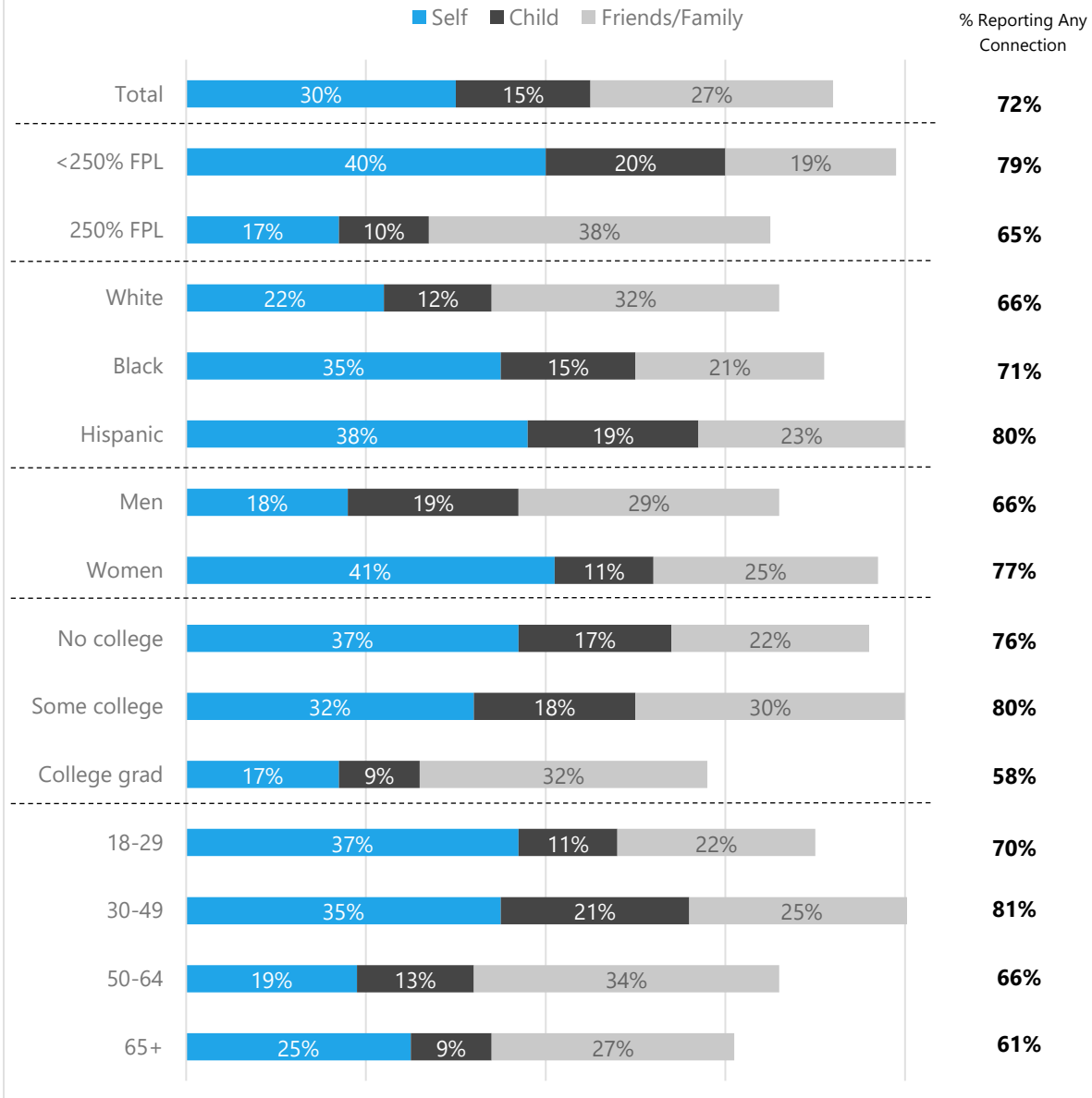
<sup>3</sup> Texas Health and Human Services, Healthcare Statistics, data for October 2018 accessed February 3, 2019: <https://hhs.texas.gov/about-hhs/records-statistics/data-statistics/healthcare-statistics>

<sup>4</sup> Kaiser Family Foundation's report "Distribution of the Nonelderly with Medicaid by Race/Ethnicity," estimates based on analysis of the 2017 American Community Survey <https://www.kff.org/medicaid/state-indicator/distribution-by-raceethnicity-4/>

<sup>5</sup> Kaiser Family Foundation's report "Distribution of the Nonelderly with Medicaid by Family Work Status," estimates based on analysis of the 2017 American Community Survey <https://www.kff.org/medicaid/state-indicator/distribution-by-employment-status-4/>

**Chart 6: Women, Hispanic and Black Adults, Lower Income, and Younger Texans More Likely to Report a Connection to Medicaid**

Percent who report a connection to the Medicaid program through each of the following:



*Note: A personal connection to Medicaid is defined as: Self ever covered by Medicaid, Child ever covered by Medicaid, or Family or close friends ever covered by Medicaid.*

Widespread connection to Medicaid may also be a key driver for views about the program. Adults in the Lone Star State also look favorably upon the Medicaid program. Seven in 10 Texans today have a favorable opinion of Medicaid, equal to the share who held that opinion in the 2018 survey. Unsurprisingly, those

who have any connection to Medicaid are more likely to have an overall favorable opinion of the program than those with no connection (75% v. 63%), but those with no connection to Medicaid are interestingly not more likely to view it unfavorably (26% no connection and unfavorable and 21% connection and unfavorable). Among the largest shares of the Texas general public who have a very favorable opinion of Medicaid are: those with incomes under 138% of the federal poverty level (50%), foreign-born Texans (47%), mothers (47%), Democrats (46%), those in fair or poor health (46%), Hispanics (48%), those with no college education (43%), black Texans (41%), and women (39%) (Tables 6a/6b).

**Table 6a: Views on Medicaid by Key Demographic Groups**

	Total	PARTY ID			RACE/ETHNICITY			INCOME (% OF FPL)			MEDICAID CONNECTION	
		Dem	Ind	Rep	Wht.	Black	Hisp.	<138 %	138%-250%	250% +	Any connection	No connection
<b>NET Favorable</b>	<b>72%</b>	<b>79%</b>	<b>72%</b>	<b>65%</b>	<b>65%</b>	<b>75%</b>	<b>77%</b>	<b>77%</b>	<b>73%</b>	<b>69%</b>	<b>75%</b>	<b>63%</b>
Very favorable	35%	46%	36%	25%	24%	41%	48%	50%	37%	25%	39%	26%
Somewhat favorable	36%	33%	35%	40%	41%	34%	30%	27%	36%	44%	36%	36%
<b>NET Unfavorable</b>	<b>22%</b>	<b>16%</b>	<b>22%</b>	<b>28%</b>	<b>27%</b>	<b>20%</b>	<b>20%</b>	<b>19%</b>	<b>21%</b>	<b>25%</b>	<b>21%</b>	<b>26%</b>
Somewhat unfavorable	12%	8%	12%	18%	17%	6%	10%	10%	13%	14%	12%	15%
Very unfavorable	10%	9%	10%	11%	10%	13%	9%	9%	8%	11%	9%	12%

Note: Don't know/Refused responses are not shown.

**Table 6b: Views on Medicaid by Key Demographic Groups**

	Total	IMMIGRANT STATUS		EDUCATION			HEALTH STATUS		GENDER	
		U.S. born	Foreign-born	No college	Some college	College grad	Excellent/ Very good/ Good	Fair/ Poor	Men	Women
<b>NET Favorable</b>	<b>72%</b>	<b>70%</b>	<b>78%</b>	<b>75%</b>	<b>70%</b>	<b>68%</b>	<b>71%</b>	<b>73%</b>	<b>69%</b>	<b>74%</b>
Very favorable	35%	33%	47%	43%	31%	28%	31%	46%	31%	39%
Somewhat favorable	36%	37%	32%	32%	38%	40%	40%	27%	37%	35%
<b>NET Unfavorable</b>	<b>22%</b>	<b>24%</b>	<b>17%</b>	<b>21%</b>	<b>24%</b>	<b>24%</b>	<b>23%</b>	<b>22%</b>	<b>23%</b>	<b>22%</b>
Somewhat unfavorable	12%	14%	8%	11%	16%	11%	13%	12%	12%	13%
Very unfavorable	10%	10%	8%	10%	7%	13%	10%	10%	11%	9%

Note: Don't know/Refused responses are not shown.

Despite the state's strict Medicaid eligibility requirements and less than half of Texans reporting ever receiving help through Medicaid for themselves or a child, six in 10 Texans say that Medicaid is either very important (43%) or somewhat important (16%) for them and their family. A smaller but still substantial share (40%) say the program is not important for them, including 28 percent who say it is not at all important for their family.

## WIDESPREAD SUPPORT FOR MEDICAID EXPANSION IN TEXAS

Most Texans (59%) believe that the current Medicaid program is working well for most low-income people covered by the program in the state, 29 percent say it is not working well, and 11 percent do not know enough to say. Many of the same groups that hold favorable opinions of Medicaid are also the adults who say the current Medicaid program is working well, including foreign-born Texans (70%), Hispanics (67%), those with incomes under 138% of the federal poverty level (63%), and no college (64%) or only some college (63%). However, some adults championing the current Medicaid program are those who oppose Medicaid expansion and would rather keep the current program going than grow it. Seventy-two percent of those who oppose Medicaid expansion say the current program is working well, compared with 55 percent who support expansion. A similar trend emerges among Republicans who say the current program is working well, double-digits more than the Democrats (56%) or independents (57%). Among those who say the current program is not working well are those who do not think the program goes far enough in supporting low-income Texans: Democrats (35%) and those who support expansion of the program (35%).

Though the majority of Texans were unaware of the state's standing as highest in the nation of uninsured residents, they are more aware of the status of Medicaid expansion in Texas but many get it wrong or are



unsure. A 47 percent plurality know that Texas has not expanded the Medicaid program, 18 percent mistakenly believe that it has, and 35 percent do not know.

When asked whether they think Texas should keep Medicaid as it is today or expand it to cover more low-income uninsured people, nearly two-thirds (64%) support expansion, more than double those who would rather keep the current program as is (31%). This finding is unchanged from the 2018 survey.

Among the key proponents for Medicaid expansion are Democrats (84%), independents (68%), and lower-income Texans below 138% FPL (77%).

**Table 7: Views on Medicaid Expansion by Key Demographic Groups**

	Total	PARTY ID			RACE/ETHNICITY			INCOME (% OF FPL)		
		Dem	Ind	Rep	Wht.	Black	Hisp.	<138%	138%-250%	250%+
Expand Medicaid	64%	84%	68%	38%	51%	87%	71%	77%	66%	53%
Keep Medicaid as is	31%	15%	27%	55%	42%	10%	27%	20%	29%	42%

*Note: Don't know/Refused responses are not shown.*

There is also widespread support among the nonelderly uninsured (76%), women (69%), younger adults ages 18-29 (72%) or ages 30-49 (70%), and black (87%) and Hispanic (71%) residents (Table 7).

## METHODOLOGY

SSRS conducted the second wave of the *Texas Health Policy Survey* on behalf of Episcopal Health Foundation (EHF) from January 3 through January 25, 2019. The goal of this survey was to detail the attitudes and experiences of Texas adults regarding their health care, with a comparison to a similar study completed in 2018.<sup>6</sup> For the *Texas Health Policy Survey*, SSRS interviewed a representative sample of 1,210 Texas adults (age 18 or older), reached via landline (n=345) and cell phone (n=865) random digit dialing (RDD). Interviews were conducted by live professional telephone interviewers in English or Spanish based on the respondent's language preference.

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 balance the sample demographics to match estimates for the Texas adult population. The margin of sampling error for this study is +/- 3.6 percentage points for results based on the total sample.

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<sup>6</sup> [https://www.episcopalhealth.org/files/1515/2908/8060/Topline-Texas\\_Health\\_Policy\\_Survey.pdf](https://www.episcopalhealth.org/files/1515/2908/8060/Topline-Texas_Health_Policy_Survey.pdf)

## 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 market and survey research firm managed by a core of dedicated professionals with advanced degrees in the social sciences. Service offerings include the Omnibus Survey, Probability Panel and other Online Solutions as well as custom research programs – all driven by a central commitment to methodological rigor. The SSRS team is renowned for its multimodal approach, as well as its sophisticated and proprietary sample designs. Typical projects for the company include complex strategic, tactical and public opinion initiatives in the U.S. and in more than 40 countries worldwide. SSRS is research, refined. Visit [www.ssrs.com](http://www.ssrs.com) for more information.