March 2013

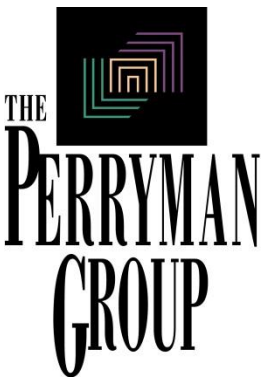
Toward a "Texas Solution"

Texas Should Provide Insurance Coverage for the Expanded Medicaid Population Under the Affordable Care Act:

Effects of Implementing a Representative Market-Based, Private Exchange Option for Newly Eligible Recipients

Provided as a Public Service by

THE PERRYMAN GROUP



510 N. Valley Mills Dr., Suite 300

Waco, TX 76710

ph. 254.751.9595, fax 254.751.7855

info@perrymangroup.com

www.perrymangroup.com

Toward a "Texas Solution":

Texas Should Provide Insurance Coverage for the Expanded Medicaid Population Under the Affordable Care Act

Contents

Introduction and Overview

The Dilemma Facing Texas

- **Following the ruling of the Supreme Court regarding its constitutionality, States can decide whether to provide coverage to the expanded Medicaid population provided under the Affordable Care Act** (ACA). Following this decision, Texas Governor Rick Perry and numerous other governors indicated that their states would decline to expand coverage. Because of the generous initial and ongoing Federal matching provisions, however, many states that were reluctant to embrace the program have now announced their intention to participate.
- **While the Medicaid system and ACA are not perfect, they are key aspects of the current health care environment in which Texas must function.**
- In a recent study, **The Perryman Group (TPG) examined the economic effects of expanding Medicaid coverage in Texas under the ACA and found that the benefits are substantial;** a subsequent report provided further detail for regions, metropolitan areas, counties, and Congressional and legislative districts.[1] These reports and extensive additional research demonstrated conclusively that Texas should participate; in fact, **the State government even receives back in dynamic revenue more than its required contributions.** Despite these findings, some leaders have expressed concerns about putting more resources into Medicaid due to its current limitations.
- As various states have crafted their programs, however, **federal regulators have demonstrated flexibility** in allowing them to be tailored to specific local needs and priorities. In fact, **one potential option that has surfaced involves using Medicaid funds to buy private insurance for newly eligible persons through the private exchange that is being set up in another segment of the ACA.** As a result, considerable discussion is occurring regarding the possibility of formulating **a private, market-driven "Texas Solution" which provides health insurance availability for the newly eligible indigent population without expanding the Medicaid program.**
- The present report evaluates the economic and fiscal effects of a representative **"Texas Solution"** which incorporates elements of a market-based, private exchange approach. While the final structure would likely be somewhat different, an evaluation of this nature provides a benchmark and perspective on a viable option.

[1] The October statewide study and more recent local area analysis by The Perryman Group are available on the firm's website at www.perrymangroup.com.

From an Economic Perspective, Texas Should Provide Coverage for the Newly Medicaid-Eligible Individuals

- **Not expanding coverage given the matching levels available under the ACA involves significant economic fallout**. The Federal government pays 100% of the costs for the first three years, with matching requirement phasing in beginning in 2017 that never exceeds 10% ($1.00 in State contributions for every $9.00 in Federal resources). The most recent data indicates that Texas has by far the highest relative uninsured rate (28.8% of the under 65 population) in the US. Moreover, that gap between Texas and other states has widened to the greatest on record. The health care needs of Texans do not simply go away because individuals do not have insurance coverage. In fact, they actually compound and become worse over time. In addition, as major competing states provide coverage for the newly eligible individuals, this spread will increase dramatically, thus adversely impacting the ability of Texas to compete for new economic development (particularly in the health and biosciences arena).
- In the original study, **The Perryman Group identified three major sources of economic gains from covering the expanded Medicaid-eligible population under the ACA.** Total economic benefits were quantified over the first 10 years after implementation (2014-2023).
    - **First, health spending expands, generating gains in business activity.** The Perryman Group quantified these likely increases by evaluating the total direct and spinoff activity on a "net" basis, accounting for the fact that the State portion of the funding may displace other public or private spending and associated multiplier effects.[2]
    - **Second, uncompensated care is reduced, freeing up private funds to be used for other purposes.** The cost of uncompensated care is currently borne by local governments (and, thus, local taxpayers) and privately insured persons (through higher premiums). Reducing uncompensated care would thus leave more resources in the hands of the private sector (both individuals and companies) to be used in other ways.

[2] Following the completion of the prior reports, former Deputy Comptroller and Chief Revenue Estimator Billy Hamilton, a noted expert on the State budget, identified numerous programs that are currently funded to some extent by the State that could potentially transfer primarily or entirely to the Federal government. Under these conditions, most or all of the required matching funds could be offset by the resulting savings. Because the status of these programs in future years is unknown, however, these savings were not included in the current analysis.

- **Third, having health insurance increases productivity.** When individuals lack health insurance and their access to care is constrained, empirical evidence indicates they have worse health care outcomes and, hence, reduced labor force participation, higher absenteeism, and lower productivity.

A "Texas Solution" Using the Market-Based, Private Insurance Exchange Option for Newly Eligible Persons Could Enhance Health Care Outcomes as Well as Economic Benefits

- **Recently, the federal government has indicated that utilizing Medicaid funds to purchase private insurance for newly eligible individuals could potentially be permissible, thus opening up another set of possible frameworks for states.** While the newly eligible group is not specifically included in the exchange in the ACA, there is legal and historical precedent from provisions of the Social Security Act that have been used in the past as a rationale for using Medicaid funds to purchase private insurance policies for eligible individuals.
- Given these considerations, TPG prepared and analyzed a representative potential "Texas Solution" as outlined below.
  - For the current Medicaid-eligible population, the Texas Health and Human Services Commission (HHSC) has estimated substantial new enrollment over the next few years in response to the mandate in the ACA. These individuals will be a part of the existing program irrespective of whether Texas adopts expanded coverage for those newly eligible. This group merely opts to participate in a plan for which they already qualify. Thus, it is assumed that the increased participation among these individuals will be a part of the current Medicaid system (this assumption has been consistently adopted by HHSC in their planning for the ACA).
  - For the newly eligible group (primarily adults without children with incomes below 133% of the Federal Poverty Level as well as a broader group of indigent parents and aged and disabled individuals), the Medicaid funds will be used to purchase private insurance policies on a market-based exchange.
  - The Perryman Group examined the overall effects of all of the new enrollees and performed a separate analysis of the exchange segment only (which is optional and much more advantageous from an economic and fiscal perspective).
- **A private exchange option offers a number of advantages.**
  - **Newly eligible recipients would have regular private insurance policies rather than Medicaid.** Because private insurance sometimes involves coverage better able to meet individual needs than Medicaid, improved health outcomes would likely result. This incremental benefit of the private market over traditional Medicaid coverage results in both greater uncompensated care reductions and higher productivity benefits than those measured in the prior study. The economic

gains are quantified herein using research sponsored by the Kaiser Family Foundation.

- According to the Center for Budget Policy Priorities, annual health care spending is somewhat higher with private coverage, thus bringing expanded business activity in that category as well.
- **Health care providers are reimbursed at private sector rates which are above those available through Medicaid.** Because of this more favorable situation, doctors and other health care professionals would be more likely to see the new patients, this alleviating potential capacity issues (only about 30% of physicians presently accept new Medicaid patients).
- **While the costs are somewhat higher for private coverage, the Federal government will likely make up most or all of the added costs over time** through (1) the reduction in costs from only administering a single program and eliminating the "churning" that would occur as individuals fluctuated between Medicaid and exchange eligibility; (2) the savings as better outcomes are achieved and long-term health costs decline; and (3) the direct and secondary effects of lower payments for other programs and higher tax collections associated with improved productivity. **Although the State matching amount also rises moderately relative to that of traditional Medicaid beginning in the fourth year of implementation, this amount is approximately offset by the reduced administrative costs from operating the program through private insurers on an exchange operated by the Federal government (according to budget estimates from HHSC).**[3]
- **Such an exchange is truly a private-market solution where competition among insurance providers will stimulate innovation and cost reduction measures and is not subject to the flaws of the Medicaid program.**

[3] As noted above, additional savings may be attainable through the transfer of funding for existing programs to the Federal government.

Measuring Economic Impacts

Any economic stimulus (such as direct spending, investments, or corporate activity) generates multiplier effects throughout the economy. In this instance, economic benefits of increased coverage for low-income individuals under the ACA include increased health-related spending, additional private outlays associated with reducing uncompensated care, and higher productivity stemming from better health outcomes. (These channels of benefits were briefly described above.) Once the direct stimulus was quantified, the associated multiplier effects were measured. All findings are given on a "net" basis to reflect the effects on the offsetting requirements for additional State contributions.

The Perryman Group's input-output assessment model (the US Multi-Regional Impact System, which is described in further detail in the Appendices to this report) was developed by The Perryman Group some 30 years ago and has been consistently maintained and updated since that time; it has been used in hundreds of analyses for clients ranging from major corporations to government agencies. The system uses a variety of data (from surveys, industry information, and other sources) to describe the various goods and services (known as resources or inputs) required to produce another good/service. This process allows for estimation of the total economic impact (including multiplier effects) of expanding Medicaid participation under the ACA and providing coverage for newly eligible individuals on the private exchange. An associated fiscal model allows for estimation of tax receipts to state and local entities. The submodels used in the current analysis reflect the specific industrial composition and characteristics of the Texas economy and its various counties, metropolitan areas, regions, and legislative districts.

These total economic effects are quantified for key measures of business activity:

- **Total expenditures** (or total spending) measure the dollars changing hands as a result of the economic stimulus.
- **Gross product** (or output) is production of goods and services that will come about in each area as a result of the activity. This measure is parallel to the gross domestic product numbers commonly reported by various media outlets and is a subset of total expenditures.
- **Personal income** is dollars that end up in the hands of people in the area; the vast majority of this aggregate derives from the earnings of employees, but payments such as interest and rents are also included.
- **Job gains** are expressed as (1) person-years of employment (one person working for one year) for temporary projects (such as construction of a facility) or cumulative assessments over time or (2) permanent jobs when evaluating ongoing annual effects.

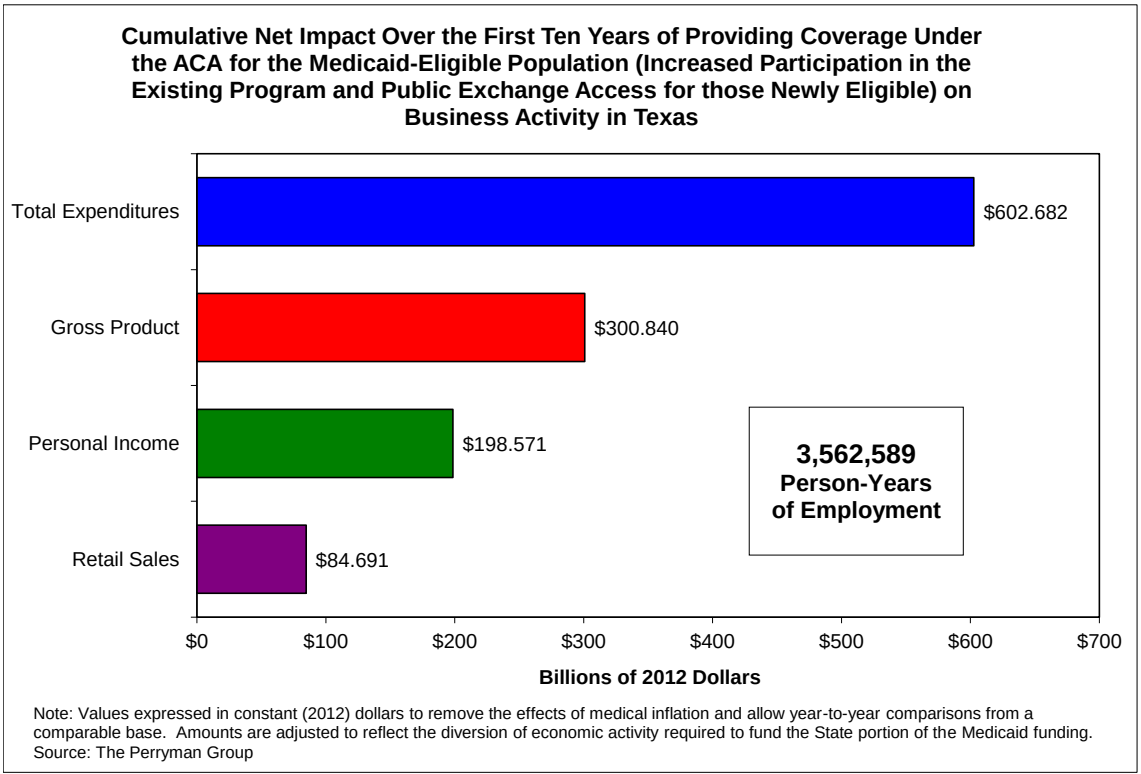
Dynamic State and local government revenue reflect tax receipts stemming from the increase in total economic activity. Monetary values were quantified on a constant (2012) basis, which eliminates inflationary effects and allows comparison across various time periods. See the Appendices to this report for additional information regarding the methods and assumptions used in this analysis.

Although Better Options Are Now Available, the Effect of Expanding Traditional Medicaid under ACA is Clearly Positive for Texas

- As noted, The Perryman Group previously studied the potential benefits of traditional Medicaid expansion in a prior study.
    - Adjusting for the potential diversion of State spending, **total cumulative net benefits to the state during the first 10 years after implementation include $255.8 billion (in 2012 dollars) in output (real gross product) and 3,031,400 person-years of employment**.
    - **Expanding Medicaid under the ACA leads to expansion in business activity in all major industry groups** including, among others, manufacturing, agriculture, business services, financial services, mineral extraction, hospitality, and information.
    - **The Perryman Group's prior analysis indicates that every $1 spent by the State returns $1.29 in dynamic State government revenue over the first 10 years of Medicaid expansion under the ACA.** In other words, the State actually earns a significant positive return from participating in the Medicaid expansion.

Economic Benefits under a Representative Private Insurance Exchange Option or "Texas Solution" for Persons Newly Eligible for Medicaid are Substantial

- Utilizing the Federal funds designated for Medicaid expansion under the ACA to provide private insurance coverage for the newly Medicaid-eligible population would **increase the economic benefits to the state by both decreasing the administrative costs to the state and increasing the potential gains**.
- The Perryman Group found that during the first 10 years after implementation, the **total cumulative net benefits to the state economy** from both higher enrollment in the existing Medicaid program and the use of the private exchange for the newly eligible population include $300.8 billion (in 2012 dollars) in output (real gross product) and 3,562,589 person-years of employment.



Note: Values expressed in constant (2012) dollars to remove the effects of medical inflation and allow year-to-year comparisons from a comparable base. Amounts are adjusted to reflect the diversion of economic activity required to fund the State portion of the Medicaid funding.
Source: The Perryman Group

Returns on the State's Investment are Greater with the Private Exchange Option

- Total benefits of expanded Medicaid enrollment among the currently eligible population and purchasing coverage on the private insurance exchange option for the newly qualified group include the return of **$1.60 in dynamic fiscal revenue for every $1 of State funds expended for the program. In other words, this option is about 24% more efficient in the use of public resources than the traditional Medicaid approach.**
- Segmenting out **the returns on the discretionary aspect of the program (which allows newly eligible persons to acquire private insurance through an exchange) indicates that every $1 of State funds utilized in this way yields $2.56 in dynamic State revenues.** This finding and those summarized in the **table below illustrate the enormous benefits associated with the use of such a market-based approach, which is well in excess of those attainable through the traditional Medicaid mechanism.**

Return on State Investment with a Private Exchange:

NET ECONOMIC IMPACT OF EACH ADDITIONAL DOLLAR OF DIRECT STATE GOVERNMENT EXPENDITURES USED TO PROVIDE ADDITIONAL INSURANCE COVERAGE FOR THE MEDICAID-ELIGIBLE POPULATION UNDER THE AFFORDABLE CARE ACT: 2014-2023

	TOTAL: OVERALL RETURN (Including Expanded Medicaid Usage by Currently Eligible Population)	**BREAKOUT: RETURN ON NEWLY ELIGIBLE PERSONS ACQUIRING COVERAGE ON THE PRIVATE EXCHANGE ONLY**
Total Expenditures* in Texas	**$59.61**	**$95.61**
Gross State Product*	**$29.76**	**$47.92**
Personal Income* in Texas	**$19.64**	**$31.73**
Retail Sales in Texas	**$8.38**	**$13.42**
Federal Medicaid Funding in Texas	**$8.26**	**$14.44**
Reduced Local Taxes for Uncompensated Care	**($1.67)**	**($2.31)**
Reduced Insurance Premiums for Uncompensated Care	**($0.42)**	**($0.58)**
Increased Dynamic* State Government Revenue	**$1.60**	**$2.56**
Increased Dynamic* Local Government Revenue	**$0.81**	**$1.31**
Income for Previously Uninsured Population	**$2.11**	**$2.92**

***For definitions of these measures of business activity and terms, as well as an overview of methods used, see page 5.**
SOURCE: The Perryman Group

Future Texas Prosperity and Economic Development also Affected by High Levels of Uninsured

- **In addition to the clear economic benefits described above, high rates of uninsured or underinsured individuals can have a detrimental effect on future economic development.** Significant erosion of the state's overall health care outcomes relative to other competing areas that are implementing expanded coverage makes Texas less attractive as a site for certain types of new locations. Texas already compares poorly to other areas in certain measures, and will lose ground as other states expand their Medicaid programs. Texas

ranks near the bottom of all states in terms of spending per enrollee, for example, and is by far the highest in terms of the relative size of the uninsured population.

- **Certain industries which are desirable from an economic development standpoint are also affected by a poor environment for health care.** For example, Texas has specifically targeted the biosciences cluster with numerous initiatives designed to enhance investment and job creation and place Texas among the leading states in the next generation of medical advances. At present, the relative concentration of such industries in Texas is less than half the national average, whereas Massachusetts and California have shares more that 30% and 60%, respectively, above the national norm. Moreover, while the relative share in Texas has fallen almost 17% in the past decade, California has seen a 10% increase. If major competing states invest in expanding their provision of health care at rates well in excess of Texas, then it is economically rational for collateral investment to migrate to other areas.

Effects for Regions and Local Areas

Local Areas and Regions Experience Notable Gains Under the Representative Private Exchange Approach ("Texas Solution")

- **As noted, The Perryman Group previously examined the potential gains associated with expanding Medicaid under the ACA for Texas planning regions, Council of Governments regions, metropolitan statistical areas, and counties.** In addition, the distribution of these effects by Texas House, Texas Senate, and Congressional district was quantified.
- **With the option for newly eligible persons to acquire coverage through a private exchange and the anticipated growth in the current program, these benefits are approximately 17.5% higher than those observed in the traditional Medicaid structure.**
- **Each legislative district has a sizable stake in Medicaid expansion, which a private insurance exchange option would increase.** Over the 2014 to 2023 time period,
    - effects in Texas House districts range from $508.0 million in gross product and 6,500 person-years of employment in some rural districts to $3.8 billion and 46,000 job-years in urban areas with a notable presence of health care facilities;
    - the distribution in Texas Senate districts is $4.9 billion to $17.3 billion in output and 61,700 to 193,400 persons-years of employment; and
    - Congressional district gains in business activity are between $4.7 billion and $14.7 billion in output and from 54,600 to more than 164,800 job-years.
- The following maps indicate results for Council of Governments regions and metropolitan statistical areas.

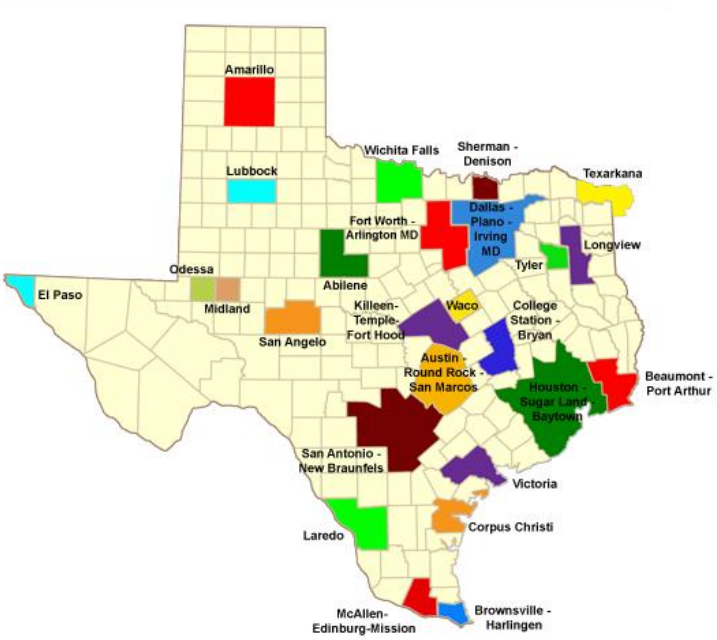
BENEFITS BY COUNCIL OF GOVERNMENTS REGION:

PROVIDING COVERAGE FOR THE MEDICAID-ELIGIBLE POPULATION INCLUDING A PRIVATE EXCHANGE OPTION FOR NEWLY ELIGIBLE ADULTS

TOTAL CUMULATIVE NET IMPACT OVER THE FIRST TEN YEARS OF PARTICIPATION IN THE MEDICAID EXPANSION PORTION OF THE ACA ON BUSINESS ACTIVITY		
	GROSS PRODUCT	EMPLOYMENT
	(Billions of 2012 Dollars)	*(Person-Years)*
Panhandle	$4.2	52,085
South Plains	$5.1	63,151
North Texas	$2.2	27,775
North Central Texas	$93.4	1,084,524
North East Texas	$3.0	38,338
East Texas	$10.1	124,989
West Central Texas	$3.2	39,535
Upper Rio Grande	$7.7	92,627
Permian Basin	$3.1	37,818
Concho Valley	$1.8	21,739
Heart of Texas	$3.4	41,873
Capital	$18.9	229,810
Brazos Valley	$2.6	33,053
Deep East Texas	$2.7	34,360
South East Texas	$4.5	56,542
Gulf Coast	$76.3	855,907
Golden Crescent	$1.8	22,789
Alamo	$27.6	336,357
South Texas	$2.1	27,151
Coastal Bend	$6.9	83,959
Lower Rio Grande Valley	$12.5	159,739
Texoma	$1.9	23,988
Central Texas	$4.8	61,159
Middle Rio Grande	$1.0	13,319
Border Region	$23.4	292,871
TOTAL STATE	**$300.8**	3,562,589
Source: The Perryman Group		

BENEFITS BY METROPOLITAN STATISTICAL AREA:

PROVIDING COVERAGE FOR THE MEDICAID-ELIGIBLE POPULATION INCLUDING A PRIVATE EXCHANGE OPTION FOR NEWLY ELIGIBLE ADULTS



TOTAL CUMULATIVE NET IMPACT OVER THE FIRST TEN YEARS OF PARTICIPATION IN THE MEDICAID EXPANSION PORTION OF THE ACA ON BUSINESS ACTIVITY		
	GROSS PRODUCT	**EMPLOYMENT**
	(Billions of 2012 Dollars)	*(Person-Years)*
Abilene	$2.3	28,173
Amarillo	$3.7	45,403
Austin-Round Rock-San Marcos	$18.2	221,444
Beaumont-Port Arthur	$4.5	56,542
Brownsville-Harlingen	$4.4	55,154
College Station-Bryan	$2.2	27,708
Corpus Christi	$5.9	71,556
Dallas-Plano-Irving MD*	$66.4	758,884
Fort Worth-Arlington MD*	$26.0	313,293
El Paso	$7.6	91,192
Houston-Sugar Land-Baytown	$75.4	844,480
Killeen-Temple-Fort Hood	$4.6	58,521
Laredo	$1.7	21,992
Longview	$2.8	35,099
Lubbock	$4.7	57,538
McAllen-Edinburg-Mission	$8.1	103,769
Midland	$1.2	14,349
Odessa	$1.3	15,881
San Angelo	$1.6	20,011
San Antonio-New Braunfels	$26.5	322,384
Sherman-Denison	$1.5	19,290
Texarkana	$1.7	21,096
Tyler	$5.0	60,976
Victoria	$1.5	18,345
Waco	$2.8	34,430
Wichita Falls	$1.9	23,523
Rural Areas	$17.4	221,556
TOTAL STATE	$300.8	3,562,589

*Metropolitan Division
Source: The Perryman Group

Conclusion

There is Only One Rational Choice for Texas

- **Neither the Affordable Care Act nor the Medicaid program is perfect, and there are many opportunities to provide needed health services in a more efficient and cost effective manner. However, the economic benefits of improving access to care far more than outweigh the costs**, and even more so when an innovative, private-sector based "Texas Solution" is implemented
- The Perryman Group found that **utilizing a portion of Medicaid funding to purchase private insurance coverage for newly eligible adults through an exchange leads to economic benefits in the state even greater than the substantial increase in business activity that would be realized through traditional Medicaid expansion under the ACA** without such an option.
- During the 2014-2023 time period, economic gains (fully adjusted for the potential diversion of State funding for other purposes) were estimated to include $300.8 billion (2012 dollars) in output (real gross product) and some 3,562,600 person-years of employment (an average of over 350,000 per year**). These gains are spread across industries and throughout the state, with thousands of jobs at stake in every legislative district.**
- **For every dollar the State spends for Medicaid expansion under the ACA with the option of a private insurance exchange for newly eligible adults, $1.60 is returned in dynamic State government revenue. For those able to take advantage of the private exchange, the return is even higher ($2.56 in dynamic State revenue per $1.00 of direct State outlays).**
- Expanding insurance coverage for the existing and newly eligible Medicaid population is an investment that improves the quality of life of many Texans, while simultaneously enhancing the economy and providing a notable positive return to the State government on the dollars expended and improving economic development prospects. **Adding an option to insure newly eligible persons with a private insurance exchange enhances the already substantial outcomes and economic benefits of expanding Medicaid under the Affordable Care Act. It is a "game changer" for the health and well-being of a sizable segment of the Texas population and an enormous catalyst for future economic prosperity.**

APPENDICES

About The Perryman Group

- The Perryman Group (TPG) is an economic research and analysis firm based in Waco, Texas. The firm has more than 30 years of experience in assessing the economic impact of corporate expansions, regulatory changes, real estate developments, public policy initiatives, and myriad other factors affecting business activity. TPG has conducted hundreds of impact analyses for local areas, regions, and states throughout the U.S. Impact studies have been performed for hundreds of clients including many of the largest corporations in the world, governmental entities at all levels, educational institutions, major health care systems, utilities, and economic development organizations.

- Dr. M. Ray Perryman, founder and President of the firm, developed the US Multi-Regional Impact Assessment System (used in this study) in the early 1980s and has consistently maintained, expanded, and updated it since that time. The model has been used in hundreds of diverse applications and has an excellent reputation for reliability. Dr. Perryman has been asked to testify before the State legislature, Congress, and other major legislative and regulatory bodies on more than one hundred occasions, including invited testimony related to public-sector funding for health insurance.

- The firm has conducted numerous investigations related to health care including previous studies of health care funding. The Perryman Group has also measured the comprehensive cost of cancer (including treatment as well as lost productivity and premature mortality) on multiple occasions. The firm is also engaged in the ongoing evaluation of the economic effects of the Cancer Prevention and Research Institute of Texas (CPRIT). In addition, the firm measured economic aspects of obesity including associated morbidity, mortality, and productivity. The Perryman Group has performed assessments of scores of major medical facilities, teaching institutions, and research programs. Representative clients include The Methodist Hospital, Parkland (on multiple occasions), Scott & White, M. D. Anderson (including a comprehensive assessment of the benefits of its research and superior outcomes), Citizens Medical Center, the University of Kansas Cancer Center (including an investigation of the benefits of achieving the status of a Comprehensive Cancer Center), the Menninger Clinic, the University of Texas Medical Branch, Baylor College of Medicine, Texas Tech University Health Science Center, Texas Health Resources, the University of Texas Health Science Center at San Antonio, Texas A&M University School of Medicine, the Texas Institute for Genomic Medicine, and others. As noted, TPG has developed numerous public policy studies related to health care issues. Representative efforts include analyses of Medicaid and Children's Health Insurance Program (CHIP) funding, wellness initiatives, more extensive use of Advanced Practice Registered Nurses, and mental health

programs. Moreover, a major study developed using the relevant model was recently published in *The Journal of Medical Economics*.

Methods Used

- The basic modeling technique employed in this study is known as dynamic input-output analysis. This methodology essentially uses extensive survey data, industry information, and a variety of corroborative source materials to create a matrix describing the various goods and services (known as resources or inputs) required to produce one unit (a dollar's worth) of output for a given sector. Once the base information is compiled, it can be mathematically simulated to generate evaluations of the magnitude of successive rounds of activity involved in the overall production process.

- There are two essential steps in conducting an input-output analysis once the system is operational. The first major endeavor is to accurately define the levels of direct activity to be evaluated. In the case of a prospective evaluation, it is necessary to first calculate reasonable estimates of the direct activity.

- In this instance, the Texas Health and Human Services Commission (HHSC) prepared information describing the effects of the Affordable Care Act. These measures include likely enrollment increases and costs to the state of expanding Medicaid coverage. This information was used as a starting point for assessing the economic benefits of extending coverage to the Medicaid-eligible population. After verifying their reasonableness, TPG used the recent HHSC projections for enrollment growth, health costs, administration fees, and other factors for the expected expansion of enrollment by those currently eligible as a result of the implementation of the Affordable Care Act. The incremental health spending was allocated among various categories of providers based on current and projected usage patterns (all economic projections required for this analysis are obtained from the most recent simulations of the Texas Econometric Model, which was developed and is maintained by The Perryman Group). With regard to the newly eligible population (primarily adults with incomes of 133% of the Federal Poverty Level or less) that would obtain coverage on the private exchange, the HHSC projections were used for enrollment growth. Health care costs were adjusted based on the differential between Medicaid and private coverage as estimated by the Center for Budget Policy Priorities. The administrative costs in this segment were modified to reflect that the insured individuals would not be administered under Medicaid, but rather through an exchange operated by the federal government.

- It was assumed that the offsetting funds necessary to provide the State contribution are withdrawn from the economy based on current spending and production patterns across more than 500 industrial categories based on current information from the Bureau of Economic Analysis of the US Department of Commerce. This assumption results in a higher offset (lower

reported impact) than if the funds were allocated to other governmental outlays, as the average multipliers in the private sector exceed those in the public arena.

- To quantify potential reductions in the value of uncompensated care, TPG used extensive research by the Institute of Medicine to estimate the reduction in uncompensated care (which is essentially funded by increased local taxes and higher private-sector insurance premiums) associated with each additional person obtaining insurance coverage. All information was updated from the original analysis to reflect current medical costs in Texas. This analysis was then combined with HHSC estimates regarding incremental insured individuals and incremental costs to determine the additional direct benefits (cost reductions) within the state economy. This amount was then assumed to be available within the private or public sector for alternative uses based on the current composition of business activity. The benefit is somewhat greater for the newly eligible individuals obtaining private coverage on the exchange, as extensive academic and clinical research has demonstrated that patients with private coverage have significantly better outcomes and, hence, less need for ongoing care. This differential was estimated based on a large study of panel data funded by the Kaiser Family Foundation[4] (KFF) which controlled for other intervening factors.

- The annual value of the increase in productivity associated with higher insurance rates on an annual basis is based on estimates by the Institute of Medicine as part of a major research initiative, and has been fully updated to current price levels and relative income levels in Texas based on appropriate cost indices from the US Department of Labor and income data from the US Department of Commerce. The totals have also been adjusted to include only the portion of the value that reflects earned income and to eliminate various non-pecuniary, quality-of-life factors. While such considerations are obviously beneficial and important to the future of the state, they do not result in any net governmental revenue and, thus, are not appropriate to consider in an analysis focused on an economic and fiscal assessment. The outcomes are somewhat better and, hence, productivity gains greater for those obtaining coverage on the exchange. This phenomenon was also accounted for using results from the KFF study.

- The second major phase of the analysis is the simulation of the input-output system to measure overall economic effects of these direct changes in health care spending and outcomes. The present study was conducted within the context of the US Multi-Regional Impact Assessment System (USMRIAS) which was developed and is maintained by The Perryman Group. This model has been used in hundreds of diverse applications across the country and has an excellent reputation for accuracy and credibility. The system used in the current simulations reflects the unique industrial structure and characteristics of the Texas economy, as well as its various

[4] "Is Medicaid Coverage as Good as Private Insurance or No Better than Being Uninsured?" Presentation by Jack Hadley, Ph.D. (George Mason University) at the AcademyHealth Annual Research Meeting, June 4, 2007; based on research supported by the Kaiser Family Foundation.

counties, metropolitan areas, regions, and legislative districts. In particular, the spillover effects across geographic areas within the state were also measured.

- The USMRIAS is somewhat similar in format to the Input-Output Model of the United States and the Regional Input-Output Modeling System, both of which are maintained by the US Department of Commerce. The model developed by TPG, however, incorporates several important enhancements and refinements. Specifically, the expanded system includes (1) comprehensive 500-sector coverage for any county, multi-county, or urban region; (2) calculation of both total expenditures and value-added by industry and region; (3) direct estimation of expenditures for multiple basic input choices (expenditures, output, income, or employment); (4) extensive parameter localization; (5) price adjustments for real and nominal assessments by sectors and areas; (6) measurement of the induced impacts associated with payrolls and consumer spending; (7) embedded modules to estimate multi-sectoral direct spending effects; (8) estimation of retail spending activity by consumers; and (9) comprehensive linkage and integration capabilities with a wide variety of econometric, real estate, occupational, and fiscal impact models. Moreover, the model uses specific local taxing patterns to estimate the fiscal effects of activity on a detailed sectoral basis. The models used for the present investigation have been thoroughly tested for reasonableness and historical reliability.

- The impact assessment (input-output) process essentially estimates the amounts of all types of goods and services required to produce one unit (a dollar's worth) of a specific type of output. For purposes of illustrating the nature of the system, it is useful to think of inputs and outputs in dollar (rather than physical) terms. As an example, the construction of a new building will require specific dollar amounts of lumber, glass, concrete, hand tools, architectural services, interior design services, paint, plumbing, and numerous other elements. Each of these suppliers must, in turn, purchase additional dollar amounts of inputs. This process continues through multiple rounds of production, thus generating subsequent increments to business activity. The initial process of building the facility is known as the *direct effect*. The ensuing transactions in the output chain constitute the *indirect effect*.

- Another pattern that arises in response to any direct economic activity comes from the payroll dollars received by employees at each stage of the production cycle. As workers are compensated, they use some of their income for taxes, savings, and purchases from external markets. A substantial portion, however, is spent locally on food, clothing, health care services, utilities, housing, recreation, and other items. Typical purchasing patterns in the relevant areas are obtained from the *ACCRA Cost of Living Index*, a privately compiled inter-regional measure which has been widely used for several decades, and the *Consumer Expenditure Survey* of the US Department of Labor. These initial outlays by area residents generate further secondary activity as local providers acquire inputs to meet this consumer demand. These consumer spending impacts are known as the *induced effect*. The USMRIAS is designed to provide realistic, yet conservative, estimates of these phenomena.

- Sources for information used in this process include the Bureau of the Census, the Bureau of Labor Statistics, the Regional Economic Information System of the US Department of Commerce, and other public and private sources. The pricing data are compiled from the US Department of Labor and the US Department of Commerce. The verification and testing procedures make use of extensive public and private sources.

- Impacts were measured both in terms of (1) current dollars, reflecting the actual amounts as they are expended over the 10-year timeframe, and (2) constant 2012 dollars to eliminate the effects of inflation and allow comparisons across years on a comparable basis.

- The USMRIAS generates estimates of the effect on several measures of business activity. The most comprehensive measure of economic activity used in this study is **Total Expenditures**. This measure incorporates every dollar that changes hands in any transaction. For example, suppose a farmer sells wheat to a miller for $0.50; the miller then sells flour to a baker for $0.75; the baker, in turn, sells bread to a customer for $1.25. The Total Expenditures recorded in this instance would be $2.50, that is, $0.50 + $0.75 + $1.25. This measure is quite broad, but is useful in that (1) it reflects the overall interplay of all industries in the economy, and (2) some key fiscal variables such as sales taxes are linked to aggregate spending.

- A second measure of business activity frequently employed in this analysis is that of **Gross Product**. This indicator represents the regional equivalent of Gross Domestic Product, the most commonly reported statistic regarding national economic performance. In other words, the Gross Product of Arkansas is the amount of US output that is produced in that state; it is defined as the value of all final goods produced in a given region for a specific period of time. Stated differently, it captures the amount of value-added (gross area product) over intermediate goods and services at each stage of the production process, that is, it eliminates the double counting in the Total Expenditures concept. Using the example above, the Gross Product is $1.25 (the value of the bread) rather than $2.50. Alternatively, it may be viewed as the sum of the value-added by the farmer, $0.50; the miller, $0.25 ($0.75 - $0.50); and the baker, $0.50 ($1.25 - $0.75). The total value-added is, therefore, $1.25, which is equivalent to the final value of the bread. In many industries, the primary component of value-added is the wage and salary payments to employees.

- The third gauge of economic activity used in this evaluation is **Personal Income**. As the name implies, Personal Income is simply the income received by individuals, whether in the form of wages, salaries, interest, dividends, proprietors' profits, or other sources. It may thus be viewed as the segment of overall impacts which flows directly to the citizenry.

- The fourth measure, **Retail Sales**, represents the component of Total Expenditures which occurs in retail outlets (general merchandise stores, automobile dealers and service stations, building

materials stores, food stores, drugstores, restaurants, and so forth). Retail Sales is a commonly used measure of consumer activity.

- The final aggregates used are **Permanent Jobs and Person-Years of Employment**. The Person-Years of Employment measure reveals the full-time equivalent jobs generated by an activity. It should be noted that, unlike the dollar values described above, Permanent Jobs is a "stock" rather than a "flow." In other words, if an area produces $1 million in output in 2010 and $1 million in 2011, it is appropriate to say that $2 million was achieved in the 2010-2011 period. If the same area has 100 people working in 2010 and 100 in 2011, it only has 100 Permanent Jobs. When a flow of jobs is measured, such as in a construction project or a cumulative assessment over multiple years, it is appropriate to measure employment in Person-Years (a person working for a year). This concept is distinct from Permanent Jobs, which anticipates that the relevant positions will be maintained on a continuing basis.

- Because any expenditure of State funds is an economic stimulus, The Perryman Group also calculated these economic benefits on a "net" basis by adjusting for the diversion of State funds that would have otherwise been spent for various other goods or services.

Results by Area

Results for Texas

The Cumulative Net Impact Over the First Ten Years of Implementation (Health-Related Spending, Uncompensated Care Reductions, and Productivity Enhancement) Associated with Providing Coverage for the Medicaid-Eligible Population (Increased Participation in the Existing Program and Public Exchange Access for Those Newly Eligible) as a Result of the Affordable Care Act (ACA) on Business Activity in Texas 2014-2023: Results by Detailed Industrial Category

Category	Total Expenditures (2012 Dollars)	Gross Product (2012 Dollars)	Personal Income (2012 Dollars)	Employment (Person-Years)
Agricultural Products & Services	$11,078,815,050	$2,882,315,734	$1,963,017,664	31,334
Forestry & Fishery Products	$232,155,269	$199,849,792	$74,121,143	926
Coal Mining	$1,140,989,544	$330,268,514	$348,025,342	2,311
Crude Petroleum & Natural Gas	$27,124,615,308	$5,943,939,764	$2,741,337,697	13,425
Miscellaneous Mining	$505,618,434	$213,608,198	$125,568,507	1,371
New Construction	$2,321,357,287	$992,652,951	$818,007,851	11,540
Maintenance & Repair Construction	$13,169,473,754	$6,956,360,927	$5,732,474,772	80,816
Food Products & Tobacco	$21,975,164,174	$5,514,397,861	$2,817,017,956	47,054
Textile Mill Products	$335,020,021	$78,434,178	$66,362,718	1,470
Apparel	$4,405,893,691	$2,430,184,740	$1,231,411,979	33,544
Paper & Allied Products	$3,607,813,774	$1,601,524,557	$724,037,683	10,984
Printing & Publishing	$5,349,053,479	$2,636,678,590	$1,721,019,744	29,212
Chemicals & Petroleum Refining	$31,622,841,327	$6,262,800,088	$2,940,748,323	21,719
Rubber & Leather Products	$3,803,822,099	$1,624,174,942	$949,485,209	18,896
Lumber Products & Furniture	$1,485,892,583	$516,575,279	$368,289,620	7,635
Stone, Clay, & Glass Products	$1,934,378,533	$1,034,798,288	$541,203,573	8,776
Primary Metal	$2,221,873,987	$585,338,700	$435,697,481	6,545
Fabricated Metal Products	$4,395,946,068	$1,615,276,057	$1,042,824,354	17,837
Machinery, Except Electrical	$4,038,241,958	$1,613,528,370	$1,152,711,476	12,247
Electric & Electronic Equipment	$3,409,544,573	$1,901,968,814	$1,137,061,718	9,400
Motor Vehicles & Equipment	$2,083,070,221	$450,938,228	$292,959,150	4,109
Transp. Equip., Exc. Motor Vehicles	$1,216,381,503	$563,910,484	$368,495,580	4,357
Instruments & Related Products	$1,268,633,893	$510,923,395	$388,348,165	4,925
Miscellaneous Manufacturing	$1,412,269,046	$546,483,842	$376,916,544	5,952
Transportation	$17,966,147,101	$11,944,898,990	$7,899,929,583	109,171
Communication	$14,141,301,103	$8,708,910,742	$3,718,113,719	32,857
Electric, Gas, Water, Sanitary Services	$31,583,840,183	$7,039,904,699	$3,072,026,669	12,980
Wholesale Trade	$21,827,124,867	$14,766,732,964	$8,514,629,624	95,194
Retail Trade	$57,509,130,103	$47,659,129,390	$28,498,635,461	747,061
Finance	$11,889,590,398	$6,066,185,529	$3,532,357,111	31,385
Insurance	$11,478,726,035	$7,079,267,589	$4,232,264,784	50,900
Real Estate	$75,912,403,256	$14,872,050,503	$2,396,209,762	21,234
Hotels, Lodging Places, Amusements	$6,468,354,924	$3,330,321,381	$2,184,805,901	53,220
Personal Services	$11,810,848,812	$7,261,465,322	$5,649,537,388	95,194
Business Services	$28,799,782,026	$17,919,063,539	$14,617,364,013	177,869
Eating & Drinking Places	$27,181,577,390	$15,919,522,143	$8,470,035,485	382,892
Health Services	$118,104,878,950	$83,158,297,065	$70,311,110,446	1,161,280
Miscellaneous Services	$17,077,824,905	$7,315,994,566	$6,342,358,183	151,467
Households	$791,291,666	$791,291,666	$774,548,006	53,497
Total	**$602,681,687,298**	**$300,839,968,381**	**$198,571,070,384**	**3,562,589**

NOTE: Values expressed in constant (2012) dollars to remove the effects of medical inflation and allow year-to-year comparisons from a comparable base. Amounts are adjusted to reflect the diversion of economic activity required to fund the State portion of the Medicaid funding.

SOURCE: US Multi-Regional Impact Assessment System, The Perryman Group

The Cumulative Net Impact Over the First Ten Years of Implementation (Health-Related Spending, Uncompensated Care Reductions, and Productivity Enhancement) Associated with Insuring the Newly Eligible Medicaid Population Under the Affordable Care Act (ACA) on the Private Exchange on Business Activity in Texas 2014-2023: Results by Detailed Industrial Category

Category	Total Expenditures (2012 Dollars)	Gross Product (2012 Dollars)	Personal Income (2012 Dollars)	Employment (Person-Years)
Agricultural Products & Services	$9,101,449,026	$2,370,102,747	$1,614,172,045	25,764
Forestry & Fishery Products	$193,125,897	$164,921,906	$61,166,923	763
Coal Mining	$932,407,722	$269,971,899	$284,486,935	1,887
Crude Petroleum & Natural Gas	$21,495,704,568	$4,710,441,571	$2,172,449,852	10,637
Miscellaneous Mining	$406,639,325	$171,872,624	$101,034,446	1,101
New Construction	$1,821,730,589	$779,660,872	$642,489,119	9,063
Maintenance & Repair Construction	$10,781,771,129	$5,695,320,520	$4,693,298,889	66,165
Food Products & Tobacco	$18,126,248,103	$4,554,978,871	$2,326,900,895	38,865
Textile Mill Products	$276,471,946	$64,629,845	$54,682,920	1,210
Apparel	$3,659,185,991	$2,018,111,536	$1,022,608,122	27,853
Paper & Allied Products	$2,969,251,016	$1,317,423,159	$595,597,463	9,032
Printing & Publishing	$4,389,153,950	$2,162,481,630	$1,411,500,674	23,957
Chemicals & Petroleum Refining	$25,657,581,500	$5,064,760,423	$2,378,199,155	17,559
Rubber & Leather Products	$3,131,991,201	$1,338,121,088	$782,259,460	15,566
Lumber Products & Furniture	$1,212,653,904	$421,672,694	$300,629,338	6,229
Stone, Clay, & Glass Products	$1,571,251,474	$842,689,281	$440,729,794	7,144
Primary Metal	$1,782,351,686	$470,745,091	$350,399,621	5,261
Fabricated Metal Products	$3,549,934,868	$1,303,428,095	$841,494,882	14,390
Machinery, Except Electrical	$3,229,023,776	$1,291,135,746	$922,392,822	9,796
Electric & Electronic Equipment	$2,766,765,401	$1,542,006,570	$921,864,031	7,618
Motor Vehicles & Equipment	$1,696,911,471	$367,269,302	$238,602,309	3,346
Transp. Equip., Exc. Motor Vehicles	$986,534,286	$456,768,325	$298,481,961	3,527
Instruments & Related Products	$1,063,427,236	$427,799,246	$325,166,259	4,123
Miscellaneous Manufacturing	$1,157,689,478	$448,071,330	$309,040,233	4,878
Transportation	$14,728,895,180	$9,795,737,491	$6,478,550,908	89,525
Communication	$11,586,711,682	$7,136,431,455	$3,046,771,815	26,922
Electric, Gas, Water, Sanitary Services	$25,853,479,944	$5,769,453,788	$2,517,635,768	10,634
Wholesale Trade	$17,888,537,558	$12,102,146,052	$6,978,205,099	78,013
Retail Trade	$47,365,276,787	$39,252,853,963	$23,471,951,575	615,288
Finance	$9,630,334,537	$4,938,272,566	$2,875,570,184	25,546
Insurance	$9,486,541,159	$5,845,867,999	$3,494,890,001	42,029
Real Estate	$62,417,635,922	$12,174,868,203	$1,961,635,227	17,378
Hotels, Lodging Places, Amusements	$5,296,102,514	$2,728,374,624	$1,789,908,051	43,598
Personal Services	$9,732,633,189	$5,983,588,725	$4,655,328,728	78,437
Business Services	$23,511,833,944	$14,622,239,034	$11,928,000,039	145,144
Eating & Drinking Places	$22,377,128,196	$13,105,705,691	$6,972,934,934	315,215
Health Services	$100,476,295,215	$70,754,854,303	$59,823,884,687	988,068
Miscellaneous Services	$14,069,307,722	$6,026,067,871	$5,224,099,109	124,758
Households	$657,331,539	$657,331,539	$643,422,454	44,438
Total	**$497,037,300,631**	**$249,148,177,674**	**$164,952,436,731**	**2,960,730**

NOTE: Values expressed in constant (2012) dollars to remove the effects of medical inflation and allow year-to-year comparisons from a comparable base. Amounts are adjusted to reflect the diversion of economic activity required to fund the State portion of the Medicaid funding.

SOURCE: US Multi-Regional Impact Assessment System, The Perryman Group

The Cumulative Net Impact Over the First Ten Years of Implementation (Health-Related Spending, Uncompensated Care Reductions, and Productivity Enhancement) Associated with Increased Participation in the Existing Medicaid Program as a Result of the Affordable Care Act (ACA) on Business Activity in Texas 2014-2023: Results by Detailed Industrial Category

Category	Total Expenditures (2012 Dollars)	Gross Product (2012 Dollars)	Personal Income (2012 Dollars)	Employment (Person-Years)
Agricultural Products & Services	$1,977,366,025	$512,212,987	$348,845,618	5,571
Forestry & Fishery Products	$39,029,372	$34,927,886	$12,954,220	163
Coal Mining	$208,581,822	$60,296,615	$63,538,407	424
Crude Petroleum & Natural Gas	$5,628,910,740	$1,233,498,193	$568,887,845	2,788
Miscellaneous Mining	$98,979,109	$41,735,575	$24,534,061	270
New Construction	$499,626,698	$212,992,079	$175,518,731	2,477
Maintenance & Repair Construction	$2,387,702,624	$1,261,040,407	$1,039,175,883	14,652
Food Products & Tobacco	$3,848,916,071	$959,418,990	$490,117,061	8,190
Textile Mill Products	$58,548,075	$13,804,333	$11,679,798	261
Apparel	$746,707,701	$412,073,204	$208,803,856	5,691
Paper & Allied Products	$638,562,758	$284,101,397	$128,440,220	1,952
Printing & Publishing	$959,899,530	$474,196,960	$309,519,070	5,255
Chemicals & Petroleum Refining	$5,965,259,828	$1,198,039,666	$562,549,168	4,160
Rubber & Leather Products	$671,830,898	$286,053,854	$167,225,748	3,330
Lumber Products & Furniture	$273,238,679	$94,902,585	$67,660,282	1,406
Stone, Clay, & Glass Products	$363,127,060	$192,109,007	$100,473,779	1,632
Primary Metal	$439,522,302	$114,593,609	$85,297,860	1,284
Fabricated Metal Products	$846,011,200	$311,847,962	$201,329,471	3,447
Machinery, Except Electrical	$809,218,182	$322,392,625	$230,318,654	2,450
Electric & Electronic Equipment	$642,779,172	$359,962,244	$215,197,687	1,782
Motor Vehicles & Equipment	$386,158,750	$83,668,926	$54,356,840	763
Transp. Equip., Exc. Motor Vehicles	$229,847,216	$107,142,159	$70,013,618	830
Instruments & Related Products	$205,206,657	$83,124,149	$63,181,906	802
Miscellaneous Manufacturing	$254,579,568	$98,412,512	$67,876,311	1,074
Transportation	$3,237,251,921	$2,149,161,499	$1,421,378,675	19,646
Communication	$2,554,589,420	$1,572,479,287	$671,341,904	5,935
Electric, Gas, Water, Sanitary Services	$5,730,360,239	$1,270,450,911	$554,390,901	2,346
Wholesale Trade	$3,938,587,309	$2,664,586,912	$1,536,424,525	17,181
Retail Trade	$10,143,853,316	$8,406,275,427	$5,026,683,886	131,773
Finance	$2,259,255,861	$1,127,912,963	$656,786,926	5,839
Insurance	$1,992,184,876	$1,233,399,590	$737,374,783	8,871
Real Estate	$13,494,767,334	$2,697,182,300	$434,574,535	3,856
Hotels, Lodging Places, Amusements	$1,172,252,410	$601,946,757	$394,897,850	9,623
Personal Services	$2,078,215,623	$1,277,876,597	$994,208,661	16,757
Business Services	$5,287,948,082	$3,296,824,505	$2,689,363,974	32,725
Eating & Drinking Places	$4,804,449,194	$2,813,816,452	$1,497,100,551	67,678
Health Services	$17,628,583,736	$12,403,442,762	$10,487,225,759	173,212
Miscellaneous Services	$3,008,517,183	$1,289,926,695	$1,118,259,075	26,709
Households	$133,960,127	$133,960,127	$131,125,552	9,058
Total	**$105,644,386,666**	**$51,691,790,707**	**$33,618,633,653**	**601,859**

NOTE: Values expressed in constant (2012) dollars to remove the effects of medical inflation and allow year-to-year comparisons from a comparable base. Amounts are adjusted to reflect the diversion of economic activity required to fund the State portion of the Medicaid funding.

SOURCE: US Multi-Regional Impact Assessment System, The Perryman Group

Results for Economic Planning Regions

The Cumulative Net Impact Over the First Ten Years of Implementation (Health-Related Spending, Uncompensated Care Reductions, and Productivity Enhancement) Associated with Providing Coverage for the Medicaid-Eligible Population (Increased Participation in the Existing Program and Public Exchange Access for Those Newly Eligible) as a Result of the Affordable Care Act (ACA) on Business Activity in Texas 2014-2023: Comptroller's Economic Region Results

Economic Region	Total Expenditures (2012 Dollars)	Gross Product (2012 Dollars)	Personal Income (2012 Dollars)	Retail Sales (2012 Dollars)	Employment (Person-Years)
High Plains	$17,764,735,563	$9,343,894,261	$6,241,020,686	$2,907,232,305	115,235
Northwest Texas	$10,324,625,799	$5,402,095,781	$3,619,809,343	$1,736,168,869	67,310
Metroplex	$191,384,863,111	$95,299,503,888	$62,204,864,967	$26,192,180,180	1,108,512
Upper East Texas	$25,306,264,181	$13,117,528,029	$8,809,004,469	$4,146,317,773	163,328
Southeast Texas	$13,521,100,111	$7,146,193,482	$4,880,254,190	$2,374,225,184	90,902
Gulf Coast	$163,810,103,030	$76,255,032,206	$49,894,116,508	$18,447,781,726	855,907
Capital	$35,364,892,028	$18,875,420,506	$12,565,216,890	$5,755,284,554	229,810
Central Texas	$20,339,780,489	$10,781,633,963	$7,256,198,683	$3,423,541,246	136,085
Alamo	$56,820,285,420	$29,421,197,868	$19,607,003,281	$8,755,739,986	359,146
South Texas	$43,169,439,525	$22,592,941,977	$15,202,969,356	$7,158,952,626	284,169
West Texas	$9,664,791,905	$4,879,708,080	$3,228,269,755	$1,576,927,146	59,557
Upper Rio Grande	$15,210,806,137	$7,724,818,340	$5,062,342,255	$2,216,355,899	92,627
TOTAL STATE IMPACT	**$602,681,687,298**	**$300,839,968,381**	**$198,571,070,384**	**$84,690,707,493**	**3,562,589**

NOTE: Allocations reflect best available evidence regarding incidence and industrial structure and composition of each area.
SOURCE: US Multi-Regional Impact Assessment System, The Perryman Group

Results for Council of Governments Regions

The Cumulative Net Impact Over the First Ten Years of Implementation (Health-Related Spending, Uncompensated Care Reductions, and Productivity Enhancement) Associated with Providing Coverage for the Medicaid-Eligible Population (Increased Participation in the Existing Program and Public Exchange Access for Those Newly Eligible) as a Result of the Affordable Care Act (ACA) on Business Activity in Texas 2014-2023: Council of Governments (COG) Region Results

COG	Total Expenditures (2012 Dollars)	Gross Product (2012 Dollars)	Personal Income (2012 Dollars)	Retail Sales (2012 Dollars)	Employment (Person-Years)
Panhandle	$8,209,245,164	$4,245,346,992	$2,828,441,018	$1,337,907,373	52,085
South Plains	$9,555,490,399	$5,098,547,268	$3,412,579,668	$1,569,324,932	63,151
North Texas	$4,085,390,639	$2,196,757,036	$1,485,607,484	$732,289,290	27,775
North Central Texas	$187,928,038,572	$93,440,733,351	$60,941,226,991	$25,563,200,784	1,084,524
North East Texas	$5,571,979,869	$2,992,329,009	$2,040,885,711	$1,005,123,493	38,338
East Texas	$19,734,284,312	$10,125,199,020	$6,768,118,758	$3,141,194,279	124,989
West Central Texas	$6,239,235,160	$3,205,338,745	$2,134,201,859	$1,003,879,579	39,535
Upper Rio Grande	$15,210,806,137	$7,724,818,340	$5,062,342,255	$2,216,355,899	92,627
Permian Basin	$6,136,254,418	$3,112,839,572	$2,068,131,638	$1,024,127,734	37,818
Concho Valley	$3,528,537,487	$1,766,868,509	$1,160,138,117	$552,799,412	21,739
Heart of Texas	$6,627,301,486	$3,377,627,504	$2,241,294,818	$1,035,366,570	41,873
Capital	$35,364,892,028	$18,875,420,506	$12,565,216,890	$5,755,284,554	229,810
Brazos Valley	$5,091,574,729	$2,633,755,347	$1,763,536,863	$836,864,764	33,053
Deep East Texas	$4,953,448,425	$2,663,751,613	$1,816,445,760	$899,197,398	34,360
South East Texas	$8,567,651,686	$4,482,441,869	$3,063,808,430	$1,475,027,786	56,542
Gulf Coast	$163,810,103,030	$76,255,032,206	$49,894,116,508	$18,447,781,726	855,907
Golden Crescent	$3,657,271,686	$1,849,074,082	$1,245,928,858	$590,053,565	22,789
Alamo	$53,163,013,734	$27,572,123,786	$18,361,074,423	$8,165,686,421	336,357
South Texas	$3,922,121,775	$2,114,554,669	$1,432,949,014	$740,472,747	27,151
Coastal Bend	$14,188,608,951	$6,916,889,882	$4,608,382,209	$2,130,888,980	83,959
Lower Rio Grande Valley	$23,209,261,291	$12,538,605,515	$8,465,070,629	$3,940,309,233	159,739
Texoma	$3,456,824,539	$1,858,770,537	$1,263,637,976	$628,979,395	23,988
Central Texas	$8,620,904,275	$4,770,251,112	$3,251,367,002	$1,551,309,912	61,159
Middle Rio Grande	$1,849,447,508	$1,022,891,911	$696,567,504	$347,281,665	13,319
Border Region	$44,196,689,969	$23,403,686,483	$15,658,783,982	$7,245,559,890	292,871
TOTAL STATE IMPACT	**$602,681,687,298**	**$300,839,968,381**	**$198,571,070,384**	**$84,690,707,493**	**3,562,589**

NOTE: Allocations reflect best available evidence regarding incidence and industrial structure and composition of each area.
SOURCE: US Multi-Regional Impact Assessment System, The Perryman Group

Results for Metropolitan Statistical Areas

The Cumulative Net Impact Over the First Ten Years of Implementation (Health-Related Spending, Uncompensated Care Reductions, and Productivity Enhancement) Associated with Providing Coverage for the Medicaid-Eligible Population (Increased Participation in the Existing Program and Public Exchange Access for Those Newly Eligible) as a Result of the Affordable Care Act (ACA) on Business Activity in Texas 2014-2023: Metropolitan Statistical Area (MSA) and Rural Texas Results

MSA	Total Expenditures (2012 Dollars)	Gross Product (2012 Dollars)	Personal Income (2012 Dollars)	Retail Sales (2012 Dollars)	Employment (Person-Years)
Abilene	$4,597,945,762	$2,323,877,793	$1,539,673,727	$691,166,703	28,173
Amarillo	$7,078,734,648	$3,701,361,323	$2,473,581,601	$1,135,853,555	45,403
Austin-Round Rock-San Marcos	$34,026,968,759	$18,195,255,152	$12,115,817,882	$5,535,358,067	221,444
Beaumont-Port Arthur	$8,567,651,686	$4,482,441,869	$3,063,808,430	$1,475,027,786	56,542
Brownsville-Harlingen	$8,224,686,271	$4,355,028,684	$2,914,599,660	$1,364,315,607	55,154
College Station-Bryan	$4,300,697,502	$2,214,125,900	$1,479,822,603	$693,649,069	27,708
Corpus Christi	$12,378,206,776	$5,949,590,053	$3,952,290,302	$1,795,880,750	71,556
Dallas-Plano-Irving MD*	$134,741,002,957	$66,441,471,015	$43,042,916,694	$17,678,031,855	758,884
Fort Worth-Arlington MD*	$51,330,884,613	$26,032,377,270	$17,243,674,395	$7,566,589,504	313,293
El Paso	$15,008,195,954	$7,612,797,606	$4,987,198,118	$2,175,412,988	91,192
Houston-Sugar Land-Baytown	$162,129,041,165	$75,369,229,900	$49,293,914,741	$18,137,510,048	844,480
Killeen-Temple-Fort Hood	$8,241,536,107	$4,566,712,395	$3,112,913,705	$1,476,926,343	58,521
Laredo	$3,245,978,998	$1,733,567,593	$1,168,575,364	$591,415,985	21,992
Longview	$5,303,798,986	$2,810,397,168	$1,906,596,077	$882,934,343	35,099
Lubbock	$8,712,484,940	$4,659,026,046	$3,120,786,458	$1,401,341,102	57,538
McAllen-Edinburg-Mission	$14,873,471,634	$8,120,889,426	$5,508,479,463	$2,552,440,713	103,769
Midland	$2,386,740,881	$1,211,963,050	$792,362,922	$397,167,473	14,349
Odessa	$2,516,281,725	$1,285,741,481	$869,208,908	$411,100,140	15,881
San Angelo	$3,263,465,038	$1,629,048,821	$1,068,441,139	$502,855,706	20,011
San Antonio-New Braunfels	$51,018,827,173	$26,465,088,566	$17,620,239,180	$7,800,064,109	322,384
Sherman-Denison	$2,715,708,488	$1,482,996,067	$1,013,115,988	$498,942,744	19,290
Texarkana	$3,009,405,659	$1,651,087,820	$1,128,168,899	$539,660,874	21,096
Tyler	$10,026,057,896	$5,013,737,693	$3,301,380,982	$1,527,826,494	60,976
Victoria	$3,004,983,789	$1,501,461,154	$1,009,769,862	$474,230,734	18,345
Waco	$5,514,465,401	$2,796,775,332	$1,847,628,875	$837,831,302	34,430
Wichita Falls	$3,427,189,508	$1,858,604,569	$1,260,263,440	$611,887,318	23,523
Rural Area	$33,037,274,981	$17,375,314,635	$11,735,840,968	$5,935,286,182	221,556
TOTAL STATE IMPACT	**$602,681,687,298**	**$300,839,968,381**	**$198,571,070,384**	**$84,690,707,493**	**3,562,589**

***Metropolitan Division**

NOTE: Allocations reflect best available evidence regarding incidence and industrial structure and composition of each area.

SOURCE: US Multi-Regional Impact Assessment System, The Perryman Group

Results for Counties

The Cumulative Net Impact Over the First Ten Years of Implementation (Health-Related Spending, Uncompensated Care Reductions, and Productivity Enhancement) Associated with Providing Coverage for the Medicaid-Eligible Population (Increased Participation in the Existing Program and Public Exchange Access for Those Newly Eligible) as a Result of the Affordable Care Act (ACA) on Business Activity in Texas 2014-2023: County Results

County	Total Expenditures (2012 Dollars)	Gross Product (2012 Dollars)	Personal Income (2012 Dollars)	Retail Sales (2012 Dollars)	Employment (Person-Years)
Anderson	$978,139,507	$543,301,687	$370,971,663	$174,108,705	6,872
Andrews	$73,370,217	$36,302,927	$23,090,354	$13,314,684	422
Angelina	$2,223,156,218	$1,184,472,397	$803,257,858	$390,440,786	15,138
Aransas	$188,639,465	$87,551,949	$55,848,849	$32,380,006	1,059
Archer	$26,191,673	$13,061,688	$8,388,506	$5,083,640	162
Armstrong	$16,331,449	$8,447,036	$5,831,213	$1,995,666	102
Atascosa	$544,272,831	$269,785,320	$180,629,791	$83,521,430	3,270
Austin	$336,202,301	$159,730,511	$101,867,226	$49,803,141	1,793
Bailey	$31,064,850	$15,937,081	$10,030,838	$6,709,214	192
Bandera	$115,118,931	$56,729,868	$37,051,145	$21,102,825	711
Bastrop	$401,337,640	$202,275,151	$132,484,167	$72,163,167	2,529
Baylor	$85,107,942	$46,176,701	$31,332,653	$15,192,723	579
Bee	$335,228,499	$179,477,985	$122,731,916	$62,241,187	2,328
Bell	$7,790,012,171	$4,325,994,702	$2,950,483,627	$1,393,434,432	55,387
Bexar	$46,984,623,015	$24,421,890,525	$16,266,470,005	$7,106,976,622	296,666
Blanco	$74,141,437	$37,177,881	$24,333,904	$12,628,055	460
Borden	$2,032,090	$931,495	$551,615	$331,627	10
Bosque	$150,036,339	$79,769,981	$54,516,675	$22,424,040	995
Bowie	$3,009,405,659	$1,651,087,820	$1,128,168,899	$539,660,874	21,096
Brazoria	$2,652,392,430	$1,299,657,215	$861,989,690	$466,728,958	16,217
Brazos	$4,110,222,142	$2,114,187,148	$1,412,835,662	$654,310,340	26,419
Brewster	$125,357,336	$71,567,734	$48,688,227	$23,446,559	909
Briscoe	$3,443,313	$1,596,063	$978,710	$691,712	19
Brooks	$50,459,756	$27,709,397	$19,320,583	$10,293,241	372
Brown	$653,091,238	$370,233,200	$254,087,648	$131,134,031	4,935
Burleson	$90,072,491	$46,950,196	$31,183,631	$18,726,139	596
Burnet	$672,768,637	$340,067,976	$223,616,881	$112,179,225	4,177
Caldwell	$370,794,635	$189,111,863	$129,029,486	$61,618,865	2,404
Calhoun	$121,964,984	$50,900,988	$32,686,162	$17,891,327	604
Callahan	$50,414,369	$24,654,547	$16,254,020	$8,508,636	303
Cameron	$8,224,686,271	$4,355,028,684	$2,914,599,660	$1,364,315,607	55,154
Camp	$135,792,684	$71,298,238	$49,205,573	$21,021,749	908
Carson	$32,332,017	$12,651,869	$7,490,230	$2,977,314	131
Cass	$236,416,962	$125,028,590	$85,113,685	$46,989,148	1,623
Castro	$39,075,494	$18,732,886	$11,757,760	$8,003,263	235
Chambers	$142,444,815	$57,143,006	$35,222,306	$18,345,688	635
Cherokee	$491,868,450	$267,088,936	$184,710,054	$85,076,569	3,453
Childress	$57,135,847	$29,733,926	$20,201,019	$10,552,726	387
Clay	$133,823,900	$68,420,678	$46,353,361	$21,800,684	845
Cochran	$12,551,791	$6,060,708	$3,861,555	$2,013,227	72

(continued)
The Cumulative Net Impact Over the First Ten Years of Implementation (Health-Related Spending, Uncompensated Care Reductions, and Productivity Enhancement) Associated with Provided Coverage for the Medicaid Eligible Population (Increased Participation in the Existing Program and Public Exchange Access for Those Newly Eligible) as a Result of the Affordable Care Act (ACA) on Business Activity in Texas 2014-2023: County Results

County	Total Expenditures (2012 Dollars)	Gross Product (2012 Dollars)	Personal Income (2012 Dollars)	Retail Sales (2012 Dollars)	Employment (Person-Years)
Coke	$10,028,715	$4,743,276	$3,046,570	$1,909,526	57
Coleman	$68,370,116	$35,868,585	$24,185,169	$11,885,769	449
Collin	$17,699,954,523	$9,182,230,063	$6,105,781,966	$2,940,964,383	112,101
Collingsworth	$37,332,589	$20,277,608	$13,485,509	$8,022,649	254
Colorado	$307,860,732	$162,791,414	$110,660,094	$55,511,213	2,130
Comal	$1,687,747,107	$872,192,283	$580,007,990	$280,132,868	11,035
Comanche	$104,433,205	$56,380,563	$38,443,129	$17,671,161	708
Concho	$13,292,618	$7,350,334	$5,186,754	$2,245,063	96
Cooke	$458,703,507	$224,411,440	$147,399,067	$81,683,037	2,766
Coryell	$283,770,622	$150,498,365	$101,354,817	$52,338,897	1,955
Cottle	$8,089,385	$4,554,723	$3,086,348	$1,505,217	56
Crane	$26,140,417	$14,221,487	$9,909,728	$3,992,953	178
Crockett	$10,244,660	$5,194,516	$3,291,862	$2,608,948	67
Crosby	$38,288,660	$21,176,569	$14,699,709	$5,095,399	263
Culberson	$17,493,895	$10,182,605	$6,817,819	$5,029,841	141
Dallam	$42,462,278	$22,482,841	$14,153,513	$7,613,588	266
Dallas	$103,044,040,443	$50,161,722,032	$32,239,717,055	$12,566,832,321	560,512
Dawson	$58,395,353	$28,200,287	$17,322,090	$11,852,383	338
Deaf Smith	$73,208,430	$35,866,732	$22,968,617	$10,992,293	423
Delta	$63,445,402	$34,310,103	$23,946,801	$7,481,642	414
Denton	$9,646,732,651	$4,844,772,082	$3,190,771,755	$1,407,325,943	57,813
DeWitt	$217,346,521	$114,300,592	$77,910,937	$37,430,503	1,466
Dickens	$6,732,775	$3,528,023	$2,307,747	$1,414,909	43
Dimmit	$61,783,925	$32,910,607	$22,772,123	$12,340,710	438
Donley	$24,070,879	$14,010,674	$9,771,163	$5,398,681	192
Duval	$58,175,609	$29,686,002	$20,355,611	$8,414,907	370
Eastland	$235,070,366	$117,479,010	$78,413,589	$43,638,131	1,513
Ector	$2,516,281,725	$1,285,741,481	$869,208,908	$411,100,140	15,881
Edwards	$4,682,896	$2,308,948	$1,391,409	$976,208	27
El Paso	$15,008,195,954	$7,612,797,606	$4,987,198,118	$2,175,412,988	91,192
Ellis	$1,210,050,068	$593,443,211	$385,407,896	$209,288,587	7,312
Erath	$491,837,607	$274,814,306	$189,876,128	$96,673,547	3,653
Falls	$134,910,807	$74,429,167	$51,121,171	$22,686,157	942
Fannin	$282,412,544	$151,363,030	$103,122,920	$48,353,614	1,932
Fayette	$390,088,996	$201,060,902	$133,989,551	$60,492,409	2,464
Fisher	$19,995,638	$11,145,500	$7,595,966	$3,900,280	144
Floyd	$24,633,019	$11,951,374	$7,703,545	$3,465,065	140
Foard	$7,889,219	$4,597,566	$3,265,339	$1,347,443	61
Fort Bend	$7,941,623,017	$3,676,369,794	$2,368,402,594	$1,178,888,689	42,892
Franklin	$260,443,591	$133,833,369	$90,662,021	$44,548,828	1,694

(continued)
The Cumulative Net Impact Over the First Ten Years of Implementation (Health-Related Spending, Uncompensated Care Reductions, and Productivity Enhancement) Associated with Provided Coverage for the Medicaid Eligible Population (Increased Participation in the Existing Program and Public Exchange Access for Those Newly Eligible) as a Result of the Affordable Care Act (ACA) on Business Activity in Texas 2014-2023: County Results

County	Total Expenditures (2012 Dollars)	Gross Product (2012 Dollars)	Personal Income (2012 Dollars)	Retail Sales (2012 Dollars)	Employment (Person-Years)
Freestone	$153,628,970	$77,327,636	$50,760,404	$30,682,497	976
Frio	$162,758,350	$80,918,979	$53,679,384	$25,939,811	991
Gaines	$56,214,624	$25,458,473	$15,654,274	$9,719,035	291
Galveston	$3,840,777,217	$1,919,271,235	$1,282,285,607	$605,381,951	23,639
Garza	$29,165,038	$13,627,049	$8,587,990	$5,930,690	165
Gillespie	$642,638,936	$331,269,570	$223,288,325	$108,479,612	4,208
Glasscock	$2,129,476	$900,028	$529,074	$228,167	9
Goliad	$30,548,681	$16,332,503	$11,234,057	$6,769,288	219
Gonzales	$142,127,599	$75,008,362	$51,397,472	$24,449,417	959
Gray	$325,345,892	$158,785,188	$107,324,273	$54,023,041	1,980
Grayson	$2,715,708,488	$1,482,996,067	$1,013,115,988	$498,942,744	19,290
Gregg	$4,572,997,771	$2,445,940,573	$1,663,005,766	$761,610,175	30,594
Grimes	$143,691,429	$73,875,225	$49,884,245	$26,855,892	945
Guadalupe	$780,302,340	$394,840,727	$258,486,344	$153,179,964	5,048
Hale	$339,268,260	$188,144,994	$128,139,940	$71,995,405	2,496
Hall	$24,086,979	$12,501,046	$8,152,467	$4,339,709	152
Hamilton	$86,511,176	$45,957,604	$31,447,428	$16,333,400	598
Hansford	$18,940,345	$7,463,598	$4,345,036	$2,442,391	76
Hardeman	$15,370,591	$8,571,137	$5,717,369	$3,779,395	116
Hardin	$808,004,342	$412,664,836	$272,787,127	$150,982,137	5,153
Harris	$138,296,765,429	$63,903,749,283	$41,739,927,961	$14,548,510,190	706,986
Harrison	$821,981,229	$394,497,518	$266,426,681	$114,131,190	4,750
Hartley	$11,690,243	$5,764,467	$3,753,273	$2,005,633	72
Haskell	$82,208,471	$43,698,346	$30,295,439	$13,628,521	553
Hays	$1,753,559,923	$932,357,219	$623,883,160	$301,756,337	11,710
Hemphill	$22,225,998	$10,044,972	$6,391,833	$3,239,196	114
Henderson	$910,744,729	$461,522,625	$307,543,289	$146,539,220	5,751
Hidalgo	$14,873,471,634	$8,120,889,426	$5,508,479,463	$2,552,440,713	103,769
Hill	$348,112,755	$176,244,024	$117,591,028	$60,256,352	2,276
Hockley	$201,238,177	$103,267,648	$69,794,208	$37,299,690	1,332
Hood	$473,467,019	$240,252,438	$161,811,015	$80,469,554	3,034
Hopkins	$286,603,788	$152,282,510	$101,347,942	$59,881,367	1,960
Houston	$256,451,352	$131,039,568	$88,683,851	$34,076,971	1,553
Howard	$707,301,332	$354,822,252	$238,339,763	$115,517,178	4,401
Hudspeth	$7,862,547	$4,063,959	$2,406,845	$2,605,102	54
Hunt	$848,717,108	$453,208,651	$304,827,417	$166,071,331	5,857
Hutchinson	$161,994,176	$74,038,705	$47,100,054	$35,674,045	923
Irion	$26,182,141	$10,343,967	$5,951,778	$4,168,891	109
Jack	$67,538,838	$32,273,774	$20,681,392	$13,633,267	396
Jackson	$63,453,372	$31,582,546	$20,323,869	$12,881,538	392

(continued)
The Cumulative Net Impact Over the First Ten Years of Implementation (Health-Related Spending, Uncompensated Care Reductions, and Productivity Enhancement) Associated with Provided Coverage for the Medicaid Eligible Population (Increased Participation in the Existing Program and Public Exchange Access for Those Newly Eligible) as a Result of the Affordable Care Act (ACA) on Business Activity in Texas 2014-2023: County Results

County	Total Expenditures (2012 Dollars)	Gross Product (2012 Dollars)	Personal Income (2012 Dollars)	Retail Sales (2012 Dollars)	Employment (Person-Years)
Jasper	$438,191,818	$238,775,859	$163,829,835	$83,192,298	3,119
Jeff Davis	$28,371,693	$14,910,592	$10,103,372	$5,173,911	191
Jefferson	$7,127,714,468	$3,740,941,936	$2,567,452,760	$1,205,715,807	47,171
Jim Hogg	$68,926,386	$34,703,999	$21,785,337	$16,227,192	432
Jim Wells	$813,343,373	$449,866,031	$306,137,609	$155,441,911	5,781
Johnson	$1,534,161,499	$808,322,490	$548,552,357	$260,297,230	10,284
Jones	$99,230,162	$51,437,701	$34,765,325	$15,602,578	639
Karnes	$101,884,774	$48,424,833	$31,977,406	$15,646,817	586
Kaufman	$871,355,828	$451,450,148	$304,968,220	$148,323,434	5,792
Kendall	$485,184,570	$234,347,856	$153,855,181	$82,166,442	2,905
Kenedy	$2,793,844	$1,230,693	$769,985	$743,868	18
Kent	$9,394,323	$4,206,989	$2,545,980	$1,669,682	46
Kerr	$1,236,904,501	$646,421,837	$431,890,129	$215,556,072	8,189
Kimble	$25,199,627	$11,506,232	$7,169,651	$4,461,489	137
King	$485,276	$243,255	$149,882	$69,357	3
Kinney	$10,587,751	$5,074,099	$3,190,807	$1,842,626	61
Kleberg	$452,992,399	$232,281,296	$156,612,459	$76,550,202	2,939
Knox	$25,947,266	$13,680,110	$9,275,709	$3,765,193	165
La Salle	$30,318,116	$16,604,463	$11,386,384	$6,273,120	223
Lamar	$1,116,842,723	$589,323,423	$402,617,811	$199,572,311	7,610
Lamb	$62,425,977	$30,706,921	$20,110,172	$10,793,367	370
Lampasas	$167,753,315	$90,219,327	$61,075,261	$31,153,014	1,178
Lavaca	$229,360,404	$126,721,428	$86,526,718	$41,061,372	1,627
Lee	$110,192,168	$54,721,249	$35,951,606	$18,993,198	671
Leon	$41,602,347	$22,125,905	$13,964,781	$10,331,630	279
Liberty	$919,704,742	$483,790,844	$330,088,181	$154,310,248	6,060
Limestone	$326,147,213	$173,081,364	$119,676,664	$61,486,223	2,254
Lipscomb	$7,059,299	$3,091,005	$1,872,669	$977,033	34
Live Oak	$57,216,425	$27,701,903	$18,200,689	$11,046,251	347
Llano	$90,732,032	$47,137,347	$31,507,068	$15,633,599	594
Loving	$44,206	$13,625	$8,290	$4,124	0
Lubbock	$8,674,196,280	$4,637,849,477	$3,106,086,749	$1,396,245,702	57,275
Lynn	$14,713,781	$7,267,914	$4,597,248	$1,804,783	80
Madison	$103,418,964	$55,693,005	$37,698,251	$20,719,900	733
Marion	$93,606,695	$49,209,511	$33,499,356	$17,308,348	644
Martin	$40,250,283	$19,892,333	$13,409,801	$5,731,112	236
Mason	$29,940,484	$15,161,595	$10,032,730	$4,918,376	187
Matagorda	$310,869,551	$144,788,037	$94,561,494	$59,843,948	1,817
Maverick	$716,482,301	$383,917,078	$259,250,085	$133,292,117	5,016
McCulloch	$105,183,908	$56,855,154	$38,836,243	$19,342,138	726

(continued)
The Cumulative Net Impact Over the First Ten Years of Implementation (Health-Related Spending, Uncompensated Care Reductions, and Productivity Enhancement) Associated with Provided Coverage for the Medicaid Eligible Population (Increased Participation in the Existing Program and Public Exchange Access for Those Newly Eligible) as a Result of the Affordable Care Act (ACA) on Business Activity in Texas 2014-2023: County Results

County	Total Expenditures (2012 Dollars)	Gross Product (2012 Dollars)	Personal Income (2012 Dollars)	Retail Sales (2012 Dollars)	Employment (Person-Years)
McLennan	$5,514,465,401	$2,796,775,332	$1,847,628,875	$837,831,302	34,430
McMullen	$1,272,977	$542,419	$322,513	$173,009	6
Medina	$203,469,241	$102,142,176	$67,138,532	$34,938,160	1,284
Menard	$5,597,946	$2,860,135	$1,799,872	$1,274,705	35
Midland	$2,386,740,881	$1,211,963,050	$792,362,922	$397,167,473	14,349
Milam	$197,311,727	$101,666,674	$68,712,545	$37,665,944	1,304
Mills	$51,574,490	$31,631,369	$22,105,591	$11,271,240	421
Mitchell	$61,107,116	$32,866,087	$22,334,624	$11,154,428	415
Montague	$150,752,267	$76,177,052	$50,850,354	$25,206,604	964
Montgomery	$7,682,090,181	$3,723,229,547	$2,482,388,217	$1,058,275,812	44,464
Moore	$122,950,932	$52,808,414	$33,019,809	$18,944,008	604
Morris	$72,321,388	$33,823,222	$22,724,411	$9,071,531	403
Motley	$9,660,415	$4,697,406	$3,000,858	$1,638,415	56
Nacogdoches	$1,065,186,781	$586,283,279	$405,313,384	$204,590,924	7,845
Navarro	$694,328,838	$360,360,557	$244,137,719	$108,874,596	4,534
Newton	$37,543,185	$23,489,835	$16,418,170	$10,219,792	318
Nolan	$135,074,038	$70,693,088	$46,527,263	$24,444,480	873
Nueces	$11,736,484,995	$5,640,235,344	$3,746,128,554	$1,683,692,927	67,656
Ochiltree	$52,169,493	$23,520,027	$14,827,634	$8,605,484	270
Oldham	$20,177,127	$10,829,399	$7,100,429	$6,383,010	160
Orange	$631,932,876	$328,835,096	$223,568,543	$118,329,842	4,219
Palo Pinto	$192,308,431	$92,420,088	$59,619,592	$32,403,683	1,128
Panola	$232,140,385	$117,996,706	$79,916,316	$39,029,869	1,471
Parker	$1,064,135,740	$510,647,877	$326,488,384	$182,593,610	6,217
Parmer	$26,244,945	$11,618,457	$7,542,632	$2,317,758	131
Pecos	$104,467,789	$51,764,532	$33,983,593	$20,345,990	657
Polk	$369,654,948	$195,762,588	$130,720,499	$71,663,467	2,457
Potter	$6,112,918,549	$3,201,042,524	$2,144,443,172	$973,326,875	39,271
Presidio	$23,524,712	$11,295,844	$7,127,873	$4,687,498	139
Rains	$27,916,544	$12,768,023	$7,741,204	$5,876,423	151
Randall	$917,152,633	$479,219,895	$315,816,985	$157,553,700	5,899
Reagan	$13,808,074	$6,861,280	$4,155,379	$3,356,734	81
Real	$33,625,416	$16,297,937	$10,747,534	$5,408,642	199
Red River	$136,728,287	$70,685,317	$47,835,920	$21,936,185	893
Reeves	$62,057,630	$30,974,727	$20,141,865	$13,835,538	402
Refugio	$38,919,292	$18,804,102	$11,640,542	$10,103,655	242
Roberts	$1,106,554	$462,227	$273,749	$266,120	6
Robertson	$100,402,869	$52,988,557	$35,803,310	$20,612,590	693
Rockwall	$1,356,706,933	$720,334,724	$487,495,583	$231,744,214	9,083
Runnels	$89,474,508	$41,170,178	$26,485,247	$13,763,357	494

(continued)
The Cumulative Net Impact Over the First Ten Years of Implementation (Health-Related Spending, Uncompensated Care Reductions, and Productivity Enhancement) Associated with Provided Coverage for the Medicaid Eligible Population (Increased Participation in the Existing Program and Public Exchange Access for Those Newly Eligible) as a Result of the Affordable Care Act (ACA) on Business Activity in Texas 2014-2023: County Results

County	Total Expenditures (2012 Dollars)	Gross Product (2012 Dollars)	Personal Income (2012 Dollars)	Retail Sales (2012 Dollars)	Employment (Person-Years)
Rusk	$471,907,149	$232,336,099	$156,634,553	$73,852,995	2,875
Sabine	$62,843,988	$33,292,909	$23,216,794	$11,918,788	439
San Augustine	$104,673,486	$53,331,207	$36,111,359	$16,379,554	664
San Jacinto	$53,026,719	$27,220,578	$18,079,286	$10,030,433	346
San Patricio	$453,082,315	$221,802,761	$150,312,899	$79,807,816	2,842
San Saba	$43,970,774	$24,283,071	$16,187,734	$9,112,985	315
Schleicher	$18,299,770	$9,690,399	$6,800,631	$2,004,347	119
Scurry	$81,350,143	$43,672,293	$27,657,402	$19,189,660	547
Shackelford	$12,812,669	$6,351,281	$4,149,282	$2,382,484	80
Shelby	$163,299,575	$91,571,924	$63,899,050	$32,187,529	1,212
Sherman	$5,864,541	$2,504,044	$1,513,842	$855,541	29
Smith	$10,026,057,896	$5,013,737,693	$3,301,380,982	$1,527,826,494	60,976
Somervell	$67,654,508	$33,347,779	$23,138,249	$7,639,687	413
Starr	$532,594,747	$306,567,813	$215,663,754	$116,963,073	4,203
Stephens	$49,993,382	$27,234,932	$18,092,731	$11,921,652	355
Sterling	$3,370,924	$1,906,956	$1,266,826	$971,314	26
Stonewall	$3,875,388	$2,179,344	$1,480,471	$903,355	29
Sutton	$30,105,723	$15,689,810	$10,110,460	$6,851,066	197
Swisher	$20,240,783	$9,500,899	$5,959,226	$3,328,166	113
Tarrant	$48,064,314,676	$24,371,999,323	$16,145,270,931	$6,993,155,114	292,553
Taylor	$4,448,301,232	$2,247,785,545	$1,488,654,383	$667,055,488	27,231
Terrell	$5,053,259	$2,816,048	$1,854,580	$1,140,345	35
Terry	$74,877,578	$36,742,360	$22,585,207	$16,998,421	448
Throckmorton	$9,091,531	$4,601,447	$2,958,485	$1,660,692	55
Titus	$389,772,068	$201,954,653	$138,468,221	$75,981,606	2,645
Tom Green	$3,237,282,897	$1,618,704,854	$1,062,489,361	$498,686,815	19,902
Travis	$28,034,246,893	$15,010,704,112	$9,986,030,429	$4,457,025,351	181,471
Trinity	$78,695,168	$44,018,603	$29,939,025	$15,388,303	571
Tyler	$100,725,188	$54,492,867	$36,976,649	$19,108,554	698
Upshur	$258,894,066	$132,120,496	$86,955,757	$47,471,172	1,630
Upton	$12,966,783	$6,516,281	$4,241,456	$2,102,285	77
Uvalde	$283,923,146	$152,558,744	$103,297,788	$49,194,792	1,952
Val Verde	$646,101,078	$375,861,366	$257,647,757	$124,040,635	4,874
Van Zandt	$330,749,032	$188,894,409	$129,968,478	$65,605,492	2,483
Victoria	$2,852,470,124	$1,434,227,664	$965,849,643	$449,570,119	17,523
Walker	$667,768,487	$367,513,690	$250,429,276	$125,158,522	4,770
Waller	$264,014,313	$119,067,886	$73,663,673	$47,234,938	1,448
Ward	$61,847,468	$31,684,486	$20,611,831	$13,287,282	402
Washington	$502,164,486	$267,935,310	$182,166,983	$85,308,273	3,388
Webb	$3,245,978,998	$1,733,567,593	$1,168,575,364	$591,415,985	21,992

(continued)
The Cumulative Net Impact Over the First Ten Years of Implementation (Health-Related Spending, Uncompensated Care Reductions, and Productivity Enhancement) Associated with Provided Coverage for the Medicaid Eligible Population (Increased Participation in the Existing Program and Public Exchange Access for Those Newly Eligible) as a Result of the Affordable Care Act (ACA) on Business Activity in Texas 2014-2023: County Results

County	Total Expenditures (2012 Dollars)	Gross Product (2012 Dollars)	Personal Income (2012 Dollars)	Retail Sales (2012 Dollars)	Employment (Person-Years)
Wharton	$447,589,814	$237,929,743	$162,630,189	$79,788,427	3,056
Wheeler	$33,684,376	$18,352,493	$12,366,201	$7,377,768	242
Wichita	$3,267,173,936	$1,777,122,204	$1,205,521,573	$585,002,994	22,517
Wilbarger	$119,036,640	$61,105,728	$41,461,126	$20,698,713	776
Willacy	$111,103,386	$62,687,405	$41,991,505	$23,552,913	816
Williamson	$3,467,029,668	$1,860,806,805	$1,244,390,640	$642,794,348	23,329
Wilson	$218,109,138	$113,159,812	$76,600,192	$38,045,798	1,464
Winkler	$20,960,886	$10,636,060	$6,911,492	$4,457,419	132
Wise	$668,272,698	$341,407,581	$223,362,723	$130,543,550	4,240
Wood	$381,488,176	$194,486,507	$130,159,087	$61,735,878	2,430
Yoakum	$36,188,522	$17,346,488	$10,924,019	$7,851,287	215
Young	$204,416,250	$104,695,785	$68,949,462	$39,038,610	1,304
Zapata	$74,621,645	$39,715,264	$26,924,559	$15,866,497	523
Zavala	$61,942,880	$37,358,667	$26,883,616	$13,912,815	530
TOTAL STATE IMPACT	**$602,681,687,298**	**$300,839,968,381**	**$198,571,070,384**	**$84,690,707,493**	**3,562,589**

NOTE: Allocations reflect best available evidence regarding incidence and industrial structure and composition of each area.
SOURCE: US Multi-Regional Impact Assessment System, The Perryman Group

Results for Texas House Districts

The Cumulative Net Impact Over the First Ten Years of Implementation (Health-Related Spending, Uncompensated Care Reductions, and Productivity Enhancement) Associated with Providing Coverage for the Medicaid-Eligible Population (Increased Participation in the Existing Program and Public Exchange Access for Those Newly Eligible) as a Result of the Affordable Care Act (ACA) on Business Activity in Texas 2014-2023: Results by Texas House District

House District	Total Expenditures (2012 Dollars)	Gross Product (2012 Dollars)	Personal Income (2012 Dollars)	Retail Sales (2012 Dollars)	Employment (Person-Years)
1	$4,523,420,260	$2,444,929,930	$1,669,284,651	$805,718,198	31,293
2	$1,466,069,929	$794,385,570	$536,143,836	$291,558,190	10,299
3	$2,307,450,302	$1,109,446,945	$733,978,939	$328,736,304	13,276
4	$1,627,273,953	$834,513,926	$560,229,150	$269,950,986	10,565
5	$3,413,544,755	$1,717,627,689	$1,140,629,932	$540,365,546	21,172
6	$7,619,804,001	$3,810,440,646	$2,509,049,546	$1,161,148,135	46,342
7	$4,831,891,837	$2,578,061,069	$1,749,961,524	$809,081,348	32,224
8	$2,174,210,070	$1,157,233,905	$783,460,813	$373,922,150	14,658
9	$1,610,288,833	$811,597,158	$552,071,882	$261,564,872	10,139
10	$1,364,876,672	$671,902,058	$437,690,256	$234,200,255	8,290
11	$2,028,962,379	$1,085,708,314	$746,657,991	$363,520,488	14,172
12	$2,873,436,052	$1,477,801,632	$986,943,514	$460,824,015	18,446
13	$1,999,440,839	$1,039,064,986	$696,278,447	$337,758,439	12,943
14	$3,452,586,599	$1,775,917,204	$1,186,781,956	$549,620,686	22,192
15	$2,819,327,097	$1,366,425,244	$911,036,476	$388,387,223	16,318
16	$2,819,327,097	$1,366,425,244	$911,036,476	$388,387,223	16,318
17	$1,126,336,816	$569,541,459	$380,840,137	$192,871,464	7,149
18	$1,640,499,948	$878,525,112	$598,596,743	$289,499,204	11,176
19	$1,754,119,481	$925,185,984	$620,732,279	$335,166,247	11,745
20	$1,632,826,890	$851,112,147	$566,095,367	$291,259,925	10,614
21	$3,197,910,085	$1,675,574,193	$1,147,851,537	$552,387,533	21,200
22	$4,561,737,260	$2,394,202,839	$1,643,169,766	$771,658,116	30,190
23	$1,832,386,791	$901,622,350	$599,427,973	$284,713,747	11,037
24	$2,150,835,241	$1,074,791,891	$718,079,940	$339,013,893	13,238
25	$1,477,922,220	$716,637,212	$473,836,958	$265,204,690	8,952
26	$2,160,121,461	$999,972,584	$644,205,506	$320,657,723	11,666
27	$2,160,121,461	$999,972,584	$644,205,506	$320,657,723	11,666
28	$2,160,121,461	$999,972,584	$644,205,506	$320,657,723	11,666
29	$1,485,339,761	$727,808,041	$482,714,226	$261,368,216	9,081
30	$3,449,889,068	$1,722,117,798	$1,155,170,191	$554,144,899	21,112
31	$1,457,134,076	$777,219,416	$530,426,152	$277,209,002	10,056
32	$5,750,877,648	$2,763,715,318	$1,835,602,992	$825,009,534	33,151
33	$3,480,701,476	$1,822,202,332	$1,220,189,419	$584,659,940	22,535
34	$5,985,607,348	$2,876,520,025	$1,910,525,563	$858,683,393	34,504
35	$3,302,001,035	$1,779,828,723	$1,200,567,314	$558,646,065	22,659
36	$3,242,416,816	$1,770,353,895	$1,200,848,523	$556,432,076	22,622
37	$3,454,368,234	$1,829,112,047	$1,224,131,857	$573,012,555	23,165
38	$3,372,121,371	$1,785,561,760	$1,194,985,861	$559,369,399	22,613
39	$3,242,416,816	$1,770,353,895	$1,200,848,523	$556,432,076	22,622
40	$3,242,416,816	$1,770,353,895	$1,200,848,523	$556,432,076	22,622

(continued)
The Cumulative Net Impact Over the First Ten Years of Implementation (Health-Related Spending, Uncompensated Care Reductions, and Productivity Enhancement) Associated with Provided Coverage for the Medicaid Eligible Population (Increased Participation in the Existing Program and Public Exchange Access for Those Newly Eligible) as a Result of the Affordable Care Act (ACA) on Business Activity in Texas 2014-2023: Results by Texas House District

House District	Total Expenditures (2012 Dollars)	Gross Product (2012 Dollars)	Personal Income (2012 Dollars)	Retail Sales (2012 Dollars)	Employment (Person-Years)
41	$3,242,416,816	$1,770,353,895	$1,200,848,523	$556,432,076	22,622
42	$2,077,426,558	$1,109,483,259	$747,888,233	$378,506,230	14,075
43	$2,054,646,587	$1,083,428,072	$735,794,883	$374,041,116	13,890
44	$998,411,478	$508,000,539	$335,086,536	$191,225,762	6,513
45	$1,827,701,360	$969,535,100	$648,217,063	$314,384,392	12,171
46	$4,569,582,244	$2,446,744,770	$1,627,722,960	$726,495,132	29,580
47	$4,765,821,972	$2,551,819,699	$1,697,625,173	$757,694,310	30,850
48	$4,765,821,972	$2,551,819,699	$1,697,625,173	$757,694,310	30,850
49	$4,597,616,490	$2,461,755,474	$1,637,708,990	$730,952,158	29,761
50	$4,569,582,244	$2,446,744,770	$1,627,722,960	$726,495,132	29,580
51	$4,765,821,972	$2,551,819,699	$1,697,625,173	$757,694,310	30,850
52	$1,352,141,571	$725,714,654	$485,312,349	$250,689,796	9,098
53	$1,803,921,227	$931,140,800	$618,931,023	$315,734,437	11,745
54	$3,906,959,157	$2,166,696,784	$1,477,307,402	$700,001,542	27,764
55	$4,050,806,329	$2,249,517,245	$1,534,251,486	$724,585,905	28,801
56	$3,860,125,781	$1,957,742,732	$1,293,340,212	$586,481,911	24,101
57	$2,807,997,536	$1,490,680,686	$1,009,655,125	$487,337,144	18,938
58	$1,684,197,838	$888,092,471	$603,069,032	$282,721,270	11,278
59	$1,234,936,291	$673,768,211	$461,389,319	$230,383,056	8,790
60	$1,735,527,589	$914,494,080	$616,613,045	$322,343,939	11,797
61	$1,732,408,438	$852,055,458	$549,851,107	$313,137,160	10,456
62	$3,061,566,434	$1,668,669,200	$1,140,185,710	$554,778,001	21,636
63	$2,411,683,163	$1,211,193,021	$797,692,939	$351,831,486	14,453
64	$2,411,683,163	$1,211,193,021	$797,692,939	$351,831,486	14,453
65	$2,411,683,163	$1,211,193,021	$797,692,939	$351,831,486	14,453
66	$3,893,989,995	$2,020,090,614	$1,343,272,033	$647,012,164	24,662
67	$3,893,989,995	$2,020,090,614	$1,343,272,033	$647,012,164	24,662
68	$1,409,677,805	$713,710,016	$473,676,386	$255,214,061	8,912
69	$3,546,133,935	$1,923,058,947	$1,304,137,141	$632,192,677	24,327
70	$3,893,989,995	$2,020,090,614	$1,343,272,033	$647,012,164	24,662
71	$4,682,605,432	$2,369,916,335	$1,569,946,971	$707,102,547	28,744
72	$4,102,870,685	$2,046,803,126	$1,347,450,751	$640,847,045	25,175
73	$2,815,570,613	$1,437,809,709	$957,151,496	$470,778,922	18,148
74	$1,747,404,196	$962,442,210	$651,221,116	$335,444,285	12,480
75	$3,001,639,191	$1,522,559,521	$997,439,624	$435,082,598	18,238
76	$3,001,639,191	$1,522,559,521	$997,439,624	$435,082,598	18,238
77	$3,001,639,191	$1,522,559,521	$997,439,624	$435,082,598	18,238
78	$3,001,639,191	$1,522,559,521	$997,439,624	$435,082,598	18,238
79	$3,001,639,191	$1,522,559,521	$997,439,624	$435,082,598	18,238
80	$1,813,582,384	$967,546,595	$654,244,601	$330,164,380	12,352

(continued)
The Cumulative Net Impact Over the First Ten Years of Implementation (Health-Related Spending, Uncompensated Care Reductions, and Productivity Enhancement) Associated with Provided Coverage for the Medicaid Eligible Population (Increased Participation in the Existing Program and Public Exchange Access for Those Newly Eligible) as a Result of the Affordable Care Act (ACA) on Business Activity in Texas 2014-2023: Results by Texas House District

House District	Total Expenditures (2012 Dollars)	Gross Product (2012 Dollars)	Personal Income (2012 Dollars)	Retail Sales (2012 Dollars)	Employment (Person-Years)
81	$2,672,460,296	$1,364,364,953	$919,822,586	$442,159,525	16,837
82	$2,524,493,717	$1,280,793,437	$837,245,997	$420,846,206	15,177
83	$3,759,973,842	$2,002,078,413	$1,335,815,070	$617,696,235	24,699
84	$5,204,517,768	$2,782,709,686	$1,863,652,050	$837,747,421	34,365
85	$1,972,301,821	$945,964,331	$618,740,135	$309,585,484	11,340
86	$1,090,935,657	$565,781,790	$371,335,450	$186,865,982	6,951
87	$6,436,060,215	$3,343,045,555	$2,233,567,107	$1,031,777,783	40,957
88	$1,212,747,077	$617,118,414	$412,193,997	$225,632,945	7,819
89	$3,893,989,995	$2,020,090,614	$1,343,272,033	$647,012,164	24,662
90	$4,373,852,636	$2,217,851,938	$1,469,219,655	$636,377,115	26,622
91	$4,373,852,636	$2,217,851,938	$1,469,219,655	$636,377,115	26,622
92	$4,373,852,636	$2,217,851,938	$1,469,219,655	$636,377,115	26,622
93	$4,373,852,636	$2,217,851,938	$1,469,219,655	$636,377,115	26,622
94	$4,373,852,636	$2,217,851,938	$1,469,219,655	$636,377,115	26,622
95	$4,373,852,636	$2,217,851,938	$1,469,219,655	$636,377,115	26,622
96	$4,373,852,636	$2,217,851,938	$1,469,219,655	$636,377,115	26,622
97	$4,373,852,636	$2,217,851,938	$1,469,219,655	$636,377,115	26,622
98	$4,373,852,636	$2,217,851,938	$1,469,219,655	$636,377,115	26,622
99	$4,373,852,636	$2,217,851,938	$1,469,219,655	$636,377,115	26,622
100	$7,316,126,871	$3,561,482,264	$2,289,019,911	$892,245,095	39,796
101	$4,325,788,321	$2,193,479,939	$1,453,074,384	$629,383,960	26,330
102	$7,316,126,871	$3,561,482,264	$2,289,019,911	$892,245,095	39,796
103	$7,316,126,871	$3,561,482,264	$2,289,019,911	$892,245,095	39,796
104	$7,316,126,871	$3,561,482,264	$2,289,019,911	$892,245,095	39,796
105	$7,316,126,871	$3,561,482,264	$2,289,019,911	$892,245,095	39,796
106	$2,411,683,163	$1,211,193,021	$797,692,939	$351,831,486	14,453
107	$7,316,126,871	$3,561,482,264	$2,289,019,911	$892,245,095	39,796
108	$7,316,126,871	$3,561,482,264	$2,289,019,911	$892,245,095	39,796
109	$7,316,126,871	$3,561,482,264	$2,289,019,911	$892,245,095	39,796
110	$7,316,126,871	$3,561,482,264	$2,289,019,911	$892,245,095	39,796
111	$7,470,692,932	$3,636,724,847	$2,337,379,486	$911,095,343	40,637
112	$7,316,126,871	$3,561,482,264	$2,289,019,911	$892,245,095	39,796
113	$7,470,692,932	$3,636,724,847	$2,337,379,486	$911,095,343	40,637
114	$7,470,692,932	$3,636,724,847	$2,337,379,486	$911,095,343	40,637
115	$7,470,692,932	$3,636,724,847	$2,337,379,486	$911,095,343	40,637
116	$4,698,462,301	$2,442,189,052	$1,626,647,000	$710,697,662	29,667
117	$4,698,462,301	$2,442,189,052	$1,626,647,000	$710,697,662	29,667
118	$4,698,462,301	$2,442,189,052	$1,626,647,000	$710,697,662	29,667
119	$4,698,462,301	$2,442,189,052	$1,626,647,000	$710,697,662	29,667
120	$4,698,462,301	$2,442,189,052	$1,626,647,000	$710,697,662	29,667

(continued)
The Cumulative Net Impact Over the First Ten Years of Implementation (Health-Related Spending, Uncompensated Care Reductions, and Productivity Enhancement) Associated with Provided Coverage for the Medicaid Eligible Population (Increased Participation in the Existing Program and Public Exchange Access for Those Newly Eligible) as a Result of the Affordable Care Act (ACA) on Business Activity in Texas 2014-2023: Results by Texas House District

House District	Total Expenditures (2012 Dollars)	Gross Product (2012 Dollars)	Personal Income (2012 Dollars)	Retail Sales (2012 Dollars)	Employment (Person-Years)
121	$4,698,462,301	$2,442,189,052	$1,626,647,000	$710,697,662	29,667
122	$4,698,462,301	$2,442,189,052	$1,626,647,000	$710,697,662	29,667
123	$4,698,462,301	$2,442,189,052	$1,626,647,000	$710,697,662	29,667
124	$4,698,462,301	$2,442,189,052	$1,626,647,000	$710,697,662	29,667
125	$4,698,462,301	$2,442,189,052	$1,626,647,000	$710,697,662	29,667
126	$5,808,464,148	$2,683,957,470	$1,753,076,974	$611,037,428	29,693
127	$5,808,464,148	$2,683,957,470	$1,753,076,974	$611,037,428	29,693
128	$5,808,464,148	$2,683,957,470	$1,753,076,974	$611,037,428	29,693
129	$5,808,464,148	$2,683,957,470	$1,753,076,974	$611,037,428	29,693
130	$5,808,464,148	$2,683,957,470	$1,753,076,974	$611,037,428	29,693
131	$5,808,464,148	$2,683,957,470	$1,753,076,974	$611,037,428	29,693
132	$5,808,464,148	$2,683,957,470	$1,753,076,974	$611,037,428	29,693
133	$5,808,464,148	$2,683,957,470	$1,753,076,974	$611,037,428	29,693
134	$5,808,464,148	$2,683,957,470	$1,753,076,974	$611,037,428	29,693
135	$5,808,464,148	$2,683,957,470	$1,753,076,974	$611,037,428	29,693
136	$1,352,141,571	$725,714,654	$485,312,349	$250,689,796	9,098
137	$5,670,167,383	$2,620,053,721	$1,711,337,046	$596,488,918	28,986
138	$5,670,167,383	$2,620,053,721	$1,711,337,046	$596,488,918	28,986
139	$5,670,167,383	$2,620,053,721	$1,711,337,046	$596,488,918	28,986
140	$5,670,167,383	$2,620,053,721	$1,711,337,046	$596,488,918	28,986
141	$5,808,464,148	$2,683,957,470	$1,753,076,974	$611,037,428	29,693
142	$5,808,464,148	$2,683,957,470	$1,753,076,974	$611,037,428	29,693
143	$5,808,464,148	$2,683,957,470	$1,753,076,974	$611,037,428	29,693
144	$5,808,464,148	$2,683,957,470	$1,753,076,974	$611,037,428	29,693
145	$5,808,464,148	$2,683,957,470	$1,753,076,974	$611,037,428	29,693
146	$5,808,464,148	$2,683,957,470	$1,753,076,974	$611,037,428	29,693
147	$5,670,167,383	$2,620,053,721	$1,711,337,046	$596,488,918	28,986
148	$5,670,167,383	$2,620,053,721	$1,711,337,046	$596,488,918	28,986
149	$5,670,167,383	$2,620,053,721	$1,711,337,046	$596,488,918	28,986
150	$5,670,167,383	$2,620,053,721	$1,711,337,046	$596,488,918	28,986
TOTAL STATE IMPACT	**$602,681,687,298**	**$300,839,968,381**	**$198,571,070,384**	**$84,690,707,493**	**3,562,589**

NOTE: Allocations reflect best available evidence regarding incidence and industrial structure and composition of each area. In cases in which a county was part of more than one district, allocations are based on the percentage of the population residing in a district. This convention is adopted because of a lack of subcounty data sufficient for allocation purposes. In some instances, this approach will result in districts which reflect the same proportion of a large urban county reporting identical results. Allocations reflect district maps as currently defined.

SOURCE: US Multi-Regional Impact Assessment System, The Perryman Group

Results for Texas Senate Districts

The Cumulative Net Impact Over the First Ten Years of Implementation (Health-Related Spending, Uncompensated Care Reductions, and Productivity Enhancement) Associated with Providing Coverage for the Medicaid-Eligible Population (Increased Participation in the Existing Program and Public Exchange Access for Those Newly Eligible) as a Result of the Affordable Care Act (ACA) on Business Activity in Texas 2014-2023: Results by Texas Senate District

Senate District	Total Expenditures (2012 Dollars)	Gross Product (2012 Dollars)	Personal Income (2012 Dollars)	Retail Sales (2012 Dollars)	Employment (Person-Years)
1	$22,216,796,728	$11,457,359,735	$7,682,775,039	$3,601,748,354	142,243
2	$21,585,394,056	$10,692,104,344	$6,944,170,465	$2,869,699,012	122,959
3	$10,769,335,696	$5,682,207,774	$3,853,648,966	$1,876,702,733	72,092
4	$18,064,067,574	$8,936,367,544	$6,002,549,628	$2,576,687,819	107,492
5	$9,311,223,817	$4,899,266,011	$3,284,155,778	$1,630,617,885	61,702
6	$27,659,353,086	$12,780,749,857	$8,347,985,592	$2,909,702,038	141,397
7	$27,659,353,086	$12,780,749,857	$8,347,985,592	$2,909,702,038	141,397
8	$20,197,163,367	$10,312,981,655	$6,801,900,524	$3,128,161,342	123,312
9	$25,615,830,630	$12,801,034,753	$8,390,966,651	$3,508,687,648	149,914
10	$22,109,584,751	$11,211,119,689	$7,426,824,628	$3,216,851,352	134,574
11	$15,313,293,801	$7,270,104,451	$4,786,030,595	$1,939,766,826	84,081
12	$15,216,435,302	$7,676,960,727	$5,070,131,197	$2,217,053,799	91,868
13	$25,019,358,496	$11,562,147,639	$7,545,784,246	$2,697,235,583	128,337
14	$21,146,680,341	$11,310,196,195	$7,522,146,685	$3,370,361,927	136,818
15	$26,276,385,431	$12,141,712,364	$7,930,586,313	$2,764,216,936	134,327
16	$35,550,193,953	$17,305,794,101	$11,122,702,384	$4,335,557,151	193,377
17	$21,342,140,525	$9,886,819,478	$6,451,296,269	$2,413,236,682	110,661
18	$12,035,613,078	$5,847,266,426	$3,855,470,532	$1,848,216,402	70,217
19	$16,651,465,705	$8,698,404,027	$5,808,252,660	$2,606,138,117	106,680
20	$21,109,536,823	$10,771,524,285	$7,229,043,549	$3,313,006,763	133,318
21	$10,793,848,980	$5,731,250,113	$3,849,816,255	$1,872,217,112	71,706
22	$12,530,402,969	$6,381,544,946	$4,241,168,532	$1,959,425,261	78,846
23	$35,550,193,953	$17,305,794,101	$11,122,702,384	$4,335,557,151	193,377
24	$16,579,359,041	$8,902,642,314	$6,004,486,295	$2,846,327,294	112,276
25	$16,870,459,166	$8,784,561,432	$5,846,246,666	$2,647,614,041	107,570
26	$21,847,849,702	$11,356,179,094	$7,563,908,552	$3,304,744,129	137,950
27	$15,038,433,987	$8,062,001,637	$5,427,534,985	$2,537,187,689	102,510
28	$15,765,475,284	$8,237,791,355	$5,485,669,081	$2,567,211,325	101,849
29	$15,085,448,801	$7,653,250,606	$5,013,654,028	$2,192,909,341	91,718
30	$13,735,801,063	$7,199,394,303	$4,818,905,024	$2,392,996,036	90,123
31	$14,035,208,108	$7,200,687,572	$4,792,571,290	$2,301,167,707	87,898
TOTAL STATE IMPACT	**$602,681,687,298**	**$300,839,968,381**	**$198,571,070,384**	**$84,690,707,493**	**3,562,589**

NOTE: Allocations reflect best available evidence regarding incidence and industrial structure and composition of each area. In cases in which a county was part of more than one district, allocations are based on the percentage of the population residing in a district. This convention is adopted because of a lack of subcounty data sufficient for allocation purposes. In some instances, this approach will result in districts which reflect the same proportion of a large urban county reporting identical results. Allocations reflect district maps as currently defined.

SOURCE: US Multi-Regional Impact Assessment System, The Perryman Group

Results for US Congressional Districts

The Cumulative Net Impact Over the First Ten Years of Implementation (Health-Related Spending, Uncompensated Care Reductions, and Productivity Enhancement) Associated with Providing Coverage for the Medicaid-Eligible Population (Increased Participation in the Existing Program and Public Exchange Access for Those Newly Eligible) as a Result of the Affordable Care Act (ACA) on Business Activity in Texas 2014-2023: Results by US Congressional District in Texas

US Congressional District in Texas	Total Expenditures (2012 Dollars)	Gross Product (2012 Dollars)	Personal Income (2012 Dollars)	Retail Sales (2012 Dollars)	Employment (Person-Years)
1	$19,969,467,144	$10,268,322,531	$6,875,579,482	$3,210,144,001	127,393
2	$23,510,450,123	$10,863,637,378	$7,095,787,753	$2,473,246,732	120,188
3	$15,752,959,526	$8,172,184,756	$5,434,145,950	$2,617,458,301	99,770
4	$12,096,475,497	$6,483,781,899	$4,405,182,324	$2,174,245,246	82,933
5	$18,245,545,877	$9,055,480,523	$5,892,420,724	$2,417,286,188	104,329
6	$15,362,387,015	$7,777,963,579	$5,150,221,476	$2,276,246,616	93,760
7	$23,510,450,123	$10,863,637,378	$7,095,787,753	$2,473,246,732	120,188
8	$11,768,134,571	$5,709,736,823	$3,797,626,270	$1,585,712,006	67,636
9	$21,346,952,914	$9,865,617,348	$6,435,690,563	$2,331,513,599	109,701
10	$17,141,381,656	$8,505,574,393	$5,607,081,806	$2,297,008,109	99,164
11	$10,950,848,137	$5,595,907,363	$3,719,420,944	$1,825,283,021	69,062
12	$16,224,699,642	$8,199,116,624	$5,418,633,835	$2,401,383,680	98,561
13	$12,944,174,237	$6,766,775,821	$4,527,341,626	$2,190,460,186	83,867
14	$12,268,163,975	$6,297,045,207	$4,272,113,316	$2,039,794,948	78,757
15	$11,268,820,234	$6,110,673,623	$4,134,694,140	$1,953,756,450	78,044
16	$13,057,130,480	$6,623,133,917	$4,338,862,362	$1,892,609,300	79,337
17	$14,332,128,206	$7,419,743,806	$4,935,896,246	$2,275,739,807	91,590
18	$23,510,450,123	$10,863,637,378	$7,095,787,753	$2,473,246,732	120,188
19	$15,477,129,136	$8,093,745,789	$5,397,730,483	$2,493,007,461	99,645
20	$19,263,695,436	$10,012,975,115	$6,669,252,702	$2,913,860,415	121,633
21	$16,283,090,914	$8,521,153,948	$5,673,920,995	$2,581,950,999	104,365
22	$10,074,872,711	$4,698,177,511	$3,050,715,247	$1,413,168,489	54,579
23	$12,211,378,975	$6,380,588,127	$4,251,813,688	$1,935,969,872	78,441
24	$22,898,158,308	$11,308,493,966	$7,348,569,233	$2,990,210,483	129,818
25	$11,560,524,724	$6,162,359,836	$4,125,807,007	$1,905,494,633	76,129
26	$11,954,977,315	$6,021,082,496	$3,972,201,949	$1,740,099,774	71,950
27	$16,752,972,232	$8,156,462,795	$5,435,252,342	$2,519,875,999	98,856
28	$11,360,028,380	$6,034,860,750	$4,064,440,422	$1,917,355,040	75,711
29	$23,510,450,123	$10,863,637,378	$7,095,787,753	$2,473,246,732	120,188
30	$30,294,947,890	$14,747,546,277	$9,478,476,814	$3,694,648,702	164,790
31	$10,400,140,501	$5,710,942,090	$3,870,321,068	$1,882,950,992	72,623
32	$29,296,064,353	$14,295,245,640	$9,200,029,391	$3,619,769,919	160,306
33	$24,588,825,855	$12,154,938,176	$7,903,559,035	$3,213,724,320	139,662
34	$12,459,374,901	$6,642,359,184	$4,467,208,598	$2,117,504,999	84,455
35	$16,522,492,917	$8,686,174,079	$5,784,903,788	$2,579,454,169	105,753
36	$14,511,943,149	$6,907,254,874	$4,548,805,545	$1,790,032,840	79,218
TOTAL STATE IMPACT	**$602,681,687,298**	**$300,839,968,381**	**$198,571,070,384**	**$84,690,707,493**	**3,562,589**

NOTE: Allocations reflect best available evidence regarding incidence and industrial structure and composition of each area. In cases in which a county was part of more than one district, allocations are based on the percentage of the population residing in a district. This convention is adopted because of a lack of subcounty data sufficient for allocation purposes. In some instances, this approach will result in districts which reflect the same proportion of a large urban county reporting identical results. Allocations reflect district maps as currently defined.

SOURCE: US Multi-Regional Impact Assessment System, The Perryman Group