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# The Uninsured in Texas

## Statewide and Local Area Views

*Matthew Buettgens, Linda J. Blumberg, and Clare Pan*

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The number of insured people in the US has increased significantly since implementation of the Affordable Care Act's (ACA's) coverage reforms in 2014. Since that time, the number of people insured nationally has increased by approximately 19 million (Skopec, Holahan, and Elmendorf 2018). However, the increase in coverage has occurred unevenly across the states, with states that have chosen to expand Medicaid eligibility under the law experiencing the largest increases in coverage. Nationally, we estimate that 11 percent of the nonelderly population (those below age 65) are uninsured in 2018. In comparison, we estimate that 19 percent of the Texas nonelderly population, 4.7 million people, remain uninsured; this is the highest uninsurance rate of any state in the country. Although the Texas uninsurance rate remains high, the state has seen a significant increase in coverage across a diverse group of residents since implementation of the ACA.<sup>1</sup>

This brief provides detailed characteristics of the Texas uninsured population as well as an analysis of how the characteristics of this population vary across localities. Such information can be valuable when developing policy approaches intended to expand insurance coverage. As a companion to this analysis, we have also prepared fact sheets exploring the characteristics of the uninsured in Texas counties and county groups (we place counties with small populations into groups for more reliable estimates). These fact sheets can be accessed [here](#).

## Methods

Survey data require time to collect and process, so the most recent year for which data are available lag behind the current year. Also, survey data often differ from administrative data on the number of people enrolled in programs such as Medicaid and the Children's Health Insurance Program (CHIP) and in Marketplace-based private coverage. To estimate the number and characteristics of uninsured

Texans in 2018 in a manner consistent with the latest enrollment data, we used the Urban Institute’s Health Insurance Policy Simulation Model (HIPSM).

## Estimating the Number of Uninsured Texans in 2018

HIPSM is a detailed microsimulation model of the health care system designed to estimate the cost and coverage effects of proposed health care policy options. HIPSM is based on two years of the American Community Survey, which provides national and state representative samples of the US population. The population is aged to future years using projections from the Urban Institute’s Mapping America’s Futures tool. HIPSM is designed to incorporate timely, real-world data when they are available. We regularly update the model to reflect published Medicaid and Marketplace enrollments and costs in each state. HIPSM is calibrated to reproduce the latest available Texas enrollment numbers for Medicaid, CHIP, and private Marketplace coverage with premium tax credits. As a check, we compared the 2018 HIPSM results with 2016 results from the American Community Survey and the National Health Interview Survey. The 2018 HIPSM Texas uninsurance rate was within 0.2 percentage points of both surveys. Further, the distribution of major characteristics of the uninsured, such as income, race and ethnicity, and age, were very similar in all three.

## Estimates for Counties and Local Areas

The American Community Survey is designed to produce statistically valid estimates down to local areas called Public Use Microdata Areas (PUMAs). Each of these areas has roughly the same population. Texas contains 212 PUMAs. This is a cumbersome number of areas for presenting most results, and PUMAs do not necessarily correspond to easily identifiable jurisdictions. Consequently, we grouped PUMAs together in two different ways. First, we combined PUMAs into 41 counties or groups of less populous counties. Estimates for these counties and county groups are provided in [fact sheets](#) produced as part of this project. To the extent possible, our county groups correspond either with Texas Councils of Government or regional planning commissions. Each fact sheet shows the major characteristics of the uninsured in that area. The uninsurance rate and characteristics of the uninsured in individual counties or county groups can vary considerably from the statewide average. For example, 61 percent of the uninsured across the state are Hispanic and 24 percent are white, non-Hispanic. In Hidalgo county, however, 97 percent of the uninsured are Hispanic, and in North Texas (Wichita Falls), 62 percent of the uninsured are white, non-Hispanic.

Second, we used cluster analysis to define six clusters of PUMAs in which the characteristics of the uninsured were much closer to each other than to other localities. This allowed us to characterize local variation in the uninsured that county and county group estimates miss. For example, many large, urban counties contain many PUMAs—sometimes more than a dozen—that are notably different from each other. Local areas in each of these counties can be much more like other areas in Texas than their neighboring localities. All 212 Texas PUMAs fit into one of these six categories, which are most easily characterized by their composition of income and race and ethnicity: majority white and high income; majority white and low income; majority Hispanic and low income; large majority Hispanic and very low

income; plurality of a racial or ethnic group and medium income; plurality of a racial or ethnic group and low income. The cluster analysis identified these categories as those in which the characteristics of the uninsured were much closer to each other than to other localities. Here, a very low-income area is defined as one in which nearly 70 percent of the uninsured population has incomes below 138 percent of the federal poverty level (FPL); low-income areas are those in which roughly 60 percent of the uninsured population has incomes below 138 percent of FPL; medium income areas are defined as those in which just over 50 percent of the uninsured population has incomes below 138 percent of FPL; and the sole higher-income area has 46 percent of its uninsured population below 138 percent of FPL and nearly 30 percent above 300 percent of FPL. Areas with a plurality of racial or ethnic groups are those where no single racial or ethnic group constitutes at least 50 percent of the area's uninsured population. Areas with a large racial or ethnic majority are those where one racial or ethnic group constitutes over 80 percent of the area's uninsured population. Policy changes and outreach programs would likely have similar effects on the localities within each of these clusters.

## Limitations

This analysis has several limitations. Our model is based on survey data, which necessarily involve some degree of error in reported characteristics such as income, citizenship, and receipt of benefits such as from the Supplemental Nutrition Assistance Program (SNAP). We have found that the characteristics of the uninsured are very similar across the American Community Survey and the National Health Interview Survey, increasing confidence in our estimates of the statewide distribution. However, reported receipt of SNAP is generally noticeably lower than the enrollment reported in administrative data in all surveys (Stevens, Fox, and Heggeness 2018). No estimates of characteristics of the uninsured at a local level are available other than from the American Community Survey, nor are publicly available administrative data on local enrollment in Medicaid, CHIP, or Marketplace coverage with tax credits, so there are no external benchmarks for our local estimates.

# Results

## Statewide Findings

In table 1, we show the characteristics of the statewide Texas nonelderly uninsured population.

### SOCIOECONOMIC CHARACTERISTICS

**Income.** The uninsured are heavily concentrated at low incomes. About 60 percent of the uninsured have family modified adjusted gross income (MAGI) below 138 percent of FPL, and 88 percent have family MAGI below 300 percent of FPL. The uninsurance rate varies with income, ranging from 29 percent of those with incomes below 138 percent of FPL to only 4 percent of those with incomes above 400 percent of FPL.

TABLE 1

## Characteristics of the Nonelderly Uninsured Population in Texas, 2018

	Thousands of people	Share of state total uninsured	Uninsurance rate
<b>Socioeconomic characteristics</b>			
<i>Family modified adjusted gross income as a percentage of FPL</i>			
< 138%	2,822	60%	29%
138%–200%	617	13%	23%
200%–300%	685	15%	21%
300%–400%	302	6%	12%
>400%	268	6%	4%
<i>Age</i>			
0–18	640	14%	8%
19–34	1,992	42%	32%
35–54	1,624	35%	23%
55–64	440	9%	14%
<i>Sex</i>			
Male	2,437	52%	20%
Female	2,257	48%	18%
<i>Race or ethnicity</i>			
White, non-Hispanic	1,117	24%	12%
Black, non-Hispanic	454	10%	16%
Hispanic	2,842	61%	27%
Asians/Pacific Islanders	189	4%	16%
American Indian/Alaska Native	56	1%	18%
Other, non-Hispanic	37	1%	12%
<i>Education (ages 19–64)</i>			
Less than high school	1,214	30%	48%
High school	1,598	39%	29%
Some college	842	21%	20%
College graduate	400	10%	10%
Total	4,055	100%	25%
<i>Health status</i>			
Excellent	1,109	24%	17%
Very good	1,332	28%	19%
Good	1,540	33%	20%
Fair	543	12%	24%
Poor	170	4%	21%
<i>Family type (ages 19–64)</i>			
Single without dependents	1,734	43%	30%
Single with dependents	648	16%	33%
Couple without dependents	600	15%	15%
Couple with dependents	1,073	26%	22%
Total	4,055	100%	25%
<i>Family receiving other benefits</i>			
SNAP	1,297	28%	26%
Not receiving other benefits	3,398	72%	18%
<b>Employment</b>			
<i>Family work status</i>			
No worker in family	1,551	33%	31%
Only part-time worker in family	520	11%	31%
At least one full-time worker in family	2,623	56%	15%
<i>Family firm size</i>			
No worker in family	1,551	33%	31%
Only small-firm workers in family	1,190	25%	30%
At least one large-firm worker in family	1,953	42%	13%

	Thousands of people	Share of state total uninsured	Uninsurance rate
<i>Major Industry (employed age 19–64)</i>			
Agriculture	42	2%	40%
Mining	35	1%	12%
Manufacturing	186	7%	17%
Construction	409	15%	43%
Transportation	102	4%	19%
Wholesale and retail	399	15%	24%
Finance, ins, real estate	91	3%	12%
Professional	294	11%	23%
Education	91	3%	8%
Health and social service	256	10%	18%
Arts/entertainment/recreation	408	15%	42%
Other services	216	8%	35%
Other industries	126	5%	14%
<i>Total employed</i>	2,656	100%	23%
<b>Citizenship</b>			
<i>Citizenship status</i>			
US Citizen	3,095	66%	14%
Noncitizen	1,600	34%	54%
<i>Family citizenship status</i>			
All US citizens	2,704	58%	14%
At least one noncitizen in the family	1,990	42%	36%
<i>English proficiency (age 19–64)</i>			
Speaks very well or better	3,475	86%	22%
Does not speak very well or less proficient	580	14%	55%
Total	4,055	100%	25%
<i>Language spoken at home</i>			
English	1,854	39%	14%
Spanish	2,478	53%	34%
Other	363	8%	9%
<b>Health insurance eligibility and coverage</b>			
<i>Program eligibility</i>			
Eligible for Medicaid/CHIP	691	15%	12%
Eligible for Marketplace PTCs	809	17%	31%
Not currently eligible	3,194	68%	20%
Would gain Medicaid eligibility if Texas expands Medicaid	1,177	25%	38%
Would be ineligible even with Medicaid expansion	2,017	43%	20%
<i>Mixed coverage scenarios</i>			
All family members uninsured	3,076	66%	100%
At least one family member is enrolled in private coverage, nongroup or employer	152	3%	1%
At least one family member enrolled in public insurance	1,466	31%	17%
At least one child enrolled in Medicaid, and at least one adult is eligible for Marketplace PTCs, but not enrolled	111	2%	
At least one child enrolled in Medicaid, and at least one adult is eligible for Medicaid, but not enrolled	352	8%	
<b>Total</b>	<b>4,695</b>	<b>100%</b>	<b>19%</b>

Source: Urban Institute analysis, HIPSMS 2018.

Notes: CHIP = the Children's Health Insurance Program; PTCs= premium tax credits; SNAP = the Supplemental Nutrition Assistance Program. Small firms are defined as employers with fewer than 50 employees. Data include people age less than 65 who are residents of Texas.

**Age.** Children make up only 14 percent of the uninsured and have an uninsurance rate far lower than adults; 8 percent of children are uninsured compared with 25 percent of all adults. This is mainly because of the availability of Medicaid and CHIP; children with incomes up to 206 percent of FPL are eligible for one of these public insurance programs in Texas.<sup>2</sup> By contrast, nondisabled adult parents are eligible for Medicaid only with incomes up to approximately 18 percent of FPL, and there is no income-related eligibility for nondisabled adult nonparents. Among adults, uninsurance rates decline with age, ranging from 32 percent of those age 19 to 34 uninsured to 14 percent of those age 55 to 64 uninsured.

**Race and ethnicity.** Sixty-one percent of the uninsured are Hispanic, 24 percent are non-Hispanic white, and 10 percent are non-Hispanic black. Hispanics have a notably higher uninsurance rate than any other race/ethnicity group: 27 percent are uninsured compared with 12 percent of non-Hispanic whites and 16 percent of non-Hispanic blacks.

**Education.** Nearly 70 percent of the uninsured adults in Texas have a high school education or less, with 39 percent having a high school diploma and 30 percent not having one. Uninsurance rates vary dramatically with educational attainment, ranging from 48 percent of those with less than a high school education down to 10 percent of college graduates.

**Self-reported health status.** Fifteen percent of the uninsured report being in fair or poor health. On average, people who report being in fair or poor health have notably higher levels of health care spending than those reporting better health.<sup>3</sup> The differences in health care spending between those reporting excellent, very good, or good health are much smaller on average.

**Family structure.** Forty-three percent of the adult uninsured are single without dependents, 16 percent are in single-parent families, 15 percent are in childless couples, and the remaining 26 percent are in two-parent families with dependents. Adults in single-parent families and singles without children have the highest uninsurance rates (33 percent and 30 percent, respectively). Twenty-two percent of adults in two-parent families are uninsured, and 15 percent of adults in couples without children are uninsured.

**Receipt of other benefits.** Twenty-eight percent of the uninsured report receiving SNAP benefits, and among all SNAP recipients, 26 percent are uninsured. This is a notably higher uninsurance rate than the 18 percent rate for those not receiving other benefits. As noted, survey data generally underreport receipt of SNAP, so we are likely underestimating the number of uninsured people receiving SNAP.

## EMPLOYMENT-RELATED CHARACTERISTICS

**Family work status.** Two-thirds of the Texas uninsured are in working families. A majority (56 percent) are in families with at least one full-time worker. The uninsurance rates among families without workers and families with only part-time workers are identical (31 percent uninsured). By contrast, only 15 percent of people in families with at least one full-time worker are uninsured.

**Firm size.** Forty-two percent of uninsured Texans are in families with at least one adult who works in a large firm (defined as one with more than 50 employees), and 25 percent are members of families with only small-firm workers. The remaining 33 percent are in families with no worker. The uninsurance

rates for families without workers and families with only small-firm workers are nearly identical (31 percent and 30 percent uninsured, respectively). In contrast, only 13 percent of people in families where at least one adult works in a large firm are uninsured.

**Industry.** The three most common major industries that employ uninsured Texas adults are construction, wholesale and retail trades, and arts/entertainment/recreation services, each employing 15 percent of uninsured workers. Other common industries include professional services (11 percent), health and social services (10 percent), other services (8 percent), and manufacturing (7 percent). Considered another way, nearly half of uninsured workers are employed in a service industry, whether professional, education, health and social services, arts/entertainment/recreation, or other services.

## CITIZENSHIP AND LANGUAGE

**US citizenship.** Two thirds of the uninsured are US citizens. However, US citizens are much less likely to be uninsured than people who are not US citizens (14 percent versus 54 percent uninsured, respectively). Likewise, fifty-eight percent of uninsured Texans are in families consisting entirely of citizens. Although most uninsured Texans are in families made up of only citizens, people in families with at least one noncitizen have a higher likelihood of being uninsured; 36 percent of people in families with at least one noncitizen are uninsured compared with 14 percent of people in all-citizen families. These large differences are attributable to US citizens tending to have higher incomes and more employment opportunities that come with offers of private health insurance (data not shown) combined with the fact that noncitizens are not eligible for subsidized public insurance programs.

Although citizenship is strongly correlated with insurance coverage, as is Hispanic ethnicity (as discussed), many of the uninsured Hispanic residents of the state are citizens. Consequently, citizenship only partly explains the differences in insurance coverage between Hispanic Texans and those of other races and ethnicities. Over 40 percent of uninsured Hispanic Texans are US citizens (1.2 million people; data not shown).

**English proficiency and language spoken at home.** Eighty-six percent of uninsured adults report speaking English very well or better. However, 53 percent of the uninsured report speaking Spanish as their primary language at home. Thus, most uninsured Hispanics are English proficient, but many prefer speaking Spanish at home. The uninsurance rate among those speaking Spanish at home is 34 percent, compared with 14 percent among those who primarily speak English at home.

## HEALTH INSURANCE PROGRAM ELIGIBILITY AND COVERAGE OF FAMILY MEMBERS

**Program eligibility.** We estimate that 15 percent of the Texas uninsured are eligible for Medicaid or CHIP, and an additional 17 percent are eligible for premium tax credits for private Marketplace coverage. The remaining 68 percent of the uninsured (3.2 million people) are not currently eligible for any financial assistance for health insurance coverage. If Texas were to expand Medicaid eligibility, 1.2 million more uninsured people would become Medicaid eligible, making 57 percent of all uninsured Texans eligible for Medicaid, CHIP, or Marketplace premium tax credits.

Those currently eligible for Medicaid or CHIP have an uninsurance rate of 12 percent, which is low for Texas but still above the nationwide uninsurance rate of 11 percent. This low uninsurance rate among public coverage eligible Texans is because most of the eligible are children. Not only are the income eligibility thresholds higher for children, but their likelihood of enrolling in Medicaid or CHIP is high as well (Haley et al. 2018). Still, 691,000 people are uninsured and are eligible for free or low-cost coverage through Medicaid or CHIP, and additional investments in outreach and enrollment assistance could increase coverage significantly among this population.

Thirty-one percent of Texans eligible for Marketplace tax credits are uninsured. Nationwide, only 20 percent of those eligible for Marketplace tax credits are uninsured (data not shown). Therefore, this form of financial assistance for health coverage is underused in Texas relative to the rest of the country. Again, additional outreach and enrollment assistance could improve participation among this group.

**Coverage of family members.** Two-thirds of uninsured Texans are in families consisting entirely of uninsured people, 31 percent have at least one family member enrolled in Medicaid or CHIP, and 3 percent are in families with at least one member with private health coverage.

## Local Variation

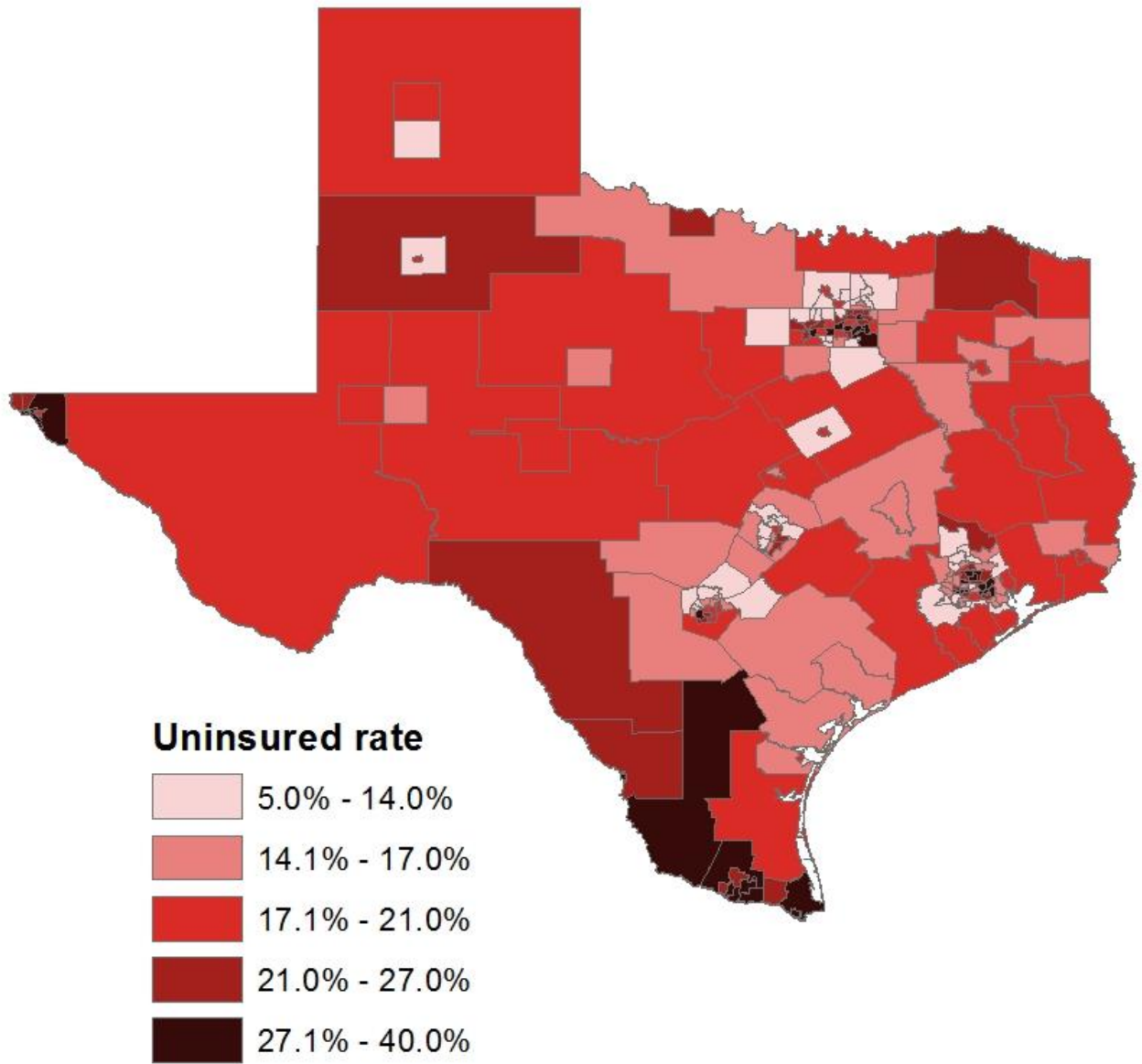
In figure 1, we map uninsurance rates for the 212 Texas PUMAs. The areas with the highest uninsurance rates (over 25 percent) are found in parts of major cities, El Paso, and the southern tip of Texas, ranging from Cameron and Hidalgo Counties up to McMullen and Live Oak Counties. Areas with the lowest uninsurance rates (less than 14 percent) are generally in suburban areas of major cities, along with areas around Waco and Amarillo. In Harris County (the Houston area), some PUMAs with uninsurance rates of 10 percent are adjacent to areas with uninsurance rates exceeding 30 percent.

In figure 2, we show local variation in the characteristics of the uninsured by assigning PUMAs to a small number of categories defined by cluster analysis. The uninsured populations in areas within each category are very similar to each other but noticeably different from those in the other categories. The cluster analysis defined the categories by local area income and racial and ethnic composition of the resident uninsured population. The race and ethnicity of the uninsured was the characteristic that most starkly distinguished localities.

Table 2 summarizes several basic characteristics of the locality groups defined by the cluster analysis. The two locality groups with the highest uninsurance rates are those in which the majority of the population's uninsured are Hispanic and have low or very low average income. These two locality groups account for more than 60 percent of the state's nonelderly uninsured population (2.8 million people) and 49 percent of the state's total nonelderly population. In these groups, roughly three-quarters of uninsured nonelderly adults have a high school education or less. The uninsured in the majority Hispanic, very low-income group are more likely to have family incomes below 138 percent of FPL, and the uninsured adults are somewhat more likely to have a high school education or less. The uninsured in this group are also the least likely to be in families of all US citizens.



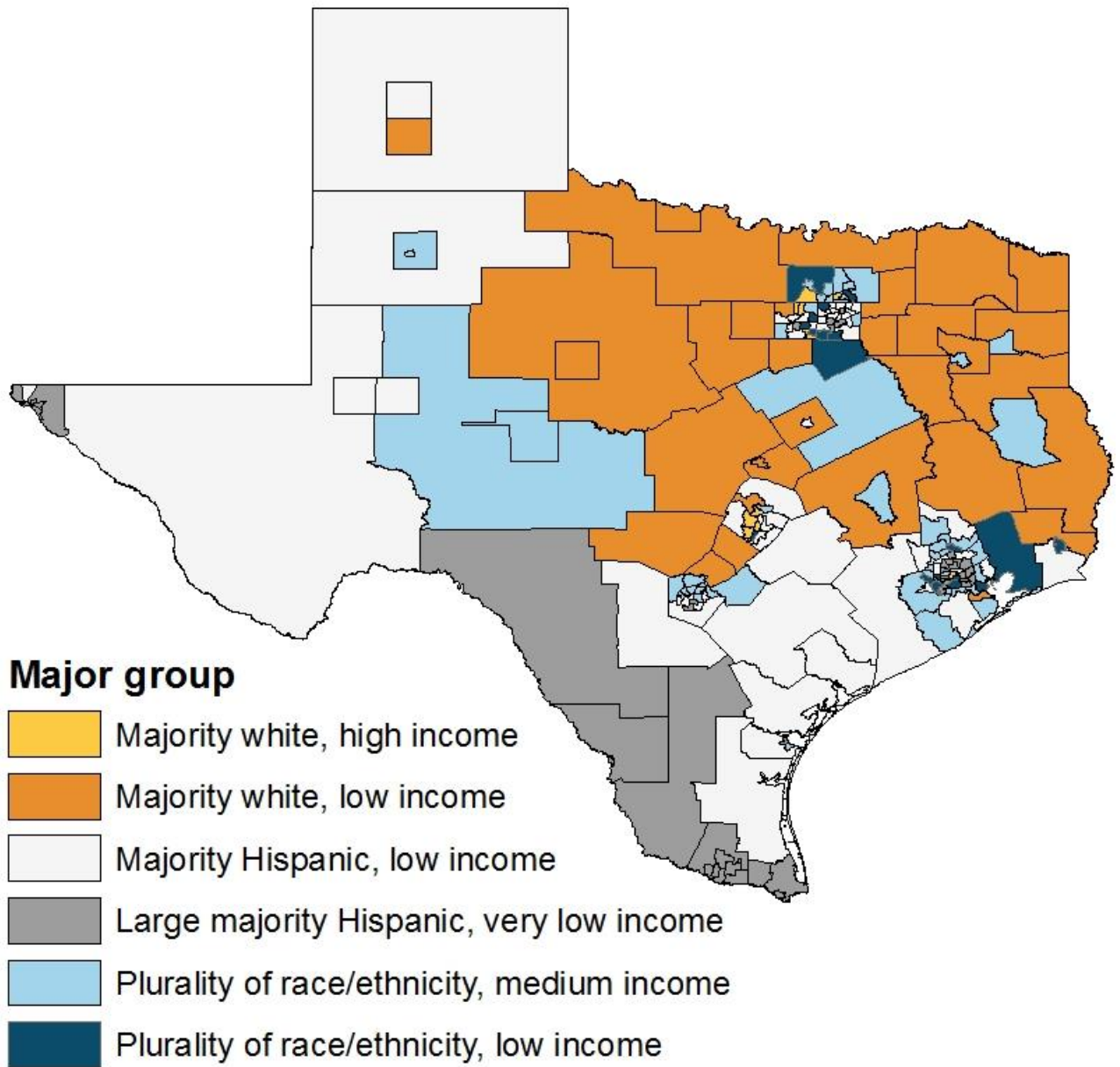
**FIGURE 1**  
**Local Area Uninsurance Rates of Nonelderly Texans, 2018**



Source: Urban Institute, HIPSM 2018.

FIGURE 2

Local Area Variation in the Characteristics of Uninsured Texans, 2018



Source: Urban Institute, HIPS 2018.

TABLE 2

**Characteristics of Texas Locality Groups***Categorized by race or ethnicity and income of their uninsured populations*

	Large majority- Hispanic, very low-income group	Majority- Hispanic, low-income group	Majority- white, low- income group	Plurality of a race or ethnicity, low- income group	Plurality of a race or ethnicity, medium-income group	Majority- white, higher- income group
Total nonelderly population (thousands)	5,211	6,698	3,795	2,132	5,419	1,105
Number of uninsured (thousands)	1,449	1,386	621	338	790	110
Uninsured rate	28%	21%	16%	16%	15%	10%
Percent of all uninsured in the state	31%	30%	13%	7%	17%	2%
Share of uninsured in group with family income below 138% FPL	67%	59%	58%	58%	54%	46%
Share of uninsured adults in group with high school education or less	76%	72%	68%	61%	60%	38%
Share of uninsured in group in families with all members US Citizens	42%	55%	82%	62%	66%	80%

**Source:** Source: Urban Institute analysis, HIPSM 2018.**Notes:** FPL = the federal poverty level. Locality groups were defined by using cluster analysis on the 212 Public Use Microdata Areas in Texas. The six resulting clusters (or groups) are those in which the characteristics of the uninsured are much closer to each other than to the characteristics of the uninsured in other localities.

The uninsurance rates are similar (15 to 16 percent) in the locality groups where the uninsured are mostly white and low income and in the two groups whose uninsured populations are characterized by a plurality of a race or ethnicity. These three groups account for 37 percent of the state's uninsured (1.8 million people) but 47 percent of the state's total nonelderly population. The education level of the uninsured adults in groups with a racial or ethnic plurality is somewhat higher than in the majority white, low-income group, with about 60 percent having a high school education or less in the plurality groups compared with 68 percent in the white, low-income group.

The locality group where the uninsured population is majority white and higher income has the lowest uninsurance rate of the six groups: 10 percent of the area's nonelderly population are uninsured. This group of localities accounts for about 5 percent of the state's nonelderly population and only 2 percent of the state's uninsured. The uninsured in this group are the most highly educated: only 38 percent have a high school education or less, they are the least likely to have income below 138 percent of FPL (46 percent), and they are largely in families composed entirely of US citizens (80 percent). Below, we provide more detail on the characteristics of the uninsured in each of these six locality groups.

**Majority-white localities.** Although 60 percent of uninsured Texans are Hispanic, 15 percent of them live in local areas where most of the uninsured are white, non-Hispanic. Most frequently, uninsured Texans living in majority-white localities are part of families where all family members are US citizens (about 80 percent) and proficient in English (94 percent). Workforce participation among the uninsured in these areas is moderately lower than in non-majority white localities.

Differences in income distribution and geography separate majority white localities into two distinct clusters. The *majority-white, higher-income* cluster (table 3) consists entirely of suburban areas of Dallas-Fort Worth, Austin, and Houston, and these areas combined include about 2 percent of the state's uninsured residents. This cluster differs from the statewide average characteristics of the uninsured in almost every respect. On average, the uninsured in this cluster have substantially higher incomes (46 percent with incomes below 138 percent of FPL and 28 percent with incomes above 300 percent of FPL), they are more highly educated (most of these uninsured people have at least some college), and they are overwhelmingly (80 percent) in families where all members are US citizens. The local areas in this cluster also have the lowest uninsurance rate (10 percent) across all our six clusters.

The second group of majority white localities fall into the *majority-white, low-income* cluster (table 4). About 13 percent of the Texas uninsured live in the areas in this cluster, which covers most of central and northeastern Texas, along with Potter county and a PUMA near Houston. Nearly 60 percent of the uninsured in this cluster have incomes below 138 percent of FPL; only 15 percent have incomes above 300 percent of FPL. Across all localities in this cluster, 16 percent of residents are uninsured.

**Majority-Hispanic localities.** About 61 percent of the uninsured live in areas where Hispanics make up the majority of the uninsured. The uninsured in these areas are less likely to be US citizens, they are somewhat less likely to have a high level of English proficiency (although English proficiency is still very common), and a majority speak Spanish as their primary language at home. Lower educational attainment is more common among uninsured people in these local areas, and it is more common for them to be in two-adult families with children. These areas have the highest uninsurance rates in Texas, in part because of the larger prevalence of noncitizens in their populations.

TABLE 3

**Characteristics of the Nonelderly Uninsured in Texas Localities  
in the Majority-White, Higher-Income Group, 2018**

	Thousands of people	Share of state total uninsured	Uninsurance rate
<b>Socioeconomic characteristics</b>			
<i>Family modified adjusted gross income as a percentage of FPL</i>			
< 138%	51	46%	22%
138%–200%	11	10%	16%
200%–300%	18	16%	18%
300%–400%	13	12%	10%
>400%	17	16%	3%
<i>Age</i>			
0–18	14	13%	5%
19–34	46	42%	17%
35–54	37	33%	10%
55–64	13	12%	9%
<i>Sex</i>			
Male	57	51%	10%
Female	54	49%	10%
<i>Race and ethnicity</i>			
White, non-Hispanic	61	55%	9%
Black, non-Hispanic	7	7%	12%
Hispanic	24	22%	15%
Asians/Pacific Islanders	15	14%	12%
American Indian/Alaska Native	1	1%	8%
Other, non-Hispanic	1	1%	5%
<i>Education (age 19–64)</i>			
Less than high school	8	9%	43%
High school	28	29%	21%
Some college	26	27%	13%
College graduate	34	35%	8%
Total	96	100%	12%
<i>Health status</i>			
Excellent	30	27%	9%
Very good	34	30%	10%
Good	35	32%	11%
Fair	9	8%	13%
Poor	3	2%	13%
<i>Family type (age 19–64)</i>			
Single without dependents	52	54%	19%
Single with dependents	12	12%	22%
Couple without dependents	14	14%	7%
Couple with dependents	19	19%	7%
Total	96	100%	12%
<i>Family receiving other benefits</i>			
SNAP	14	12%	22%
Not receiving SNAP	97	88%	9%
<b>Employment</b>			
<i>Family work status</i>			
No worker in family	41	37%	24%
Only part-time worker in family	13	12%	23%
At least one full-time worker in family	56	51%	6%
<i>Family firm size</i>			
No worker in family	41	37%	24%
Only small-firm workers in family	27	25%	19%
At least one large-firm worker in family	42	38%	5%

	Thousands of people	Share of state total uninsured	Uninsurance rate
<i>Major Industry (employed age 19–64)</i>			
Agriculture	-	-	-
Mining	1	1%	7%
Manufacturing	4	6%	6%
Construction	5	7%	20%
Transportation	2	2%	6%
Wholesale and retail	10	16%	13%
Finance, ins, real estate	4	7%	7%
Professional	10	15%	9%
Education	3	5%	5%
Health and social service	7	11%	11%
Arts/entertainment/recreation	12	18%	24%
Other services	5	8%	19%
Other industries	2	4%	5%
<i>Total employed</i>	65	100%	10%
<b>Citizenship</b>			
<i>Citizenship status</i>			
US Citizen	92	83%	9%
Noncitizen	19	17%	23%
<i>Family citizenship status</i>			
All US citizens	88	80%	9%
At least one noncitizen in the family	22	20%	17%
<i>English proficiency (age 19–64)</i>			
Speaks very well or better	90	94%	12%
Does not speak very well or less proficient	6	6%	45%
Total	96	100%	12%
<i>Language spoken at home</i>			
English	72	65%	9%
Spanish	19	18%	20%
Chinese	3	3%	12%
Korean	2	1%	31%
Vietnamese	3	2%	25%
Other	12	11%	7%
<b>Health insurance eligibility and coverage</b>			
<i>Program eligibility</i>			
Eligible for Medicaid/CHIP	12	10%	9%
Eligible for Marketplace PTCs	28	25%	30%
Not currently eligible	71	65%	8%
Would gain Medicaid eligibility if Texas expands Medicaid	28	26%	29%
Would be ineligible even with Medicaid expansion	43	39%	5%
<i>Mixed coverage scenarios</i>			
All family members uninsured	84	76%	100%
At least one family member is enrolled in private coverage, nongroup or employer	7	6%	1%
At least one family member enrolled in public insurance	20	18%	14%
At least one child enrolled in Medicaid, and at least one adult is eligible for Marketplace PTCs, but not enrolled	3	3%	
At least one child enrolled in Medicaid, and at least one adult is eligible for Medicaid, but not enrolled	4	3%	
<b>Total</b>	110	100%	10%

Source: Urban Institute analysis, HIPSMS 2018.

Notes: CHIP = the Children's Health Insurance Program; PTCs = premium tax credits; SNAP = the Supplemental Nutrition Assistance Program. Cells with sample size smaller than 100 are not shown. Small firms are defined as employers with fewer than 50 employees. Data include residents age 64 and younger.

TABLE 4

**Characteristics of the Nonelderly Uninsured in Texas Localities  
in the Majority-White, Low-Income Group, 2018**

	Thousands of people	Share of state total uninsured	Uninsurance rate
<b>Socioeconomic characteristics</b>			
<i>Family modified adjusted gross income as a percentage of FPL</i>			
<138%	359	58%	25%
138%–200%	77	12%	20%
200%–300%	91	15%	17%
300%–400%	49	8%	11%
>400%	46	7%	5%
<i>Age</i>			
0–18	83	13%	7%
19–34	261	42%	29%
35–54	210	34%	19%
55–64	67	11%	11%
<i>Sex</i>			
Male	328	53%	17%
Female	293	47%	15%
<i>Race and ethnicity</i>			
White, non-Hispanic	351	57%	14%
Black, non-Hispanic	59	10%	17%
Hispanic	184	30%	23%
Asians/Pacific Islanders	13	2%	19%
American Indian/Alaska Native	9	1%	15%
Other, non-Hispanic	6	1%	11%
<i>Education (age 19–64)</i>			
Less than high school	115	21%	40%
High school	250	46%	24%
Some college	125	23%	17%
College graduate	48	9%	9%
Total	538	100%	21%
<i>Health status</i>			
Excellent	143	23%	14%
Very good	174	28%	16%
Good	207	33%	18%
Fair	72	12%	19%
Poor	26	4%	19%
<i>Family type (age 19–64)</i>			
Single without dependents	239	44%	29%
Single with dependents	81	15%	29%
Couple without dependents	91	17%	12%
Couple with dependents	128	24%	16%
Total	538	100%	21%
<i>Family receiving other benefits</i>			
SNAP	160	26%	24%
Not receiving SNAP	461	74%	11%
<b>Employment</b>			
<i>Family work status</i>			
No worker in family	242	39%	28%
Only part-time worker in family	68	11%	28%
At least one full-time worker in family	311	50%	12%
<i>Family firm size</i>			
No worker in family	242	39%	28%
Only small-firm workers in family	136	22%	27%
At least one large-firm worker in family	243	39%	10%

	Thousands of people	Share of state total uninsured	Uninsurance rate
<i>Major Industry (employed age 19–64)</i>			
Agriculture	11	3%	35%
Mining	7	2%	14%
Manufacturing	25	7%	14%
Construction	46	13%	32%
Transportation	11	3%	14%
Wholesale and retail	49	14%	19%
Finance, ins, real estate	9	3%	10%
Professional	27	8%	19%
Education	11	3%	6%
Health and social service	34	10%	15%
Arts/entertainment/recreation	51	15%	35%
Other services	26	8%	29%
Other industries	39	11%	20%
<i>Total employed</i>	347	100%	19%
<b>Citizenship</b>			
<i>Citizenship status</i>			
US Citizen	531	86%	15%
Noncitizen	90	14%	51%
<i>Family citizenship status</i>			
All US citizens	511	82%	15%
At least one noncitizen in the family	110	18%	32%
<i>English proficiency (age 19–64)</i>			
Speaks very well or better	505	94%	20%
Does not speak very well or less proficient	33	6%	51%
Total	538	100%	21%
<i>Language spoken at home</i>			
English	441	71%	15%
Spanish	148	24%	31%
Other	32	5%	8%
<b>Health insurance eligibility and coverage</b>			
<i>Program eligibility</i>			
Eligible for Medicaid/CHIP	114	18%	13%
Eligible for Marketplace PTCs	134	22%	29%
Not currently eligible	373	60%	15%
Would gain Medicaid eligibility if Texas expands Medicaid	187	30%	36%
Would be ineligible even with Medicaid expansion	186	30%	10%
<i>Mixed coverage scenarios</i>			
All family members uninsured	412	66%	100%
At least one family member is enrolled in private coverage, nongroup or employer	25	4%	1%
At least one family member enrolled in public insurance	183	30%	14%
At least one child enrolled in Medicaid, and at least one adult is eligible for Marketplace PTCs, but not enrolled	15	2%	
At least one child enrolled in Medicaid, and at least one adult is eligible for Medicaid, but not enrolled	55	9%	
<b>Total</b>	621	100%	16%

Source: Urban Institute analysis, HIPSMS 2018.

Notes: CHIP = the Children’s Health Insurance Program; PTCs = premium tax credits; SNAP = the Supplemental Nutrition Assistance Program. Cells with sample size smaller than 100 are not shown. Small firms are defined as employers with fewer than 50 employees. Data include residents age 64 and younger.



Majority-Hispanic localities are also split into two distinct clusters based on income. The characteristics of the uninsured in the *large majority-Hispanic, very low-income* cluster differ the most from the statewide average characteristics of the uninsured (table 5). About 31 percent of the state's uninsured people live in areas that fit into this cluster, and 28 percent of the population in these localities is uninsured. The cluster covers most of the southern border areas, El Paso, and areas of major cities, particularly Houston and Dallas-Fort Worth. Just over two-thirds of the uninsured in this cluster have incomes below 138 percent of FPL. Hispanic residents make up 84 percent of the uninsured in this cluster, and 58 percent of the uninsured are in families that include at least one member who is not a US citizen. Seventy-six percent of uninsured adults in this cluster have a high school education or less, and 39 percent lack a high school diploma. Sixty-seven percent of this uninsured population are members of working families, and 55 percent are part of families with at least one full-time working adult. About 36 percent of the uninsured in this group report receiving SNAP benefits.

The second cluster of majority-Hispanic areas, the *majority-Hispanic, low-income* cluster, has an income distribution similar to the majority-white, low-income cluster, with nearly 60 percent of the uninsured having incomes below 138 percent of FPL (table 6). About 30 percent of uninsured Texans live in areas that fall into this cluster, which is found in the far western tip of the state and in the southeast, as well as in parts of the Dallas-Fort Worth area. Twenty-one percent of people living in this group of local areas are uninsured, and 28 percent of the areas' Hispanic residents are uninsured. Hispanics make up 65 percent of the uninsured in this cluster, and 45 percent of the cluster's uninsured are members of families that include at least one non-US citizen. Seventy-two percent of these areas' uninsured adults have a high school education or less. However, 70 percent are members of working families, and 59 percent have at least one family member who is a full-time worker. These employment rates are the highest among the uninsured in any of the six clusters. Twenty-seven percent of the uninsured in the cluster report receiving SNAP benefits.

**Localities with a plurality of a race or ethnicity.** The remaining 24 percent of the Texas uninsured live in areas where no single racial or ethnic group makes up a majority of the uninsured. These areas have a similar uninsurance rate (15 to 16 percent), and their uninsured populations have consistent rates of workforce participation (67 percent in working families, 56 percent with at least one full-time worker), citizenship (more than 60 percent are in families in which all members are US citizens), and English proficiency (near 90 percent). The educational attainment among their uninsured populations is similar as well, with a higher share of college degree holders (14 to 15 percent) than any other clusters except the majority-white, high-income group.

As similar as these areas are in many respects, they can still be separated into two clusters based on race or ethnicity, income, and geography. The most distinct is the *plurality of race or ethnicity, low-income* cluster (table 7), which includes 7 percent of the state's uninsured and is found in parts of the greater Houston and Dallas-Fort Worth areas, along with a PUMA in Austin. The income distribution in these areas is like that in the majority-white and majority-Hispanic low-income clusters. Its uninsured population is also the most racially and ethnically diverse. Non-Hispanic blacks and Asians/Pacific Islanders are much more common among the uninsured in this cluster than in any other (21 percent and 10 percent, respectively). In this cluster, 39 percent of the uninsured are Hispanic and 27 percent are white, non-Hispanic.

TABLE 5

**Characteristics of the Nonelderly Uninsured in Texas Localities  
in the Large Majority–Hispanic, Very Low–Income Group, 2018**

	Thousands of people	Share of state total uninsured	Uninsurance rate
<b>Socioeconomic characteristics</b>			
<i>Family modified adjusted gross income as a percentage of FPL</i>			
<138%	977	67%	34%
138%–200%	186	13%	29%
200%–300%	178	12%	26%
300%–400%	62	4%	16%
>400%	47	3%	8%
<i>Age</i>			
0–18	191	13%	10%
19–34	611	42%	46%
35–54	515	36%	36%
55–64	132	9%	22%
<i>Sex</i>			
Male	746	51%	29%
Female	703	49%	27%
<i>Race and ethnicity</i>			
White, non-Hispanic	70	5%	16%
Black, non-Hispanic	116	8%	20%
Hispanic	1,219	84%	31%
Asians/Pacific Islanders	31	2%	21%
American Indian/Alaska Native	9	1%	23%
Other, non-Hispanic	4	0%	15%
<i>Education (age 19–64)</i>			
Less than high school	493	39%	53%
High school	467	37%	39%
Some college	223	18%	30%
College graduate	75	6%	15%
Total	1,258	100%	37%
<i>Health status</i>			
Excellent	339	23%	25%
Very good	392	27%	27%
Good	481	33%	29%
Fair	179	12%	32%
Poor	58	4%	28%
<i>Family type (age 19–64)</i>			
Single without dependents	476	38%	40%
Single with dependents	218	17%	43%
Couple without dependents	191	15%	28%
Couple with dependents	373	30%	38%
Total	1,258	100%	37%
<i>Family receiving other benefits</i>			
SNAP	521	36%	29%
Not receiving SNAP	928	64%	20%
<b>Employment</b>			
<i>Family work status</i>			
No worker in family	480	33%	37%
Only part-time worker in family	166	11%	38%
At least one full-time worker in family	803	55%	23%
<i>Family firm size</i>			
No worker in family	480	33%	37%
Only small-firm workers in family	373	26%	38%
At least one large-firm worker in family	596	41%	20%

	Thousands of people	Share of state total uninsured	Uninsurance rate
<i>Major Industry (employed age 19–64)</i>			
Agriculture	10	1%	60%
Mining	8	1%	20%
Manufacturing	56	7%	31%
Construction	144	18%	58%
Transportation	35	4%	30%
Wholesale and retail	118	15%	37%
Finance, ins, real estate	24	3%	23%
Professional	89	11%	40%
Education	23	3%	12%
Health and social service	84	11%	29%
Arts/entertainment/recreation	102	13%	48%
Other services	67	9%	52%
Other industries	29	4%	19%
<i>Total employed</i>	790	100%	35%
<b>Citizenship</b>			
<i>Citizenship status</i>			
US Citizen	788	54%	19%
Noncitizen	661	46%	62%
<i>Family citizenship status</i>			
All US citizens	611	42%	20%
At least one noncitizen in the family	838	58%	40%
<i>English proficiency (age 19–64)</i>			
Speaks very well or better	1,020	81%	35%
Does not speak very well or less proficient	238	19%	57%
Total	1,258	100%	37%
<i>Language spoken at home</i>			
English	262	18%	18%
Spanish	1,114	77%	36%
Other	73	5%	10%
<b>Health insurance eligibility and coverage</b>			
<i>Program eligibility</i>			
Eligible for Medicaid/CHIP	212	15%	12%
Eligible for Marketplace PTCs	180	12%	33%
Not currently eligible	1,057	73%	36%
Would gain Medicaid eligibility if Texas expands Medicaid	355	24%	46%
Would be ineligible even with Medicaid expansion	702	48%	32%
<i>Mixed coverage scenarios</i>			
All family members uninsured	884	61%	100%
At least one family member is enrolled in private coverage, nongroup or employer	29	2%	2%
At least one family member enrolled in public insurance	536	37%	21%
At least one child enrolled in Medicaid, and at least one adult is eligible for Marketplace PTCs, but not enrolled	31	2%	
At least one child enrolled in Medicaid, and at least one adult is eligible for Medicaid, but not enrolled	123	9%	
<b>Total</b>	1,449	100%	28%

Source: Urban Institute analysis, HIPSM 2018.

Notes: CHIP = the Children's Health Insurance Program; PTCs = premium tax credits; SNAP = the Supplemental Nutrition Assistance Program. Cells with sample size smaller than 100 are not shown. Small firms are defined as employers with fewer than 50 employees. Data include residents age 64 and younger.

TABLE 6

**Characteristics of the Nonelderly Uninsured in Texas Localities  
in the Majority-Hispanic, Low-Income Group, 2018**

	Thousands of people	Share of state total uninsured	Uninsurance rate
<b>Socioeconomic characteristics</b>			
<i>Family modified adjusted gross income as a percentage of FPL</i>			
<138%	812	59%	29%
138%–200%	203	15%	25%
200%–300%	208	15%	22%
300%–400%	86	6%	13%
>400%	77	6%	5%
<i>Age</i>			
0–18	199	14%	9%
19–34	590	43%	34%
35–54	474	34%	25%
55–64	122	9%	14%
<i>Sex</i>			
Male	728	53%	22%
Female	658	47%	20%
<i>Race and ethnicity</i>			
White, non-Hispanic	282	20%	13%
Black, non-Hispanic	115	8%	16%
Hispanic	906	65%	28%
Asians/Pacific Islanders	52	4%	19%
American Indian/Alaska Native	19	1%	18%
Other, non-Hispanic	11	1%	14%
<i>Education (age 19–64)</i>			
Less than high school	385	32%	48%
High school	478	40%	29%
Some college	223	19%	20%
College graduate	100	8%	10%
Total	1,186	100%	26%
<i>Health status</i>			
Excellent	330	24%	18%
Very good	399	29%	20%
Good	450	33%	22%
Fair	160	12%	25%
Poor	46	3%	20%
<i>Family type (age 19–64)</i>			
Single without dependents	510	43%	31%
Single with dependents	192	16%	34%
Couple without dependents	167	14%	16%
Couple with dependents	317	27%	25%
Total	1,186	100%	26%
<i>Family receiving other benefits</i>			
SNAP	370	27%	25%
Not receiving SNAP	1,016	73%	10%
<b>Employment</b>			
<i>Family work status</i>			
No worker in family	415	30%	31%
Only part-time worker in family	147	11%	31%
At least one full-time worker in family	823	59%	17%
<i>Family firm size</i>			
No worker in family	415	30%	31%
Only small-firm workers in family	374	27%	32%
At least one large-firm worker in family	596	43%	14%

	Thousands of people	Share of state total uninsured	Uninsurance rate
<i>Major Industry (employed age 19–64)</i>			
Agriculture	14	2%	37%
Mining	13	2%	13%
Manufacturing	59	7%	18%
Construction	143	18%	47%
Transportation	31	4%	22%
Wholesale and retail	115	14%	25%
Finance, ins, real estate	26	3%	13%
Professional	90	11%	25%
Education	24	3%	9%
Health and social service	66	8%	18%
Arts/entertainment/recreation	128	16%	41%
Other services	63	8%	35%
Other industries	29	4%	13%
<i>Total employed</i>	801	100%	24%
<b>Citizenship</b>			
<i>Citizenship status</i>			
US Citizen	873	63%	15%
Noncitizen	513	37%	57%
<i>Family citizenship status</i>			
All US citizens	758	55%	15%
At least one noncitizen in the family	627	45%	38%
<i>English proficiency (age 19–64)</i>			
Speaks very well or better	997	84%	24%
Does not speak very well or less proficient	189	16%	56%
Total	1,186	100%	26%
<i>Language spoken at home</i>			
English	506	36%	14%
Spanish	772	56%	35%
Other	107	8%	12%
<b>Health insurance eligibility and coverage</b>			
<i>Program eligibility</i>			
Eligible for Medicaid/CHIP	198	14%	12%
Eligible for Marketplace PTCs	231	17%	31%
Not currently eligible	957	69%	22%
Would gain Medicaid eligibility if Texas expands Medicaid	326	24%	38%
Would be ineligible even with Medicaid expansion	631	46%	19%
<i>Mixed coverage scenarios</i>			
All family members uninsured	918	66%	100%
At least one family member is enrolled in private coverage, nongroup or employer	45	3%	1%
At least one family member enrolled in public insurance	423	31%	17%
At least one child enrolled in Medicaid, and at least one adult is eligible for Marketplace PTCs, but not enrolled	33	2%	
At least one child enrolled in Medicaid, and at least one adult is eligible for Medicaid, but not enrolled	95	7%	
<b>Total</b>	1,386	100%	21%

Source: Urban Institute analysis, HIPSMS 2018.

Notes: CHIP = the Children's Health Insurance Program; PTCs = premium tax credits; SNAP = the Supplemental Nutrition Assistance Program. Cells with sample size smaller than 100 are not shown. Small firms are defined as employers with fewer than 50 employees. Data include residents age 64 and younger.

TABLE 7

**Characteristics of the Nonelderly Uninsured in the Texas Localities  
in the Plurality of a Race or Ethnicity, Low-Income Group, 2018**

	Thousands of people	Share of state total uninsured	Uninsurance rate
<b>Socioeconomic characteristics</b>			
<i>Family modified adjusted gross income as a percentage of FPL</i>			
<138%	196	58%	27%
138%–200%	44	13%	21%
200%–300%	51	15%	18%
300%–400%	25	7%	11%
>400%	23	7%	3%
<i>Age</i>			
0–18	42	13%	7%
19–34	141	42%	27%
35–54	122	36%	18%
55–64	33	10%	11%
<i>Sex</i>			
Male	173	51%	17%
Female	165	49%	15%
<i>Race and ethnicity</i>			
White, non-Hispanic	90	27%	11%
Black, non-Hispanic	72	21%	14%
Hispanic	132	39%	25%
Asians/Pacific Islanders	34	10%	15%
American Indian/Alaska Native	5	2%	22%
Other, non-Hispanic	4	1%	11%
<i>Education (age 19–64)</i>			
Less than high school	68	23%	46%
High school	114	38%	25%
Some college	72	24%	18%
College graduate	42	14%	9%
Total	296	100%	20%
<i>Health status</i>			
Excellent	79	23%	13%
Very good	103	30%	16%
Good	108	32%	17%
Fair	38	11%	21%
Poor	12	4%	20%
<i>Family type (age 19–64)</i>			
Single without dependents	136	46%	26%
Single with dependents	42	14%	27%
Couple without dependents	44	15%	12%
Couple with dependents	73	25%	16%
Total	296	100%	20%
<i>Family receiving other benefits</i>			
SNAP	78	23%	23%
Not receiving SNAP	260	77%	8%
<b>Employment</b>			
<i>Family work status</i>			
No worker in family	113	33%	30%
Only part-time worker in family	38	11%	29%
At least one full-time worker in family	188	56%	12%
<i>Family firm size</i>			
No worker in family	113	33%	30%
Only small-firm workers in family	89	26%	27%
At least one large-firm worker in family	137	40%	10%

	Thousands of people	Share of state total uninsured	Uninsurance rate
<i>Major Industry (employed age 19–64)</i>			
Agriculture	1	0%	26%
Mining	1	0%	4%
Manufacturing	12	6%	11%
Construction	24	13%	36%
Transportation	9	5%	16%
Wholesale and retail	34	18%	21%
Finance, ins, real estate	8	4%	9%
Professional	23	12%	17%
Education	9	5%	8%
Health and social service	17	9%	13%
Arts/entertainment/recreation	33	17%	35%
Other services	15	8%	28%
Other industries	5	3%	7%
<i>Total employed</i>	192	100%	17%
<b>Citizenship</b>			
<i>Citizenship status</i>			
US Citizen	234	69%	12%
Noncitizen	105	31%	43%
<i>Family citizenship status</i>			
All US citizens	210	62%	12%
At least one noncitizen in the family	128	38%	31%
<i>English proficiency (age 19–64)</i>			
Speaks very well or better	260	88%	18%
Does not speak very well or less proficient	36	12%	51%
Total	296	100%	20%
<i>Language spoken at home</i>			
English	169	50%	13%
Spanish	118	35%	31%
Chinese	4	1%	12%
Vietnamese	9	3%	22%
Other	40	12%	11%
<b>Health insurance eligibility and coverage</b>			
<i>Program eligibility</i>			
Eligible for Medicaid/CHIP	49	14%	11%
Eligible for Marketplace PTCs	66	19%	30%
Not currently eligible	224	66%	15%
Would gain Medicaid eligibility if Texas expands Medicaid	87	26%	35%
Would be ineligible even with Medicaid expansion	137	40%	11%
<i>Mixed coverage scenarios</i>			
All family members uninsured	228	67%	100%
At least one family member is enrolled in private coverage, nongroup or employer	13	4%	1%
At least one family member enrolled in public insurance	97	29%	16%
At least one child enrolled in Medicaid, and at least one adult is eligible for Marketplace PTCs, but not enrolled	7	2%	
At least one child enrolled in Medicaid, and at least one adult is eligible for Medicaid, but not enrolled	25	7%	
<b>Total</b>	338	100%	16%

Source: Urban Institute analysis, HIPSM 2018.

Notes: CHIP = the Children's Health Insurance Program; PTCs = premium tax credits; SNAP = the Supplemental Nutrition Assistance Program. Cells with sample size smaller than 100 are not shown. Small firms are defined as employers with fewer than 50 employees. Data include residents age 64 and younger.

TABLE 8

**Characteristics of the Nonelderly Uninsured in Texas Localities  
in the Plurality of a Race or Ethnicity, Medium-Income Group, 2018**

	Thousands of people	Share of state total uninsured	Uninsurance rate
<b>Socioeconomic characteristics</b>			
<i>Family modified adjusted gross income as a percentage of FPL</i>			
<138%	428	54%	25%
138%–200%	97	12%	19%
200%–300%	140	18%	19%
300%–400%	67	9%	11%
>400%	58	7%	3%
<i>Age</i>			
0–18	110	14%	6%
19–34	342	43%	25%
35–54	267	34%	16%
55–64	71	9%	10%
<i>Sex</i>			
Male	405	51%	15%
Female	385	49%	14%
<i>Race and ethnicity</i>			
White, non-Hispanic	263	33%	10%
Black, non-Hispanic	84	11%	14%
Hispanic	377	48%	22%
Asians/Pacific Islanders	43	5%	13%
American Indian/Alaska Native	12	2%	17%
Other, non-Hispanic	11	1%	11%
<i>Education (age 19–64)</i>			
Less than high school	145	21%	44%
High school	261	38%	23%
Some college	174	26%	16%
College graduate	101	15%	8%
Total	680	100%	18%
<i>Health status</i>			
Excellent	189	24%	12%
Very good	232	29%	14%
Good	258	33%	16%
Fair	85	11%	20%
Poor	26	3%	17%
<i>Family type (age 19–64)</i>			
Single without dependents	321	47%	25%
Single with dependents	103	15%	27%
Couple without dependents	92	14%	10%
Couple with dependents	164	24%	14%
Total	680	100%	18%
<i>Family receiving other benefits</i>			
SNAP	154	19%	21%
Not receiving SNAP	636	81%	10%
<b>Employment</b>			
<i>Family work status</i>			
No worker in family	259	33%	28%
Only part-time worker in family	88	11%	26%
At least one full-time worker in family	442	56%	11%
<i>Family firm size</i>			
No worker in family	259	33%	28%
Only small-firm workers in family	191	24%	24%
At least one large-firm worker in family	340	43%	9%



	Thousands of people	Share of state total uninsured	Uninsurance rate
<i>Major Industry (employed age 19–64)</i>			
Agriculture	6	1%	38%
Mining	6	1%	8%
Manufacturing	30	6%	11%
Construction	48	10%	28%
Transportation	15	3%	14%
Wholesale and retail	73	16%	18%
Finance, ins, real estate	19	4%	9%
Professional	55	12%	17%
Education	20	4%	7%
Health and social service	47	10%	14%
Arts/entertainment/recreation	83	18%	33%
Other services	38	8%	28%
Other industries	21	5%	10%
<i>Total employed</i>	462	100%	17%
<b>Citizenship</b>			
<i>Citizenship status</i>			
US Citizen	577	73%	12%
Noncitizen	213	27%	44%
<i>Family citizenship status</i>			
All US citizens	525	66%	11%
At least one noncitizen in the family	265	34%	31%
<i>English proficiency (age 19–64)</i>			
Speaks very well or better	602	89%	17%
Does not speak very well or less proficient	78	11%	53%
Total	680	100%	18%
<i>Language spoken at home</i>			
English	404	51%	11%
Spanish	307	39%	29%
Other	79	10%	10%
<b>Health insurance eligibility and coverage</b>			
<i>Program eligibility</i>			
Eligible for Medicaid/CHIP	107	14%	10%
Eligible for Marketplace PTCs	171	22%	30%
Not currently eligible	512	65%	13%
Would gain Medicaid eligibility if Texas expands Medicaid	194	25%	31%
Would be ineligible even with Medicaid expansion	318	40%	10%
<i>Mixed coverage scenarios</i>			
All family members uninsured	550	70%	100%
At least one family member is enrolled in private coverage, nongroup or employer	33	4%	1%
At least one family member enrolled in public insurance	207	26%	15%
At least one child enrolled in Medicaid, and at least one adult is eligible for Marketplace PTCs, but not enrolled	21	3%	
At least one child enrolled in Medicaid, and at least one adult is eligible for Medicaid, but not enrolled	50	6%	
<b>Total</b>	790	100%	15%

Source: Urban Institute analysis, HIPSMS 2018.

Notes: CHIP = the Children's Health Insurance Program; PTCs = premium tax credits; SNAP = the Supplemental Nutrition Assistance Program. Cells with sample size smaller than 100 are not shown. Small firms are defined as employers with fewer than 50 employees. Data include residents age 64 and younger.

The remaining local areas with a plurality of a race or ethnicity form the *plurality of race or ethnicity, medium-income* cluster (table 8). This cluster is larger and more widely geographically distributed than the plurality of race or ethnicity, low-income cluster. The local areas in this cluster include 17 percent of the state's uninsured population and is found in the Houston-Galveston, Dallas-Fort Worth, and San Antonio areas, along with other areas in central and eastern Texas. About 54 percent of the uninsured in this cluster have incomes below 138 percent of FPL. More than 80 percent of the uninsured in this cluster are white, non-Hispanic or Hispanic (33 and 48 percent, respectively).

## Discussion

At 19 percent of the population below age 65, Texas has the highest uninsurance rate in the country. However, the rate of uninsurance and the characteristics of the Texas uninsured population varies tremendously across the state. Thirty-one percent of the uninsured in Texas live in a group of local areas that have uninsurance rates near 30 percent, and 2 percent of the uninsured live in a group of areas with uninsurance rates around 10 percent. To design successful policy strategies for increasing coverage, the characteristics of the state's uninsured and the variation across geographic areas of the state must be considered. We highlight some of our central findings here along with their implications of policy initiatives.

**Medicaid and CHIP.** The uninsurance rate for children in Texas is less than one-third the rate for nonelderly adults (8 percent versus 25 percent). This difference is primarily because of the broader eligibility for public programs for the state's children. Texan children in families with incomes up to 206 percent of FPL are eligible for Medicaid or CHIP. However, the state has thus far decided not to expand Medicaid eligibility for adults up to 138 percent of FPL. Consequently, only 15 percent of the state's uninsured population are currently eligible for public insurance. If the state were to expand Medicaid eligibility to adults with incomes up to 138 percent of FPL, 1.2 million uninsured people currently ineligible for assistance would gain Medicaid eligibility. This assumes that, consistent with current Texas policy, legal immigrant noncitizens would not be eligible. Uninsured people in the majority-white, low-income cluster would gain the most from Medicaid expansion; 30 percent of the uninsured in these areas would gain Medicaid eligibility, making about 70 percent of all uninsured in those localities eligible for Medicaid, CHIP, or Marketplace premium tax credits.

**Citizenship.** Statewide, nearly 60 percent of the uninsured are in families consisting entirely of US citizens. However, 31 percent of the uninsured live in a group of local areas where a majority of the uninsured are in families with at least one noncitizen. The recent proposal to modify the federal public charge rule could exacerbate the uninsurance rate among both citizens and noncitizens in mixed-citizenship families because of fears that enrolling in insurance coverage that provides financial assistance could negatively affect at least some family members' ability to obtain citizenship. This report focuses on those currently uninsured, so we did not estimate the impact this might have on those already enrolled.

**Employment.** Two-thirds of the uninsured are members of working families and most (55 percent) are in families that include at least one adult who is a full-time worker. Families in which the adults work only part time have nearly the same uninsurance rate as families with no one in the work force. Part-time work is not generally a path to independent health coverage. Similarly, families whose workers are only employed in small firms have nearly the same high uninsurance rate as families with no one in the work force. Consequently, outreach strategies that involve employers and are focused on assisting workers and their family members to enroll in public programs and Marketplace coverage could reach a large number of uninsured Texans. This approach would be particularly useful when directed at small firms and those employing large numbers of part-time workers.

**SNAP receipt.** Twenty-eight percent of the Texas uninsured report receiving SNAP benefits. This is likely an underestimate because SNAP benefit receipt is underreported in household surveys. Nine states have Medicaid waivers allowing them to automatically determine the Medicaid eligibility of SNAP recipients and enroll them in Medicaid if they are deemed eligible. If Texas were to expand Medicaid, virtually all of the 1.3 million people currently uninsured and receiving SNAP benefits would be eligible for Medicaid and could be enrolled automatically through such a waiver. Still, several of the states with such waivers have not yet expanded Medicaid; most of these use their waivers to enroll more children in Medicaid and CHIP. This is a strategy Texas could put in place even without expanding Medicaid eligibility.

**Educational attainment.** Seventy percent of the state's uninsured population has a high school education or less. This has important implications for designing effective outreach and enrollment efforts, particularly under expanded eligibility for public insurance. Language in outreach and enrollment materials must be targeted to an audience with limited education, and in-person enrollment assistance will likely need to be widely available in the localities where most of the uninsured reside in order to be effective.

**Marketplace with premium tax credits.** Seventeen percent of the Texas uninsured are currently eligible for premium tax credits if they enroll in ACA Marketplace coverage. The uninsurance rate among those eligible for the tax credits is 31 percent in the state, compared with 20 percent nationwide. With additional investments in Marketplace outreach and enrollment assistance, the uninsurance rate within this eligible group can be reduced.

**Racial and ethnic diversity across geographic areas.** There are substantial geographic differences in the racial and ethnic composition of the Texas uninsured and in the language spoken at home. Statewide, 60 percent of the uninsured are Hispanic. However, 15 percent of the uninsured live in a group of local areas where most of the uninsured residents are non-Hispanic white. Another 31 percent live in a group of local areas where more than 80 percent of the uninsured are Hispanic, and nearly a quarter of the uninsured live in a group of local areas where no racial or ethnic group forms a majority of the uninsured.

Racial and ethnic diversity among the uninsured leads to corresponding differences in language spoken at home, although a large majority of the uninsured in all localities report speaking English very well or better. Cultural and language differences have significant implications for the design of effective outreach and enrollment assistance in coverage expansion efforts. The widespread availability of

materials in Spanish and a large number of Spanish-speaking in-person assisters and call center personnel are likely to be critical, even with high English proficiency among many of the uninsured. In addition, recruitment of members of the communities' racial or ethnic groups for outreach work is likely to be instrumental in increasing enrollment for those eligible for particular insurance programs.

Texas is a state with significant challenges in reducing the number of uninsured because of its size, racial and ethnic diversity, and large number of noncitizen residents. The characteristics of its local areas vary considerably economically as well. However, with the highest percentage of uninsured residents in the country, there remains considerable room for improvement. In the near term, substantial strides in increasing coverage and improving affordable access to care can be made by expanding eligibility for Medicaid and additional investments in outreach and enrollment assistance for public insurance programs and Marketplace-based insurance coverage. Without policy changes, however, the number and share of uninsured Texans will likely increase with time as rising health care costs continue to increase, making coverage less affordable for low- and middle-income residents, in turn putting more financial pressure on state government and health care providers.

## Notes

- <sup>1</sup> Three analyses estimated detailed changes in insurance coverage in Texas between 2013 and 2016 using an expanded representative of Texas residents in the Urban Institute's Health Reform Monitoring Survey (Marks, Ho, and Sim 2016a, 2016b, 2016c).
- <sup>2</sup> "Medicaid and CHIP Income Eligibility Limits for Children as a Percent of the Federal Poverty Level," Kaiser Family Foundation, accessed December 4, 2018, <https://www.kff.org/health-reform/state-indicator/medicaid-and-chip-income-eligibility-limits-for-children-as-a-percent-of-the-federal-poverty-level/>.
- <sup>3</sup> Bradley Sawyer and Nolan Sroczynski, "How Do Health Expenditures Vary across the Population?" Kaiser Family Foundation, December 1, 2017.

## References

- Haley, Jennifer M., Genevieve M. Kenney, Robin Wang, Clare Wang Pan, Victoria Lynch, and Matthew Buettgens. 2018. *Uninsurance and Medicaid/CHIP Participation among Children and Parents: Variation in 2016 and Recent Trends*. Washington, DC: Urban Institute.
- Marks, Elena, Vivian Ho, and Shao-Chee Sim. 2016a. "The Impact of the Affordable Care Act on Adult Hispanics in Texas." Issue brief 22. Houston: Episcopal Health Foundation.
- . 2016b. "Changes in Rates and Characteristics of the Uninsured among Texans Ages 18–64 from 2013 to 2016." Issue brief 21. Houston: Episcopal Health Foundation.
- . 2016c. "The Experience of Texas Young Invincibles 2013–2016." Issue brief 23. Houston: Episcopal Health Foundation.
- Skopec, Laura, John Holahan, and Caroline Elmendorf. 2018. *Changes in Health Insurance Coverage 2013–2016: Medicaid Expansion States Lead the Way*. Washington, DC: Urban Institute.
- Stevens, Kathryn, Liana E. Fox, and Misty L. Heggeness. 2018. "Precision in Measurement: Using State-Level SNAP Administrative Records and the Transfer Income Model (TRIM3) to Evaluate Poverty Measurement." Working paper 2018-15. Washington, DC: US Census Bureau; Center for Economic Studies; Social, Economic, & Housing Statistics Division.

## About the Authors



**Matthew Buettgens** is a senior fellow in the Health Policy Center at the Urban Institute, where he is the mathematician leading the development of Urban’s Health Insurance Policy Simulation Model (HIPSM). The model is currently being used to provide technical assistance for health reform implementation in Massachusetts, Missouri, New York, Virginia, and Washington as well as to the federal government. His recent work includes a number of research papers analyzing various aspects of national health insurance reform, both nationally and state-by-state. Research topics have included the costs and coverage implications of Medicaid expansion for both federal and state governments; small firm self-insurance under the Affordable Care Act and its effect on the fully insured market; state-by-state analysis of changes in health insurance coverage and the remaining uninsured; the effect of reform on employers; the affordability of coverage under health insurance exchanges; and the implications of age rating for the affordability of coverage. Buettgens was previously a major developer of the Health Insurance Reform Simulation Model—the predecessor to HIPSM—used in the design of the 2006 Roadmap to Universal Health Insurance Coverage in Massachusetts.



**Linda J. Blumberg** is an Institute fellow in the Health Policy Center. She is an expert on private health insurance (employer and nongroup), health care financing, and health system reform. Her recent work includes extensive research related to the Affordable Care Act (ACA); in particular, providing technical assistance to states, tracking policy decisionmaking and implementation at the state and federal levels, and interpreting and analyzing the implications of particular policies. Examples of her work include analyses of the implications of congressional proposals to repeal and replace the ACA, delineation of strategies to fix problems associated with the ACA, estimation of the cost and coverage potential of high-risk pools, analysis of the implications of the *King v. Burwell* case, and several studies of competition in ACA Marketplaces. In addition, Blumberg led the quantitative analysis supporting the development of a “Roadmap to Universal Coverage” in Massachusetts, a project with her Urban colleagues that informed that state’s comprehensive health reforms in 2006. Blumberg received her PhD in economics from the University of Michigan.



**Clare Pan** is a research analyst in the Health Policy Center, where she works primarily on the Health Insurance Policy Simulation Model. Pan holds a master of public policy from the McCourt School of Public Policy at Georgetown University.

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2100 M Street NW  
Washington, DC 20037

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