

Midland Memorial Hospital

Community Health Needs Assessment and Implementation Plan



September 2016



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EXECUTIVE SUMMARY





Executive Summary

A comprehensive, six-step community health needs assessment ("CHNA") was conducted for Midland Memorial Hospital (MMH) by Community Hospital Consulting (CHC Consulting). This CHNA utilizes relevant health data and stakeholder input to identify the significant community health needs in Midland County, Texas.

The CHNA Team, consisting of leadership from MMH, met with staff from CHC Consulting on September 12, 2016 to review the research findings and prioritize the community health needs. Five significant community health needs were identified by assessing the prevalence of the issues identified from the health data findings combined with the frequency and severity of mentions in community input.

The CHNA Team participated in a roundtable discussion to rank the community health needs based on three characteristics: size and prevalence of the issue, effectiveness of interventions and their capacity to address the need. Once this prioritization process was complete, MMH leadership discussed the results and decided to address all of the prioritized needs in various capacities through the hospital's implementation plan.

The five most significant needs, as discussed during the September 12th prioritization meeting, are listed below:

- 1. Prevention, Education and Services to Address High Mortality Rates, Chronic Diseases, Preventable Conditions and Unhealthy Lifestyles
- 2. Increased Emphasis on Coordination and Communication Across the Continuum of Care
- Access to Mental and Behavioral Health Care
- 4. Access to Affordable Care and Reducing Health Disparities Across Specific Populations
- 5. Need for Increased Emphasis on Physician Recruitment and Retention

The MMH Board reviewed and adopted the 2016 Community Health Needs Assessment and Implementation Plan on September 29, 2016.



PROCESS AND METHODOLOGY





Process and Methodology

Background and Objectives

This CHNA is designed in accordance with requirements identified in the Patient Protection and Affordable Care Act and further addressed in the Internal Revenue Service final regulations released in December 29, 2014. The objectives of the CHNA are to:

- Meet federal government and regulatory requirements
- Research and report on the demographics and health status of the study area, including a review of state and local data
- · Gather input, data and opinions from persons who represent the broad interest of the community
- Analyze the quantitative and qualitative data gathered and communicate results via a final comprehensive report on the needs of the community served by MMH
- · Document the progress of previous implementation plan activities
- · Prioritize the needs of the community served by the hospital
- Create an implementation plan that addresses the prioritized needs for the hospital

Scope of CHNA Report

The CHNA components include:

- A description of the process and methods used to conduct this CHNA, including a summary of data sources used in this report
- A biography of MMH
- · A description of the hospital's defined study area
- Definition and analysis of the community served, including both a demographic and a health data analysis
- Findings from phone interviews that collected input from people who represent a broad interest in the community, including:
 - State, local, tribal or regional governmental public health department (or equivalent department or agency) with knowledge, information or expertise relevant to the health needs of the community;
 - Members of a medically underserved, low-income or minority populations in the community, or individuals or organizations serving or representing the interests of such populations
 - Community leaders (ex: Weaver Accounting, Midland Chamber of Commerce, OGX Resources LLC)
- A description of the progress and/or completion of community benefit activities documented in the previous implementation plan
- The prioritized community needs and separate implementation plan, which intend to address the community needs identified
- A description of additional health services and resources available in the community
- A list of information gaps that impact the hospital's ability to assess the health needs of the community served



Process and Methodology Continued

Methodology:

MMH worked with CHC Consulting in the development of its CHNA. MMH provided essential data and resources necessary to initiate and complete the process, including the definition of the hospital's study area and the identification of key community stakeholders to be interviewed.

CHC Consulting conducted the following research:

- · A demographic analysis of the study area, utilizing demographic data
- A study of the most recent health data available
- Conducted one-on-one phone interviews with individuals who have special knowledge of the communities, and analyzed
 results
- Facilitated the prioritization process during the CHNA Team meeting on September 12, 2016

The methodology for each component of this study is summarized below. In certain cases methodology is elaborated in the body of the report.

- Midland Memorial Hospital Biography
 - Background information, mission, vision, values and services were provided by the hospital or taken from its website
- Study Area Definition
 - The study area for MMH is based on hospital inpatient discharge data from January 2015 December 2015 and discussions with hospital staff
- Demographics of the Study Area
 - Population demographics include population change by race, ethnicity, age, median household income, unemployment and economic statistics in the study area
 - Demographic data sources include, but are not limited to, Texas Department of State Health Services, the U.S. Census Bureau and the United States Bureau of Labor Statistics
- Health Data Collection Process
 - A variety of sources, which are all listed in the reference section of this report, were utilized in the health data collection process
 - Health data sources include, but are not limited to, the Robert Wood Johnson Foundation, Texas Department of State Health Services, Community Commons, Enroll America, the U.S. Department of Health and Human Services Health Resources and Services Administration, United States Census Bureau, and the Centers for Disease Control and Prevention



Process and Methodology Continued

Interview Methodology

- MMH provided CHC Consulting with a list of persons with special knowledge of public health in Midland County, including
 public health representatives and other individuals who focus specifically on underrepresented groups
- From their lists of potential interviewees, 22 in depth interviews were conducted using a structured interview guide
- Extensive notes were taken during each interview and then quantified based on responses, communities and populations (minority, elderly, un/underinsured, etc.) served, and priorities identified by respondents. Qualitative data from the interviews was also analyzed and reported.

Evaluation of Hospital's Impact

- A description of the progress and/or completion of community benefit activities documented in the previous implementation plan
- MMH provided CHC Consulting with a report of community benefit activity progress since the previous community health needs assessment

Prioritization Strategy

- Five significant needs were determined by assessing the prevalence of the issues identified in the health data findings, combined with the frequency and severity of mentions in the interviews
- Three factors were used to rank those needs during the CHNA prioritization meeting on September 12, 2016
- See the prioritization section for a more detailed description of the prioritization methodology



HOSPITAL BIOGRAPHY





About Midland Memorial Hospital

About Us

Midland Memorial Hospital is your home for healthcare, providing the high quality healthcare and services you and your family need.

Since 1950, we have exemplified excellence in patient care, medical education and community service. We also offer financial assistance programs, so everyone can access quality health care they can trust. As a not-for-profit entity, we show our commitment to improving our community by reinvesting volunteered time and finances into the health of west Texas.

History

In 1950, Midland Memorial Hospital, the only not-for-profit hospital in Midland County, Texas was established by prominent community leaders with one mission: "To make quality healthcare available to all residents of Midland County." Funds to build the hospital were donated by individuals, corporations and foundations as a nonprofit, community-based hospital, offering medical care to the west Texas community, regardless of their ability to pay.

The hospital opened its doors on July 11, 1950, as a community owned, 75-bed hospital, serving the nearly 22,000 people who resided in Midland County. The hospital was staffed with 78 employees and 26 physicians. The 58,694 square foot, state-of-the-art medical facility cost \$1,372,000.

Over succeeding decades, Midland Memorial Hospital has changed dramatically to meet the needs of a dynamic community. In May 2009, Midland County residents approved a \$115 million bond to build a new patient tower, which was combined with another \$62.6 million in private donations and grants. It was the first \$100 million bond issue approved by Midland voters.

On December 19, 2012, the hospital opened the new, nine-story, Dorothy and Clarence Scharbauer Jr Patient Tower, staying under the \$177.6 million project budget.

The new tower consolidated several West Campus operations, such as the OB/GYN unit, into the main campus. The tower also features a number of new amenities for inpatients such as an interactive television system and a motorized patient lift in every room. The hospital is licensed for 474 beds and offers several innovative programs, including the Heart Institute, Total Joint Center, women's and children's health care services and various rehabilitation programs.

In August 1977, the Hospital District was formed and a modest tax levied to support only the care of indigent patients. Now, the Board of Directors of the Midland County Hospital District, elected by the voters, add their counsel and insight to the direction of the volunteer Boards of Trustees and Governors, in guiding the further development of Midland Memorial Hospital.

For over 60 years, we have maintained our pledge to deliver quality health care to the residents of Midland County and the surrounding region. Our staff, volunteers, facilities, and services reflect this commitment today. We are committed to providing the best possible care and service you and your family need.

Source: Midland Memorial Hospital, "About Us," http://www.midland-memorial.com/about-us/default.aspx; accessed August 1, 2016.

Mission, Vision and Values

Our Mission

Leading healthcare for greater Midland.

Our Vision

Midland will be the healthiest community in Texas.

Our Core Values

Pioneer Spirit

We tell the truth and honor commitments.

We innovate and embrace change.

We are careful stewards of our resources.

We overcome problems without complaining.

We exceed expectations through teamwork and partnerships.

Caring Heart

We are West Texas friendly... treating all people with kindness and respect.

We care for the hearts and souls of our patients and visitors.

We see the human being first, then the medical condition.

We slow down and listen; true healing begins with empathy.

We honor diversity and promote the dignity of each individual.

Healing Mission

We do our best to improve the health and well-being of our community.

We are continuous learners.

We create an environment that supports the healing process.

We care for ourselves so we are able to care for others.

We find joy in our work and have fun together.

Source: Midland Memorial Hospital, "About Us," http://www.midland-memorial.com/about-us/default.aspx; accessed August 1, 2016



Services Provided

- Acute Care of the Elderly (ACE) Unit
- Cancer Care
- Cardiopulmonary
- Critical Care
- Diabetes
- Direct Access Testing
- Heart & Lung Care
- Hope Chest
- Hospitalists
- Infection Prevention

- Neurology, Neurosurgery & Orthopedics
- Outpatient Treatment Center
- Palliative Care
- Radiology
- Rehabilitation Services

 Wound Care
- Robotic Surgery
- Stroke Care
- **Surgical Services**

- **Testing Center**
- Total Joint Center
- Weigh to Success **Bariatric Program**
- West Texas Therapy
- Women's and Children's Services

Source: Midland Memorial Hospital, "Services," http://www.midland-memorial.com/services/default.aspx; accessed August 1, 2016.



STUDY AREA





Midland Memorial Hospital Study Area



Indicates the hospital

Midland Memorial Hospital Patient Origin by County CY 2015

County	State	CY 2015 Discharges	% of Total	Cumulative % of Total
Midland	TX	7,279	76.8%	76.8%
Other		2,198	23.2%	100.0%
Total		9,477	100.0%	

City Gardendale 250 Chub Greenwood Mustang Creek Midland Creek Sandy Acres Cotton Flat Sprabetry

Bounce Ridgeheights Sandy Acres Cotton Flat Sprabetry

TEXAS

Benge Corner Bigby

Midkiff

Source: Hospital inpatient discharge data by DRG; Normal Newborns MS-DRG 795 excluded; January 2015 - December 2015



Stanton

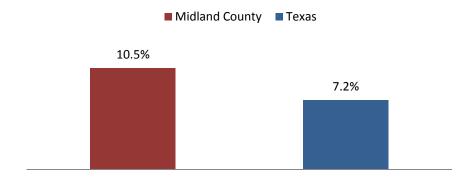
DEMOGRAPHIC OVERVIEW





Overall Population Change

Projected Population Growth (2016-2021)



Overall Population Growth							
Geographic Location 2010 2016 2021 2016-2021 2016-2021 % Change							
Midland County	136,872	162,350	179,380	17,030	10.5%		
Texas	25,145,561	27,611,503	29,594,059	1,982,556	7.2%		

Texas

Midland County

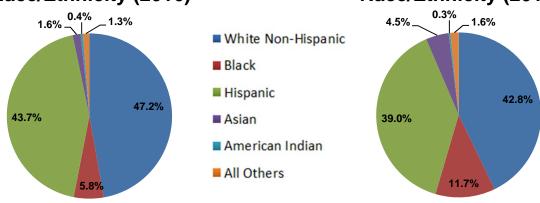
Source: Truven Health's Market Expert, data accessed August 1, 2016.



Population by Race/Ethnicity

Midland County Race/Ethnicity (2016)

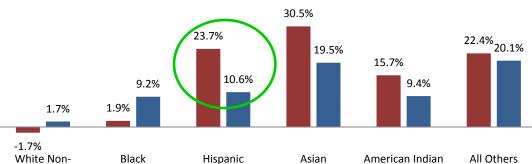
Texas Race/Ethnicity (2016)



Note: due to rounding, percentages may not add up to 100.0%.

Race/Ethnicity Projected Growth (2016-2021)

■ Midland County



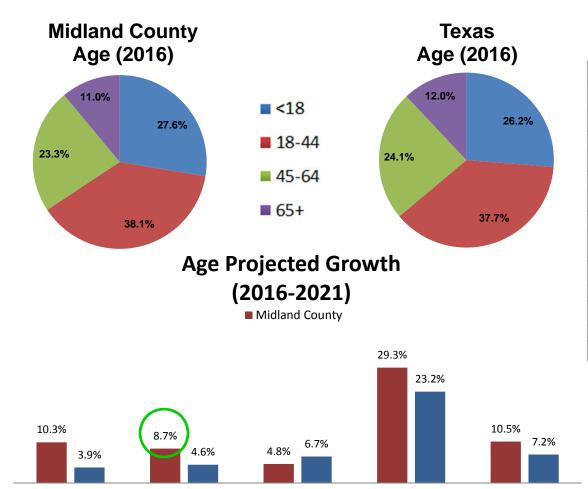
		acc,	
		Ethnicity	
		White Non-	
		Hispanic	1
		Black	2
		Hispanic	ç
20.19	6	Asian	
		American	
		Indian	
		All Others	
		Total	2
hers			

Midland County							
Race/ Ethnicity	2010	2016	2021	2016-2021 Change	2016-2021 % Change		
White Non-							
Hispanic	72,822	76,684	75,414	-1,270	-1.7%		
Black	8,675	9,444	9,621	177	1.9%		
Hispanic	51,600	70,923	87,703	16,780	23.7%		
Asian	1,681	2,521	3,289	768	30.5%		
American							
Indian	552	693	802	109	15.7%		
All Others	1,542	2,085	2,551	466	22.4%		
Total	136,872	162,350	179,380	17,030	10.5%		
		Texas	S				
Race/ Ethnicity	2010	2016	2021	2016-2021 Change	2016-2021 % Change		
White Non-							
Hispanic	11,397,345	11,826,504	12,031,781	205,277	1.7%		
Black	2,886,825	3,236,542	3,533,064	296,522	9.2%		
Hispanic	9,460,921	10,770,670	11,911,61	1,140,941	10.6%		
Asian	966,346	1,234,583	1,474,773	240,190	19.5%		
American							
Indian	80,586	90,730	99,277	8,547	9.4%		
All Others	353,538	452,474	543,553	91,079	20.1%		
Total	25,145,561	27,611,503	29,594,059	1,982,556	7.2%		





Population by Age



45-64

65+

Total

Midland County						
Age Cohort	2016	2021	2016-2021 Change	2016-2021 % Change		
<18	44,857	49,472	4,615	10.3%		
18-44	61,809	67,157	5,348	8.7%		
45-64	37,774	39,594	1,820	4.8%		
65+	17,910	23,157	5,247	29.3%		
Total	162,350	179,380	17,030	10.5%		
		Texas				
Age Cohort	2016	2021	2016-2021 Change	2016-2021 % Change		
<18	7,247,559	7,532,274	284,715	3.9%		
18-44	10,396,903	10,879,403	482,500	4.6%		
45-64	6,644,010	7,089,711	445,701	6.7%		
65+	3,323,031	4,092,671	769,640	23.2%		
Total	27,611,503	29,594,059	1,982,556	7.2%		

Source: Truven Health's Market Expert, data accessed August 1, 2016.

18-44

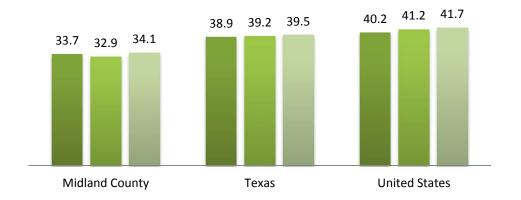
<18



Median Age

- As of 2016, Midland County (32.9 years) has a lower median age than Texas (39.2 years) and the nation (41.2 years).
- The median ages in Midland County, Texas, and the United States are projected to increase between 2016 and 2021.





Source: Truven Health's Market Expert, data accessed August 1, 2016.



Median Household Income

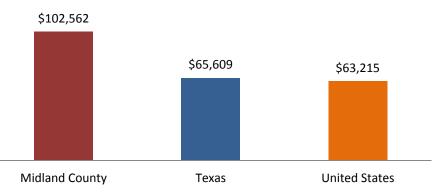
- As of 2016, Midland County (\$74,572) has a significantly higher median household income than Texas (\$48,776) and the United States (\$48,280).
- The median household incomes in Midland County, Texas, and the United States are projected to increase between 2016 and 2021. Midland County's projected growth percentage in median household income level is higher than the state and the nation (2016-2021).
- The average income in Midland County (\$102,562) is significantly higher than the state (\$65,609) and national (\$63,215) average income levels (2016). The average income in the county (\$102,562) is also significantly higher than the median household income (\$74,572).

Median Household Income



Average Income (2016)





Source: Truven Health's Market Expert, data accessed August 1, 2016.

Median Household Income Definition: A median household income refers to the income level earned by a given household where half of the homes in the area earn more and half earn less.

Average Income Definition: Average income measures the average income earned per person in a given area (city, region, country, etc.) in a specified year. It is calculated by dividing the area's total income by its total population.



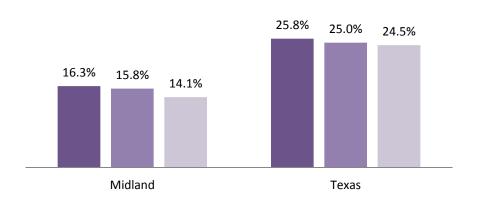
Poverty

- Between 2012 and 2014, the percent of children (age 0-17) living below poverty in Midland County and the state steadily decreased.
- As of 2014, Midland County (14.1%) has a lower rate of children (age 0-17) living in poverty than the state (24.5%).

Children Living Below Poverty

Percent, Children (age 0-17), 2012-2014

2012 2013 2014



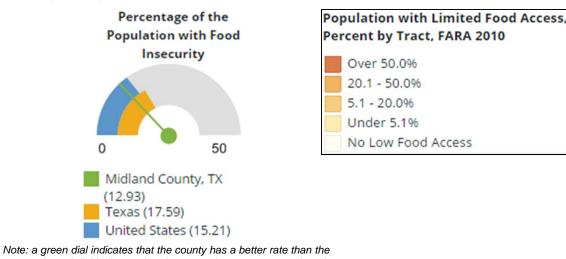
Source: The Annie E. Casey Foundation, Kids Count Data Center, filtered for Midland County, TX, www.datacenter.kidscount.org; data accessed August 4, 2016 Children Living Below Poverty Definition: Estimated numbers of children ages 0-17 living in families with incomes below the official federal poverty threshold.

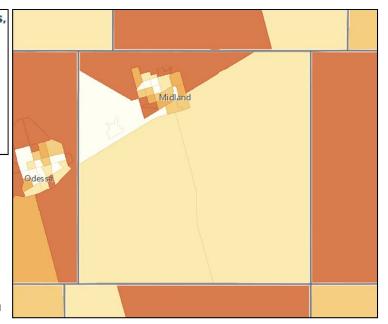


Limited Access to Healthy Food

Food Insecurity & Hunger

- In 2013, Midland County (12.9%) had a lower percentage of its population that experienced food insecurity at some point during the report year than the state (17.6%) and the nation (15.2%).
- A significant number of census tract populations in Midland County have at least 5.1% 20.0% of their populations facing limited food access, or classified as living within a food desert (2010).
- Several census tracts in the county have over 50.0% of their residents with limited food access (2010).





state, and a red dial indicates that the county has a worse rate than the state.

Source: Community Commons, Health Indicator Report filtered for Midland County, Texas, www.communitycommons.org; data accessed August 8, 2016.

Food Insecurity Definition: Food insecurity is the household-level economic and social condition of limited or uncertain access to adequate food.

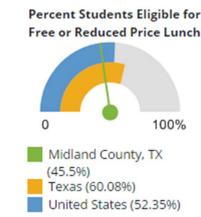
Food Desert Definition: A food desert is defined as a low-income census tract where a substantial number or share of residents has low access to a supermarket or large grocery store. A population is defined as having limited food access if they are living more than 1 mile from a supermarket or large grocery store if in a rural area.



Limited Access to Healthy Food

Food Insecurity & Hunger Continued

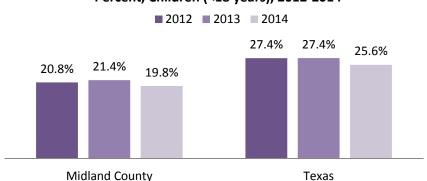
- Midland County (45.5%) has a lower percentage of public school students that are eligible for free or reduced price lunch than the state (60.1%) and the nation (52.4%) (2013-2014).
- Between 2012 and 2014, the percent of children (<18 years) that were food insecure in Midland County and the state overall decreased.
- In 2014, Midland County (19.8%)
 had a lower percentage of children
 (<18 years) who were food
 insecure than the state (25.6%).



Note: a green dial indicates that the county has a better rate than the state, and a red dial indicates that the county has a worse rate than the state.

Child Food Insecurity

Percent, Children (<18 years), 2012-2014



Source: Community Commons, Health Indicator Report filtered for Midland County, Texas, www.communitycommons.org; data accessed August 9, 2016.

Source: The Annie E. Casey Foundation, Kids Count Data Center, filtered for Midland County, TX, www.datacenter.kidscount.org; data accessed August 9, 2016.

Food Insecurity Definition: A child (under 18 years old) is defined as being food insecure if he or she lives in a household having difficult meeting basic food needs, as defined by the Census Bureau's Current Population Survey.

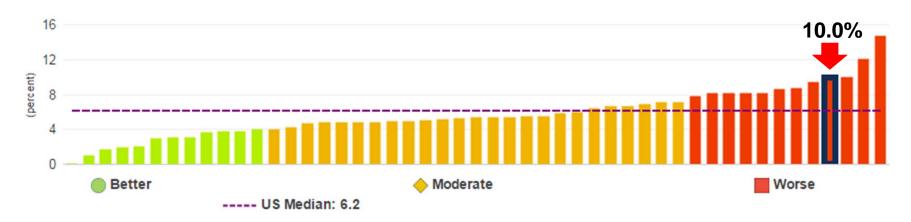


Limited Access to Healthy Food

Peer County Rankings

• In comparison to peer counties, Midland County (10.0%) ranked in the least favorable quartile for the percent of individuals who are low-income and do not live close to a grocery store in 2010, and also ranked above the U.S. median (6.2%).

Limited Access to Healthy Food, Midland County Percent, Low-Income Population that Does Not Live Near a Grocery Store, 2010



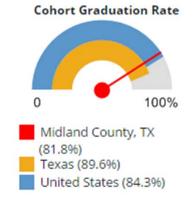
Source: Centers for Disease Control and Prevention, Community Health Status Indicators, filtered for Midland County, Texas; http://wwwn.cdc.gov/CommunityHealth/: data accessed August 9, 2016.

Definition: Limited access to healthy foods captures the proportion of the population who are low income and do not live close to a grocery store. Living close to a grocery store is defined differently in rural and non-rural areas; in rural areas, it means living less than 10 miles from a grocery store whereas in non-rural areas, it means less than 1 mile. Low income is defined as having an annual family income of less than or equal to 200 percent of the federal poverty threshold for the family size. Stores met the definition of a supermarket or large grocery store if they reported at least \$2 million in annual sales and contained all the major food departments found in a traditional supermarket, including fresh meat and poultry, dairy, dry and packaged foods, and frozen foods.



Educational Attainment

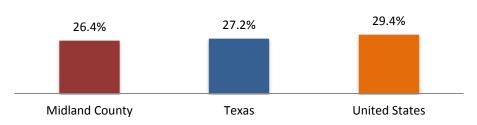
- In 2013-2014, Midland County (81.8%) had a lower high school graduation rate than the state (89.6%) and the nation (84.3%).
- Midland County (26.4%)
 has a lower percentage of
 residents with a Bachelor's
 or Advanced Degree than
 Texas (27.2%) and the
 nation (29.4%) (2016).



Note: a green dial indicates that the county has a better rate than the state, and a red dial indicates that the county has a worse rate than the

Education Bachelor / Advanced Degree (2016)





Source: Community Commons, Health Indicator Report filtered for Midland County, Texas, www.communitycommons.org; data accessed August 3, 2016. Cohort Graduation Rate Definition: Students receiving a high school diploma within four years.

Source: Truven Health's Market Expert, data accessed August 1, 2016.

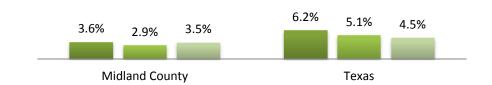


Unemployment

- Unemployment rates in Midland County have fluctuated since 2013, while rates in the state have steadily decreased (2013-2015).
- In 2015, the unemployment rate in Midland County (3.5%) was lower than the state rate (4.5%).
- Labor force numbers in Midland County have fluctuated since 2013, but have overall increased (2013-2015).



■ 2013 **■** 2014 **■** 2015



LOCATION	2013		2014		2015	
LOCATION	Employed	Unemployed	Employed	Unemployed	Employed	Unemployed
Midland County	83,175	3,133	88,324	2,610	85,404	3,052
Labor Force Total	86,308		90,934		88,456	

Source: Bureau of Labor Statistics, Local Area Unemployment Statistics, (rates shown are a percentage of the labor force), http://www.bls.gov/lau/; data accessed September 14, 2016.



HEALTH DATA OVERVIEW



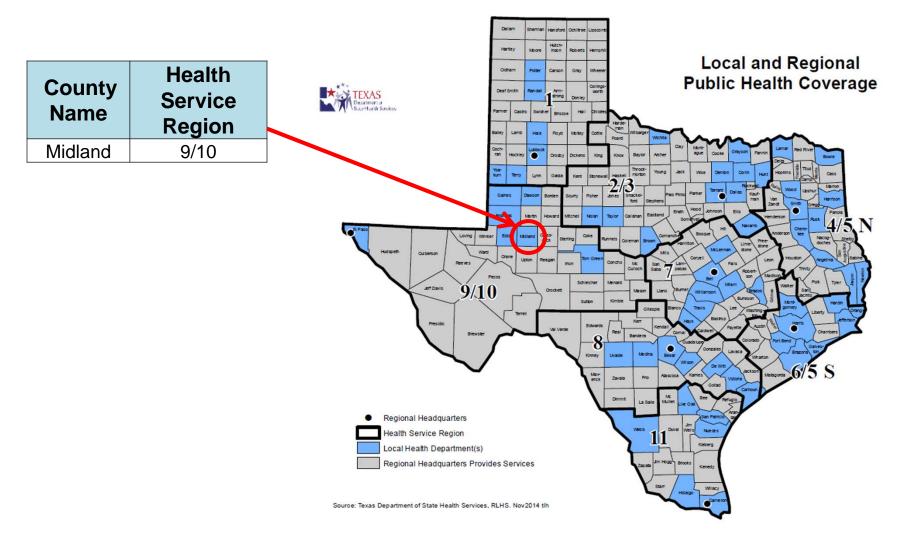


Data Methodology

- The following information outlines specific health data:
 - Mortality, chronic diseases and conditions, health behaviors, natality, mental health and health care access
- Data Sources include, but are not limited to:
 - Texas Department of State Health Services
 - Texas Cancer Registry
 - Enroll America
 - Community Commons
 - Community Health Status Indicators (CHSI)
 - The Annie E. Casey Foundation Kids Count Data Center
 - The Behavioral Risk Factor Surveillance System (BRFSS)
 - The Behavioral Risk Factor Surveillance System (BRFSS) is the world's largest, on-going telephone health survey system, tracking health conditions and risk behaviors in the United States yearly since 1984. Currently, data are collected monthly in all 50 states, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, and Guam.
 - It is a state-based system of health surveys that collects information on health risk behaviors, preventive health
 practices, and health care access primarily related to chronic disease and injury. For many states, the BRFSS is the
 only available source of timely, accurate data on health-related behaviors.
 - States use BRFSS data to identify emerging health problems, establish and track health objectives, and develop
 and evaluate public health policies and programs. Many states also use BRFSS data to support health-related
 legislative efforts.
 - The Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute
 - U.S. Department of Health and Human Services Health Resources and Services Administration
 - United States Census Bureau
- Data Levels: Nationwide, state, health service region and county level data



County and Health Service Region Map



Source: Texas Department of State Health Services, Center for Health Statistics; Last updated July 31, 2015; http://www.dshs.state.tx.us/chs/vstat/annrpts.shtm; data accessed March 29, 2016.



County Health Rankings (2016)

- The County Health Rankings rank 241 counties in Texas (1 being the best, 241 being the worst).
- Many factors go into these rankings.

A few examples include:

- Quality of Life:
 - Poor or fair health
 - Poor physical health days
 - Poor mental health days
 - Low birthweight
- Physical Environment:
 - Air pollution particulate matter
 - Drinking water violations
 - Severe housing problems
 - Driving alone to work

2016 County Health Rankings	Midland County
Health Outcomes	40
LENGTH OF LIFE	74
QUALITY OF LIFE	41
Health Factors	71
HEALTH BEHAVIORS	136
CLINICAL CARE	44
SOCIAL & ECONOMIC FACTORS	48
PHYSICAL ENVIRONMENT	222

Note: Green represents the best ranking for the county, and red represents the worst ranking.

Source: County Health Rankings and Roadmaps; www.countyhealthrankings.org; data accessed August 1, 2016. Note: Please see the appendix for full methodology.

Note: County Health Rankings ranks 241 of the 254 counties in Texas.



Top 10 Causes of Death

State/County Comparison, Age-Adjusted Death Rate, 2013

Rank	Midland County	Texas		
1	Diseases of the Heart (I00-I09, I11, I13, I20-I51)	Diseases of the Heart (I00-I09, I11, I13, I20-I51)		
2	Malignant Neoplasms (C00-C97)	Malignant Neoplasms (C00-C97)		
3	Accidents (V01-X59, Y85-Y86)	Chronic Lower Respiratory Diseases (J40-J47)		
4	Alzheimer's Disease (G30)	Cerebrovascular Diseases (I60-I69)		
5	Cerebrovascular Diseases (I60-I69)	Accidents (V01-X59, Y85-Y86)		
6	Chronic Lower Respiratory Diseases (J40-J47)	Alzheimer's Disease (G30)		
7	Influenza and Pneumonia (J09-J18)	Diabetes Mellitus (E10-E14)		
8	Intentional Self-Harm (Suicide) (X60-X84, Y87.0)	Septicemia (A40-A41)		
9	Septicemia (A40-A41)	Nephritis, Nephrotic Syndrome and Nephrosis (N00-N07, N17-N19, N25-N27)		
10	Diabetes Mellitus (E10-E14)	Influenza and Pneumonia (J09-J18)		

Source: Texas Health Data, Deaths of Texas Residents; Last Updated July 31, 2015; http://soupfin.tdh.state.tx.us/death10.htm; data accessed August 4, 2016.



Leading Causes of Death

State/County Comparison, Age-Adjusted Death Rate

	Ranking				ortality	Rate Change 2011-2013 (3)	
2011	2012	2013	Cause of Death	Midland County	e (2) Texas	Midland County	Texas
121	153	132	Diseases of the Heart (100-109, 111, 113, 120-151)	1 69.1	170.7	+	•
147	144	156	Malignant Neoplasms (C00-C97)	133.1	156.1	•	•
51	47	29	Accidents (V01-X59, Y85-Y86)	45.3	36.8		•
12	22	18	Alzheimer's Disease (G30)	41.2	24.4	•	•
24	53	49	Cerebrovascular Diseases (160-169)	4 0.8	40.1	+	•
39	62	72	Chronic Lower Respiratory Diseases (J40-J47)	38.5	42.3	•	1
1	2	2	Influenza and Pneumonia (J09-J18)	31.1	14.4	1	1
6	11	6	Intentional Self-Harm (Suicide) (X60-X84, Y87.0)	16.8	11.6	1	1
15	8	24	Septicemia (A40-A41)	1 4.5	16.4	+	1
25	34	38	Diabetes Mellitus (E10-E14)	13.6	21.6	+	1

⁽¹⁾ Note: the higher the ranking number, the lower the rate. The lower the ranking number, the higher the rate (1 being the worst, 254 being the best).

Source: Texas Health Data, Deaths of Texas Residents; Last Updated July 31, 2015; http://soupfin.tdh.state.tx.us/death10.htm; data accessed August 4, 2016. Note: Age-adjusted rates use the 2000 population standard; "-" indicates that the numerator is too small for rate calculation.



^{🔻 (1)} Red indicates the county's ranking lowered/worsened for that disease category. 🔎 (2) Green indicates that the county's rate is lower than the state's rate for that disease category.

⁽¹⁾ Yellow indicates the county's ranking *remained steady* for that disease category.

(1) Green indicates the county's ranking *improved* for that disease category.

⁽²⁾ Red indicates that the county's rate is *higher* than the state's rate for that disease category.

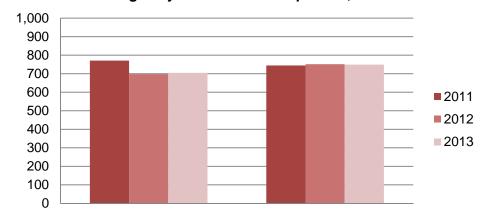
⁽³⁾ Green indicates that the county's rate has decreased since 2011.

⁽³⁾ Red indicates that the county's rate has increased since 2011.

Mortality

- Overall mortality rates in Midland County decreased between 2011 and 2013, while rates in the state remained steady.
- In 2013, Midland County (704.6 per 100,000) had a lower overall mortality rate than the state (749.2 per 100,000).

Overall Mortality Age-adjusted Death Rate per 100,000



Midland County

LOCATION	20	11	20	12	20	13
	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE
Midland County	1,051	770.6	986	697.7	1,037	704.6
Texas	167,997	744.3	173,935	751.3	178,501	749.2

Source: Texas Health Data, Deaths of Texas Residents; Last Updated July 31, 2015; http://soupfin.tdh.state.tx.us/death10.htm; data accessed August 4, 2016.



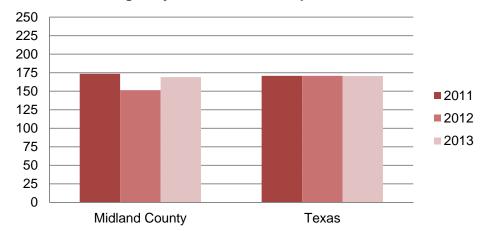
Texas

Diseases of the Heart Mortality

- Heart disease is the leading cause of death in both Midland County and the state (2013).
- Between 2011 and 2013, heart disease mortality rates in Midland County fluctuated, while rates in the state remained stable.
- In 2013, the heart disease mortality rate in Midland County (169.1 per 100,000) was consistent with the state rate (170.7 per 100,000).

Diseases of the Heart

Age-adjusted Death Rates per 100,000



	20	11	20	12	20	13
LOCATION	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE
Midland County	235	173.6	214	151.4	247	169.1
Texas	37,955	170.8	38,987	170.8	40,150	170.7

Source: Texas Health Data, Deaths of Texas Residents; Last Updated July 31, 2015; http://soupfin.tdh.state.tx.us/death10.htm; data accessed August 4, 2016.

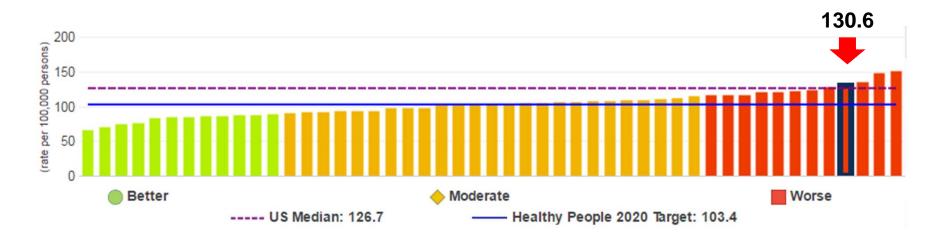


Coronary Heart Disease Deaths

Peer County Rankings

• In comparison to peer counties, Midland County (130.6 per 100,000) ranked in the least favorable quartile for coronary heart disease deaths, and also ranked above the Healthy People 2020 Target (103.4 per 100,000) and the U.S. median (126.7 per 100,000) (2005-2011).

Coronary Heart Disease Deaths, Midland County Age-adjusted Death Rate per 100,000 Persons, 2005-2011



Source: Centers for Disease Control and Prevention, Community Health Status Indicators, filtered for Midland County, Texas; http://wwwn.cdc.gov/CommunityHealth/; data accessed August 4, 2016.

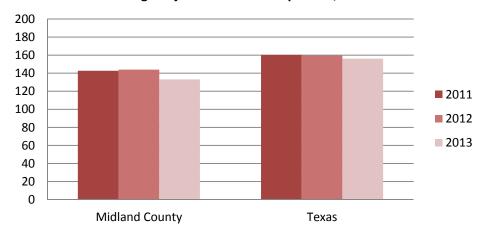


Malignant Neoplasms Mortality

- Cancer is the 2nd leading cause of death in both Midland County and the state (2013).
- Between 2011 and 2013, Midland County and the state experienced an overall slight decrease in cancer mortality rates.
- In 2013, the cancer mortality rate in Midland County (133.1 per 100,000) was lower than the state rate (156.1 per 100,000).

Malignant Neoplasms

Age-adjusted Death Rate per 100,000



LOCATION	2011		2012		2013	
	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE
Midland County	196	142.7	206	143.9	202	133.1
Texas	37,121	160.2	38,096	159.5	38,289	156.1

Source: Texas Health Data, Deaths of Texas Residents; Last Updated July 31, 2015; http://soupfin.tdh.state.tx.us/death10.htm; data accessed August 4, 2016.

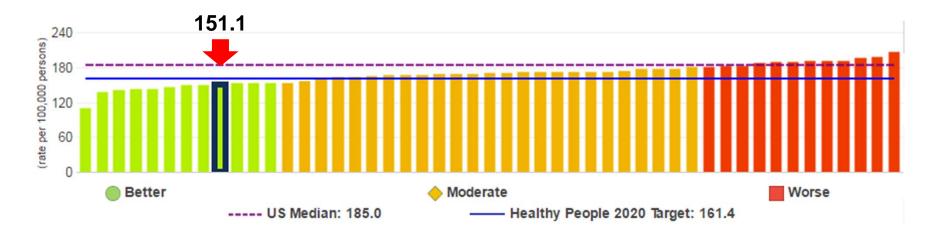


Cancer Deaths Peer County Rankings

• In comparison to peer counties, Midland County (151.1 per 100,000) ranked within the most favorable quartile for cancer death rates, and also ranked below the Healthy People 2020 Target (161.4 per 100,000) and

the U.S. median (185.0 per 100,000) (2005-2011).

Cancer Deaths, Midland County Age-adjusted Death Rate per 100,000 Persons, 2005-2011



Source: Centers for Disease Control and Prevention, Community Health Status Indicators, filtered for Midland County, Texas; http://wwwn.cdc.gov/CommunityHealth/: data accessed August 4, 2016.



Cancer Mortality by Type

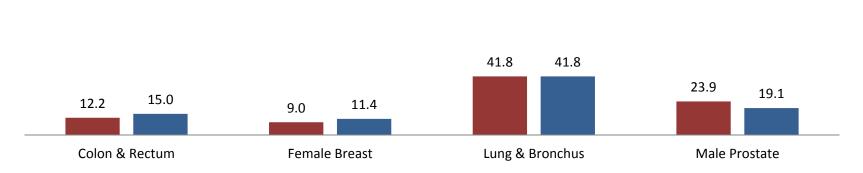
Age-Adjusted Rates per 100,000, 2009-2013

- Midland County has lower colon and rectum (12.2 per 100,000) and female breast (9.0 per 100,000) cancer mortality rates than the state (15.0 per 100,000 and 11.4 per 100,000, respectively) (2009-2013).
- The lung and bronchus cancer mortality rate in Midland County (41.8 per 100,000) is consistent with the state rate (41.8 per 100,000), while male prostate cancer mortality rates in the county (23.9 per 100,000) are higher than the state rate (19.1 per 100,000) (2009-2013).

Cancer Mortality by Type

Age-adjusted Death Rates per 100,000; 2009-2013

■ Midland County
■ Texas



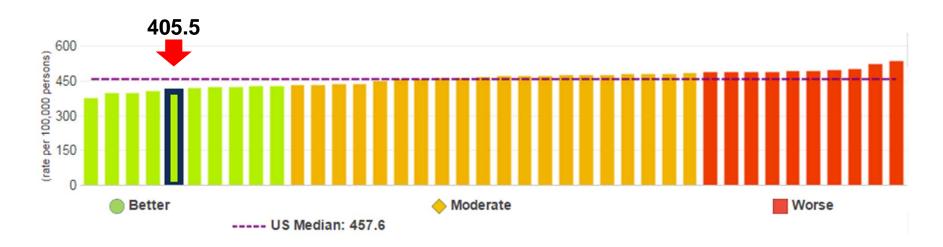
Source: Texas Cancer Registry, Cancer Incidence File, http://www.cancer-rates.info/tx/index.php; data accessed August 4, 2016. Note: All rates are per 100.000. Rates are age-adjusted to the 2000 U.S. Standard Population.



Cancer Incidence Peer County Rankings

 In comparison to peer counties, Midland County (405.5 per 100,000) ranked within the most favorable quartile for cancer incidence rates, and also ranked below the U.S. median (457.6 per 100,000) (2006-2010).

Cancer Incidence, Midland County Age-adjusted Incidence Rate per 100,000 Persons, 2006-2010



Source: Centers for Disease Control and Prevention, Community Health Status Indicators, filtered for Midland County, Texas; http://wwwn.cdc.gov/CommunityHealth/; data accessed August 4, 2016.



Cancer Incidence by Type

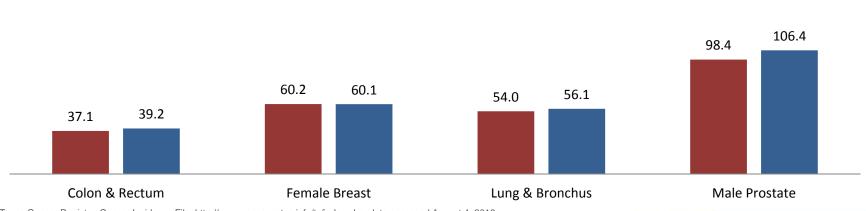
Age-Adjusted Rates per 100,000, 2009-2013

- Midland County has a lower colon and rectum (37.1 per 100,000), lung and bronchus (54.0 per 100,000), and male prostate (98.4 per 100,000) cancer incidence rate than the state (39.2 per 100,000, 56.1 per 100,000, and 106.4 per 100,000, respectively) (2009-2013).
- The female breast cancer incidence rate in Midland County (60.2 per 100,000) is consistent with the state rate (60.1 per 100,000) (2009-2013).

Cancer Incidence by Type

Age-adjusted Incidence Rates per 100,000, 2009-2013

Midland County Texas



Source: Texas Cancer Registry, Cancer Incidence File, http://www.cancer-rates.info/tx/index.php; data accessed August 4, 2016. Note: All rates are per 100,000. Rates are age-adjusted to the 2000 U.S. Standard Population.

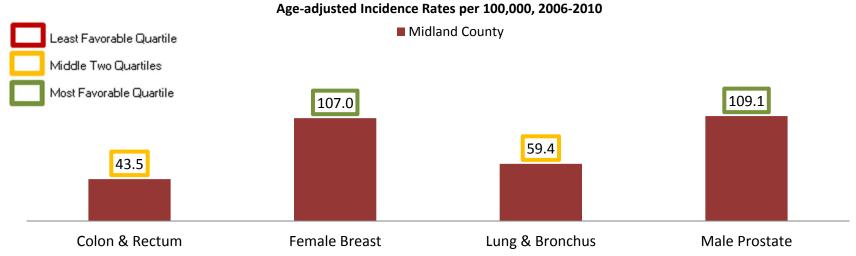


Cancer Incidence by Type

Peer County Rankings

- In comparison to peer counties, Midland County ranked within the two middle quartiles for colon and rectum (43.5 per 100,000) and lung and bronchus (59.4 per 100,000) cancer incidence rates (2006-2010).
- Midland County ranked within the most favorable quartile for female breast (107.0 per 100,000) and male prostate (109.1 per 100,000) cancer incidence rates (2006- 2010).

Cancer Incidence by Type, Peer County Rankings



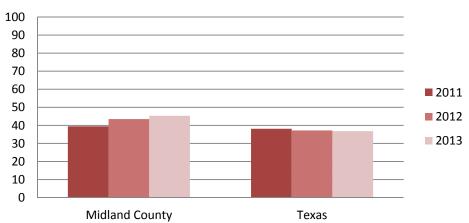
Source: Centers for Disease Control and Prevention, Community Health Status Indicators, filtered for Midland County, Texas; http://wwwn.cdc.gov/CommunityHealth/; data accessed August 4, 2016.



Accidents Mortality

- Fatal accidents are the 3rd leading cause of death in Midland County, and the 5th leading cause of death in the state (2013).
- Accident mortality rates in Midland County steadily increased in between 2011 and 2013, and slightly decreased in the state.
- Midland County (45.3 per 100,000) accident mortality rates remain higher than the state (36.8 per 100,000) (2013).
- In 2013, the leading cause of fatal accidents in Midland County was motor vehicle accidents (38 deaths; 25.8 per 100,000).





	2011		2012		2013	
LOCATION	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE
Midland County	55	39.5	61	43.5	66	45.3
Texas	9,301	38.1	9,267	37.2	9,341	36.8

Source: Texas Health Data, Deaths of Texas Residents; Last Updated July 31, 2015; http://soupfin.tdh.state.tx.us/death10.htm; data accessed August 4, 2016. Accident mortality rates include: motor vehicle crashes, other land transport accidents, water transport accidents, air and space transport accidents, falls, accidental shootings, drownings, fire and smoke exposures, poisonings, suffocations, and all other unintentional injuries.

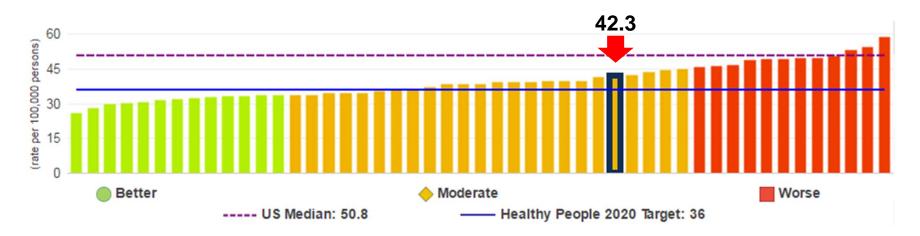


Unintentional Injury (Including Motor Vehicle) Mortality

Peer County Rankings

• In comparison to peer counties, Midland County (42.3 per 100,000) ranked within the upper end of the two middle quartiles for unintentional injury deaths between 2005 and 2011, and also ranked above the Healthy People 2020 Target (36.0 per 100,000) but below the U.S. median (50.8 per 100,000).

Unintentional Injury (Including Motor Vehicle), Midland County Age-adjusted Death Rate per 100,000 Persons, 2005-2011



Source: Centers for Disease Control and Prevention, Community Health Status Indicators, filtered for Midland County, Texas; http://wwwn.cdc.gov/CommunityHealth/: data accessed August 3, 2016.

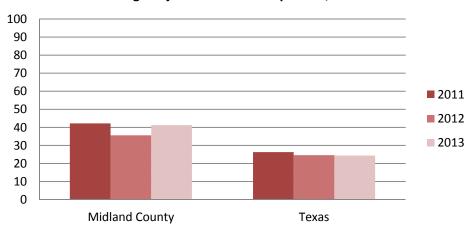


Alzheimer's Disease Mortality

- Alzheimer's Disease is the 4th leading cause of death in Midland County, and the 6th leading cause of death in the state (2013).
- Alzheimer's Disease mortality rates fluctuated in Midland County, but slightly decreased in the state between 2011 and 2013.
- In 2013, Midland County's Alzheimer's Disease mortality rate (41.2 per 100,000) was higher than the state's rate (24.4 per 100,000).

Alzheimer's Disease

Age-adjusted Death Rate per 100,000



	2011		2012		2013	
LOCATION	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE
Midland County	57	42.2	49	35.6	60	41.2
Texas	5,394	26.3	5,168	24.6	5,284	24.4

Source: Texas Health Data, Deaths of Texas Residents; Last Updated July 31, 2015; http://soupfin.tdh.state.tx.us/death10.htm; data accessed August 4, 2016.

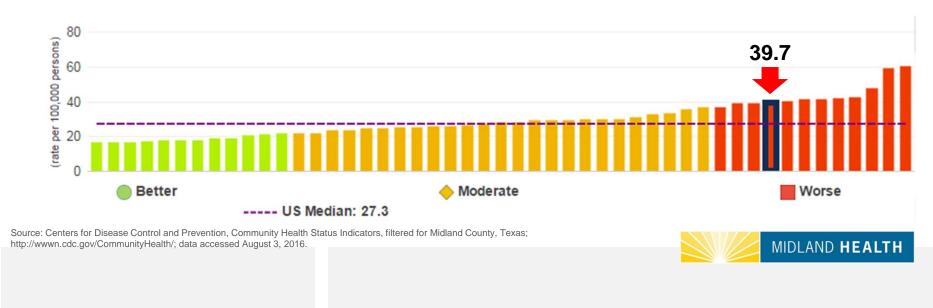


Alzheimer's Disease Deaths

Peer County Rankings

 In comparison to peer counties, Midland County (39.7 per 100,000) ranked within the least favorable quartile for Alzheimer's Disease deaths, and also ranked above the U.S. median (27.3 per 100,000) (2005-2011).

Alzheimer's Disease Deaths, Midland County Age-adjusted Death Rate per 100,000 Persons, 2005-2011

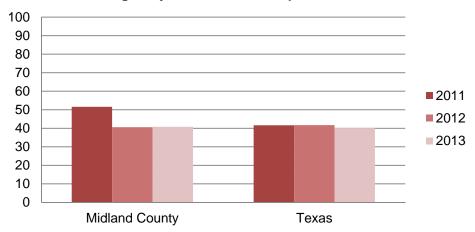


Cerebrovascular Disease Mortality

- Cerebrovascular disease is the 5th leading cause of death in Midland County, and the 4th leading cause of death in the state (2013).
- Cerebrovascular disease mortality rates overall decreased in Midland County and the state between 2011 and 2013.
- In 2013, Midland County's cerebrovascular disease mortality rate (40.8 per 100,000) was consistent with the state's rate (40.1 per 100,000).

Cerebrovascular Disease

Age-adjusted Death Rate per 100,000



	2011		2012		2013	
LOCATION	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE
Midland County	69	51.6	56	40.6	59	40.8
Texas	9,058	41.6	9,297	41.7	9,238	40.1

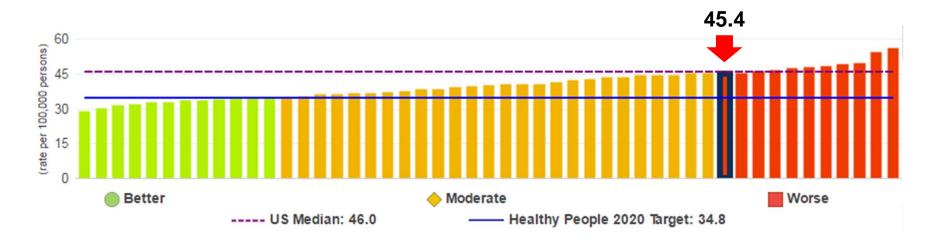
Source: Texas Health Data, Deaths of Texas Residents; Last Updated July 31, 2015; http://soupfin.tdh.state.tx.us/death10.htm; data accessed August 4, 2016.



Stroke Mortality Peer County Rankings

• In comparison to peer counties, Midland County (45.4 per 100,000) ranked in the least favorable quartile for stroke deaths, and also ranked above the Healthy People 2020 Target (34.8 per 100,000) but just below the U.S. median (46.0 per 100,000) (2005-2011).

Stroke Deaths, Midland County Age-adjusted Death Rate per 100,000 Persons, 2005-2011



Source: Centers for Disease Control and Prevention, Community Health Status Indicators, filtered for Midland County, Texas; http://wwwn.cdc.gov/CommunityHealth/; data accessed August 3, 2016.

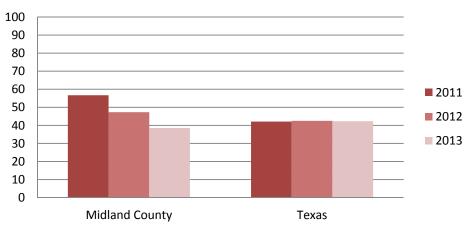


Chronic Lower Respiratory Disease Mortality

- Chronic lower respiratory disease is the 6th leading cause of death in Midland County, and the 3rd leading cause of death in the state (2013).
- Between 2011 and 2013, Midland County experienced a decrease in chronic lower respiratory disease mortality rates while rates in the state remained steady.
- In 2013, the chronic lower respiratory disease mortality rate in Midland County (38.5 per 100,000) was lower than the rate in Texas (42.3 per 100,000).

Chronic Lower Respiratory Disease

Age-adjusted Death Rate per 100,000



	2011		2012		2013	
LOCATION	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE
Midland County	76	56.7	66	47.3	55	38.5
Texas	9,115	42.1	9,520	42.5	9,787	42.3

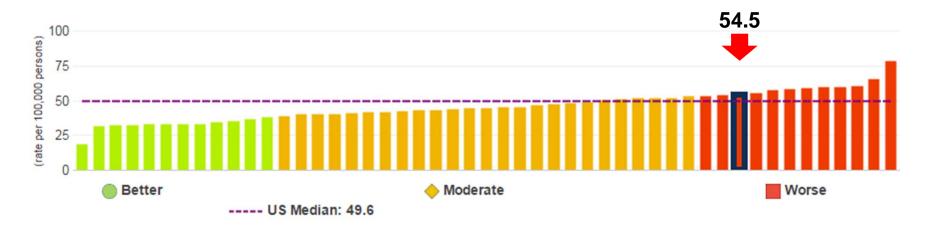
Source: Texas Health Data, Deaths of Texas Residents; Last Updated July 31, 2015; http://soupfin.tdh.state.tx.us/death10.htm; data accessed August 4, 2016.



Chronic Lower Respiratory Disease Mortality Peer County Rankings

 In comparison to peer counties, Midland County (54.5 per 100,000) ranked in the least favorable quartile for chronic lower respiratory disease rates, and also ranked above the U.S. median (49.6 per 100,000) (2005-2011).

Chronic Lower Respiratory Disease, Midland County Age-adjusted Death Rate per 100,000 Persons, 2005-2011



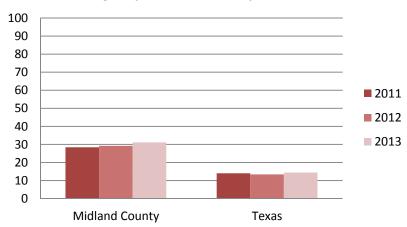
Source: Centers for Disease Control and Prevention, Community Health Status Indicators, filtered for Midland County, Texas; http://wwwn.cdc.gov/CommunityHealth/: data accessed August 4, 2016.



Additional Causes of Death

Influenza and Pneumonia

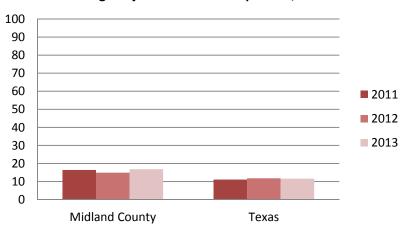
Age-adjusted Death Rate per 100,000



	2011		2012		2013	
LOCATION	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE
Midland County	38	28.4	41	29.2	46	31.1
Texas	3,049	14.0	2,978	13.4	3,338	14.4

Intentional Self-Harm

Age-adjusted Death Rate per 100,000



	2011		2012		2013	
LOCATION	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE
Midland County	22	16.4	22	14.9	24	16.8
Texas	2,802	11.1	3,032	11.8	3,047	11.6

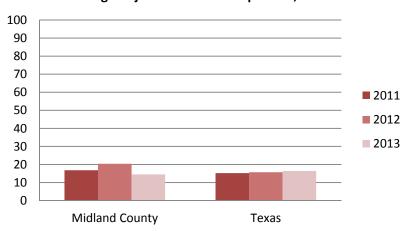
Source: Texas Health Data, Deaths of Texas Residents; Last Updated July 31, 2015; http://soupfin.tdh.state.tx.us/death10.htm; data accessed August 4, 2016.



Additional Causes of Death Continued

Septicemia

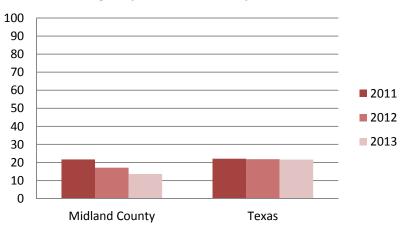
Age-adjusted Death Rate per 100,000



	2011		2012		2013	
LOCATION	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE
Midland County	23	16.8	29	20.4	21	14.5
Texas	3,420	15.2	3,616	15.7	3,879	16.4

Diabetes Mellitus

Age-adjusted Death Rate per 100,000



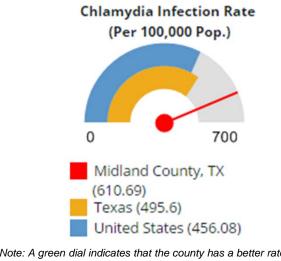
	2011		2012		2013	
LOCATION	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE
Midland County	30	21.7	23	17.1	21	13.6
Texas	5,060	22.1	5,127	21.8	5,262	21.6

Source: Texas Health Data, Deaths of Texas Residents; Last Updated July 31, 2015; http://soupfin.tdh.state.tx.us/death10.htm; data accessed August 4, 2016.



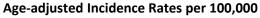
Communicable Diseases Chlamydia

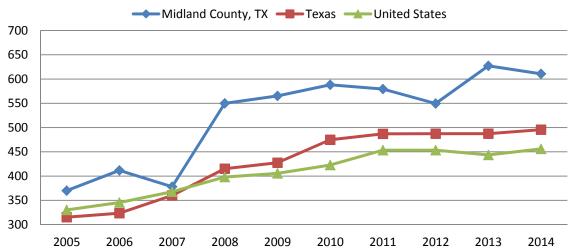
- Between 2005 and 2014, the chlamydia infection rate in Midland County overall increased and remained above the state and national rates.
- In 2014, Midland County (610.7 per 100,000) had a significantly higher chlamydia incidence rate than the state (495.6 per 100,000) and the nation (456.1 per 100,000).



Note: A green dial indicates that the county has a better rate than the state, and a red dial indicates that the county has a worse rate than the state.

Chlamydia Infection Rate



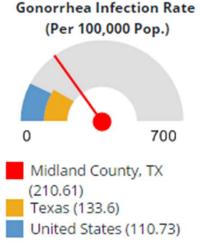


Source: Community Commons, Health Indicator Report filtered for Midland County, Texas, www.communitycommons.org; data accessed August 3, 2016.



Communicable Diseases

- Between 2005 and 2014, the gonorrhea infection rate in Midland County overall increased, and remained above the state rate for the majority of the trended timeframe.
- In 2014, Midland County (210.6 per 100,000) had a much higher gonorrhea infection rate than the state (133.6 per 100,000) and the nation (110.7 per 100,000).



195 175 155 135 115 95 75

2008

2009

2010

2011

→ Midland County, TX

Gonorrhea Infection Rate

Age-adjusted Incidence Rate per 100,000

Texas

Note: A green dial indicates that the county has a better rate than the state, and a red dial indicates that the county has a worse rate than the state.

Source: Community Commons, Health Indicator Report filtered for Midland County, Texas, www.communitycommons.org; data accessed August 3, 2016.

275255235215

2005

2006

2007



2012

2013

United States

2014

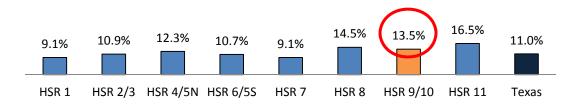
Chronic Conditions

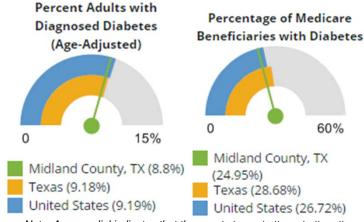
Diabetes Mellitus

- In 2013, the percent of adults (age 20+) ever diagnosed with diabetes by a doctor in Midland County (8.8%) was slightly lower than the state (9.2%) and national (9.2%) rates.
- In 2014, the percentage of *Medicare Beneficiaries* with diabetes in Midland County (25.0%) was lower than the state (28.7%) national (26.7%) levels.
- In 2014, Health Service Region (HSR) 9/10 (13.5%) had a higher prevalence rate of diabetes than the state (11.0%), as well as the majority of other regions.
- Diabetes prevalence rates in adults (age 18+) in both HSR
 9/10 and the state have remained relatively steady between
 2012 and 2014.

Diabetes

Prevalence Rates, Adults (age 18+), 2014



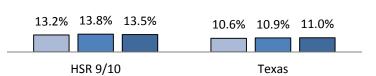


Note: A green dial indicates that the county has a better rate than the state, and a red dial indicates that the county has a worse rate than the state.

Diabetes

Prevalence Rates, Adults (age 18+), 2012-2014

□ 2012 □ 2013 □ 2014



Source: Community Commons, Health Indicator Report filtered for Midland County, Texas, www.communitycommons.org; data accessed August 3, 2016. Source: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services; data accessed January 6, 2016.

Definition: Has a doctor, nurse, or other health professional ever told you that you have diabetes?



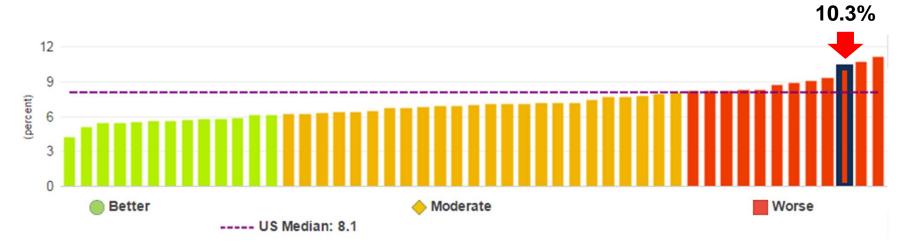
Adult Diabetes

Peer County Rankings

In comparison to peer counties, Midland County (10.3%)
ranked within the least favorable quartile for the percent of
adults (age 20+) living with diagnosed diabetes, and ranked
above the U.S. median (8.1%) (2005-2011).

Adult Diabetes, Midland County

Percent, Adults (age 20+), 2005-2011



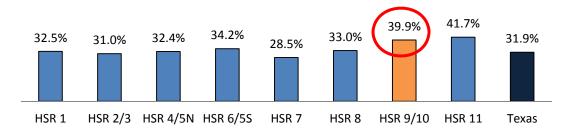
Source: Centers for Disease Control and Prevention, Community Health Status Indicators, filtered for Midland County, Texas; http://wwwn.cdc.gov/CommunityHealth/; data accessed August 3, 2016.

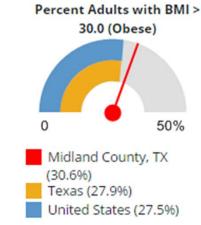


Chronic Conditions Obesity

- In 2013, Midland County (30.6%) had a higher percentage of adults (age 20+) that reported that they have a Body Mass Index (BMI) greater than 30.0 (obese) as compared to the state (27.9%) and the nation (27.5%).
- In 2014, HSR 9/10 (39.9%) had a higher prevalence rate of obesity than the state (31.9%) and the majority of other regions.
- Obesity prevalence rates in adults (age 18+) in HSR 9/10 have recently increased in 2014, while rates in the state appear to be steadily increasing (2012-2014).

Obesity Prevalence Rates, Adults (age 18+), 2014

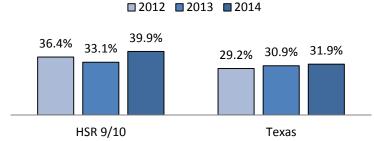




Note: A green dial indicates that the county has a better rate than the state, and a red dial indicates that the county has a worse rate than the state.

Obesity

Prevalence Rates, Adults (age 18+), 2012-2014



Source: Community Commons, Health Indicator Report filtered for Midland County, Texas, www.communitycommons.org; data accessed August 3, 2016. Source: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services; data accessed January 6, 2016.

Definition: BMI is (weight in lbs. divided by (height in inches squared)) times 703. Recommended BMI is 18.5 to 24.9 Overweight is 25.0 to 29.9 Obese is => 30.0.

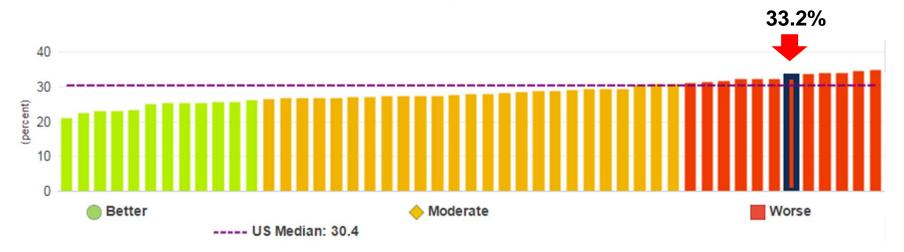


Adult Obesity

Peer County Rankings

• In comparison to peer counties, Midland County (33.2%) ranked within the least favorable quartile for the percent of obese adults, and also ranked above the U.S. median (30.4%) (2006-2012).

Adult Obesity, Midland County Percent, Adults (age 20+), 2006-2012



Source: Centers for Disease Control and Prevention, Community Health Status Indicators, filtered for Midland County, Texas; http://wwwn.cdc.gov/CommunityHealth/; data accessed August 3, 2016.



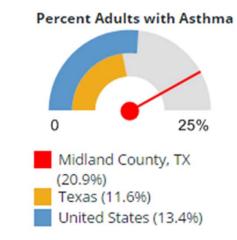
Chronic Conditions

Asthma

- In 2011-2012, the percent of adults (age 18+) in Midland County (20.9%) that had ever been told by a health professional that they had asthma was higher than the state (11.6%) and national rate (13.4%).
- In 2014, HSR 9/10 had a slightly higher prevalence rate of asthma (12.2%) compared to the state (11.1%).
- Asthma prevalence rates in adults (age 18+) in HSR 9/10 remained relatively steady while rates in the state slightly fluctuated (2012-2014).

Asthma

Prevalence Rates, Adults (age 18+), 2014

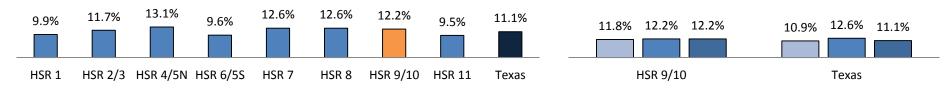


Note: A green dial indicates that the county has a better rate than the state, and a red dial indicates that the county has a worse rate than the state.

Asthma

Prevalence Rates, Adults (age 18+), 2012-2014

□ 2012 **□** 2013 **□** 2014



Source: Community Commons, Health Indicator Report filtered for Midland County, Texas, www.communitycommons.org; data accessed August 3, 2016. Source: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services; data accessed January 6, 2016

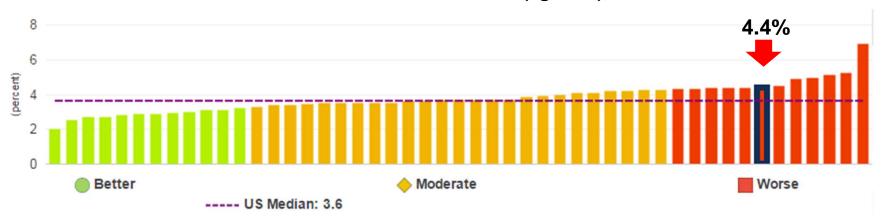
Definition: Has a doctor, nurse, or other health professional ever told you that you had asthma?



Asthma Peer County Rankings

 In comparison to peer counties, Midland County (4.4%) ranked within the least favorable quartile for the percent of older adults (age 65+) living with asthma in 2012, and also ranked above the U.S. median (3.6%).

Older Adult Asthma, Midland County Percent, Medicare Beneficiaries (age 65+), 2012



Source: Centers for Disease Control and Prevention, Community Health Status Indicators, filtered for Midland County, Texas; http://wwwn.cdc.gov/CommunityHealth/; data accessed August 3, 2016.



Chronic Conditions Arthritis

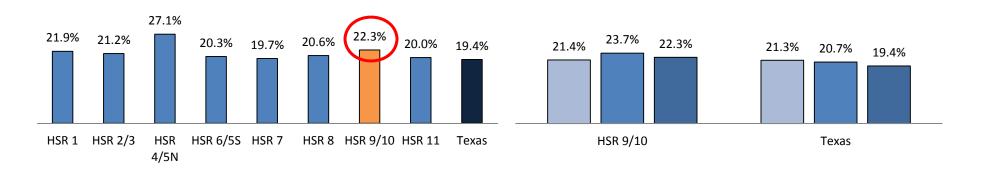
- In 2014, HSR 9/10 had one of the highest rates of adult arthritis (22.3%) compared to all other regions and the state (19.4%).
- Between 2012 and 2014, arthritis prevalence rates in adults (age 18+) in HSR 9/10 fluctuated slightly, while rates in the state steadily decreased.

Arthritis

Arthritis Prevalence Rates, Adults (age 18+), 2012-2014

Prevalence Rates, Adults (age 18+), 2014

□2012 **■**2013 **■**2014



Source: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services; data accessed January 6, 2016

Definition: Has a doctor, nurse, or other health professional ever told you that you have some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia?



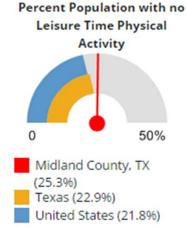
Health Behaviors

Physical Inactivity

- In 2013, the percent of the adult population (age 20+) in Midland County (25.3%) that self-reported *no leisure time for physical activity* was higher than the state (22.9%) and national rate (21.8%).
- In 2014, the prevalence of adults that *do not* participate in leisure time physical activity HSR 9/10 (31.5%) was higher than the state (27.6%).
- The percent of adults (age 18+) that *do not* participate in leisure time physical activity in HSR 9/10 increased between 2012 and 2014, while state rates remained steady.

No Leisure Time Physical Activity

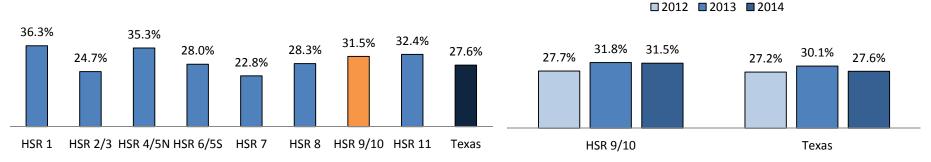
Percent, Adults (age 18+), 2014



Note: A green dial indicates that the county has a better rate than the state, and a red dial indicates that the county has a worse rate than the state.

No Leisure Time Physical Activity

Percent, Adults (age 18+), 2012-2014



Source: Community Commons, Health Indicator Report filtered for Midland County, Texas, www.communitycommons.org; data accessed August 3, 2016. Source: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services; data accessed January 6, 2016

Definition: During the past month, did you participate in any physical activities or exercises such as running, golf, gardening or walking for exercise?



Physical Inactivity Peer County Rankings

• In comparison to peer counties, Midland County (26.3%) ranked in the least favorable quartile for the percent of adults who reported no leisure time physical activity, and ranked below the Healthy People 2020 Target (32.6%) but slightly above the U.S. median (25.9%) (2006-2012).

Physical Inactivity, Midland County

Percent, Adults (age 18+), 2006-2012



Source: Centers for Disease Control and Prevention, Community Health Status Indicators, filtered for Midland County, Texas; http://wwwn.cdc.gov/CommunityHealth/; data accessed August 3, 2016.

Physical Inactivity Definition: Adults are classified as not engaging in leisure time physical activity if they answer "never" or "Unable to do this type of activity" to both the vigorous and moderate physical activity questions: During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?



Health Behaviors

Binge Drinking

- In 2014, HSR 9/10 (19.4%) had the highest percent of adults at risk of binge drinking, as compared to all other regions and the state (16.3%).
- The percent of adults (age 18+) at risk for binge drinking in HSR 9/10 fluctuated between 2012 and 2014, while rates in the state remained steady.

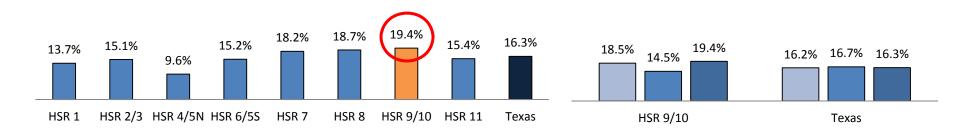
Binge Drinking

Percent At Risk, Adults (age 18+), 2014

Binge Drinking

Percent At Risk, Adults (age 18+), 2012-2014

■2012 **■**2013 **■**2014



Source: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services; data accessed January 6, 2016.

Definition: During the past 30 days, what is the largest number of drinks you had on any occasion? Adults "at risk" of binge drinking include those who indicated that they had 5 or more drinks (males) or 4 or more drinks (females) at one time during the last month.



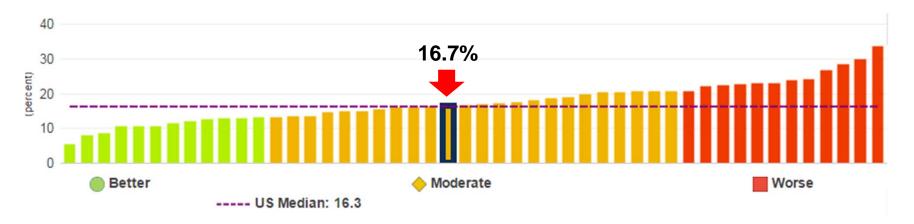
Adult Binge Drinking

Peer County Rankings

 In comparison to peer counties, Midland County (16.7%) ranked within the two middle quartiles for the percent of adults (age 18+) that reported binge drinking, and also ranked just above the U.S. median (16.3%) (2006-2012).

Adult Binge Drinking, Midland County

Percent, Adults (age 18+), 2006-2012



Source: Centers for Disease Control and Prevention, Community Health Status Indicators, filtered for Midland County, Texas; http://wwwn.cdc.gov/CommunityHealth/; data accessed August 3, 2016.

Definition: Drinking 5 or more drinks on an occasion for men or 4 or more drinks on an occasion for women.

MIDLAND HEALTH

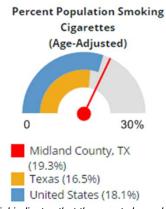
Health Behaviors

Smoking

- The percent of the adult population (age 18+) in Midland County (19.3%) that self-reported currently smoking some days or every day was higher than the state (16.5%) and national rate (18.1%) (2006-2012).
- In 2014, the prevalence of adults (age 18+) that reported smoking cigarettes *every day* in HSR 9/10 (23.5%) was slightly lower than the state (24.1%).
- In 2012-2014, the percent of adults (age 18+) that selfreported being a current smoker that smokes every day in HSR 9/10 and the state decreased.

Frequency of Smoking - Every Day

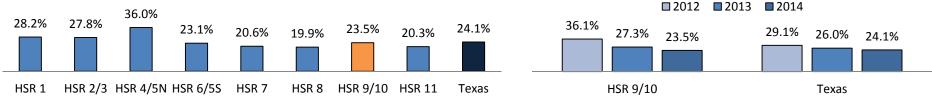
Prevalence of Everyday Smokers, Adults (age 18+), 2014



Note: A green dial indicates that the county has a better rate than the state, and a red dial indicates that the county has a worse rate than the state.

Frequency of Smoking - Every Day

Prevalence of Everyday Smokers, Adults (age 18+), 2012-2014



Source: Community Commons, Health Indicator Report filtered for Midland County, Texas, www.communitycommons.org; data accessed August 3, 2016. Population Smoking Cigarettes Definition: Data are based on the percentage of respondents answering the following question: "Do you now smoke cigarettes every day, some days, or not at all?" Respondents are considered smokers if they reported smoking every day or some days. Percentages are age-adjusted and only pertain to the non-institutionalized population aged 18 and up.

Source: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services; data accessed January 6, 2016.

Frequency of Smoking Definition: Do you now smoke cigarettes every day, some days, or not at all? (Respondents that reported smoking 'Every Day' are included in this chart)

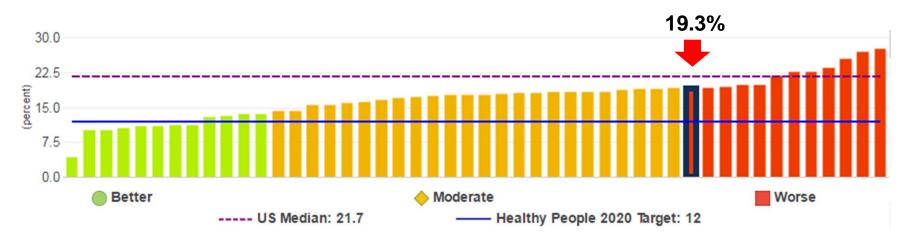
Note: smoking refers to cigarettes, and does not include electronic cigarettes (e-cigarettes, NJOY, Bluetip), herbal cigarettes, cigars, cigarillos, little cigars, pipes, bidis, kreteks, water pipes (hookahs), marijuana, chewing tobacco, snuff, or snus.



Adult Smoking Peer County Rankings

• In comparison to peer counties, Midland County (19.3%) ranked within the least favorable quartile for the percent of adults (age 18+) smoking cigarettes some days or every day between 2006 and 2012, and also ranked above the Healthy People 2020 Target (12.0%) but below the U.S. median (21.7%).

Adult Smoking, Midland County Percent, Adults (age 18+), 2006-2012



Source: Centers for Disease Control and Prevention, Community Health Status Indicators, filtered for Midland County, Texas; http://wwwn.cdc.gov/CommunityHealth/; data accessed August 3, 2016.

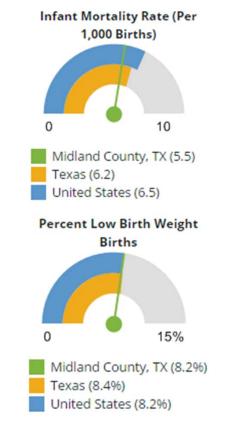
Definition: Do you now smoke cigarettes every day, some days, or not at all? Persons are considered smokers if they reported smoking every day or some days.



Natality

Infant Mortality and Low Birth Weight Births

- The infant mortality rate in Midland County (5.5 per 1,000 births) is lower than the state (6.2 per 1,000 births) and the national rate (6.5 per 1,000 births) (2006-2010).
- The percentage of low birth weight (<2,500g) births in Midland County (8.2%) is consistent with the state rate (8.4%) and the national percentage (8.2%) (2006-2010).



Note: A green dial indicates that the county has a better rate than the state, and a red dial indicates that the county has a worse rate than the state.

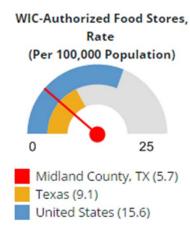
Source: Community Commons, Health Indicator Report filtered for Midland County, Texas, www.communitycommons.org; data accessed August 3, 2016. Infant Mortality Rate Definition: Rate of deaths to infants less than one year of age per 1,000 births. Low Birth Weight Birth Definition: Percentage of total births that are low birth weight (Under 2500g).



Natality

WIC-Authorized Food Stores

- The number of food stores and other retail establishments that are authorized to accept Special Supplemental Nutrition Program for Women, Infants and Children's (WIC) Program benefits and that carry designated WIC foods and food categories in Midland County (5.7 per 100,000) is lower than the state (9.1 per 100,000) and the national rate (15.6 per 100,000) (2011).
- Between 2013 and 2015, the number of women, children (1-4 years), and infants (<1 year) that participate in the WIC Program decreased in Midland County.



Note: A green dial indicates that the county has a better rate than the state, and a red dial indicates that the county has a worse rate than the state.

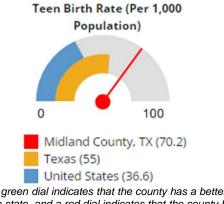
Age	Age 2013		20	14	2015	
Group	Midland	Texas	Midland	Texas	Midland	Texas
Infant (<1)	900	226,938	856	222,232	840	228,036
1-4 Years	1,073	478,416	947	451,241	934	452,509
Women	784	249,718	736	242,988	739	247,598

Source: Community Commons, Health Indicator Report filtered for Midland County, Texas, www.communitycommons.org; data accessed August 3, 2016. WIC-Authorized Store Definition: Number of food stores and other retail establishments per 100,000 population that are authorized to accept WIC Program (Special Supplemental Nutrition Program for Women, Infants, and Children) benefits and that carry designated WIC foods and food categories. Source: Kids Count Data Center, data from the Texas Department of State Health Services: Women, Infants and Children Receiving WIC, www.kidscount.org; data accessed September 14, 2016.



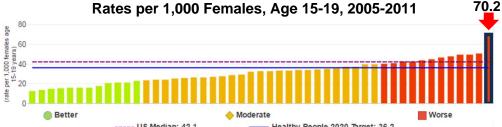
Natality Teen Births

- The teen (age 15-19) birth rate in Midland County (70.2 per 1,000) is much higher than the state (55.0 per 1,000) and national rates (36.6 per 1,000) (2006-2012).
- In comparison to peer counties, Midland County (70.2 per 1,000) ranked at the very top of the least favorable quartile for the rate of teen births between 2005 and 2011, and also ranked above the Healthy People 2020 Target (36.2 per 1,000) and the U.S. median (42.1 per 1,000).
- Midland County had much higher rates of teen births in the 15-17 year (40.0 per 1,000) and 18-19 year (116.7 per 1,000) age groups, as compared to its peer group median (14.4 per 1,000 and 60.0 per 1,000, respectively) and the U.S. median (20.3 per 1,000 and 84.0 per 1,000, respectively).
- The rate of teen births in the Hispanic or Latino racial/ethnic group in Midland County (98.1 per 1,000) was significantly higher than the peer group median (68.8 per 1,000) and the U.S. median (72.3 per 1,000).



Note: A green dial indicates that the county has a better rate than the state, and a red dial indicates that the county has a worse rate than the state.

Teen Births. Midland County Rates per 1,000 Females, Age 15-19, 2005-2011



(JS Median. 42.1	—— Healthy People 2020 larget: 36.2				
By Age	Midland	Peer Median	US Median			
Aged 15-17 Years	40.0	14.4	20.3			
Aged 18-19 Years	116.7	60.0	84.0			
By Race/Ethnicity	Midland	Peer Median	US Median			
Hispanic or Latino	98.1	68.8	72.3			

Source: Centers for Disease Control and Prevention, Community Health Status Indicators, filtered for Midland County, Texas; http://wwwn.cdc.gov/CommunityHealth/; data accessed August 3, 2016.

Teen Birth Definition: Rate of total births to women age of 15 - 19 per 1,000 female population age 15 - 19.



Mental Health Depressive Disorders

- In 2014, the percentage of *Medicare Beneficiaries* in Midland County (15.4%) with depression was lower than the state (17.0%) and national rate (16.2%).
- In 2014, HSR 9/10 (17.6%) had a higher prevalence rate of diagnosed adult depressive disorders as compared to the state (14.6%) and the majority of other regions.
- Between 2012 and 2014, the prevalence of adults (age 18+) in HSR 9/10 that have been diagnosed with a depressive disorder increased, while rates in the state remained steady.

Percentage of Medicare Beneficiaries with Depression 60% Midland County, TX (15.4%) Texas (17%) United States (16.2%)

Note: A green dial indicates that the county has a better rate than the state, and a red dial indicates that the county has a worse rate than the state.

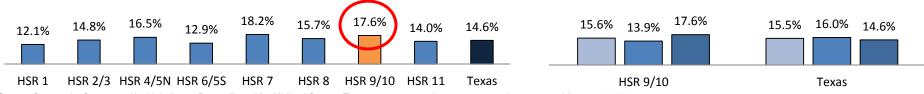
Depressive Disorders

Prevalence Rates, Adults (age 18+), 2012-2014

□2012 **□**2013 **□**2014



Prevalence Rates, Adults (age 18+), 2014



Source: Community Commons, Health Indicator Report filtered for Midland County, Texas, www.communitycommons.org; data accessed August 3, 2016. Source: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services; data accessed January 6, 2016

Definition: Has a doctor, nurse, or other health professional ever told you that you have a depressive disorder including depression, major depression, dysthymia, or minor depression?



Mental Health

Mental Health Medication Use and Mental Health Affected Activities

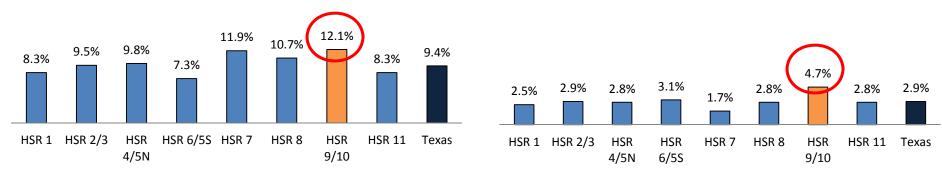
- In 2014, the percentage of adults (age 18+) in HSR 9/10 (12.1%) that reported currently taking medicine or receiving treatment from a doctor or other health professional for any type of mental health condition or emotional problem was higher than all other HSRs and the state (9.4%).
- In 2014, the percent of adults (age 18+) in HSR 9/10 (4.7%) that reported 14+ days where their mental health interfered with daily activities was higher than all other HSRs and the state (2.9%).

Mental Illness Medication or Treatment

Percent, Adults (age 18+), 2014

Days Poor Mental Health Interfered with Activities - 14+ Days

Percent, Adults (age 18+), 2014



Source: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services; data accessed January 6, 2016.

Mental Health Medication Definition: Are you now taking medicine or receiving treatment from a doctor or other health professional for any type of mental health condition or emotional problem?

Poor Mental Health Interfered With Activities Definition: Number of days mental health condition or emotional problem interfered with usual activities - 14 days



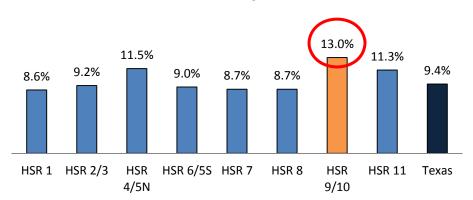
Mental Health

Poor Mental Health Days

- In 2014, HSR 9/10 (13.0%) had a higher prevalence rate of adults (age 18+) that experienced 14+ days of poor mental health as compared to the state (9.4%) and all other regions.
- Between 2012 and 2014, the prevalence of adults (age 18+) in HSR 9/10 that experienced 14+ days of poor mental health fluctuated, while rates in the state steadily declined.

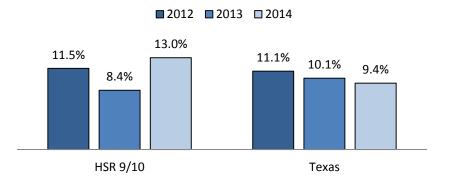
Days of Poor Mental Health - 14+ Days

Percent, Adults (age 18+), 2014



Days of Poor Mental Health - 14+ Days

Percent, Adults (age 18+), 2014



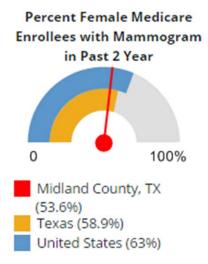
Source: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services; data accessed January 6, 2016

Definition: Days mental health not good – 14+ days



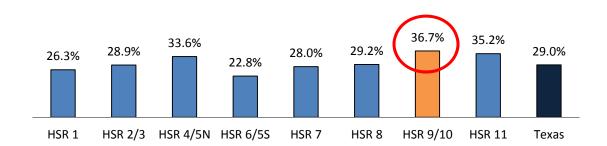
Screenings - Mammography

- In 2012, the percent of female *Medicare Enrollees* (age 67-69) in Midland County (53.6%) that received one or more mammograms in the past two years was lower than the state (58.9%) and national (63.0%) rates.
- In 2014, the percent of female adults (age 40+) in HSR 9/10 (36.7%) that **did not** receive a mammogram in the past 2 years was higher than the state (29.0%), as well as the majority of other regions.



No Mammogram in the Past 2 Years

Percent, Female Adults (age 40+), 2014



Note: A green dial indicates that the county has a better rate than the state, and a red dial indicates that the county has a worse rate than the state.

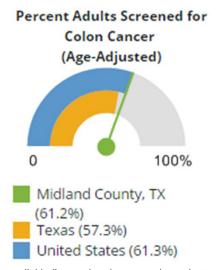
Source: Community Commons, Health Indicator Report filtered for Midland County, Texas, www.communitycommons.org; data accessed August 3, 2016. Source: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services; data accessed January 6, 2016

Definition: Females 40 years and older who had a mammogram within the past 2 years



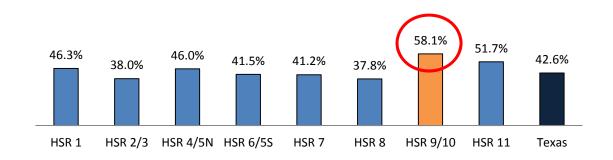
Screenings - Colonoscopy

- Between 2006 and 2012, the percentage of adults (age 50+) who self-reported that they have *ever* had a sigmoidoscopy or colonoscopy in Midland County (61.2%) was higher than the state (57.3%) and national rate (61.3%).
- In 2014, the percent of adults (age 50-75) in HSR 9/10 (58.1%) that *did not* have a colonoscopy in the past 10 years was higher than the state (42.6%) as well as all other regions.



No Colonoscopy in the Past 10 Years

Percent, Adults (age 50-75), 2014



Note: A green dial indicates that the county has a better rate than the state, and a red dial indicates that the county has a worse rate than the state.

Source: Community Commons, Health Indicator Report filtered for Midland County, Texas, www.communitycommons.org; data accessed August 3, 2016. Source: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services; data accessed January 6, 2016.

Definition: Males and females 50-75 years who have not had a colonoscopy in the past 10 years - Used to calculate CRCREC.

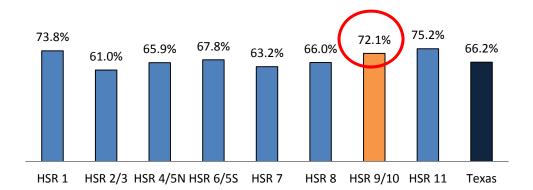


Immunizations - Influenza Vaccine (18-64 Years)

- In 2014, the percent of adults in HSR 9/10 (72.1%) that *did not* receive a flu shot in the past year was higher than the state (66.2%) and many other regions.
- Between 2012 and 2014, the percent of adults (age 18-64 years) that *did not* receive a flu shot in the past year remained stable in HSR 9/10, while rates in the state steadily decreased.

No Flu Shot in the Past Year

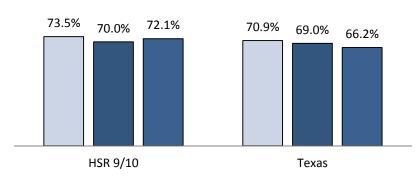
Percent, Adults (age 18-64), 2014



No Flu Shot in the Past Year

Percent, Adults (age 18-64), 2012-2014

□ 2012 **■** 2013 **■** 2014



Source: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services; data accessed January 6, 2016.

Definition: During the past 12 months, have you had either a seasonal flu shot or a seasonal flu vaccine that was sprayed in your nose?



Immunizations – Influenza Vaccine (65+ Years)

- In 2014, HSR 9/10 (58.1%) had the highest percentage of adults (age 65+) that **did not** receive a flu shot in the past year, as compared to all other regions and the state (41.2%).
- Between 2012 and 2014, the percent of adults (age 65+) that *did not* receive a flu shot in the past year in HSR 9/10 increased, while rates in the state remained steady.

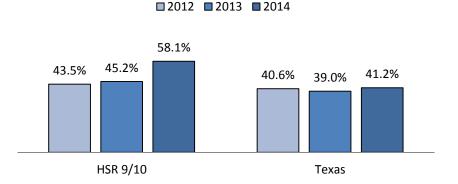
No Flu Shot in the Past Year

Percent, Adults (age 65+), 2014

38.6% 42.4% 42.9% 39.2% 37.8% 41.2% 29.8% 32.2% HSR 1 HSR 2/3 HSR 4/5N HSR 6/5S HSR 7 HSR 8 HSR 9/10 HSR 11 Texas

No Flu Shot in the Past Year

Percent, Adults (age 65+), 2012-2014



Source: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services; data accessed January 6, 2016

Definition: During the past 12 months, have you had either a seasonal flu shot or a seasonal flu vaccine that was sprayed in your nose?



Immunizations - Pneumococcal Vaccine (18-64 Years)

- In 2014, the percent of adults that had *never* received a pneumonia shot in HSR 9/10 (70.1%) was similar to the state (69.7%).
- Between 2012 and 2014, the percent of adults (age 18-64 years) that reported
 never having received a pneumococcal vaccination in HSR 9/10 and the state
 remained stable.

No Pneumonia Shot Ever

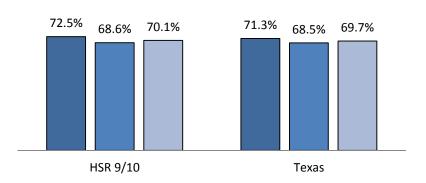
Percent, Adults (age 18-64), 2014

69.8% 68.9% 63.3% 69.2% 67.8% 70.0% 70.1% 68.9% 69.7% HSR 1 HSR 2/3 HSR 4/5N HSR 6/5S HSR 7 HSR 8 HSR 9/10 HSR 11 Texas

No Pneumonia Shot Ever

Percent, Adults (age 18-64), 2014

■2012 **■**2013 **■**2014



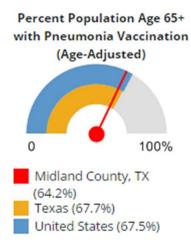
Source: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services; data accessed January 6, 2016.

Definition: Have you ever had a pneumonia shot?



Immunizations - Pneumococcal Vaccine (65+ Years)

- Between 2006 and 2012, the percent of the population (age 65+) in Midland County (64.2%) that self-reported ever having received the pneumonia vaccine was slightly lower than the state (67.7%) and national (67.5%) rates.
- In 2014, the percent of adults (age 65+) that had **never** received a pneumonia shot in HSR 9/10 (31.4%) was slightly lower than the state (32.1%).
- Between 2012 and 2014, the percent of adults (age 65+) in HSR 9/10 that *never* received a pneumonia shot overall decreased, while the percentage in the state slightly increased.



Note: A green dial indicates that the county has a better rate than the state, and a red dial indicates that the county has a worse rate than the state.

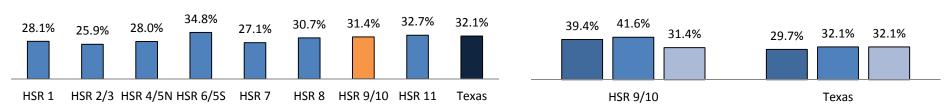
No Pneumonia Shot Ever

Percent, Adults (age 65+), 2014

No Pneumonia Shot Ever

Percent, Adults (age 65+), 2012-2014

2012 2013 2014



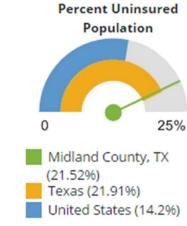
Source: Community Commons, Health Indicator Report filtered for Midland County, Texas, www.communitycommons.org; data accessed August 3, 2016. Source: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services; data accessed January 6, 2016.

Definition: Have you ever had a pneumonia shot?



Uninsured

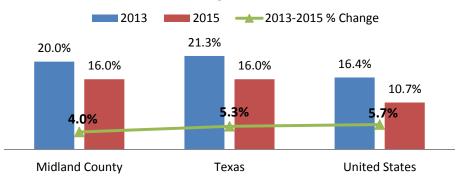
- Between 2010 and 2014, the percent of the population (all ages) in Midland County (21.5%) that were uninsured was higher than the state (21.9%) and national (14.2%) rates.
- As of 2015, the percentage of adults (age 18-64) in Midland County (16.0%) was consistent with the state percentage (16.0%), but higher than the national rate (10.7%).



Note: A green dial indicates that the county has a better rate than the state, and a red dial indicates that the county has a worse rate than the state.

Uninsured

Percent, Adults (age 18-64), 2013 & 2015



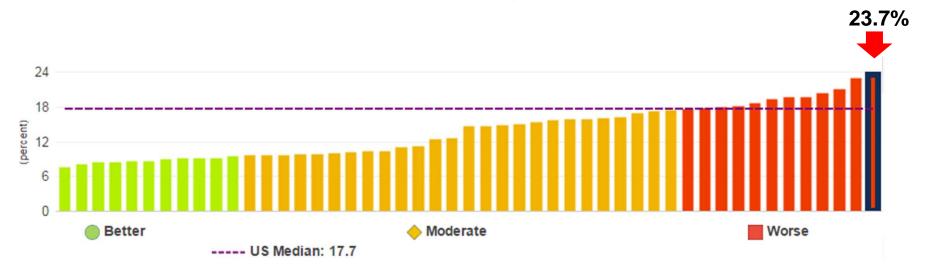
Source: Community Commons, Health Indicator Report filtered for Midland County, Texas, www.communitycommons.org; data accessed August 3, 2016. Health Professional Shortage Area Definition: having a shortage of primary medical care, dental or mental health professionals. Source: Enroll America, County-Level Snap Shots, www.enrollamerica.org; data accessed August 3, 2016.



Uninsured Peer County Rankings

• In comparison to peer counties, Midland County (23.7%) ranked at the top of the least favorable quartile for the percent of adults (under age 65) living without health insurance in 2011, and also ranked above the U.S. median (17.7%).

Uninsured, Midland County Percent, Adults (under age 65), 2011

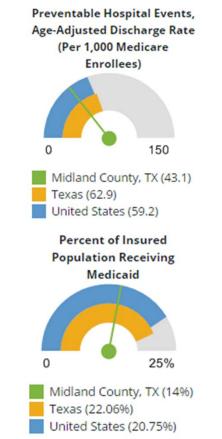


Source: Centers for Disease Control and Prevention, Community Health Status Indicators, filtered for Midland County, Texas; http://wwwn.cdc.gov/CommunityHealth/; data accessed August 3, 2016.



Preventable Hospitalizations and Insurance Coverage - Medicaid

- Lack of available primary care resources for patients to access may lead to increased preventable hospitalizations.
 - In 2012, the rate of preventable hospital events in Midland County (43.1 per 1,000 Medicare Enrollees) was lower than that of the state (62.9 per 1,000) and the nation (59.2 per 1,000).
- Cost of health care may delay or inhibit patients from seeking preventive care.
 - Between 2010 and 2014, the percentage of the insured population that was receiving Medicaid in Midland County (14.0%) was lower than the state (22.1%) and national rates (20.8%).



Note: A green dial indicates that the county has a better rate than the state, and a red dial indicates that the county has a worse rate than the state.

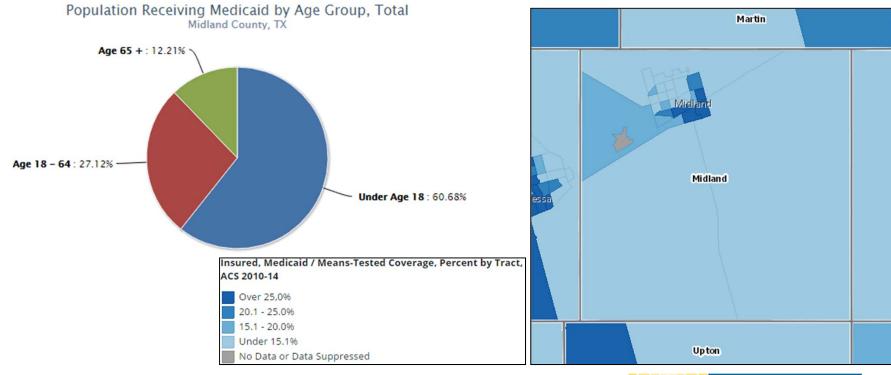
Source: Community Commons, Health Indicator Report filtered for Midland County, Texas, www.communitycommons.org; data accessed August 3, 2016. Preventable Hospital Event Definition: Ambulatory Care Sensitive (ACS) conditions include pneumonia, dehydration, asthma, diabetes, and other conditions which could have been prevented if adequate primary care resources were available and accessed by those patients.

Population Receiving Medicaid Definition: the percentage of the population with insurance enrolled in Medicaid (or other means-tested public health insurance)



Insurance Coverage – Medicaid Continued

- When breaking down the percent of the insured population that is receiving Medicaid in Midland County (as seen on the previous page), it is important to note that the majority of residents receiving Medicaid or other means-tested coverage in Midland County are located within census tracts within the city of Midland (2010-2014).
- The majority of insured residents in Midland County receiving Medicaid are under age 18 (60.7%), followed by the age 18-64 group (27.1%) and the age 65 and older group (12.2%) (2010-2014).



Source: Community Commons, Health Indicator Report filtered for Midland County, Texas, www.communitycommons.org; data accessed August 9, 2016.



Insurance Coverage - Medicaid Continued

- Between 2012 and 2014, the percent of children (ages 0-18) in Midland County that were enrolled in the Texas Medicaid Program remained lower than the state.
- In 2014, the percent of children (ages 0-18) in Midland County (23.3%) that were enrolled in the Texas Medicaid Program was much lower than the state (40.1%).
- Between 2012 and 2014, the percent of children (ages 0-18) enrolled in the Texas CHIP Program in Midland County remained lower than the state.
- In 2014, the percent of children (ages 0-18) enrolled in the Texas CHIP Program in Midland County (3.3%) was lower than the state (5.3%).



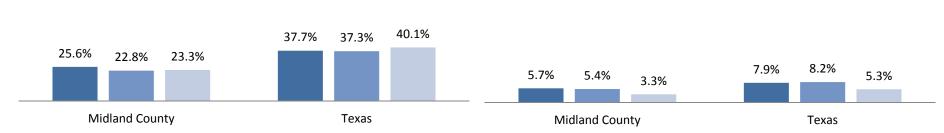
Percent, Ages 0-18, 2012-2014

■ 2012 **■** 2013 **■** 2014

Children Enrolled in the Texas CHIP **Program**

Percent, Ages 0-18, 2012-2014

2012 2013 2014



Source: Kids Count Data Center, data from the Texas Health and Human Services Commission: Medicaid and CHIP Enrollment (0-18), www.kidscount.org: data accessed August 9, 2016. Medicaid Definition: Number and percent of children ages 0-18 enrolled in the Texas Medicaid program.

Note: Prior to 2012, data on children enrolled in Medicaid was based on the number of children certified as eligible for Medicaid at a point-in-time in August. Due to data system and Texas Medicaid methodology changes, enrollment numbers beginning in 2012 also include an adjustment to simulate the additional children who will be retroactively covered by Medicaid. Medicaid can retroactively cover medical bills for children 3 months prior to certification. As part of the Affordable Care Act, CHIP clients under 133% FPL were moved to Medicaid beginning in January 2014.

CHIP Definition: Number and percent of children ages 0-18 enrolled in the Texas Children's Health Insurance Program (CHIP).

Note: This is point-in-time data from August of each fiscal year and is generally accepted as being representative of monthly enrollment.



Medical Cost Barriers

- In 2014, the percent of adults that reported experiencing a medical cost barrier in the past 12 months in HSR 9/10 (22.0%) was significantly higher than the state rate (17.6%), and higher than many other regions.
- Between 2012 and 2014, the percent of adults (age 18+) that needed medical care but could not receive it due to cost in both HSR 9/10 and the state decreased.

Medical Cost Barriers

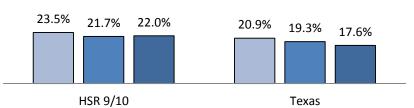
Prevalence Rates, Adults (age 18+), 2014

Medical Cost Barriers

Prevalence Rates, Adults (age 18+), 2012-2014

□ 2012 ■ 2013 ■ 2014





Source: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services; data accessed January 6, 2016.

Definition: Was there a time in the past 12 months when you needed to see a doctor but could not because of the cost?

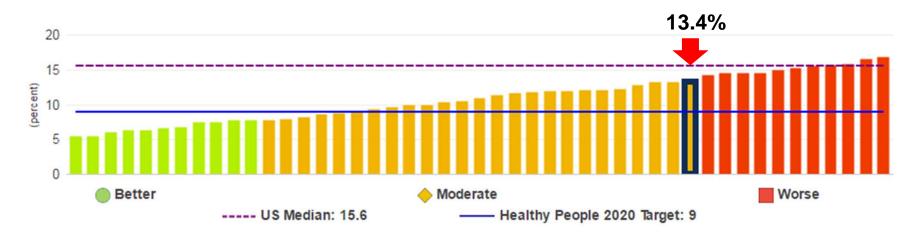


Medical Cost Barriers

Peer County Rankings

• In comparison to peer counties, Midland County (13.4%) ranked within the upper end of the two middle quartiles for the percent of adults (age 18+) who did not see a doctor due to cost between 2006 and 2012, and also ranked above the Healthy People 2020 Target (9.0%) but below the U.S. median (15.6%).

Cost Barrier to Care, Midland County Percent, Adults (age 18+), 2006-2012



Source: Centers for Disease Control and Prevention, Community Health Status Indicators, filtered for Midland County, Texas; http://wwwn.cdc.gov/CommunityHealth/; data accessed August 3, 2016.

Definition: Was there a time in the past 12 months when you needed to see a doctor but could not because of cost?



No Personal Doctor

- In 2014, HSR 9/10 (35.1%) had a higher percent of adults that had **no** personal doctor than the state (32.9%), as well as all other regions.
- Between 2012 and 2014, the percent of adults in HSR 9/10 that reported not having a personal doctor fluctuated, while rates in the state remained steady.

No Personal Doctor No Personal Doctor Percent, Adults (age 18+), 2014 Percent, Adults (age 18+), 2012-2014 **□**2012 **□**2013 **□**2014 35.0% 34.1% 32.6% 32.9% 35.8% 35.1% 31.3% 32.6% 33.1% 32.9% 32.9% 28.8% 26.7% 25.8% HSR 9/10 HSR 1 HSR 2/3 HSR 4/5N HSR 6/5S HSR 7 HSR 8 HSR 9/10 HSR 11 Texas

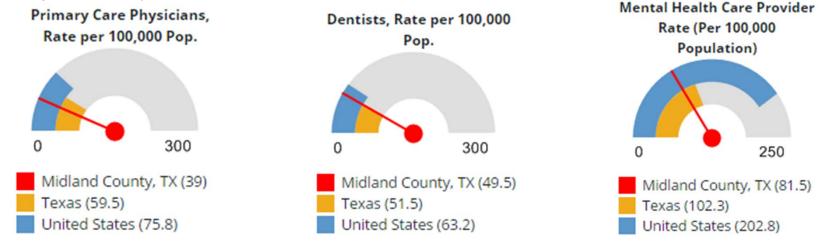
Source: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services; data accessed January 6, 2016

Definition: Do you have one person you think of as your personal doctor or health care provider?



Providers

- In 2013, the rate of primary care physicians per 100,000 population in Midland County (39.0 per 100,000) was lower than the state (59.5 per 100,000) and the national rates (75.8 per 100,000).
- In 2013, the rate of dental care providers per 100,000 population in Midland County (49.5 per 100,000) was slightly lower than the state (51.5 per 100,000) and national rates (63.2 per 100,000).
- In 2016, the rate of mental health care providers per 100,000 population in Midland County (81.5 per 100,000) was lower than the state (102.3 per 100,000) rate and significantly lower than the national rate (202.8 per 100,000).



Note: A green dial indicates that the county has a better rate than the state, and a red dial indicates that the county has a worse rate than the state.

Source: Community Commons, Health Indicator Report filtered for Midland County, Texas, www.communitycommons.org; data accessed August 3, 2016. Definition: Doctors classified as "primary care physicians" by the AMA include: General Family Medicine MDs and DOs, General Practice MDs and DOs, General Internal Medicine MDs and General Pediatrics MDs. Physicians age 75 and over and physicians practicing sub-specialties within the listed specialties are excluded. Definition: All dentists - qualified as having a doctorate in dental surgery (D.D.S.) or dental medicine (D.M.D.), who are licensed by the state to practice dentistry and who are practicing within the scope of that license.

Definition: Psychiatrists, psychologists, clinical social workers, and counselors that specialize in mental health care.

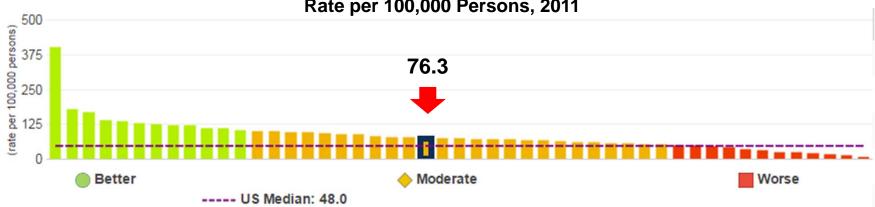


Primary Care Provider Access

Peer County Rankings

In comparison to peer counties, Midland County (76.3 per 100,000)
ranked within the two middle quartiles for the rate of primary care
providers per 100,000 persons in 2011, and also ranked above the U.S.
median (48.0 per 100,000).

Primary Care Provider Access, Midland County
Rate per 100,000 Persons, 2011



Source: Centers for Disease Control and Prevention, Community Health Status Indicators, filtered for Midland County, Texas; http://wwwn.cdc.gov/CommunityHealth/; data accessed August 3, 2016.

Definition: Primary care physicians are those who identify as practicing general practice, internal medicine, obstetrics and gynecology, or pediatrics.



Medically Underserved Areas / Populations (MUA/P)

- The Index of Medical Underservice (IMU) scale is from 1 to 100, where 0 represents 'completely underserved' and 100 represents 'best served' or 'least underserved.'
- Each service area or population group found to have an IMU of 62.0 or less qualifies for designation as a Medically Underserved Area or Medically Underserved Population.

Midland County			
Designation Type Index of Medic Underservice Sc		Designation Date	Update Date
Medically Underserved Area	57.00	05/11/1994	05/11/1994

Source: Health Resources and Services Administration, Data Warehouse, http://datawarehouse.hrsa.gov/; data accessed August 3, 2016.

Definition: Medically Underserved Areas/Populations are areas or populations designated by HRSA as having: too few primary care providers, high infant mortality, high poverty and/or high elderly population.



Health Professional Shortage Areas (HPSA)

- Health Professional Shortage Area (HPSA) designations are based on general HPSA designation criteria, plus additional criteria and guidelines specific to each of the three types of designations:
 - Primary Care
 - Dental Health
 - Mental Health
- All Federally Qualified Health Centers and those Rural Health Clinics that provide access to care regardless of ability to pay receive automatic facility HPSA designation.
- HPSA Scores range from 1 to 26, where the higher the score, the greater the priority for assignment of clinicians.

Source: Health Resources and Services Administration, Data Warehouse, http://datawarehouse.hrsa.gov/; data accessed August 3, 2016.

Definition: Health Professional Shortage Areas (HPSAs) are designated by HRSA as having shortages of primary medical care, dental or mental health providers and may be geographic (a county or service area), demographic (low income population) or institutional (comprehensive health center, federally qualified health center or other public facility).



Health Professional Shortage Areas (HPSA)

Midland County					
HPSA Name	Designation Type	Discipline Class	HPSA Score	Update Date	
Midland County	HPSA Geographic High Needs	· Primary (are		06/29/2015	
Midland County	HPSA Geographic	Mental Health	11	12/27/2013	
Midland Community	Comprehensive Health	Primary Care	13	03/20/2014	
Healthcare Services, Inc.	Center	Filliary Care	13	03/20/2014	
Midland Community	Comprehensive Health	Dental Health	19	03/20/2014	
Healthcare Services, Inc.	Center	Dental Health	19	03/20/2014	
Midland Community	Comprehensive Health	Mental Health	20	03/27/2014	
Healthcare Services, Inc.	Center	iviciital Health	20	03/2//2014	

Source: Health Resources and Services Administration, Data Warehouse, http://datawarehouse.hrsa.gov/; data accessed August 3, 2016.

Definition: Health Professional Shortage Areas (HPSAs) are designated by HRSA as having shortages of primary medical care, dental or mental health providers and may be geographic (a county or service area), demographic (low income population) or institutional (comprehensive health center, federally qualified health center or other public facility).



MEADOWS MENTAL HEALTH POLICY INSTITUTE FOR TEXAS: MIDLAND COUNTY MENTAL HEALTH SYSTEMS ASSESSMENT FINDINGS





Background Information

- Community leaders in Midland County engaged the Meadows Mental Health Policy Institute (MMHPI) to
 assess the behavioral health (BH) systems of Midland County. The objective of the assessment was to
 evaluate current capacity for service delivery, system development, and population health management to
 determine viable strategies that build on existing strengths to further develop the system of care that:
 - Is more responsive, vision-driven, recovery- and resiliency-oriented, and integrated;
 - Increases the quality and effectiveness of service delivery for populations with more complex needs;
 - Improves the efficiency of system operations, resource allocations, and revenue generation across available federal, state, and local funding streams; and
 - Continues to ensure compliance with complex and changing state and federal regulatory requirements
- Key providers of behavioral health services identified by the community leaders brought together by the Midland Memorial Foundation (MMF) were the primary focus of this review, and included:
 - Permian Basin Community Centers (PBCC)
 - Midland Memorial Hospital (MMH)
 - Midland Independent School District (Midland ISD)
 - Adult and juvenile justice system leaders/agencies (county and district court judges, sheriff's office, police department, adult and juvenile probation, detention center, etc.)
 - Texas Tech University Health Science Center- Permian Basin
 - Centers for Children and Families
 - Other system partners that offer behavioral health and support services (EX: other mental health care providers, substance use disorder treatment providers, health plans and payers, homeless coalitions and housing services, mental health advocacy organizations, health care providers, child welfare agencies, faith-based organizations, and others)



Prevalence of Mental Health Disorders

- One in five residents of the county have mental health needs, and up to one in three have mental health and/or substance use disorders, based on the latest epidemiological research. But, individual needs vary in intensity from very mild to extremely acute and chronic.
- About three out of every four (75%) friends and families of Texas voters are affected by mental health issues, based on statewide surveys conducted by MMHPI.
- The population of people with severe needs can be broken down in two further ways: severity and primary diagnosis.
- MMHPI believes that one barrier to better treatment of mental illness is the tendency to group a range of diverse needs into a single, large group of "people with major mental illness" or "adults with serious mental illness."
- The table on the next page displays a continuation of the list of some of the most common mental illnesses broken out into prevalence rates by severity, as well as specific subgroups.



Prevalence of Mental Health Disorders Continued

Twelve-Month Prevalence of Mental Health Disorders in Midland County

Mental Health Disorder	Total	Adults	Adults in Poverty	Children & Youth	Children & Youth in Poverty
County Population ³	157,078	114,667	29,813	42,411	16,540
All Mental Illness ⁴	41,155	30,043	7,811	11,112	4,334
Mild	16,626	12,137	3,156	4,489	1,751
Moderate	15,351	11,206	2,914	4,145	1,616
Severe/Serious	9,178	6,700	1,742	2,478	966
Serious Mental Illness (Adults) ⁵	4,562	4,562	2,217	N/A	N/A
Super-Utilizers ⁶	320	320	156	N/A	N/A
Severe Emotional Disturbance (Youth / Children)	2,916	N/A	N/A	2,916	1,374
Children / Youth Most At Risk ⁷	194	N/A	N/A	194	91
All Anxiety Disorders ⁸	23,554°	20,755	5,396	2,799	1,092
PTSD	3,371	2,944	765	427	166
All Mood Disorders	12,020	10,893	2,832	1,127	440
Major Depression/Depression (child)	6,970	6,073	1,579	897	350
Bipolar Disorder	1,399	1,169	304	230	90
Schizophrenia	446	421	109	25	10
First Episode Psychosis (all ages) ¹⁰	23	17	4	N/A	N/A
Other Selected Adolescent Conditions ¹¹					
Conduct Disorder	590	N/A	N/A	590	230
Self-Injury/Harming Behaviors	1,039	N/A	N/A	1,039	405

Source: Meadows Mental Health Policy Institute for Texas, Midland County Mental Health Systems Assessment, information received on September 20, 2016. Note: Super-utilizer adults are at the highest risk for repeat use of jails, emergency rooms, hospitals, and jails.

Note: Children/Youth Most at Risk are children and youth at risk for out-of-home and out-of-district placements.

Note: Serious mental illness (SMI) refers to adults and older adults with schizophrenia, severe bipolar disorder, severe depression, and severe post-traumatic stress, all of which are conditions that require comprehensive and intensive treatment and support. Severe Emotional Disturbance (SED) refers to children and youth through age 17 with emotional or mental health problems so serious that their ability to function is significantly impaired, or their ability to stay in their natural homes may be in

jeopardy.



Provider Capacity and Hospital Admissions

- Access to publicly-funded inpatient care for indigent patients in Midland County is facilitated by the
 availability of 24 adult and 14 adolescent (ages 12 and over) psychiatric beds at Oceans Behavioral Health,
 supported by DSHS funding for nine (9) indigent rapid stabilization beds as well as access to indigent detox
 beds funded by Midland Memorial Health System at Springboard, which supports approximately 15
 admissions per month.
- Access is often limited by the lack of availability of these beds as well as the lack of Medicaid beds for adults in the Permian Basin. When local beds are not available, transport is required to facilities in San Angelo, Amarillo, Abilene, or even El Paso.
- Furthermore, there are no crisis stabilization or crisis diversion beds available for any age population and no sobering center for individuals with addiction. The community does have access to, and utilization of, state hospital beds at Big Springs State Hospital. Data relevant to state hospital utilization in the following tables indicate that PBCC is about average compared to other centers in utilization of adult and child psychiatric beds at the state hospital.
- The significant needs in the community relate more to the need for access to a full continuum of crisis beds, an improvement overall in the fragmented community BH crisis response system, and development of access to Medicaid beds for adults in the Permian Basin.
- Permian Basin Community Centers' utilization is comparable to that of other centers. Note that StarCare
 uniquely operates its own adult psychiatric inpatient facility, thus significantly reducing its utilization of state
 beds. Overall, PBCC does a relatively good job managing state hospital length of stay for patients in all age
 groups. State hospital bed utilization in PBCC is on the lower end of the spectrum due to the availability of
 indigent beds at Oceans Behavioral Health.



Provider Capacity and Hospital Admissions Continued

Capacity Among Adult Inpatient Providers in Midland County

Adult Inpatient Providers and Facilities ⁵⁴	Psychiatric Beds	SUD Inpatient Beds	
Oceans Behavioral Hospital Permian Basin ⁵⁵	62 (48 adult)	0	
River Crest Hospital – San Angelo	62	18	
The Shannon Center – San Angelo ⁵⁶	36	0	
Midland Memorial ⁵⁷	0	0	

State-Operated Psychiatric Hospital Admissions by Age, FY 2014⁵⁸

Age Group	РВСС	MHMR – Concho Valley	StarCare SHS	Texas Panhandle Centers	Tropical Texas BH
Child/Adolescent	9	7	11	16	48
SED 200% FPL	3,565	1,321	3,825	4,699	27,308
Adult	88	62	13	84	494
Geriatric	2	1	0	9	10
SMI 200% FPL	5,705	2,948	7,451	8,071	32,361

Source: Meadows Mental Health Policy Institute for Texas, Midland County Mental Health Systems Assessment, information received on September 20, 2016. Note: Sobering centers serve as a police-friendly drop off site for inebriants that avoids expensive incarceration and provide supervised sobering services with a focus on engaging people to accept treatment services.

Note: Unless otherwise noted, capacity data comes from the DSHS 2014 Hospital Survey.

Note: Need to verify with Oceans Behavioral Hospital Permian Basin.

Note: Need to verify with The Shannon Center.

Note: As coded in the DSHS 2014 Hospital Survey results, Midland Memorial's SUD beds are reported in combination with another survey field or facility, and not available separately.



Costs Related to Mental Health Needs

- Expenditures for behavioral health services include not only the total MH funding provided to PBCC, but also substance use disorder services funding and estimates of Medicaid funding for inpatient and outpatient care, jail and emergency room costs, other criminal / juvenile justice costs, costs related to school-based services, and child welfare services.
- As in other Texas communities, coordinated planning across the major payers for public mental health state general revenue, Medicaid, Delivery System Reform Incentive Payment (DSRIP), county expenditures, and local private funders (both foundations and contributors to uncompensated care) is lacking yet essential to making best use of these considerable, though limited, resources.

Other Costs Related to Mental Health Needs

Source of Costs ⁶¹	CY 2013 Costs	Comment
Midland County Jail	\$2,500,000	Based on the prevalence of SMI in Midland County and a forecasting model estimating the relationship between Texas county prevalence rates and county jail costs.
Estimated Costs: MH Emergency	\$2,100,000	Estimates by MMHPI based on 2013 data.
Total	\$4,600,000	

Note that this \$4.6 million – which represents only a portion of the behavioral health-related cost in non-behavioral health settings and systems – can be considered an opportunity cost for the current system that can potentially support investment into a more efficient and effective crisis response system and continuum of crisis and jail diversion services.

Source: Meadows Mental Health Policy Institute for Texas, Midland County Mental Health Systems Assessment, information received on September 20, 2016. Source: Meadows Mental Health Policy Institute and Texas Conference of Urban Counties. (2015). Survey of County Behavioral Health Utilization. Unpublished Document. Dallas, TX: Meadows Mental Health Policy Institute.

Note: No county jail data was provided by Midland for this study. Estimates were based on a 2012 Texas Health Care Information Collection hospital survey of 580 hospitals and costs from a 2013 Dallas Fort Worth Hospital Council Foundation report.



Midland County Mental Health Assessment System Level Findings

- The MMHPI assessment found significant pockets of strength and progress, and many high quality programs and providers, which will be discussed in greater detail in the following sections of the report. Midland County deserves particular recognition for the strength of the collaborative leadership group that commissioned this assessment. These areas of strength and progress represent an important foundation for ongoing strategic improvement of the entire system over time.
- 1. **System Level Finding SF-1:** An emergent group of community leaders has come together to address the behavioral health needs of the community.
- 2. **System Level Finding SF-2:** Although there are pockets of significant collaboration, the culture of the system overall does not reflect a partnership that shares in collaborative management of the entire population.
- 3. System Level Finding SF-3: Customer-oriented continuous quality improvement (CQI) is a system and organizational management process by which customer experiences and outcomes are central, and all system partners work together within a CQI change cycle framework to improve system responsiveness and performance.
- **4. System Level Finding SF-4:** Within the overall BH system, there are significant pockets of strength and progress, including development of new programs and resources.
- 5. **System Level Finding SF-5:** The current Midland County BH crisis system has many of the elements that are usual components of an excellent crisis continuum.
- 6. System Level Finding SF-6: Midland County's adult MH system of care has put in place, primarily through the efforts of PBCC, a basic array of services for adults with serious mental illness.



Midland County Mental Health Assessment System Level Findings Continued

- 7. System Level Finding SF-7: For children, the community has many strong elements, including: an emerging children's system of care collaboration, the Midland County System of Care (MCSOC), organized with leadership from juvenile justice, which emphasizes trauma informed care and plans to implement a wraparound project (Pathways to Hope), having recently received a grant from the Criminal Justice Department / Governor's Office; an organized suicide prevention effort developed by the Midland Independent School District; expanding school-based counseling services; a well-regarded Communities in Schools program; some excellent providers, particularly Centers for Children and Families; and family partners involved in wraparound services at PBCC.
- 8. System Level Finding SF-8: The continuum of adult and adolescent substance use disorder (SUD) services in Midland is stronger than that found in many Texas communities, with some excellent services and opportunities.
- 9. **System Level Finding SF-9:** Individuals with co-occurring psychiatric and substance use disorders (COPSD) represent more than half of people with severe needs across settings in Midland and a plurality of the overall population in need.
- 10. **System Level Finding SF-11:** Individuals with BH needs are over-represented and highly prevalent in all aspects of the criminal justice system in Midland, including law enforcement, the jail, detention, courts, probation, and parole.
- 11. System Level Finding SF-12: Every informant noted the considerable shortages of behavioral health providers of all types in the Midland area.
- 12. System Level Finding SF-13: As noted above, intensive services (e.g., Level of Care 3 and ACT) are generally lacking in Midland, more so than the state as a whole.



Midland County Mental Health Assessment System Level Recommendations

- 1. System Level Recommendation SR-1: The Midland community should move quickly to create a formal, ongoing, and representative behavioral health leadership team.
- 2. **System Level Recommendation SR-2:** Develop a "Culture of Collaboration" that emphasizes an inclusive community-wide behavioral health system collaboration based on shared values.
- 3. System Level Recommendation SR-3: Implement a systemic culture of customer-oriented continuous quality improvement (CQI).
- **4. System Level Recommendation SR-4:** Address multiple improvement opportunities for behavioral health system improvement within a common collaborative process. Opportunities with the most potential to bring about change cost-effectively include the following:
 - System Level Recommendation SR-5: Physical health-behavioral health integration (PHBHI) offers the most promise for expanding capacity to treat mental health and substance use disorders more routinely in the most costeffective manner.
 - System Level Recommendation SR-6: Improve the crisis system through specific recommendations, including:
 - Within the BHLT, establish a high-level collaborative Crisis Workgroup.
 - Develop a universal protocol for crisis response that puts customers and the community first.
 - Develop quality sustainable and comprehensive crisis intervention and mental health peace officer training which integrates community providers, resources and consumers as participants and instructors. The new enhanced training will encourage and build cross-systems collaborations for an integrated crisis response.
 - Identify a clear locus to ensure coordination for all community crisis response and for tracking crisis cases to ensure that they are properly engaged.
 - Develop the ability to provide psychiatric evaluation, psychopharmacologic intervention, and crisis intervention in the MMH Emergency Department.
 - Consider planning for a conceptual "one-stop shop" crisis hub for crisis services (including a designated psychiatric emergency service) with a full array of diversion services for adults and children. This will primarily involve more closely organizing existing capacity with the newly funded PBCC-MMH crisis project.
 - Develop a partnership with MCOs to develop Medicaid-funded crisis diversion beds in the Midland-Odessa area.



Midland County Mental Health Assessment System Level Recommendations Continued

- System Level Recommendation SR-7: Additional steps to improve BH care within the criminal justice system should be organized with a Sequential Intercept Mapping model. The findings in this report are a starting place. The BHLT can guide the development of an ongoing mechanism for formal behavioral health-criminal justice (BH-CJ) collaboration.
- System Level Recommendation SR-8: For the adult mental health system of care, the most cost-effective components focus on organization and incremental improvement of capacity to serve super-utilizers. We recommend consideration of the following specific steps:
 - Under the behavioral health leadership team, create a more organized collaboration of adult MH providers, either as part of or separate from the crisis work group, with an initial focus on "super-utilizers".
 - As an initial step to improve care of "super-utilizers," improve fidelity and effectiveness of ACT (and other intensive community treatment) services. This should include braided funding strategies to work around, and state policy advocacy to eliminate, state-level barriers to outreach and engagement.
 - Prioritize access to and continuity of services for all those in need, for example, 1) those identified as needing services who did not get in (e.g., referrals from probation that were screened out) and 2) those engaged in services who dropped out.
 - More broadly, the following should also be considered:
 - Maximize community collaboration and cross-consultation for adult services across the board.
 - Establish a firm foundation of value-based care for the adult system (e.g., trauma-informed, person-centered, recoveryoriented), and improve implementation of value-based care in all practice.
 - Focus on clinical leadership, supervision, and quality. Coordinate the limited number of licensed practitioners to provide mechanisms for routine supervision.
 - Expand quality of and access to psychopharmacology with innovative approaches.
 - Develop improved access to psychiatric rehabilitation services for Midland residents.
 - Increase availability and utilization of reimbursable peer support services.



Midland County Mental Health Assessment System Level Recommendations Continued

- **System Level Recommendation SR-9:** Recommendations for improving the children's continuum:
 - Within the BHLT, establish a high-level collaborative Child and Family Services Work Group. There appear to be quality services in the community and a desire to
 - collaborate better. Even though providers of services are aware of each other, these services seem to be provided in isolation from each other. Stronger planning among providers around the goals of children, youth, and family are strongly encouraged.
 - The Midland County System of Care, spearheaded by the Juvenile Probation Department, appears to be the most tangible example of the potential for collaboration. This effort is built on a foundation of effective practices and should be supported as a cornerstone of system improvement for children and their families.
 - The school-based crisis counseling services appear to be addressing needs of youth who otherwise would not have access to services due to a lack of funds or transportation. In order to have a stronger impact, these services should be a part of a full range of school-based services. Key to this will be exploring implementation of a strong continuum of community-partnered school mental health by building on efforts to implement Positive Behavioral Intervention and Supports and developing stronger partnerships between schools, community behavioral health providers, and families to augment existing school supports and services and provide a more comprehensive and broader array of behavioral health care within schools to students and their families.
 - The development of intensive community-based services should be prioritized as a part of broader system development efforts. There is a lack of intensive home- and community-based services, such as Multisystemic Therapy (MST) or Functional Family Therapy (FFT), in the community. Many of the interviewees expressed a need for more beds. They indicated that the 12 beds that Oceans provides are not sufficient and they also expressed the need for a closer residential treatment facility.
 - Based on our review, additional beds do not appear to be a top priority. Given the relative dearth of intensive community treatment for children, rather than focusing efforts on increasing residential bed capacity, the development of a full continuum of family- and community-based services for children, youth, and their families should be explored. This continuum should include crisis services, respite services, and intensive community services.
 - Expand access to child/family-centered trauma-informed practice through training and high quality implementation.
 - Engage all potential partners in the suicide prevention collaborative, coupled with expanded access to helpful response coordinated across all providers of children's services.
 - Psychiatric consultation to pediatricians can improve availability of medications.



Midland County Mental Health Assessment System Level Recommendations Continued

- System Level Recommendation SR-10: Recommendations for the SUD continuum:
 - Under the behavioral health leadership team (BHLT), create a more organized collaboration of SUD providers so that the energy for collaboration and improvement is "integrated" rather than occurring in silos. The ROSC and the Permian Basin Regional Council on Alcohol and Drug Abuse (PBRCADA) prevention coalitions should also be engaged in the BHLT.
 - PBCC and Springboard can collaborate to create a more complete SUD services continuum, including sober living, care coordination, recovery coaching, and more flexible outpatient services to maximize efficient utilization of residential beds.
- System Level Recommendation SR-11: To further the implementation of integrated services for co-occurring psychiatric and substance use disorders (COPSD), implement an organized approach to improve co-occurring capability in all services with current resources. PBCC leadership can help organize the implementation of COPSD capability in all SUD settings, and provide consultation to build COPSD capability within MH settings.
- 12. System Level Recommendation SR-12: Develop an organized behavioral health workforce development strategy under the BHLT.
- 13. System Level Recommendation SR-13: To improve BH housing and homeless services, provide BH consultation services in settings for people who are homeless, expand supported housing options in Midland for adults and transition age youth with SMI/SED, and promote further development of sober living options in Midland.
- **14. System Level Recommendation SR-14:** Prioritize engagement of local veterans services representatives (e.g., MVPN, Veterans Court) in the BHLT as well as representative veteran leadership from the Permian Basin with oversight of the Veterans Administration (VA) Hospital and outpatient VA services.
- 15. System Level Recommendation SR-15: In spite of the many resource challenges in the community, and the limited availability of bilingual service providers, through purposeful collaboration the community can make progress in addressing the disparity of behavioral health services for culturally and linguistically diverse populations.
- **16. System Level Recommendation SR-16:** Midland should take purposeful steps toward organizing a strong holistic prevention coalition, using the framework of trauma-informed care to guide efforts in addressing multiple issues, including suicide, substance use, mental health issues, and relationship violence.



MMH and Midland Health Findings

- The Midland County Hospital District, dba Midland Memorial Hospital (MMH), is the taxing hospital district for Midland County and, in collaboration with affiliated medical practices, is a principal component of Midland Health. Under the leadership of Russell Meyers, CEO, MMH has demonstrated significant community leadership in the area of behavioral health.
- 1. **MMH Finding 1:** Russell Meyers has articulated publicly that the new vision of population health management and the Triple Aim brings behavioral and physical health more closely together in planning and service delivery.
- 2. **MMH Finding 2:** MMH has been a prime mover for funding community collaboration initiatives and creating the community collaboration that led to this assessment. MMH has been instrumental in the following areas:
 - Fostering community collaboration leading to \$1.9 million of expanded crisis funding, resulting in the expansion of indigent beds at Oceans and Permian Basis Community Centers (PBCC) Mobile Crisis Outreach Team (MCOT) coverage of the MMH Emergency Department (ED), as well as recruitment of psychiatric nursing coverage for the MMH ED;
 - Generating funding for Springboard's contracts for detox and residential treatment services for over 180 indigent individuals per year;
 - Funding Midland Community Healthcare Services to support indigent healthcare, which includes a component of behavioral health integration;
 - Obtaining 1115 Waiver funding to engage two doctoral level psychologists to provide child (and some adult) treatment and consultation services in the community, including collaboration with a MMH developmental pediatrician;
 - Supporting Dr. Ventolini and Dr. Jain in bringing a Texas Tech University Health Science Center (TTUHSC) psychiatry residency training program to the Permian Basin; and
 - Promoting nursing standards of excellence in clinical care, research, and training at MMH.
- 3. MMH Finding 3: MMH has developed expertise in identifying high need, high cost, poor outcome medical populations and using continuous quality improvement (CQI) strategies for improving care. One of these efforts led to funding for the High Utilizer Groups (HUGS) program for frequent utilizers of the medical emergency room.



MMH and Midland Health Findings Continued

- 4. MMH Finding 4: MMH has demonstrated the implementation of a culture of ownership and customer service across its entire organization, which is an example of creating a culture of collaboration across the whole community for behavioral health. Traditionally, many hospital districts in Texas have regarded behavioral health care as external to their prime mission. They commonly contribute funding to other entities for the provision of behavioral health services, as does MMH, but do not see themselves as fundamentally "in the behavioral health business." Within the "new world" of population health, behavioral health must not be viewed as just a feature of specialty mental health services as with Oceans and PBCC, or specialty substance abuse providers like Springboard; rather, behavioral health must be integrated into health care at every level for the purpose of improving outcomes and efficiency.
- **5. MMH Finding 5:** There is a lack of broad awareness of current evidence-based, best-practice models for integrating attention to behavioral health needs within primary health settings, using a collaborative/consultative approach.



MMH and Midland Health Recommendations

- 1. **MMH Recommendation 1:** As the "population health" leader for the Midland community and an entity that recognizes that "behavioral health is part of health," MMH should lead efforts to organize a collaborative behavioral health leadership team for Midland County, based on customer and community values. MMH can use its experience to help facilitate a culture of collaboration among all behavioral health stakeholders.
- 2. MMH Recommendation 2: MMH can demonstrate leadership in integrating behavioral health care with primary care not only in Midland, but also as a front-running hospital district for the state by formally announcing its commitment to engage in recognizing, identifying, and serving the behavioral health needs of the population that is already within its purview as a health provider. This commitment would augment collaboration with existing behavioral health providers for specialty care.
- 3. MMH Recommendation 3: Building integrated behavioral health care capability within services involves the use of scarce specialty resources to provide consultation and collaboration while building capacity for behavioral health screening and intervention within primary (and specialty) health settings. Although this is a challenging endeavor, it can be accomplished by small, deliberate steps over time. MMH can establish itself as a leader in Texas by announcing this as a priority direction for all of Midland Health and developing a strategic vision and initial steps in this direction during the coming year. One step would include gathering data on the prevalence of behavioral health issues within all Midland Health services and facilitating access to behavioral health consultation (using collaborative care models and not necessarily referral) for Midland Health primary care physicians and pediatricians.
- 4. MMH Recommendation 4: MMH should integrate behavioral health into health care at every level for the purpose of improving outcomes and efficiency. Existing MMH CQI efforts for high risk populations have not routinely identified co-occurring behavioral health needs. Simply beginning with better data collection and awareness can promote opportunities for improvement in integrated service delivery. This has been identified by the MMH Chief Medical Officer and Chief Nursing Officer as an excellent starting place for integrating behavioral health into their own population health efforts. The existing CQI program can begin by identifying the baseline of capacity to address behavioral health issues within complex populations, developing strategies for improvement, and implementing small steps to achieve progress. There are national toolkits, such as the Organizational Assessment Toolkit for Integration developed by the Center for Integrated Health Solutions that can guide this effort.



MMH and Midland Health Recommendations Continued

- 5. MMH Recommendation 5: It is important to expand the capacity of the MMH ED to provide emergency psychiatric intervention within the emergency department setting. This would entail moving beyond the practice of just holding people pending disposition by viewing the ED as a part of the crisis continuum and having the capacity to provide for certain high-risk individuals a combination of psychiatric medications and crisis intervention that can divert people into community care and thereby reducing expenditure on hospitalizations. This effort also needs to reframe the role of the MCHD Police Department to be a more proactively collaborative partner with both ED clinical staff and other local law enforcement to welcome and engage individuals with severe behavioral health crises in a safe and effective manner.
- **6. MMH Recommendation 6:** MMH would be a critical collaborative partner in developing a business case and financial model for a crisis diversion "hub" as described and recommended earlier in this report under SR-6.
- 7. MMH Recommendation 7: The Behavioral Health Outlook Center is an important resource for the community as a whole, particularly given the limited availability of highly qualified licensed providers. Currently, however, even though the Behavioral Health Outlook Center is funded through the 1115 Waiver, the business model requires only serving individuals with Medicaid or insurance coverage. This has become a significant barrier to access, and significant effort should be directed to deploy the resources of the Behavioral Health Outlook Center to best meet overall community need for behavioral health care for underserved and indigent populations, including direct service as well as consultation to health and behavioral health providers.
- 8. MMH Recommendation 8: As the primary provider of population-based health services for Midland County, MMH is in an excellent position to create a vision for an enduring public university collaboration with TTUHSC-PB and other universities around cutting edge development of population health capacity, including physical health/behavioral health integration (PHBHI), for the Midland community. This collaboration should include training, education, service, and research, and involve multiple medical specialties (e.g., family practice, pediatrics, psychiatry, public health) as well as nursing, physician assistant, and allied health professions. The goal would be for Midland and the Permian Basin to be a magnet for attracting the best qualified service providers and researchers to implement the most innovative models of integrated population health in a real-world community that, despite multiple challenges, has tremendous strength.



Midland County Mental Health Assessment

MMH and Midland Health Recommendations Continued

- 9. MMH Recommendation 9: MMH could expand its collaboration with TTUHSC-PB to develop a long-range strategic plan for improving the dissemination of evidence-based, best-practice models that integrate behavioral health needs within primary health settings, using a collaborative/consultative approach. This approach shifts the primary function of scarce behavioral health specialty providers to engaging in consultation to primary care providers (to have more reach within existing resource), thus reducing the number of individuals who need continuing access to the limited specialty resources.
- 10. MMH Recommendation 10: MMH could take advantage of increasing opportunities to access incentive funds to support innovative approaches to population health management for complex populations (including future use of 1115 Waiver funds that may be better aligned with community-wide population health improvement targets), such as physical health behavioral health integration (PHBHI) expansion. A new emergent opportunity relates to Medicaid Network Adequacy Improvement Program (NAIP) funding, in which providers and insurers partner to achieve improvements in costs and outcomes for targeted high-risk populations. MMH can be in a good position to utilize these funds to support ongoing PHBHI development efforts that would be a win-win for funders, providers, and the community as a whole.
- 11. MMH Recommendation 11: There is enormous potential for capturing existing data on behavioral health needs within the complex health population served by MMH, and then using the data to engage in systematic improvement of PHBHI capacity across both hospital-based services and MMH's primary care practice partners, starting with improvements that can be developed by leveraging existing resources first.

Source: Meadows Mental Health Policy Institute for Texas, Midland County Mental Health Systems Assessment, information received on September 20, 2016.



PHONE INTERVIEW FINDINGS





Overview

- Conducted 22 interviews with the two groups outlined in Internal Revenue Service Final Regulations issued December 29, 2014.
- Discussed the health needs of the community, access issues, barriers and issues related to specific populations
- Gathered background information on each interviewee



Interviewee Information

- Michael Austin: Chief Executive Officer, Midland Community Healthcare Services
- Bobby Burns: President and Chief Executive Officer, Midland Chamber of Commerce
- Richard Coats: Vice President, OGX Resources LLC
- Barbara Cobos: Director of Case Management and Social Services, Midland Memorial Hospital
- Imo Jean Douglas: Health Services Supervisor, Midland Independent School District
- Michelle Evans: Director of Community Impact, United Way of Midland
- Sal Garcia: Director, Midland County Health Department
- Vicki Jay: Executive Director, Midland Shared Spaces
- Jessica Jones, RN: Director of Nursing, Springboard Center
- Renee Meiner: Executive Director, Community Children's Clinic
- Russell Meyers: President and Chief Executive Officer, Midland Memorial Hospital

- Jerry Morales: Mayor, City of Midland
- Dr. Sari Nabulsi: Chief of Staff, Midland Memorial Hospital
- Elsa Reed: Cultural Diversity Coordinator, Midland Memorial Hospital
- Dr. Barbara Rila: Child and Adolescent Behavioral Psychologist, Premier Physicians
- Dr. Eliseo Rivera: Chief Medical Officer, Midland Community Healthcare Services
- Laura Roman, CPA, CMAP: Partner, Weaver Accounting
- Jody Sneed: Executive Director, Senior Link Midland
- Ramona Thomas: Chief Executive Officer, Permian Basin Community Mental Health and Mental Retardation Centers
- Steve Thomason, LMSW, LCDC: Executive Director, Springboard Center
- Eric Uresti: Site Manager, International Rescue Committee
- Dr. Lawrence Wilson: Vice President of Medical Affairs and Chief Medical Officer, Midland Memorial Hospital



Interviewee Characteristics

 Work for a state, local, tribal or regional governmental public health department (or equivalent department or agency) with knowledge, information or expertise relevant to the health needs of the community

4.6%

 Member of a medically underserved, low-income or minority populations in the community, or individuals or organizations serving or representing the interests of such populations 63.6%

 Community leaders (ex: Weaver Accounting, Midland Chamber of Commerce, OGX Resources LLC) 31.8%



Community Need Summary

- Interviewees discussed the following as the most significant health issues:
 - Overall Access Barriers
 - Affordability of Care
 - Insurance Coverage
 - Access to Primary Care Services
 - Access to Mental and Behavioral Health Care
 - Access to Specialty Care Services
 - Access to Women's Health Care Services
 - Prevalence of Chronic Conditions and Need for Preventive Care
 - Increased Awareness of Existing Community Services and Resources



Overall Access Barriers

Affordability of Care and Insurance Coverage

- The majority of interviewees noted that health care costs may inhibit residents from seeking care.
- Interviewees overwhelmingly agreed that poverty was a major determinant of health status in Midland County, and many discussed affordability and cost barriers as major concerns – particularly for the low income and working poor.
- Many interviewees discussed the cost of prescription medications as another concern for residents. A few noted that many patients may not fulfill their prescribed medications due to cost.
- A few interviewees noted that access to dental services depends on ability to pay and insurance coverage, and that the low income and un/underinsured populations are lacking access to dental care.

"The people who cannot pay for their care have difficulty accessing it."

"We have a broken system in offering health care services and having [the working poor] adequately treated."

"Health care is challenging for individuals in our community, residents are not able to afford the health care and so they can't get the health care needs they want or should be receiving."

"Medications become an issue, because even if [patients] can afford to see their primary care physician, then they've got an issue with the cost of their medications."

"Dental care for low income families is difficult to come by. Sometimes people don't have the funds or the insurance for dental care."



Overall Access Barriers

Affordability of Care and Insurance Coverage Continued

- Interviewees mentioned a lack of dentists in the area that accept Medicaid, which may disproportionately affect the youth population.
- Interviewees noted that insurance coverage is another barrier that inhibits residents from accessing health care services, there are limited options for the un/underinsured populations in Midland County.
- Many interviewees mentioned that while accessing health care services is difficult for the low income and un/underinsured populations in the area, even residents who are insured may delay seeking care or not participate in preventive care due to the cost of insurance and/or health care services.
- Interviewees mentioned that those without insurance coverage tend to overuse the Emergency Room due to lack of a medical home and the growing number of providers in the area that are limiting their Medicare and Medicaid patients.

"The biggest issue we see for our population is dentists who accept Medicaid. We also have a lot of kids with huge dental needs that don't have Medicaid."

"If you have insurance, [health care] is pretty accessible. If you don't have insurance, there aren't a lot of doors open to you."

"So many people are underinsured. People may be totally insured, but may not take care of themselves for financial reasons."

"The uninsured are accessing the system on an urgent basis and not using primary care to build benefit."

"If the patient lacks insurance coverage, they have no resources other than the ER because providers are limiting Medicare/Medicaid patients."



Access to Primary Care Services

- While the majority of interviewees discussed a perceived limited access to primary care services for local residents, a few of the interviewees expressed concern over the misconception of a limited number of providers in Midland County.
- Many interviewees mentioned that providers in the area are limiting their Medicaid and Medicare appointments, or have completely stopped taking new patients due to being fully booked.
- It was mentioned that the difficulty in accessing a primary care provider may cause for residents to delay or avoid seeking preventive services.
- A few interviewees raised concern over the high number of primary care providers that are retiring and/or leaving the area.

"Midland has inadequate primary care resources historically, and we've recruited and put a few in place that are now working at less capacity.

Access is good, use is not so good."

"There are so many needs, and so few providers."

"Whether it's through not taking new patients, not taking specific types of insurance, or just the inability to schedule an appointment even if they are your doctor - you give up on it. It's impossible to get an appointment."

"Some physicians have limited their payer options, and that's our biggest issue – accessibility is defined by payer acceptance."

"I can't tell you how many physicians I have had in the last 5 years because all doctors are retiring or leaving. I go to urgent cares now."



Access to Mental and Behavioral Health Care

- Nearly all interviewees agreed that access to mental and behavioral health services is significantly lacking in Midland County.
- Many interviewees agreed that there is a shortage of mental and behavioral health care providers in Midland, and those that are in the area are booked up with very long waiting times.
- While the majority of interviewees mentioned that all residents – regardless of insurance coverage - have limited access to mental health providers, a few noted the greater barrier to seeking care for those who are un/underinsured.
- A few interviewees emphasized the need for mental and emotional support services for the youth population, and noted significantly high suicide rates in local schools.

"We're working on [mental health], but that has been and continues to be the biggest weakness in the community with respect to medical care."

"There is a huge shortage of providers for mental well-being and support services for mental health in Midland, Texas."

"[Mental health providers] are just booked up, you can't get an appointment...their waiting lists are months."

"There is a limited supply of psychologists and an even more limited supply of psychiatrists, and again that's where if you've got the insurance, you're much better off."

"Schools are really struggling with [mental health]. Local schools have had some pretty high suicide rates...it has been a struggle to have adequate mental health care for students."



Access to Specialty Care Services

- While the majority of interviewees agreed there is a large supply of specialists in the area, a few noted difficulty in getting in to see any specialists in the county.
- Interviewees mentioned a few specialty services that may benefit the community, particularly in addressing higher rates of chronic conditions, including:
 - Dermatology

Psychiatry

Neurology

Pulmonology

- Pediatric subspecialties
- Interviewees discussed difficulty in recruiting specialists to Midland, and noted the high number that are nearing retirement age.
- It was emphasized that access to specialty care for the un/underinsured or low income is more challenging, and one interviewee expressed concern regarding the limited number of bilingual specialty providers in the area.

"Specialists are very hard to get into, it's a very challenging part of our community."

"It's very difficult to get [specialists] to come here. We don't have enough business to entertain their idea of coming here."

"We cannot get another pulmonologist to the area and we have a very high COPD rate."

"The [low income] population leaves [Midland] to access specialty care."

"You're constantly battling retirement – it seems like our physicians in specialized areas are aging out."

"Half of the population is Spanish speaking, and a significant number do not speak English as a second language. We need Spanish speaking specialty providers."



Access to Women's Health Care Services

- Many of the interviewees raised concern around the limited access to women's health care services and resources.
- It was mentioned that the closing of the local Planned Parenthood has further limited access to women's health care services, such as family planning, pap smears, and contraceptives.
- A few of the interviewees mentioned that the lack of access to women's health care resources and services disproportionately affects the low income female population in Midland.
- One interviewee expressed concern over prenatal substance abuse, and recommended education from local OB/GYNs to address those expecting patients that are at risk.

"There isn't enough women's health care [in Midland], like pap smears."

"They shut [Planned Parenthood] down...they had family planning, they had pregnancy tests, pap smears, and gave out birth control pills."

"We have a great need for women's reproductive health care services, especially for low income women."

"Contraception for the CHIP patient population is not there. The funding for women's health services is not there."

"[What] is causing a lot of difficulty for the local child population is the prenatal abuse of substances. We have a lot of children in this area who suffer brain damage – some of them because the parents were drug abusers, others because [the parents] didn't know any better."



Prevalence of Chronic Conditions and Need for Preventive Care

- The majority of interviewees stated that if they were in charge of the health of Midland County residents, they would place an increased emphasis on healthy lifestyle education.
- Many interviewees recommended increased emphasis on preventive care to address unhealthy lifestyles, such as physical inactivity and poor diet, to improve health in the community.
- A few interviewees noted that preventive education efforts should be targeted towards specific populations, such as the transient populations associated with oil booms and busts.
- One interviewee raised concern over the fragmented continuum of care associated with transient populations that may increase the risk of adverse health events.

"We need to get on the front side of providing wellness services and getting away from treating people after they're sick."

"People are suffering from chronic disease and failing to have access to tools to manage it properly."

"We are a pretty unhealthy community as far as activity level and just overall weight management."

"We have such a transitional population that it's hard to maintain any type of continuity of care. With the oil boom and bust, we have fluctuations of population and kids especially. Right now we're seeing an influx of refugee populations, and we may get them started with some type of care, and then a week later – they move. The lack of continuity of care puts those families and kids at risk."



Increased Awareness of Existing Community Services and Resources

- Many interviewees raised concern over the lack of awareness and understanding of existing resources and services for residents to access.
- It was discussed that there are many resources and services in the community for residents to access; however, there is a lot of confusion surrounding what resources are available and how to access those services.
- Interviewees mentioned that the lack of education and awareness of existing resources may cause residents to avoid or delay seeking care, and that a few specific subpopulations may be disproportionately challenged – such as the low income, non-English speaking, and the elderly.
- A few interviewees emphasized the need for greater coordination across the continuum of care.

"We do have [services] in place, but people that need them don't know how to access them."

"Many [low income residents] do not know that they have access to available programs."

"We need education and understanding of what's available. There's so much confusion that some people don't get treated, especially among the elderly."

"For non-English speaking folks, it's more difficult to figure out how to enter the system."

"Provider information systems, whether they're manual, paper or electronic, do not communicate with each other. There's not a strong tradition among providers of coordinating decisions."

"We [need] to connect the dots or coordinate services from one level to the next."



Health Disparities Across Populations

 Interviewees expressed concern surrounding the health disparities that disproportionately affect specific populations, including:

Elderly

- Lack of understanding of how to navigate the health care system
- Transportation barriers
- Female OB
 - Lack of access to women's health care resources and services
- Homeless
 - Lack of understanding and awareness of existing services for them to access
- Low Income / Working Poor
 - Limited access to dental care services and women's health care services

Non-English Speaking

- Limited understanding and awareness of existing health care services and resources to access
- Delayed access to preventive care
- Limited access to bilingual mental health care providers
- Transient
 - Fragmented continuum of care
 - Lack of consistency in seeking care
- Veterans
 - Limited access to health care services
- Youth
 - Limited access to dental care services and mental health care services and providers



2013 CHNA IDENTIFIED NEEDS





2013 CHNA Identified Needs

- 1. Uninsured / Lack of access to services (cost)
- 2. Lack of primary care physicians
- 3. Lack of mental health services
- 4. Obesity
- 5. Diabetes
- 6. Heart Disease
- 7. Poor nutrition
- 8. Physical inactivity
- 9. Lack of health education
- 10. Lack of specialty health services

Source: Midland Memorial Hospital, About Us: Community Health Needs Assessment, http://www.midland-memorial.com/about-us/community-health-outreach/community health-needs-assessment/default.aspx; data accessed September 13, 2016.



INPUT REGARDING THE HOSPITAL'S PREVIOUS CHNA





Consideration of Previous Input

- IRS Final Regulations require a hospital facility to consider written comments received on the hospital facility's most recently conducted CHNA and most recently adopted Implementation Strategy in the CHNA process.
- The hospital made every effort to solicit feedback from the community by providing a feedback mechanism on the hospital's website. However, at the time of this publication, written feedback has not been received on the hospital's most recently conducted CHNA and Implementation Strategy.
- To provide input on this CHNA please see details at the end of this report or respond directly to the hospital online at the site of this download.



EVALUATION OF HOSPITAL'S IMPACT





Evaluation of Hospital's Impact

- IRS Final Regulations require a hospital facility to conduct an evaluation of the impact of any actions that were taken, since the hospital facility finished conducting its immediately preceding CHNA, to address the significant health needs identified in the hospital's prior CHNA.
- This section includes activities completed based on the 2013 to 2016 Implementation Plan.



Activity Opdate: 2014							
Specific Health Need Identified In CHNA	Implementation Strategy	Strategy		Notes			
Lack of access to Health Services/Uninsured	Federally Qualified	a. Collaborate with other stakeholders to establish a Federally Qualified Healthcare Center to serve our community with a focus on the underserved/uninsured population and vulnerable children. b. Help promote the clinics. c. Conduct media campaigns for uninsured residents to sign up for the Affordable Care Act (ACA) to start in 2016 coverage year.	Created awareness about enrollment in the Affordable Care Act health plans for uninsured residents. Expanded clinic space and recruited providers.	Midland Health has created and maintained a Service Agreement with Midland Community Healthcare Services (MCHS) to provide convenient access to fundamental healthcare services in critical access neighborhoods. MCHS, a federally-qualified health center (FQHC) has been established. Currently, MCHS operates three clinic facilities, providing primary care via pediatricians, family physicians, internists, obstetricians, nurse practitioners and physician assistants. Media Campaigns and public engagements continue to help promote MCHS and encourages the uninsured to sign up for coverage under the ACA.			
Lack of primary care physicians	Primary Care Physician recruitment	a. Hire at least two (2) primary care or mid-level providers per year for our FQHC clinics and other non-FQHC Clinics.	Five (5) primary care providers were hired in FY14 (2 physicians and 3 midlevel providers). Established and strengthened Nurse-Advisory phone services (68-Nurse).	Midland Health is actively assisting MCHS and its 501 (c) provider partners (Premier Physician Group) in recruitment efforts, including provision of financial assistance made available through community partnerships, and DSRIP projects with support from Midland Developmen Corporation.			
Obesity, poor nutrition, physical inactivity, lack of health education	Wellness, Prevention, and Health Education	Midland Health will increase collaboration with various city and county departments to work together on increasing community engagement in personal health and wellness and improving health literacy.	Conducted public health education campaigns and offered free health screenings.	Through collaborative efforts, MMH has increased its presence in the community by way of awareness creation, organization of community health events, public education, free health screenings, and 24 hour medical advice (Health Navigation Services) for the underserved communities. We will continue to expand and innovate to increase our reach to serve the needs of Midland and the surrounding counties. MMH has lined up some social health activities for 2016 as part of the educational campaign on healthy living and awareness creation.			
Heart Disease	Wellness, Prevention, and Health Education	a. The MMH Heart Institute will increase its education regarding prevention of heart disease by creating a more comprehensive post discharge planning program. b. The institute will also increase its community outreach efforts and raise funds to support the institute.	Ongoing	The Midland Memorial Heart Institute has increased its education regarding prevention of heart disease by creating a more comprehensive post-discharge planning program and also increasing community outreach efforts, including the creation of a fundraising walk/run.			
Diabetes	program	a. Establish a Diabetes Nutrition and Learning Center (DNLC) that will provide inpatient and outpatient support for those currently suffering from, or are at risk for, diabetes. b. Educate at risk patients on the need to make lifestyle and dietary changes to avoid the disease. c. Coordinate with local primary providers to make available our DNLC services. d. Organize periodic diabetes screenings and education in low income communities- to create awareness and increase early detection and treatment.	Expanded the capacity of the Diabetes Nutrition Learning Center (new recruits). Conducted outreach education to the public.	Midland Health has developed a Diabetes Nutrition and Learning Center that not only provides inpatient and outpatient support for those currently suffering from or at risk for diabetes, but is also involved in several community outreach efforts including hosting support groups at the local library and providing free screenings and education at the local health department.			

Specific Health Need Identified In CHNA	Implementation Strategy	Action	Achievements	Notes
Lack of mental health	Mental Health System	a. Open a mental health clinic to serve children and adolescents with	Ongoing	Unable to establish the clinic as planned.
services	Development	mental health issues.		
		b. Recruit mental health providers and mid-level support staff.		

	Activity Opuate. 2015							
Specific Health Need Identified In CHNA	Implementation Strategy	Action	Achievements	Notes/Achievements				
Lack of access to Health Services/Uninsured	Support and promotion of FQHC (Federally Qualified Healthcare Center)	a. Collaborate with other stakeholders to establish a Federally Qualified Healthcare Center to serve our community with a focus on the underserved/uninsured population and vulnerable children. b. Help promote the clinics. c. Conduct media campaigns for uninsured residents to sign up for the Affordable Care Act (ACA) to start in 2016 coverage year.	Established a one-stop shop clinic for easy access. Established an eligibility office to help patients pay for their care. Offer free care and screenings for the underserved.	MMH established a one-stop shop of Dental, OB/GYN, Pediatrics, and Family Medicine all at one location - the Coleman Clinic. This has helped ease the transportation burden on most families. We have also established an aid/eligibility office to qualify patient for grants, free care, discounted medical bills and to help them to apply for Medicaid/CHIP if they do qualify.				
Lack of primary care physicians	Primary Care Physician recruitment	 a. Hire at least two (2) primary care or mid-level providers per year for our FQHC clinics and other non-FQHC Clinics. b. Reduce appointment wait times from 9 days to 5 days. 	Four (4) primary care (Pediatrics, Internists, Family Practitioners) providers were hired in FY15. Expanded clinic hours.	Midland Health is actively assisting MCHS and its 501 (c) provider partners in recruitment efforts, including provision of financial assistance made available through community partnerships and DSRIP projects with support from Midland Development Corporation. Through DSRIP, we added 4 additional primary care providers to our community (Pediatrics, Internists and family practitioners).				
Obesity, poor nutrition, physical inactivity, lack of health education	Wellness, Prevention, and Health Education	a. Midland Health will increase collaboration with various city and county departments to work together on increasing community engagement in personal health and wellness and improving health literacy.	wellness tour that offered free health screenings and medical advice to the public. 2. Continue to promote	Through collaborative efforts, MMH has increased its presence in the community by way of awareness creation, organization of community health events, public education, free health screenings, and 24 hour medical advice (Health Navigation Services) for the underserved communities. We will continue to expand and innovate to increase our reach to serve the needs of Midland and the surrounding counties. MMH has lined up some social health activities for 2016 as part of the educational campaign on healthy living and awareness creation.				
Diabetes	Diabetes outreach program	a. Establish a Diabetes Nutrition and Learning Center (DNLC) that will provide inpatient and outpatient support for those currently suffering from, or are at risk for, diabetes. b. Educate at risk patients on the need to make lifestyle and dietary changes to avoid the disease. c. Coordinate with local primary providers to make available our DNLC services. d. Organize periodic diabetes screenings and education in low income communities to create awareness and increase early detection and treatment.	Establish diabetes support groups to help patients manage their care. Offer free health information materials to patients. Conduct free diabetes screenings for residents in Midland County.	Midland Health has developed a Diabetes Nutrition and Learning Center that not only provides inpatient and outpatient support for those currently suffering from or are at risk for diabetes, but is also involved in several community outreach efforts including hosting support groups at the local library and providing free screenings and education at the local health department. In FY15, we screened 1,578 patients and conducted 2,449 follow-up visits.				

Specific Health Need Identified In CHNA	Implementation Strategy	Action	Achievements	Notes/Achievements
Lack of mental health	Mental Health System	a. Open a mental health clinic to serve children and adolescents with	1. Hired one (1) Child	Midland Health recruited one (1) new Child and Adolescent Psychologist
services	Development	mental health issues.	and Adolescent	in 2015.
		b. Recruit mental health providers and mid-level support staff.	Psychologist.	
			Established a new	MMH is also in partnership with Oceans Behavioral Health Hospital to
			Child and Adolescent	establish inpatient services to serve Midland County residents.
			Health Clinic.	
				Collaboration between MMH and the Meadows Mental Health Policy
				Institute (MMHPI) is ongoing.
			Health Hospital, MMH	
			has established a	
			referral system that	
			provides inpatient	
			services.	

Activity Opuate: 2010							
Specific Health Need Identified In CHNA	Implementation Strategy	Action	Achievements	Notes			
Lack of access to Health Services/Uninsured	Support and promotion of FQHC (Federally Qualified Healthcare Center)	underserved/uninsured population and vulnerable children. b. Help promote the clinics. c. Conduct media campaigns for uninsured residents to sign up for the	One (1) OB/GYN clinic established at the MMH main hospital location. Added one (1) new OB physician.	Midland Health has created and maintained a Service Agreement with Midland Community Healthcare Services (MCHS) to provide convenient access to fundamental healthcare services in critical access neighborhoods. MCHS, a federally-qualified health center (FQHC) has been established. Currently, MCHS operates three clinic facilities, providing primary care via pediatricians, family physicians, internists, obstetricians, and nurse practitioners and physician assistants. Media Campaigns have started to encourage the uninsured to sign up for coverage under the ACA.			
Lack of primary care physicians	Primary Care Physician recruitment		Hired two (2) nurse practitioners for our wellness clinic in collaboration with Premier Physicians. Hired one (1) new primary care physician.	Midland Health is actively assisting MCHS and its 501 (c) provider partners in their recruitment efforts, including provision of financial assistance made available through community partnerships, and DSRIP projects with support from Midland Development Corporation.			
			Established the health and wellness center and appointed a director. Successfully conducted the second Citywide Health and Wellness Tour. Conducted the first ever "Food is Medicine" Confab that talks about plantbased nutrition. Established an employee focus group to test out and gather perceptions on plantbased nutrition.	Through collaborative efforts, MMH has increased its presence in the community by way of awareness creation, organization of community health events, public education, free health screenings, and 24 hour medical advice (Health Navigation Services) for the underserved communities. We will continue to expand and innovate to increase our reach to serve the needs of Midland and the surrounding counties.			

Specific Health Need Identified In CHNA	Implementation Strategy	Action	Achievements	Notes
Diabetes		 a. Establish a Diabetes Nutrition and Learning Center (DNLC) that will provide inpatient and outpatient support for those currently suffering from, or are at risk for, diabetes. b. Educate at risk patients on the need to make lifestyle and dietary changes to avoid the disease. c. Coordinate with local primary providers to make available our DNLC services. d. Organize periodic diabetes screenings and education in low income communities to create awareness and increase early detection and treatment. 	Offer free health information materials to patients. Conduct free diabetes screenings for residents in Midland County (1,402 patients to date).	Midland Health has developed a Diabetes Nutrition and Learning Center that not only provides inpatient and outpatient support for those currently suffering from or are at risk for diabetes, but is also involved in several community outreach efforts, including hosting support groups at the local library and providing free screenings and education at the local health department. Through September 15, 2016, MMH has screened 1,600 patients and conducted 2449 follow-up visits.
Lack of mental health services	Development	a. Open a mental health clinic to serve children and adolescents with mental health issues. b. Recruit mental health providers and mid-level support staff. c. Conduct a mental health needs assessment with the Meadows Mental Health Policy Institute (MMHPI).	1. Hire one (1) Child and Adolescent Psychologist. 2. Established a new Child and Adolescent health Clinic. 3. Complete our Mental Health Needs Assessment conducted by (MMHPI).	Midland Health recruited one (1) new Child and Adolescent Psychologist in 2016. MMH is also in partnership with Oceans Behavioral Health Hospital to establish inpatient services to serve Midland County residents. Collaboration between MMH and the Meadows Mental Health Policy Institute (MMHPI) is ongoing.

2016 PRELIMINARY HEALTH NEEDS





2016 Preliminary Health Needs

- Access to Affordable Care and Reducing Health Disparities Across Specific Populations
- Access to Mental and Behavioral Health Care
- Increased Emphasis on Coordination and Communication Across the Continuum of Care
- Need for Increased Emphasis on Physician Recruitment and Retention
- Prevention, Education and Services to Address High Mortality Rates, Chronic Diseases, Preventable Conditions and Unhealthy Lifestyles



PRIORITIZATION





The Prioritization Process

- On September 12, 2016, leadership from Midland Memorial Hospital met with Community Hospital Consulting to review findings and prioritize the community's health needs.
- The MMH CHNA Team included:
 - Russell Meyers, President, Chief Executive Officer
 - Stephen Bowerman, Senior Vice President, Chief Financial Officer
 - Cory Edmonson, Senior Vice President, Strategic Development
 - Cori Armstead, Vice President, Care Coordination/Assistant Chief Nursing Officer
 - Marcy Madrid, Vice President, Planning & Marketing
 - Dr. Lawrence Wilson, Vice President, Medical Affairs
 - Steve Olive, Executive Director at Premier Physicians
 - Barbara Cobos, Director, Case Management/Social Services
 - Reagan Twum-Barimah, Community Health Analyst
- Leadership ranked the health needs based on three factors:
 - Size and Prevalence of Issue
 - Effectiveness of Interventions
 - Hospital's Capacity
- See the following page for a more detailed description of the prioritization process.



The Prioritization Process

 The CHNA Team utilized the following factors to evaluate and prioritize the significant health needs:

1. Size and Prevalence of the Issue

- a. How many people does this affect?
- b. How does the prevalence of this issue in our communities compare with its prevalence in other counties or the state?
- c. How serious are the consequences? (urgency; severity; economic loss)

2. Effectiveness of Interventions

- a. How likely is it that actions taken will make a difference?
- b. How likely is it that actions will improve quality of life?
- c. How likely is it that progress can be made in both the short term and the long term?
- d. How likely is it that the community will experience reduction of long-term health cost?

3. MMH Capacity

- a. Are people at MMH likely to support actions around this issue? (ready)
- b. Will it be necessary to change behaviors and attitudes in relation to this issue? (willing)
- c. Are the necessary resources and leadership available to us now? (able)



Health Needs Ranking

Final Priorities

- CHNA Team participated in a roundtable discussion to rank the five significant health needs based on the three factors discussed.
- Hospital leadership decided to address all of the ranked health needs.
 The final health priorities that MMH will address through its
 Implementation Plan are, in descending order:
 - Prevention, Education and Services to Address High Mortality Rates, Chronic Diseases, Preventable Conditions and Unhealthy Lifestyles
 - 2. Increased Emphasis on Coordination and Communication Across the Continuum of Care
 - 3. Access to Mental and Behavioral Health Care
 - Access to Affordable Care and Reducing Health Disparities Across Specific Populations
 - 5. Need for Increased Emphasis on Physician Recruitment and Retention



RESOURCES IN THE COMMUNITY





Additional Resources in the Community

 In addition to the services provided by MMH, other charity care services and health resources that are available in Midland County are included in this section.



	List of Services Available in Midland County							
Organization Name	Area Primarily Served	Address	City	State	Zip Code	Phone	Website	Services Provided
211	Odessa	-	-	-	-	211	http://www.uwodessa.org/	2-1-1 is an easy to remember number for accessing free information about community services to find help when you need it or find places you can help.
ACT	Odessa	2445 E. 11th St.	Odessa	TX	79761	432-333-3667	-	Counseling Center
Alpha Behavioral Health Services	Odessa	1205 W. University Blvd.	Odessa	тх	79761	432-614-5720	www.odessatherapy.com	As solution-focused therapists, our goal is to help you uncover your true potential and lead a life worth celebrating. If you're looking for extra support and guidance through a challenging situation or you're just ready to move in a new direction in your life, we look forward to working with you to achieve your goals.
Alternative Solutions Counseling	Odessa	2458 E. 11th	Odessa	TX	79761	432-582-2444	www.alternativelifesolutionsco unseling.com	Alternative Life Solutions Counseling seeks to help individuals find an alternative solution and new directions in life's daily struggles.
American Red Cross - Permian Basin Area Chapter	Andrews, Borden, Brewster, Crane, Dawson, Ector, Gaines, Glasscock, Howard, Jeff Davis, Loving, Martin, Midland, Pecos, Presidio, Reeves, Terrell, Upton, Ward and Winkler	9601 Wright Drive	Midland	TX	79711	432-563-2267	http://www.redcross.org/tx/mi dland	The Permian Basin Area Chapter of the American Red Cross offers the following services: disaster services, health and safety services, services to the armed forces and branch officers, and other volunteer services.
Asbury Angels Alliance - Baby Blessings/Food Pantry	Odessa	4001 E. University	Odessa	TX	79762	432-366-4455	http://www.asburyumcodessa. org/	Baby Blessings is a ministry of the Asbury United Methodist Church in Odessa, TX. Baby Blessings collects supplies like wipes, bottles, etc., and provides them to mothers in need. Asbury UMC also has a Food Pantry that collects and distributes nonperishable foods to local families in need.
Basin Detox	West Texas	1711 W County Road 140	Midland	TX	79706	800-317-7818	www.basindetox.com	Provide a comfortable and safe medical detoxification to alleviate the withdrawal symptoms and the anxieties while having to go through detox.
Birthright of Odessa	Odessa	2125 E. 42nd St.	Odessa	тх	79762	432-332-0081	http://birthright.org/en/landing page/lp-odessa	Birthright of Odessa offers the following services to women who are pregnant or think they may be pregnant: completely confidential help, friendship and emotional support, free pregnancy tests, medical referrals, legal referrals, educational assistance and referrals, maternity and baby clothes, housing referrals, referrals to social agencies, and referrals for professional counseling information on prenatal development, job search/career development, adoption, pregnancy and childbirth, child care options and child safety issues.

			L	ist of S	Services A	vailable in	Midland County	
Organization Name	Area Primarily Served	Address	City	State	Zip Code	Phone	Website	Services Provided
Boys and Girls Club of the Permian Basin - Odessa	Odessa	800 East 13th Street	Odessa	TX	79761	432-337-8389	http://www.odessabgc.com/	At the Boys & Girls Club, our mission is to help young people, especially those who need us most, reach their full potential as productive, caring and responsible citizens. Our four locations are open year round for kids from 6 -18 years old with a school year schedule from 3 p.m 7 p.m. and summer schedule from 8 a.m 5:30 p.m. In addition, each facility is open one Saturday per month. Each facility provides trained adult staff members, academic support, computer learning labs, art, daily hot meal, gymnasiums, adjacent parks, game rooms, field trips, formal and informal athletic leagues, and much more.
Boys Scouts Buffalo Trail Council	West Texas	1101 W. Texas Ave.	Midland	TX	79701	432-570-7601	http://www.buffalotrailbsa.org/	The mission of the Buffalo Trail Council is to prepare young people to make ethical and moral choices over their lifetimes by instilling in them the values of the Scout Oath and Scout Law.
Cal Farley's Boys Ranch and Girlstown, USA	Texas	PO Box 1890	Amarillo	TX	79174	800-687-3722	www.calfarley.org	Cal Farley's is one of America's largest privately-funded child and family service providers specializing in both residential and community-based services at no cost to the families of children in our care.
Camp Fire USA West TX Council	West Texas	P.O. Box 50988	Midland	тх	79710-0988	432-570-4144	http://campfirewtx.org/	Camp Fire's youth development philosophies center around the concept of developmental assets. By design, Camp Fire USA programs are not only fun; they build specific skills and characteristics like self-direction, confidence and school preparedness. Programs include afterschool care, resident and multi-week camps, service learning and youth-driven leadership.
CASA of the Permian Basin Area	Ector, Crane, Loving, Ward and Winkler Counties	300 N. Grant, Ste. 207	Odessa	тх	79761	432-498-4174	http://www.casapba.org/	CASA (Court Appointed Special Advocates) of the Permian Basin Area trains volunteers to advocate for the best interests of abused and neglected children in the court system to ensure that each child is placed in a safe, permanent, and healthy environment.
Catholic Charities	Ector County	2500 Andrews Highway	Odessa	тх	79761	432-332-1387	http://www.catholiccharitiesod essatx.org/	Catholic Charities provides a continuum of services to those in need. Our goal is to meet the immediate needs, such as food, medicine and utilities, and to prepare clients for a life of self-sufficiency through training in money management, literacy, GED preparedness, and workforce training. All educational programs are provided free-of-charge.
Centers for Children and Families (Centers)	West Texas	1004 N. Big Spring St, Ste. 325	Midland	тх	79701	432-570-1084	http://www.centerswesttexas.o	Centers for Children and Families exists to improve quality of life and strengthen the communities we serve through counseling, educational and supportive services. Services include general counseling, military support, post-adoption support, parent education classes and supervised visitations.

			L	ist of S	Services A	vailable in	Midland County	
Organization Name	Area Primarily Served	Address	City	State	Zip Code	Phone	Website	Services Provided
Choiceworks Counseling	Odessa	1406 N. Grandview	Odessa	TX	79761	432-332-9644	www.odessamarriagecounselin g.com	Counseling Center
Communities in Schools - The Permian Basin	Permian Basin	PO Box 60594	Midland	тх	79711-0594	432-552-2496 (Odessa Office)	http://cispb.org/	Communities in Schools of the Permian Basin helps students stay in school and make the right choices by connecting them with needed community resources. From individualized case management services to facilitated services or programs for a targeted group of students, CISPB helps ease the burden on schools, strengthen relationships between home and school, and increase opportunities for positive life choices and academic achievement. By implementing this approach, CISPB creates a community of caring adults who work directly with educators and are able to reach students most at risk for dropping out of schools.
ECISD Family Education Center	Odessa	301 E. Clements St.	Odessa	TX	79761	432-456-8729		Free tutoring
Ector County Health Department	Ector County	221 N Texas Ave	Odessa	TX	79761	432-498-4141	http://www.co.ector.tx.us/defa ult.aspx?Ector County/Health% 20Department	The Ector County Health Department offers immunizations, nursing services including STD testing and treatment and other health education.
EZ Rider	Odessa	8007 E Business 20	Odessa	TX	79765	432-561-9990	http://www.ez-rider.org/	Local bus services with 6 routes throughout Odessa.
Family Health Clinic (FHC) and Family Health Dental Clinic	Odessa	840 W. Clements St	Odessa	TX	79763	432-640-4860	www.mchodessa.com	The FHC is a community-based healthcare program that operates in partnership with Medical Center Hospital, the Ronald McDonald Charities and the Family Dental Clinic to provide a wide range of healthcare services to uninsured and underinsured individuals in Odessa and the surrounding communities.
Family Promise of Odessa	Odessa	1354 E 6th St	Odessa	тх	79761	432-339-7100	http://www.forministry.com/us txinterfpoof	Family Promise of Odessa, Inc. exists to enable homeless families with children to achieve lasting self-sufficiency by providing temporary shelter, meals access to existing community social services.
Girl Scouts of the Desert SW - Southern New Mexico and West Texas	West Texas	5217 N. Dixie Blvd.	Odessa	TX	79762	432-550-2688	http://www.gsdsw.org/	Girl Scouts of the Desert Southwest brings together Girl Scouts of the Permian Basin, Girl Scouts of the Rio Grande and Girl Scouts - Zia Council. Girl Scouting builds girls of courage, confidence and character who make the world a better place. Girl Scouting is a unique place where a girl can learn valuable leadership skills for the benefit of her future, her community and her country. Through Girl Scouting, girls build the courage to grow strong physically, mentally and spiritually, the confidence to pursue their dreams, and the character to serve their communities and fellow Girl Scouts.
Harmony Home Children's Advocacy Center	Ector County	910 S Grant Ave	Odessa	TX	79761	432-333-5233	www_ohhcac_org/	Harmony Home CAC serves children from Ector County and 14 surrounding counties who are between the ages of 3 and 17. All of their services are offered free of charge to the victim and his/her non-offending caregivers. Primary services include: forensic interviews, victim services, therapy and community education and outreach.

			L	ist of S	Services A	vailable in	Midland County	
Organization Name	Area Primarily Served	Address	City	State	Zip Code	Phone	Website	Services Provided
Hope Chest	Odessa	1808 N. Dixie	Odessa	TX	79761	432-580-1019	http://highlandumcodessa.com /Home.html	Hope Chest exists to provide incentives to pregnant and parenting women. The Hope chest promotes and encourages responsibility and healthy behaviors during and after pregnancy.
Hospice of Midland	Midland County	911 W Texas Ave	Midland	TX	79701	432-682-2855	hospicemidland.org	Not-for-profit hospice services.
HUD Office (US Department of Housing and Urban Development)	Odessa	119 West 4th Street, Suite 104	Odessa	TX	79761	432-335-4820	http://portal.hud.gov/hudporta l/HUD?src=/states/texas/comm unity/home	HUD's mission is to create strong, sustainable, inclusive communities and quality affordable homes for all. HUD is working to strengthen the housing market to bolster the economy and protect consumers; meet the need for quality affordable rental homes: utilize housing as a platform for improving quality of life; build inclusive and sustainable communities free from discrimination; and transform the way HUD does business
Legal Aid of North West Texas	Ector, Andrews, Crane, Loving, Ward and Winkler Counties	620 N. Grant Ave., Ste 410	Odessa	тх	79761	432-332- 1207; 800- 955-1207	www.lanwt.org/contact_odessa .asp	LANWT provides free civil legal services to eligible low-income residents. The staff and volunteers are committed to the delivery of effective and efficient legal services. LANWT also offers significant educational opportunities and experiences for high school, college and law students as well as retired members of our community.
Manor Park	Midland County	2208 N Loop 250 W.	Midland	тх	79707	432-689-9898	manorparkinc.org	The Village at Manor Park in Midland, Texas, is a not-for-profit corporation managed by a volunteer board of trustees. We are licensed as a Continuing Care Retirement Community (CCRC) and currently serve over 600 residents in all levels of care.
Meals on Wheels of Odessa	Odessa	1314 E 5th St	Odessa	TX	79761	432-333-6451	www.mowodessa.com	Our service provides meals to adults 60 years of age or older and disabled adults 18 years or older who are home bound and unable by reason of disability to prepare their own meals.
Medical Transportation Program (MTP)	-	-	-	-	-	877-633-8747	http://www.dshs.state.tx.us/cs hcn/mtp.shtm	Many CSHCN Services Program clients can use the Medical Transportation Program (MTP) to get to their doctor's office, drugstore, or any place that they get medical services. If you have no way to get to these places, MTP can help you.
Midland Baptist Crisis Center	Midland County	806 S Baird St	Midland	TX	79701	432-685-1467		Prescription assistance
Midland Community Healthcare Services	Midland County	Varies	Midland	TX	Varies	Varies	midlandchs.org	Midland Community Healthcare Services provides affordable, comprehensive, accessible, culturally appropriate, cost-effective primary healthcare to residents mainly in Midland County.
Midland County Continuum of Care	Midland County	-	-	-	-	-	https://continuummidland.wor dpress.com/about/	The Midland County Continuum of Care is a collaborative made up of representatives from 28 agencies with the mission of providing housing-related services to those who are homeless or living in substandard housing. The Continuum of Care promotes safe, supportive shelter and affordable housing for all.
Midland Health and Senior Services	Midland County	3303 W. Illinois, Suite 22	Midland	TX	79701	432-681-7613	www.midlandtexas.gov/518/Ab out-Us	Midland Health & Senior Services carries out programs such as environmental sanitation, food establishment inspection, vector control, clinical services, public health education, communicable disease control, and public health preparedness

	List of Services Available in Midland County											
Organization Name	Area Primarily Served	Address	City		Zip Code	Phone	Website	Services Provided				
Midland Memorial Hospital	Midland and surrounding counties	400 Rosalind Redfern Grover Parkway	Midland	TX	79701	432-221-1111	www.midland-memorial.com	Hospital and healthcare services				
Midland/Odessa Area AIDS Support (MAAS)	Midland and Odessa	800 West Texas	Midland	тх	79701	432-218-2002	http://www.ribbonsoflight.org/	The organization offers support groups for people with HIV/AIDS and separate groups for their families in Midland and Odessa; a program to teach AIDS awareness in the secondary schools; CARE Teams that provide spiritual and emotional support to people with AIDS in their homes; and grief recovery groups.				
Mission Messiah	Odessa	1213 W. 2nd St	Odessa	тх	79763	432-580-5222	http://www.missionmessiah.or	Transitional Housing for women and children dealing with debilitating problems such as drug dependency, eating disorders, suicidal tendencies, etc. Consists of a 12-month program that includes ministry, counseling, work assignments, educational and career counseling.				
Mission Odessa	Odessa	315 W. 8th St.	Odessa	TX	79761	432-339-0762	http://FBCOdessas.com	Mission Odessa averages over 900 in Bible study each week serving apartment communities, day schools, retirement homes, plant churches, inmates, and other community projects.				
Odessa Links	Odessa	119 W 4th St #201	Odessa	TX	79761	432-582-0099	www.odessalinks.org	Odessa Links connects community members in need of assistance to valuable resources, organizations and initiatives.				
Odessa WIC Clinic	Odessa	835 Tower Dr, Ste 34	Odessa	тх	79762	866-907-0080	http://www.dshs.state.tx.us/wi chd/	The Special Supplemental Nutrition Program for Women, Infant and Children, popularly known as WIC, is a nutrition program that helps pregnant women, new mothers, and young children eat well, learn about nutrition, and stay healthy. WIC provides nutrition education and counseling, nutritious foods, and help accessing health care to low-income women, infants, and children.				
Palmer Drug Abuse Program (PDAP)	Odessa/Midland	1208 West Wall Street	Midland	тх	79701	432-685-3645	www.pdap.org	PDAP is a fellowship of young people and parents who share their experiences, love and understanding that they may solve their common problems and help others to recover from the effects of mind-changing chemicals. PDAP provides people with tools to successfully prevent substance abuse, delay its onset or reduce substance abuse-related behaviors.				
Permian Basin Community Centers for MHMR	Ector, Midland, Culberson, Pecos, Presidio, Jeff Davis, Hudspeth and Brewster Counties	3128 Kermit Hwy (Odessa Office)	Odessa	TX		432-333-3265 (Crisis Hotline)	www.pbmhmr.com	Permian Basin Community Centers is a public agency that provides a comprehensive array of services to persons experiencing major mental illnesses, mental retardation and chemical dependency.				
Permian Basin Mission Center	Permian Basin	208 N. Adams	Odessa	TX	79761	432-337-0554	http://www.pbmission.org/	The Permian Basin Mission Center is a non-profit, inter- denominational benevolent agency seeking to provide relief to families and individuals experiencing difficulties in life. The Center provides food, clothing, and furniture, as well as life-skill work-shops.				

			L	ist of S	ervices A	vailable in	Midland County	
Organization Name	Area Primarily Served	Address	City	State	Zip Code	Phone	Website	Services Provided
Permian Basin Regional Council on Alcohol & Drug Abuse (PBRCADA)	Permian Basin	120 E. 2nd St.	Odessa	тх	79761	432-580-5100	www.pbrcada.org	Provides resources to support the local and statewide alcohol, tobacco and other drug prevention. Programs provide individuals and families with access to caring counselors who provide needed resources, referrals, assessments, crisis intervention and/or motivational interviewing needed to successfully address substance use disorders.
Prevention Resource Center Region 9	Andrews, Borden, Coke, Concho, Crane, Crockett, Dawson, Ector, Gaines, Glasscock, Howard, Irion, Kimble, Loving, Martin, Mason, McCulloch, Menard, Midland, Pecos, Reagan, Reeves, Schleicher, Sterling, Sutton, Terrell, Tom Green, Upton, Ward and Winkler	120 E. 2nd St.	Odessa	TX	79763	432-580-5100	http://reg9prc.org/	Department State Health Services has established 11 Prevention Resource Centers across the state of Texas. Region 9 PRC has been given the resources to maximize prevention efforts by performing a coordinative role between DSHS and other entities that are involved in alcohol, tobacco, and other drugs. The overall goal of Region 9 PRC is to increase the effectiveness and visibility of prevention of alcohol, tobacco and other drug use and abuse within the region through information dissemination, community education, identification of community resources and identifying best practices in prevention.
Rays of Hope	-	911 W Texas Ave	Midland	TX	79701	432-684-5437	www.raysofhopemidland.org	Children's Grief Center
Reed Adolescent Center	Texas	404 Floydada	Plainview	TX	79072	806-291-4422	http://www.clplains.org/rac/rac .htm	Mission is to improve the quality of life for persons with mental illness, Intellectual Disabilities and chemical dependency, and their families by providing accessible services and resources which will support individual choices and promotes lives of dignity and independence.
Safe Place of the Permian Basin - Project Adam (Batterer's Intervention Program)	Andrews, Borden, Crane, Dawson, Ector, Gaines, Glasscock, Howard, Loving, Martin, Midland, Reeves, Upton, Ward, and Winkler Counties	700 N Grant Ave	Odessa	TX	79761	432-580-5970	www_safeplacenow_com/	The mission of Safe Place is to break the cycle of family violence by empowering individuals to make safe and healthy choices through awareness, advocacy, counseling and shelter, while promoting hope, healing and dignity. Safe Place is a Midland County funded organizations with services and programs including a 24-hour crisis hotline, an emergency shelter located in Midland, legal and personal advocacy, counseling, children's programs, batterer's intervention programs, community education and bilingual services.
Samaritan Counseling Center of West Texas	Permian Basin	10008 Pilot Ave	Midland	тх	79706	432-563-4144	http://www.samaritanccwtx.or g/	Clients may contact the center to schedule an appointment. The Center has a standard fee, but many insurance policies cover services. Some churches and employers have contracted to underwrite a portion of treatments, and assistance is provided for those clients with no insurance and low income. The Center provides counseling in a number of areas, provides services free to active military, veterans and their families, and offers workshops for families going through divorce.

			L	ist of S	Services A	vailable in	Midland County	
Organization Name	Area Primarily Served	Address	City	State	Zip Code	Phone	Website	Services Provided
"SHARE" - Sharing Hands Respite Service	West Texas	208 S. Marienfeld	Midland	тх	79701	432-218-4622	http://www.sharewesttexas.org /	SHARE partners with all members of families where there are children with special needs, supporting their efforts to establish and maintain strong and successful families. SHARE provides respite services as well as programs for siblings, parents, grandparents, and extended families.
Star Care Nurse Family Partnership (NFP)	Ector County	620 N. Grant Ave., Ste 100	Odessa	тх	79761	432-580-7707	www.startechgroup.com	Nurse-Family Partnership (NFP) is a voluntary prevention program that provides nurse home visitation services to low-income, first-time mothers. Nurses begin home visits early in the mother's pregnancy and continue visitation until the child's second birthday. Nurses provide support, education and counseling on health, behavioral and self-sufficiency issues. This program is funded by a federal grant awarded to the Texas Health and Human Services Commission from the U.S. Department of Health and Human Services. This program is also part of HHSC's Home Visiting Program, which also includes the Parents as Teachers and the Home Instruction for Parents of Preschool Youngsters (HIPPY) programs. These evidence-based programs help parents prepare their children from birth through age-five, for success in school and beyond.
Stay Together Program	Midland and Odessa	8701 W County Road 60	Midland	TX	79707	432-699-1466	http://highsky.org/programs_st av_together.html	The Stay Together Program delivers services to families with children/youth 0-17 years of age, who are experiencing runaway, truant, or delinquent behaviors. Youth and families experiencing family conflict are also eligible for these services. The Stay Together Program is preventative in nature and engages the youth and their families early on to help ensure that the family remains intact, and to prevent the involvement of more restrictive state agencies such as Juvenile Probation and Child Protective Services.
Texas Department of Health and Human Services - Odessa	Odessa	3016 Kermit Hwy	Odessa	TX	79764	432-333- 5141; 1-800- 252-9330	HHSC.state.tx.us	Provides/Offers food stamp programs, TANF (Temporary Assistance for Needy Families) and Medicaid for children, pregnant women and parents of deprived children.
Texas Runaway Hotline	-	-	-	-	-	888-580-HELP (4357)	www.texasrunaway.org	Texas Runaway Hotline is a confidential and free telephone hotline that offers referrals, safe runaway shelters, conference calling, message relay service (fostering communication between kids and parents) and education for kids and parents about runaway rights.
Texas Youth & Runaway Hotline	-	-	-	-	-	800-989-6884	http://www.dfps.state.tx.us/Yo uth Hotline/default.asp	The Texas Youth and Runaway hotline is answered 24-hour, seven days a week and provides prevention services to youths, parents, siblings and other family members who are in need of a caring voice and listening ear.
The Crisis Center	Serving Andrews, Crane, Ector, Gaines, Loving, Reese, Ward and Winkler Counties	910 S. Grant, Suite B	Odessa	тх	79761	432-333-2527	www.odessacrisiscenter.org	Established 32 years ago, The Crisis Center currently assists nearly anyone impacted by a violent crime. Client services and program areas include The Crisis Center's Family Violence Shelter in Odessa, a Crisis Response Team, a 24-hour Crisis Hotline, Counseling Services and Support Groups, Community Awareness Programs and Primary Prevention Initiatives

	List of Services Available in Midland County												
Organization Name	Area Primarily Served	Address	City	State	Zip Code	Phone	Website	Services Provided					
The Life Center: Sexual Integrity for Life	Midland and Odessa	802 N. Washington Ave	Odessa	TX	79762	432-617-8378	http://www.midlandlifecenter.o	The Life Center promotes sexual integrity, and their vison is to inspire and equip individuals to make positive decisions for life and relationships. They offer three departments: Prevention, Intervention and Restoration, and an expansion of services through satellite offices in Andrews and Odessa.					
The Ronald McDonald Care Mobile	Odessa	500 W. 4th St.	Odessa	TX	79761	432-640-6000	http://www.medicalcenterhealt hsystem.com/CareMobile/Page s/default.aspx	Medical Center Hospital and Ronald McDonald House Charities (RMHC) of the Southwest have partnered to bring the state-of-the-art Ronald McDonald Care Mobile program to our area. A medical clinic on wheels, the Care Mobile brings medical care and health information directly into local neighborhoods with unmet healthcare needs for ECISD students, siblings and their minor children up to the age of 18. The vehicle houses two patient examination rooms, a laboratory, a reception area and a medical records area.					
The Salvation Army	Odessa	810 E. 11th	Odessa	тх	79761	432-332-6910	www_salvationarmyusa_org/	Multifaceted religious and social service organization actively engaged in addressing the needs of the homeless and hungry, persons in financial crisis, and at risk children and youth.					
Top Rank Youth Program Odessa - affiliated with Permian Basin Community Centers	Ector and Midland Counties	1012 MacArthur	Odessa	TX	79763	432-580-2617	www.pbmhmr.com	The Top Rank Youth program is a youth outpatient substance abuse treatment designed for adolescents who do not require the more structured environment of residential treatment to achieve and maintain abstinence. The program ensures access to a full continuum of treatment services and provides sufficient treatment intensity to achieve treatment plan goals for both the adolescent and their families.					
United Way of Midland County	Midland County	1209 W Wall St.	Midland	тх	79701	432-685-7700	www.unitedwaymidland.com	United Way works with program providers in supporting over 50 programs and services that target community needs by focusing on the building blocks for a better life: a quality education that leads to stable employment; financial independence and sufficient housing to support a family, and sound emotional and physical health.					
United Way of Odessa	Odessa	128 East 2nd St.	Odessa	тх	79761	432-332-0941	http://www.unitedwayodessa.o	United Way of Odessa and its program providers impact the lives of 1 in every 3 Odessans. The work of United Way staff, volunteers and donors provides people with the resources necessary to build a quality life.					
UTPB Center for Behavioral Analysis	Odessa	4901 E. University	Odessa	TX	79762	432-552-2365	-	Counseling and testing center					
West Texas Area Counseling Center	Odessa	62 San Lucas Ct.	Odessa	TX	79765	432-550-3838	-	Counseling for clients age 3 and older					
West Texas Opportunities	West Texas	700 N Grant, #150	Odessa	TX	79761	432-333-9027	http://www.gowto.org/	West Texas Opportunities, Inc. was created for the purpose of administering the provisions of the Economic Opportunity Act of 1964 and its subsequent amendments. It is dedicated to the proposition that the United States can achieve full economic and social potential as a nation only if every individual, regardless of race, creed or sex, has the opportunity to develop to the full extent of his or her capabilities.					

INFORMATION GAPS





Information Gaps

- While the following information gaps exist in the health data section of this report, please note that every effort was made to compensate for these gaps in the interviews conducted by Community Hospital Consulting.
 - This assessment seeks to address the community's health needs by evaluating the most current data available. However, published data inevitably lags behind due to publication and analysis logistics.
 - The most significant information gap exists within this assessment's ability to capture various county-level health data indicators, including arthritis, mental health medication use, mental health affected activities, 14+ days of poor mental health, immunization rates, and access to a personal doctor. Data for these indicators are reported at the Health Service Region level.



ABOUT COMMUNITY HOSPITAL CONSULTING





About CHC Consulting

- Community Hospital Corporation owns, manages and consults with hospitals through three distinct organizations – CHC Hospitals, CHC Consulting and CHC ContinueCare, which share a common purpose of preserving and protecting community hospitals.
- Based in Plano, Texas, CHC provides the resources and experience community hospitals need to improve quality outcomes, patient satisfaction and financial performance. For more information about CHC, please visit the website at: www.communityhospitalcorp.com



APPENDIX

- SUMMARY OF DATA SOURCES
- DEMOGRAPHIC DATA FINDINGS
- HEALTH DATA FINDINGS
- HPSA AND MUA/P INFORMATION
- INTERVIEWEE BIOGRAPHIES





SUMMARY OF DATA SOURCES





Summary of Data Sources

Demographics

- This study utilized demographic data, such as population estimates, provided by Texas Health Data Center for Health Statistics; http://healthdata.dshs.texas.gov/home.
- The United States Bureau of Labor Statistics, Local Area Unemployment Statistics provides unemployment statistics by county and state; http://www.bls.gov/lau/#tables.
- This study also used demographic data collected by Community Commons, a site which is managed by the Institute for People Place and Possibility, the Center for Applied Research and Environmental Systems, and Community Initiatives. Data can be accessed at http://www.communitycommons.org/.
- The Annie E. Casey Foundation is a private charitable organization, dedicated to helping build better futures for disadvantaged children in the United States. One of their initiatives is the Kids Count Data Center, which provides access to hundreds of measures of child well-being by county and state. Demographic data from the Kids Count Data Center is included within this report, and can be accessed at http://datacenter.kidscount.org/.

Health Data

The County Health Rankings are made available by the Robert Wood Jonson Foundation and the University of Wisconsin Population Health Institute. The Rankings measure the health of nearly all counties in the nation and rank them within states. The Rankings are compiled using county-level measures from a variety of national and state data sources. These measures are standardized and combined using scientifically-informed weights. The Rankings are based on a model of population health that emphasizes the many factors that, if improved, can help make communities healthier places to live, learn, work and play. Building on the work of America's Health Rankings, the University of Wisconsin Population Health Institute has used this model to rank the health of Wisconsin's counties every year since 2003; http://www.countyhealthrankings.org/



Summary of Data Sources

Health Data Continued

- The Community Health Status Indicators (CHSI) 2015 is an online web application that produces health status profiles for each of the 3,143 counties in the United States and the District of Columbia. Each county profile contains indicators of health outcomes (mortality and morbidity); indicators on factors selected based on evidence that they potentially have an important influence on population health status (e.g., health care access and quality, health behaviors, social factors, physical environment); health outcome indicators stratified by subpopulations (e.g., race and ethnicity); important demographic characteristics; and HP 2020 targets.
 - A key feature of CHSI 2015 is the ability for users to compare the value of each indicator with those of demographically similar "peer counties," as well as to the U.S. as a whole, and to HP 2020 targets. Selection of the method and variables for the new peer county groupings was based on an iterative process that was guided by the advice of subject matter experts (internal and external to CDC) including representatives from academia and architects of the original CHSI. The analysis yielded 89 peer groupings based on the following 19 county-level equivalent variables for all 3,143 U.S. counties, including (but not limited to): population size, growth, density, and mobility; percent children and elderly; sex ratio; overall and elderly poverty levels; and unemployment. Please see the appendix for a full description of the CHSI methodology.
 - More information can be accessed at http://wwwn.cdc.gov/CommunityHealth/home.
- Texas Health Data is provided by the Texas Department of State Health Services. The site provides access
 to Texas public health statistics and community health data including, but not limited to, mortality, natality,
 behavioral risk factors, and communicable diseases; http://healthdata.dshs.texas.gov/home.



Summary of Data Sources

Health Data Continued

- This study utilizes Health Service Region level data from the Behavioral Risk Factor Surveillance System (BRFSS), provided by the Texas Department of State Health Services;
 http://healthdata.dshs.texas.gov/HealthRisks/BRFSS.
- The United States Census Bureau's Small Area Health Insurance Estimates provide insured and uninsured rates by county up to the year 2013; http://www.census.gov/did/www/sahie/data/interactive/.
- This study also used health data collected by Community Commons, a site which is managed by the
 Institute for People Place and Possibility, the Center for Applied Research and Environmental Systems, and
 Community Initiatives. Data can be accessed at http://www.communitycommons.org/.
- The Annie E. Casey Foundation is a private charitable organization, dedicated to helping build better futures for disadvantaged children in the United States. One of their initiatives is the Kids Count Data Center, which provides access to hundreds of measures of child well-being by county and state. Health data from the Kids Count Data Center is included within this report, and can be accessed at http://datacenter.kidscount.org/.
- Enroll America is a health care enrollment coalition that provides information regarding uninsured rates at the county level. Data can be accessed at https://www.enrollamerica.org/.
- The U.S. Department of Health and Human Services Health Resources and Services Administration
 (HRSA) provides Medically Underserved Area / Population and Health Professional Shortage Area scores,
 and can be accessed at: https://datawarehouse.hrsa.gov/tools/analyzers.aspx.

Phone Interviews

- CHC Consulting conducted interviews on behalf of Midland Memorial Hospital from August 16, 2016 –
 September 16, 2016.
- Conducted by Valerie Hayes, Planning Analyst



DEMOGRAPHIC DATA FINDINGS





Overall Population Growth

Overall Population Growth										
Geographic Location 2010 2016 2021 2016-2021 Change Change										
Midland County	136,872	162,350	179,380	17,030	10.5%					
Texas	25,145,561	27,611,503	29,594,059	1,982,556	7.2%					

Source: Truven Health's Market Expert, data accessed August 1, 2016.

Population by Race/Ethnicity

	М	idland County			
Race/Ethnicity	2010	2016	2021	2016-2021 Change	2016-2021 % Change
White Non-Hispanic	72,822	76,684	75,414	-1,270	-1.7%
Black	8,675	9,444	9,621	177	1.9%
Hispanic	51,600	70,923	87,703	16,780	23.7%
Asian	1,681	2,521	3,289	768	30.5%
American Indian	552	693	802	109	15.7%
All Others	1,542	2,085	2,551	466	22.4%
Total	136,872	162,350	179,380	17,030	10.5%
		Texas			
Race/Ethnicity	2010	2016	2021	2016-2021 Change	2016-2021 % Change
White Non-Hispanic	11,397,345	11,826,504	12,031,781	205,277	1.7%
Black	2,886,825	3,236,542	3,533,064	296,522	9.2%
Hispanic	9,460,921	10,770,670	11,911,611	1,140,941	10.6%
Asian	966,346	1,234,583	1,474,773	240,190	19.5%
American Indian	80,586	90,730	99,277	8,547	9.4%
All Others	353,538	452,474	543,553	91,079	20.1%
Total	25,145,561	27,611,503	29,594,059	1,982,556	7.2%

Source: Truven Health's Market Expert, data accessed August 1, 2016.

Population by Age

- openation by 7.8c	Midland County										
Age Cohort	2016	% of Total	2021	% of Total	2016-2021 Change	2016-2021 % Change					
<18	44,857	27.6%	49,472	27.6%	4,615	10.3%					
18-44	61,809	38.1%	67,157	37.4%	5,348	8.7%					
45-64	37,774	23.3%	39,594	22.1%	1,820	4.8%					
65+	17,910	11.0%	23,157	12.9%	5,247	29.3%					
Total	162,350	100.0%	179,380	100.0%	17,030	10.5%					
		Texa	as								
Age Cohort	2016	% of Total	2021	% of Total	2016-2021 Change	2016-2021 % Change					
<18	7,247,559	26.2%	7,532,274	25.5%	284,715	3.9%					
18-44	10,396,903	37.7%	10,879,403	36.8%	482,500	4.6%					
45-64	6,644,010	24.1%	7,089,711	24.0%	445,701	6.7%					
65+	3,323,031	12.0%	4,092,671	13.8%	769,640	23.2%					
Total	27,611,503	100.0%	29,594,059	100.0%	1,982,556	7.2%					

Source: Truven Health's Market Expert, data accessed August 1, 2016.

Median Age

Geographic Location	Median Age						
Geographic Location	2010	2016	2021				
Midland County	33.7	32.9	34.1				
Texas	38.9	39.2	39.5				
United States	40.2	41.2	41.7				

Source: Truven Health's Market Expert, data accessed August 1, 2016.

Median Household Income

Geographic Location	Median	Income	2016 - 2021 Change		
Geographic Location	2016	2021	Count	%	
Midland County	\$74,572	\$86,601	\$12,029	16.1%	
Texas	\$48,776	\$53,013	\$4,237	8.7%	
United States	\$48,280	\$51,808	\$3,529	7.3%	

Source: Truven Health's Market Expert, data accessed August 1, 2016.

Economic Analysis

2016 Economic Analysis								
Geographic Location	Average Income	Median Income	Families Below Poverty	Household Income \$100K+	Education Bachelor / Advanced			
Midland County	\$102,562	\$74,572	6.6%	36.6%	26.4%			
Texas	\$65,609	\$48,776	13.8%	24.6%	27.2%			
United States	\$63,215	\$48,280	11.7%	24.3%	29.4%			

Source: Truven Health's Market Expert, data accessed August 1, 2016.

Unemployment

Annual Average Unemployment Rates (%)								
2013 2014 2015								
Midland County	3.6%	2.9%	3.5%					
Texas	6.2%	5.1%	4.5%					

Source: Bureau of Labor Statistics, Local Area Unemployment Statistics, (rates shown are a percentage of the labor force), http://www.bls.gov/lau/; data accessed August 1, 2016.

Children Living Below Poverty Percent, Children (age 0-17), 2012-2014

LOCATION	2012		2013		2014	
LOCATION	Number	Percent	Number	Percent	Number	Percent
Midland County	6,468	16.3%	6,533	15.8%	5,997	14.1%
Texas	1,777,177	25.8%	1,739,298	25.0%	1,721,843	24.5%

Source: The Annie E. Casey Foundation, Kids Count Data Center, filtered for Midland County, TX, www.datacenter.kidscount.org; data accessed August 4, 2016.

Child Food Insecurity Percent, Children (<18 years), 2012-2014

LOCATION	20	20	13	2014		
LOCATION	Number	Percent	Number	Percent	Number	Percent
Midland County	7,900	20.8%	8,360	21.4%	7,950	19.8%
Texas	1,909,470	27.4%	1,899,310	27.4%	1,821,820	25.6%

Source: The Annie E. Casey Foundation, Kids Count Data Center, filtered for Midland County, TX, www.datacenter.kidscount.org; data accessed August 9, 2016.

Poverty Thresholds for 2015 by Size of Family and Number of Related Children Under 18 Years

	Related children under 18 years								
Size of family unit									Eight
	None	One	Two	Three	Four	Five	Six	Seven	or more
One person (unrelated individual)	40.004								
Under 65 years	12,331								
65 years and over	11,367								
Two people									
Householder under 65 years	15,871	16,337							
Householder 65 years and over	14,326	16,275							
Three people	18,540	19,078	19,096						
Four people	24,447	24,847	24,036	24,120					
Five people	29,482	29,911	28,995	28,286	27,853				
Five peopleSix people	33,909	34,044	33,342	32,670	31,670	31,078			
Seven people	39,017	39,260	38,421	37,835	36,745	35,473	34,077		
Eight people	43,637	44,023	43,230	42,536	41,551	40,300	38,999	38,668	
Nine people or more	52,493		52,046						45,822
Source: U.S. Census Bureau, Poverty	, https://www.	census.gov/h	nhes/www/po	verty/data/thi	reshld/; data a	accessed Feb	oruary 25, 20	16	

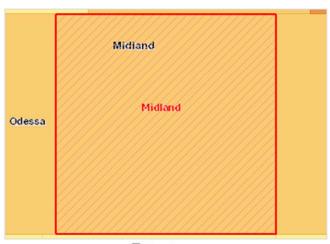
Food Insecurity Rate

This indicator reports the estimated percentage of the population that experienced food insecurity at some point during the report year. Food insecurity is the household-level economic and social condition of limited or uncertain access to adequate food.

			Download Data
Report Area	Total Population	Food Insecure Population, Total	Food Insecurity Rate
Midland County, TX	142,289	18,400	12.93%
Texas	26,448,193	4,653,290	17.59%
United States	320,750,757	48,770,990	15.21%

Note: This indicator is compared with the state average.

Data Source: Feeding America. 2013. Source geography: County



Food Insecure Population, Percent by County, Feeding America 2013

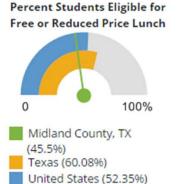
Over 18.0%
15.1 - 18.0%
12.1 - 15.0%
Under 12.1%
Report Area

☑ View larger map

Children Eligible for Free/Reduced Price Lunch

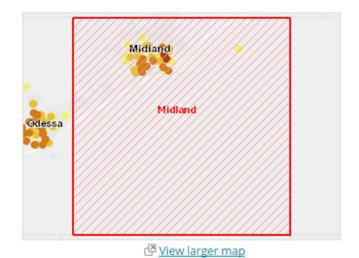
Within the report area 11,804 public school students or 45.5% are eligible for Free/Reduced Price lunch out of 25,942 total students enrolled. This indicator is relevant because it assesses vulnerable populations which are more likely to have multiple health access, health status, and social support needs. Additionally, when combined with poverty data, providers can use this measure to identify gaps in eligibility and enrollment.

			Download Data
Report Area	Total Students	Number Free/Reduced Price Lunch Eligible	Percent Free/Reduced Price Lunch Eligible
Midland County, TX	25,942	11,804	45.5%
Texas	5,149,025	3,092,087	60.08%
United States	50,195,195	26,012,902	52.35%



Note: This indicator is compared with the state average.

Data Source: National Center for Education Statistics, NCES - Common Core of Data. 2013-14. Source geography: Address



Students Eligible for Free or Reduced-Price Lunch, NCES CCD 2013-14

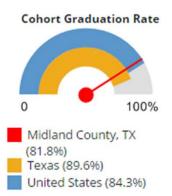
Download Data

- Over 80.0%
- 60.1 80.0%
- 40.1 60.0%
- 20.1 40.0%
- Under 20.1%Not Reported
- Report Area

High School Graduation Rate (EdFacts)

Within the report area 81.8% of students are receiving their high school diploma within four years. This indicator is relevant because research suggests education is one the strongest predictors of health (<u>Freudenberg & Ruglis, 2007</u>).

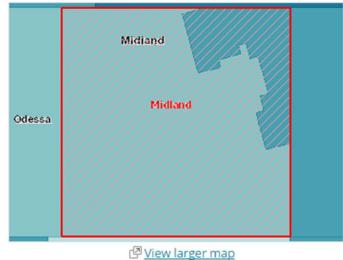
			Download Data
Report Area	Total Student Cohort	Estimated Number of Diplomas Issued	Cohort Graduation Rate
Midland County, TX	1,617	1,323	81.8
Texas	317,801	284,801	89.6
United States	3,127,886	2,635,290	84.3



Note: This indicator is compared with the state average.

Data Source: US Department of Education, EDFacts. Accessed via DATA.GOV. Additional data analysis by CARES. 2013-14. Source

geography: School District



On-Time Graduation, Rate by School District (Secondary), EDFacts 2013-14

Over 94.0%

85.1 - 94.0%

75.1 - 85.0%

Under 75.1%

No Data or Data Suppressed

Report Area

HEALTH DATA FINDINGS





County Health Rankings & Roadmaps Building a Culture of Health, County b

Building a Culture of Health, County by County		
	Texas	Midland (MID), TX
Health Outcomes		40
Length of Life		74
Premature death	6,600	7,200
Quality of Life		41
Poor or fair health	20%	16%
Poor physical health days	3.5	3.1
Poor mental health days	3.0	2.9
Low birthweight	8%	8%
Health Factors		71
Health Behaviors		136
Adult smoking	15%	15%
Adult obesity**	28%	31%
Food environment index**	6.4	7.3
Physical inactivity**	24%	26%
Access to exercise opportunities	84%	81%
Excessive drinking	17%	20%
Alcohol-impaired driving deaths	32%	33%
Sexually transmitted infections**	498.3	647.8
Teen births	52	70
Clinical Care		44
Uninsured	25%	22%
Primary care physicians	1,680:1	2,570:1
Dentists	1,880:1	2,050:1
Mental health providers	990:1	1,230:1
Preventable hospital stays	58	44
Diabetic monitoring	84%	82%
Mammography screening	58%	49%
Social & Economic Factors		48
High school graduation**	88%	81%
Some college Midland Memorial Hospital Community Health Needs Assessment	59%	62% September 2016

ie college Midland Memorial Hospital Community Health Needs Assessment Community Hospital Consulting

Unemployment	5.1%	2.8%
Children in poverty	25%	14%
Income inequality	4.9	4.4
Children in single-parent households	33%	32%
Social associations	7.8	10.4
Violent crime**	422	311
Injury deaths	54	58
Physical Environment		222
Air pollution - particulate matter	9.6	10.3
Drinking water violations		Yes
Severe housing problems	18%	14%
Driving alone to work	80%	84%
Long commute - driving alone	36%	17%

^{**} Compare across states with caution Note: Blank values reflect unreliable or missing data

2016

All Causes, Deaths per 100,000 Population, Age-Adjusted, 2011-2013

		2011		2012		2013	
LOCATION	ATION DEATHS		DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	
Midland County	1,051	770.6	986	697.7	1,037	704.6	
Texas	167,997	744.3	173,935	751.3	178,501	749.2	

Source: Texas Health Data, Deaths of Texas Residents; Last Updated July 31, 2015; http://soupfin.tdh.state.tx.us/death10.htm; data accessed August 4, 2016.

Diseases of the Heart (I00-I09, I11, I13, I20-I51), Deaths per 100,000 Population, Age-Adjusted, 2011-2013

		2011	2012		2013	
LOCATION	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE
Midland County	235	173.6	214	151.4	247	169.1
Texas	37,955	170.8	38,987	170.8	40,150	170.7

Source: Texas Health Data, Deaths of Texas Residents; Last Updated July 31, 2015; http://soupfin.tdh.state.tx.us/death10.htm; data accessed August 4, 2016.

Malignant Neoplasms (C00-C97), Deaths per 100,000 Population, Age-Adjusted, 2011-2013

		2011		2012	2013		
LOCATION	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	
Midland County	196	142.7	206	143.9	202	133.1	
Texas	37,121	160.2	38,096	159.5	38,289	156.1	

Source: Texas Health Data, Deaths of Texas Residents; Last Updated July 31, 2015; http://soupfin.tdh.state.tx.us/death10.htm; data accessed August 4, 2016.

Accidents (V01-X59, Y85-Y86), Deaths per 100,000 Population, Age-Adjusted, 2011-2013

				· ·			
		2011		2012	2013		
LOCATION	DEATHS	AGE- ADJUSTED DEATH RATE		AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	
Midland County	55	39.5	61	43.5	66	45.3	
Texas	9,301	38.1	9,267	37.2	9,341	36.8	

Source: Texas Health Data, Deaths of Texas Residents; Last Updated July 31, 2015; http://soupfin.tdh.state.tx.us/death10.htm; data accessed August 4, 2016.

Alzheimer's Disease (G30), Deaths per 100,000 Population, Age-Adjusted, 2011-2013

		2011		2012	2013		
LOCATION	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	
Midland County	57	42.2	49	35.6	60	41.2	
Texas	5,394	26.3	5,168	24.6	5,284	24.4	

Source: Texas Health Data, Deaths of Texas Residents; Last Updated July 31, 2015; http://soupfin.tdh.state.tx.us/death10.htm; data accessed August 4, 2016.

Cerebrovascular Diseases (I60-I69), Deaths per 100,000 Population, Age-Adjusted, 2011-2013

		2011		2012	2013		
LOCATION	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	
Midland County	69	51.6	56	40.6	59	40.8	
Texas	9,058	41.6	9,297	41.7	9,238	40.1	

Source: Texas Health Data, Deaths of Texas Residents; Last Updated July 31, 2015; http://soupfin.tdh.state.tx.us/death10.htm; data accessed August 4, 2016.

Chronic Lower Respiratory Diseases (J40-J47), Deaths per 100,000 Population, Age-Adjusted, 2011-2013

		2011		2012	2013		
LOCATION	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	
Midland County	76	56.7	66	47.3	55	38.5	
Texas	9,115	42.1	9,520	42.5	9,787	42.3	

Source: Texas Health Data, Deaths of Texas Residents; Last Updated July 31, 2015; http://soupfin.tdh.state.tx.us/death10.htm; data accessed August 4, 2016.

Influenza and Pneumonia (J09-J18), Deaths per 100,000 Population, Age-Adjusted, 2011-2013

		•	.,				
		2011		2012	2013		
LOCATION	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	
Midland County	38	28.4	41	29.2	46	31.1	
Texas	3,049	14.0	2,978	13.4	3,338	14.4	

Source: Texas Health Data, Deaths of Texas Residents; Last Updated July 31, 2015; http://soupfin.tdh.state.tx.us/death10.htm; data accessed August 4, 2016.

Intentional Self-Harm (Suicide) (X60-X84, Y87.0), Deaths per 100,000 Population, Age-Adjusted, 2011-2013

		2011		2012	2013		
LOCATION	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS AGE- DEATH RATE		DEATHS	AGE- ADJUSTED DEATH RATE	
Midland County	22	16.4	22	14.9	24	16.8	
Texas	2,802	11.1	3,032	11.8	3,047	11.6	

Source: Texas Health Data, Deaths of Texas Residents; Last Updated July 31, 2015; http://soupfin.tdh.state.tx.us/death10.htm; data accessed August 4, 2016.

Septicemia (A40-A41), Deaths per 100,000 Population, Age-Adjusted, 2011-2013

		2011		2012	2013		
LOCATION	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	
Midland County	23	16.8	29	20.4	21	14.5	
Texas	3,420	15.2	3,616	15.7	3,879	16.4	

Source: Texas Health Data, Deaths of Texas Residents; Last Updated July 31, 2015; http://soupfin.tdh.state.tx.us/death10.htm; data accessed August 4, 2016.

Diabetes Mellitus (E10-E14), Deaths per 100,000 Population, Age-Adjusted, 2011-2013

		2011		2012	2013		
LOCATION	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	DEATHS	AGE- ADJUSTED DEATH RATE	
Midland County	30	21.7	23	17.1	21	13.6	
Texas	5,060	22.1	5,127	21.8	5,262	21.6	

Source: Texas Health Data, Deaths of Texas Residents; Last Updated July 31, 2015; http://soupfin.tdh.state.tx.us/death10.htm; data accessed August 4, 2016.

Chlamydia Infection Rate, Age-adjusted Incidence Rates per 100,000, 2005-2014

Report Area	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Midland County, TX	369.94	411.64	378.14	549.83	565.31	588.14	579.44	549.51	627.2	610.69
Texas	315.3	323.43	360.07	415.26	427.56	474.83	487.04	487.46	487.4	495.6
United States	330.3	345.4	367.7	398	405.7	422.8	453.4	453.4	443.5	456.1

Source: Community Commons, Health Indicator Report filtered for Midland County, Texas, www.communitycommons.org; data accessed August 3, 2016.

Gonorrhea Infection Rate, Age-adjusted Incidence Rates per 100,000, 2005-2014

Report Area	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Midland County, TX	157.37	132.66	127.37	178.39	173.83	180.46	136.13	171.76	165.05	210.61
Texas	114.56	130.37	134.62	132.56	118.26	125.92	120.63	124.6	127.9	133.6
United States	114.9	120.1	118.1	110.7	98.2	100	103.3	106.7	105.3	110.7

Source: Community Commons, Health Indicator Report filtered for Midland County, Texas, www.communitycommons.org; data accessed August 3, 2016.

Diabetes, Prevalence Rates, 2012 - 2014

Has a doctor, nurse, or other health professional ever told you that you have diabetes?

LOCATION	2012	2013	2014
LOCATION	PERCENT	PERCENT	PERCENT
HSR 1	9.5%	11.4%	9.1%
HSR 2/3	10.1%	11.0%	10.9%
HSR 4/5N	11.9%	14.4%	12.3%
HSR 6/5S	11.0%	10.7%	10.7%
HSR 7	8.9%	10.3%	9.1%
HSR 8	12.1%	13.6%	14.5%
HSR 9/10	13.2%	13.8%	13.5%
HSR 11	19.5%	13.6%	16.5%
Texas	10.6%	10.9%	11.0%

Note: N = sample size less than 50, estimate not displayed

Note: All reported rates are weighted for Texas demographics and the probability of selection

Software: Prepared using SAS 9.4

Source: Texas Behavioral Risk Factor Surveillance System, Statewide BRFSS Survey, 2012-2014

Prepared by: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services

Date: January 6, 2016

Obesity, Prevalence Rates, 2012 - 2014

Four-level BMI Categories: Underweight, Normal Weight, Overweight, Obese

LOCATION	2012	2013	2014
	PERCENT	PERCENT	PERCENT
HSR 1	26.0%	32.5%	32.5%
HSR 2/3	28.3%	28.8%	31.0%
HSR 4/5N	35.1%	34.9%	32.4%
HSR 6/5S	27.8%	28.9%	34.2%
HSR 7	27.9%	29.3%	28.5%
HSR 8	30.5%	38.3%	33.0%
HSR 9/10	36.4%	33.1%	39.9%
HSR 11	42.3%	41.1%	41.7%
Texas	29.2%	30.9%	31.9%

Note: N = sample size less than 50, estimate not displayed

Note: All reported rates are weighted for Texas demographics and the probability of selection

Software: Prepared using SAS 9.4

Source: Texas Behavioral Risk Factor Surveillance System, Statewide BRFSS Survey, 2012-2014

Prepared by: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services

Date: January 6, 2016

Binge Drinking, Prevalence Rates, 2012 - 2014

During the past 30 days, what is the largest number of drinks you had on any occasion?

LOCATION	2012	2013	2014
	% AT RISK	% AT RISK	% AT RISK
HSR 1	13.1%	13.2%	13.7%
HSR 2/3	15.0%	16.3%	15.1%
HSR 4/5N	11.3%	11.4%	9.6%
HSR 6/5S	15.1%	15.0%	15.2%
HSR 7	15.6%	19.9%	18.2%
HSR 8	20.0%	20.3%	18.7%
HSR 9/10	18.5%	14.5%	19.4%
HSR 11	17.4%	16.5%	15.4%
Texas	16.2%	16.7%	16.3%

Note: Binge Drinking = More than 5 drinks on one occasion for men or 4 drinks on one occasion for women

Note: N = sample size less than 50, estimate not displayed

Note: All reported rates are weighted for Texas demographics and the probability of selection

Software: Prepared using SAS 9.4

Source: Texas Behavioral Risk Factor Surveillance System, Statewide BRFSS Survey, 2012-2014

Prepared by: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services

Date: January 6, 2016

Smoking Frequency - Every Day, Prevalence Rates, 2012 - 2014

Do you now smoke cigarettes every day, some days, or not at all?

LOCATION	2012	2013	2014
	PERCENT	PERCENT	PERCENT
HSR 1	34.1%	26.6%	28.2%
HSR 2/3	30.2%	27.1%	27.8%
HSR 4/5N	38.1%	34.9%	36.0%
HSR 6/5S	24.8%	25.4%	23.1%
HSR 7	24.6%	26.0%	20.6%
HSR 8	30.3%	22.3%	19.9%
HSR 9/10	36.1%	27.3%	23.5%
HSR 11	15.6%	21.2%	20.3%
Texas	29.1%	26.0%	24.1%

Note: N = sample size less than 50, estimate not displayed

Note: All reported rates are weighted for Texas demographics and the probability of selection

Software: Prepared using SAS 9.4

Source: Texas Behavioral Risk Factor Surveillance System, Statewide BRFSS Survey, 2012-2014

Prepared by: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services

Date: January 6, 2016

No Flu Shot in the Past Year, Age 18-64, 2012-2014

Flu shot in the past year - ages 18-64

LOCATION	2012	2013	2014
	PERCENT	PERCENT	PERCENT
HSR 1	73.1%	68.2%	73.8%
HSR 2/3	69.4%	68.0%	61.0%
HSR 4/5N	64.1%	66.4%	65.9%
HSR 6/5S	72.6%	71.4%	67.8%
HSR 7	67.9%	66.8%	63.2%
HSR 8	69.7%	67.9%	66.0%
HSR 9/10	73.5%	70.0%	72.1%
HSR 11	76.0%	73.6%	75.2%
Texas	70.9%	69.0%	66.2%

Note: N = sample size less than 50, estimate not displayed

Note: All reported rates are weighted for Texas demographics and the probability of selection

Software: Prepared using SAS 9.4

Source: Texas Behavioral Risk Factor Surveillance System, Statewide BRFSS Survey, 2012-2014

Prepared by: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services

Date: January 6, 2016

No Flu Shot in the Past Year, Age 65+, 2012-2014

Flu shot in the past year - age 65+

LOCATION	2012	2013	2014
	PERCENT	PERCENT	PERCENT
HSR 1	43.4%	35.2%	29.8%
HSR 2/3	41.4%	39.0%	38.6%
HSR 4/5N	50.9%	37.8%	42.4%
HSR 6/5S	37.6%	37.7%	42.9%
HSR 7	36.4%	37.0%	32.2%
HSR 8	34.8%	40.0%	39.2%
HSR 9/10	43.5%	45.2%	58.1%
HSR 11	42.3%	36.6%	37.8%
Texas	40.6%	39.0%	41.2%

Note: N = sample size less than 50, estimate not displayed

Note: All reported rates are weighted for Texas demographics and the probability of selection

Software: Prepared using SAS 9.4

Source: Texas Behavioral Risk Factor Surveillance System, Statewide BRFSS Survey, 2012-2014

Prepared by: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services

Date: January 6, 2016

Depressive Disorders, Prevalence Rates, 2012 - 2014

Has a doctor, nurse, or other health professional ever told you that you have a depressive disorder including depression, major depression, dysthymia, or minor depression?

LOCATION	2012	2013	2014
LOCATION	PERCENT	PERCENT	PERCENT
HSR 1	18.9%	16.1%	12.1%
HSR 2/3	14.6%	16.6%	14.8%
HSR 4/5N	19.2%	18.5%	16.5%
HSR 6/5S	16.3%	13.2%	12.9%
HSR 7	15.8%	16.6%	18.2%
HSR 8	16.6%	17.8%	15.7%
HSR 9/10	15.6%	13.9%	17.6%
HSR 11	13.5%	15.2%	14.0%
Texas	15.5%	16.0%	14.6%

Note: N = sample size less than 50, estimate not displayed

Note: All reported rates are weighted for Texas demographics and the probability of selection

Software: Prepared using SAS 9.4

Source: Texas Behavioral Risk Factor Surveillance System, Statewide BRFSS Survey, 2012-2014

Prepared by: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services

Date: January 6, 2016

Arthritis, Prevalence Rates, 2012 - 2014

Has a doctor, nurse, or other health professional ever told you that you have some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia?

LOCATION	2012	2013	2014
LOCATION	PERCENT	PERCENT	PERCENT
HSR 1	28.7%	24.1%	21.9%
HSR 2/3	22.4%	20.6%	21.2%
HSR 4/5N	28.4%	32.4%	27.1%
HSR 6/5S	21.4%	20.2%	20.3%
HSR 7	22.1%	20.8%	19.7%
HSR 8	23.6%	22.7%	20.6%
HSR 9/10	21.4%	23.7%	22.3%
HSR 11	20.4%	20.1%	20.0%
Texas	21.3%	20.7%	19.4%

Note: N = sample size less than 50, estimate not displayed

Note: All reported rates are weighted for Texas demographics and the probability of selection

Software: Prepared using SAS 9.4

Source: Texas Behavioral Risk Factor Surveillance System, Statewide BRFSS Survey, 2012-2014

Prepared by: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services

Asthma, Prevalence Rates, 2012 - 2014

Has a doctor, nurse, or other health professional ever told you that you had asthma?

LOCATION	2012	2013	2014
LOCATION	PERCENT	PERCENT	PERCENT
HSR 1	14.5%	16.6%	9.9%
HSR 2/3	10.9%	15.1%	11.7%
HSR 4/5N	10.4%	12.8%	13.1%
HSR 6/5S	8.9%	8.6%	9.6%
HSR 7	13.4%	14.2%	12.6%
HSR 8	11.3%	12.9%	12.6%
HSR 9/10	11.8%	12.2%	12.2%
HSR 11	9.6%	8.0%	9.5%
Texas	10.9%	12.6%	11.1%

Note: N = sample size less than 50, estimate not displayed

Note: All reported rates are weighted for Texas demographics and the probability of selection

Software: Prepared using SAS 9.4

Source: Texas Behavioral Risk Factor Surveillance System, Statewide BRFSS Survey, 2012-2014

Prepared by: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services

Date: January 6, 2016

No Personal Doctor

Do you have one person you think of as your personal doctor or health care provider?

LOCATION	2012	2013	2014
LOCATION	PERCENT	PERCENT	PERCENT
HSR 1	30.7%	24.9%	31.3%
HSR 2/3	27.7%	25.8%	26.7%
HSR 4/5N	24.7%	22.9%	28.8%
HSR 6/5S	35.0%	34.2%	34.1%
HSR 7	27.6%	29.4%	25.8%
HSR 8	29.3%	31.0%	32.6%
HSR 9/10	35.8%	32.6%	35.1%
HSR 11	39.2%	42.2%	35.0%
Texas	32.9%	33.1%	32.9%

Note: N = sample size less than 50, estimate not displayed

Note: All reported rates are weighted for Texas demographics and the probability of selection

Software: Prepared using SAS 9.4

Source: Texas Behavioral Risk Factor Surveillance System, Statewide BRFSS Survey, 2012

Prepared by: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services

Medical Cost Barriers, Prevalence Rates, 2012 - 2014

Was there a time in the past 12 months when you needed to see a doctor but could not because of the cost?

LOCATION	2012	2013	2014
LOCATION	PERCENT	PERCENT	PERCENT
HSR 1	16.7%	19.3%	17.7%
HSR 2/3	19.7%	17.3%	16.8%
HSR 4/5N	20.2%	19.4%	22.4%
HSR 6/5S	22.5%	18.7%	18.0%
HSR 7	15.1%	16.3%	13.3%
HSR 8	19.3%	20.8%	18.3%
HSR 9/10	23.5%	21.7%	22.0%
HSR 11	32.9%	31.4%	25.3%
Texas	20.9%	19.3%	17.6%

Note: N = sample size less than 50, estimate not displayed

Note: All reported rates are weighted for Texas demographics and the probability of selection

Software: Prepared using SAS 9.4

Source: Texas Behavioral Risk Factor Surveillance System, Statewide BRFSS Survey, 2012-2014

Prepared by: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services

Date: January 6, 2016

No Leisure Time Physical Activity, Prevalence Rates, 2012 - 2014

During the past month, did you participate in any physical activities or exercises such as running, golf, gardening or walking for exercise?

LOCATION	2012	2013	2014
LOCATION	PERCENT	PERCENT	PERCENT
HSR 1	31.8%	34.2%	36.3%
HSR 2/3	26.7%	31.3%	24.7%
HSR 4/5N	31.9%	32.6%	35.3%
HSR 6/5S	27.4%	29.9%	28.0%
HSR 7	21.1%	26.5%	22.8%
HSR 8	27.9%	30.9%	28.3%
HSR 9/10	27.7%	31.8%	31.5%
HSR 11	34.3%	35.3%	32.4%
Texas	27.2%	30.1%	27.6%

Note: N = sample size less than 50, estimate not displayed

Note: All reported rates are weighted for Texas demographics and the probability of selection

Software: Prepared using SAS 9.4

Source: Texas Behavioral Risk Factor Surveillance System, Statewide BRFSS Survey, 2012-2014

Prepared by: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services

No Pneumonia Shot Ever, Age 18-64, 2012-2014

Have you ever had a pneumonia shot?

LOCATION	2012	2013	2014
LOCATION	PERCENT	PERCENT	PERCENT
HSR 1	71.6%	60.7%	69.8%
HSR 2/3	68.2%	67.0%	68.9%
HSR 4/5N	64.3%	60.7%	63.3%
HSR 6/5S	72.3%	70.8%	69.2%
HSR 7	66.1%	68.7%	67.8%
HSR 8	72.2%	68.2%	70.0%
HSR 9/10	72.5%	68.6%	70.1%
HSR 11	77.6%	71.2%	68.9%
Texas	71.3%	68.5%	69.7%

Note: N = sample size less than 50, estimate not displayed

Note: All reported rates are weighted for Texas demographics and the probability of selection

Software: Prepared using SAS 9.4

Source: Texas Behavioral Risk Factor Surveillance System, Statewide BRFSS Survey, 2012-2014

Prepared by: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services

Date: January 6, 2016

No Pneumonia Shot Ever, Age 65+, 2012-2014

Have you ever had a pneumonia shot?

LOCATION	2012	2013	2014
LOCATION	PERCENT	PERCENT	PERCENT
HSR 1	36.1%	27.9%	28.1%
HSR 2/3	26.7%	25.4%	25.9%
HSR 4/5N	24.3%	25.3%	28.0%
HSR 6/5S	27.6%	39.4%	34.8%
HSR 7	23.4%	29.8%	27.1%
HSR 8	29.6%	29.2%	30.7%
HSR 9/10	39.4%	41.6%	31.4%
HSR 11	43.1%	39.0%	32.7%
Texas	29.7%	32.1%	32.1%

Note: N = sample size less than 50, estimate not displayed

Note: All reported rates are weighted for Texas demographics and the probability of selection

Software: Prepared using SAS 9.4

Source: Texas Behavioral Risk Factor Surveillance System, Statewide BRFSS Survey, 2012-2014

Prepared by: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services

Mammogram Past 2 Yrs Age 40+, Female Adults (age 40+), 2014

Females 40 years and older who had a mammogram within the past 2 years

LOCATION	2014
LOCATION	% AT RISK
HSR 1	26.3%
HSR 2/3	28.9%
HSR 4/5N	33.6%
HSR 6/5S	22.8%
HSR 7	28.0%
HSR 8	29.2%
HSR 9/10	36.7%
HSR 11	35.2%
Texas	29.0%

Note: N = sample size less than 50, estimate not displayed

Note: All reported rates are weighted for Texas demographics and the probability of selection

Software: Prepared using SAS 9.4

Source: Texas Behavioral Risk Factor Surveillance System, Statewide BRFSS Survey, 2012-2014

Prepared by: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services

Date: January 6, 2016

Colonoscopy in the Past 10 Years, Age 50-75, 2014

Males and females 50-75 years who have not had a colonoscopy in the past 10 years - Used to calculate CRCREC

LOCATION	2014
LOCATION	% AT RISK
HSR 1	46.3%
HSR 2/3	38.0%
HSR 4/5N	46.0%
HSR 6/5S	41.5%
HSR 7	41.2%
HSR 8	37.8%
HSR 9/10	58.1%
HSR 11	51.7%
Texas	42.6%

Note: N = sample size less than 50, estimate not displayed

Note: All reported rates are weighted for Texas demographics and the probability of selection

Software: Prepared using SAS 9.4

Source: Texas Behavioral Risk Factor Surveillance System, Statewide BRFSS Survey, 2012-2014

Prepared by: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services

Days Poor Mental Health Interfered With Activities - 14+ Days, 2014

Number of days mental health condition or emotional problem interfered with usual activities - 14 days

	2014
LOCATION	14 or more days
HSR 1	2.5%
HSR 2/3	2.9%
HSR 4/5N	2.8%
HSR 6/5S	3.1%
HSR 7	1.7%
HSR 8	2.8%
HSR 9/10	4.7%
HSR 11	2.8%
Texas	2.9%

Note: N = sample size less than 50, estimate not displayed

Note: All reported rates are weighted for Texas demographics and the probability of selection

Software: Prepared using SAS 9.4

Source: Texas Behavioral Risk Factor Surveillance System, Statewide BRFSS Survey, 2012-2014

Prepared by: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services

Date: January 6, 2016

Taking Medicine or Receiving Treatment for Mental Illness, 2014

Are you now taking medicine or receiving treatment from a doctor or other health professional for any type of mental health condition or emotional problem?

LOCATION	2014
LOCATION	% Y es
HSR 1	8.3%
HSR 2/3	9.5%
HSR 4/5N	9.8%
HSR 6/5S	7.3%
HSR 7	11.9%
HSR 8	10.7%
HSR 9/10	12.1%
HSR 11	8.3%
Texas	9.4%

Note: N = sample size less than 50, estimate not displayed

Note: All reported rates are weighted for Texas demographics and the probability of selection

Software: Prepared using SAS 9.4

Source: Texas Behavioral Risk Factor Surveillance System, Statewide BRFSS Survey, 2012-2014

Prepared by: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services

Date: January 6, 2016

Midland Memorial Hospital Community Health Needs Assessment Community Hospital Consulting

Days of Poor Mental Health - 14+ Days, 2012-2014

Days mental health not good - 14 days

	2012	2013	2014
LOCATION	14 or more days	14 or more days	14 or more days
HSR 1	17.4%	9.6%	8.6%
HSR 2/3	10.2%	10.7%	9.2%
HSR 4/5N	13.3%	11.0%	11.5%
HSR 6/5S	11.9%	8.3%	9.0%
HSR 7	9.6%	10.1%	8.7%
HSR 8	12.2%	10.6%	8.7%
HSR 9/10	11.5%	8.4%	13.0%
HSR 11	12.3%	10.1%	11.3%
Texas	11.1%	10.1%	9.4%

Note: N = sample size less than 50, estimate not displayed

Note: All reported rates are weighted for Texas demographics and the probability of selection

Software: Prepared using SAS 9.4

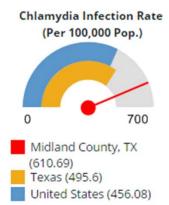
Source: Texas Behavioral Risk Factor Surveillance System, Statewide BRFSS Survey, 2012-2014

Prepared by: Texas Behavioral Risk Factor Surveillance System, Center for Health Statistics, Texas Department of State Health Services

STI - Chlamydia Incidence

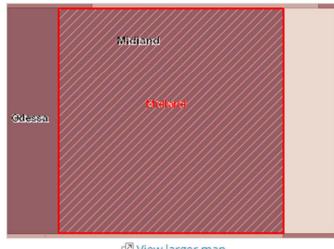
This indicator reports incidence rate of chlamydia cases per 100,000 population. This indicator is relevant because it is a measure of poor health status and indicates the prevalence of unsafe sex practices.

			Download Data
Report Area	Total Population	Total Chlamydia Infections	Chlamydia Infection Rate (Per 100,000 Pop.)
Midland County, TX	151,468	925	610.69
Texas	26,446,529	131,069	495.6
United States	316,128,839	1,441,789	456.08

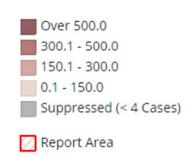


Note: This indicator is compared with the state average.

Data Source: US Department of Health & Human Services, <u>Health Indicators Warehouse</u>. Centers for Disease Control and Prevention, <u>National Center for HIV/AIDS</u>, Viral Hepatitis, STD, and TB Prevention. 2014. Source geography: County



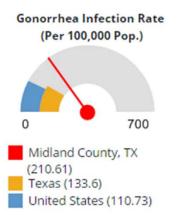
Chlamydia, Infection Rate per 100,000 Population by County, NCHHSTP 2014



STI - Gonorrhea Incidence

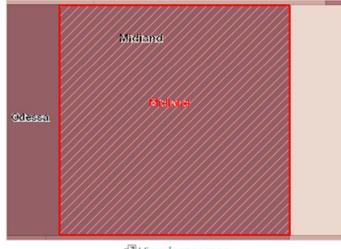
This indicator reports incidence rate of Gonorrhea cases per 100,000 population. This indicator is relevant because it is a measure of poor health status and indicates the prevalence of unsafe sex practices.

			Download Data
Report Area	Total Population	Total Gonorrhea Infections	Gonorrhea Infection Rate (Per 100,000 Pop.)
Midland County, TX	151,468	319	210.61
Texas	26,438,623	35,322	133.6
United States	316,128,839	350,062	110.73



Note: This indicator is compared with the state average.

Data Source: US Department of Health & Human Services, <u>Health Indicators Warehouse</u>. Centers for Disease Control and Prevention, <u>National Center for HIV/AIDS</u>, Viral Hepatitis, STD, and TB Prevention. 2014. Source geography: County



Gonorrhea, Infection Rate per 100,000 Population by County, NCHHSTP 2014

Dawaland Data

Over 120.0

60.01 - 120.00

20.01 - 60.00

0.1 - 20.0

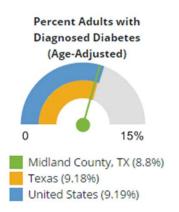
Suppressed (<4 Cases)

Report Area

Diabetes (Adult)

This indicator reports the percentage of adults aged 20 and older who have ever been told by a doctor that they have diabetes. This indicator is relevant because diabetes is a prevalent problem in the U.S.; it may indicate an unhealthy lifestyle and puts individuals at risk for further health issues.

				Download Data
Report Area	Total Population Age 20+	Population with Diagnosed Diabetes	Population with Diagnosed Diabetes, Crude Rate	Population with Diagnosed Diabetes, Age-Adjusted Rate
Midland County, TX	106,814	9,186	8.6	8.8%
Texas	18,709,042	1,734,167	9.27	9.18%
United States	236,919,508	23,685,417	10	9.19%



Note: This indicator is compared with the state average.

Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2013.

Source geography: County



Diabetes Prevalence, Percent of Adults Age 20+ by County, CDC NCCDPHP 2013

Over 11.0%

9.6 - 11.0%

8.1 - 9.5%

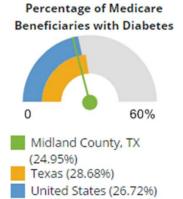
Under 8.1%

No Data or Data Suppressed

Diabetes (Medicare Population)

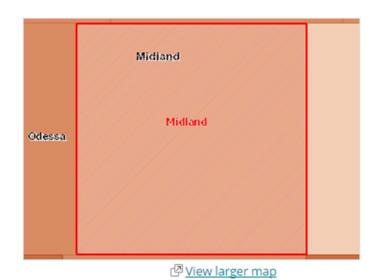
This indicator reports the percentage of the Medicare fee-for-service population with diabetes.

			Download Data
Report Area	Total Medicare Beneficiaries	Beneficiaries with Diabetes	Percent with Diabetes
Midland County, TX	12,974	3,237	24.95%
Texas	2,270,594	651,184	28.68%
United States	34,096,898	9,110,725	26.72%



Note: This indicator is compared with the state average.

Data Source: Centers for Medicare and Medicaid Services. 2014. Source geography: County



Beneficiaries with Diabetes, Percent by County, CMS 2014

Download Data

Over 30.0%

27.1 - 30.0%

24.1 - 27.0%

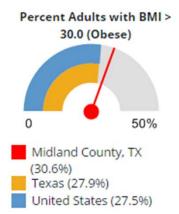
Under 24.1%

No Data or Data Suppressed

Obesity

30.6% of adults aged 20 and older self-report that they have a Body Mass Index (BMI) greater than 30.0 (obese) in the report area. Excess weight may indicate an unhealthy lifestyle and puts individuals at risk for further health issues.

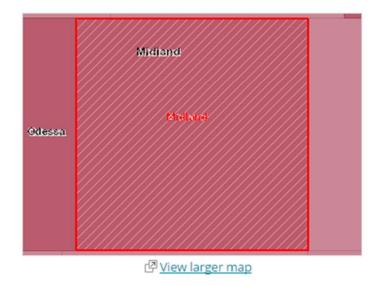
			Download Data
Report Area	Total Population Age 20+	Adults with BMI > 30.0 (Obese)	Percent Adults with BMI > 30.0 (Obese)
Midland County, TX	106,110	32,788	30.6%
Texas	18,707,673	5,244,904	27.9%
United States	234,188,203	64,884,915	27.5%



Note: This indicator is compared with the state average.

Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2013.

Source geography: County



Obese (BMI >= 30), Adults Age 20+, Percent by County, CDC NCCDPHP 2013

Over 34.0%

30.1 - 34.0%

26.1 - 30.0%

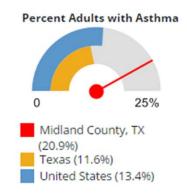
Under 26.1%

No Data or Data Suppressed

Asthma Prevalence

This indicator reports the percentage of adults aged 18 and older who self-report that they have ever been told by a doctor, nurse, or other health professional that they had asthma. This indicator is relevant because asthma is a prevalent problem in the U.S. that is often exacerbated by poor environmental conditions.

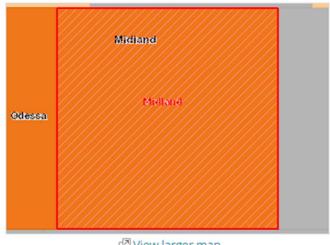
			Download Data
Report Area	Survey Population (Adults Age 18+)	Total Adults with Asthma	Percent Adults with Asthma
Midland County, TX	83,922	17,576	20.9%
Texas	18,426,913	2,132,981	11.6%
United States	237,197,465	31,697,608	13.4%



Note: This indicator is compared with the state average.

Data Source: Centers for Disease Control and Prevention, <u>Behavioral Risk Factor Surveillance System</u>. Additional data analysis by

CARES. 2011-12. Source geography: County



Asthma (Diagnosed), Percentage of Adults Age 18+ by County, BRFSS 2011-12

Over 16.0%

13.1 - 16.0%

10.1 - 13.0%

Under 10.1%

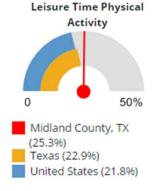
No Data or Data Suppressed

View larger map

Physical Inactivity

Within the report area, 26,759 or 25.3% of adults aged 20 and older self-report no leisure time for activity, based on the question: "During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?". This indicator is relevant because current behaviors are determinants of future health and this indicator may illustrate a cause of significant health issues, such as obesity and poor cardiovascular health.

			Download Data
Report Area	Total Population Age 20+	Population with no Leisure Time Physical Activity	Percent Population with no Leisure Time Physical Activity
Midland County, TX	106,187	26,759	25.3%
Texas	18,700,536	4,292,049	22.9%
United States	234,207,619	52,147,893	21.8%

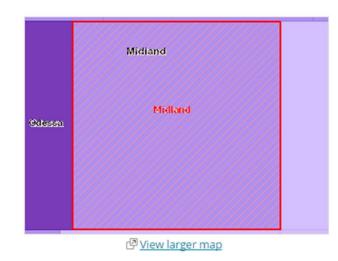


Percent Population with no

Note: This indicator is compared with the state average.

Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2013.

Source geography: County



No Leisure-Time Physical Activity, Adults Age 20+, Percent by County, CDC NCCDPHP 2013

Over 29.0%

26.1 - 29.0%

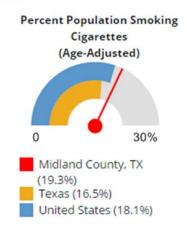
23.1 - 26.0% Under 23.1%

No Data or Data Suppressed

Tobacco Usage - Current Smokers

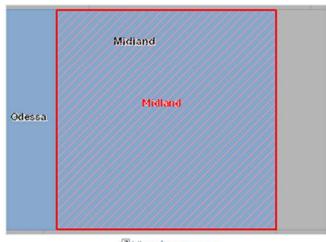
In the report area an estimated 18,684, or 19.1% of adults age 18 or older self-report currently smoking cigarettes some days or every day. This indicator is relevant because tobacco use is linked to leading causes of death such as cancer and cardiovascular disease.

				Download Data
Report Area	Total Population Age 18+	Total Adults Regularly Smoking Cigarettes	Percent Population Smoking Cigarettes (Crude)	Percent Population Smoking Cigarettes (Age-Adjusted)
Midland County, TX	97,822	18,684	19.1%	19.3%
Texas	17,999,726	3,005,954	16.7%	16.5%
United States	232,556,016	41,491,223	17.8%	18.1%



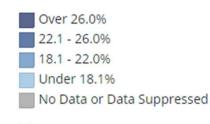
Note: This indicator is compared with the state average.

Data Source: Centers for Disease Control and Prevention, <u>Behavioral Risk Factor Surveillance System</u>. Accessed via the <u>Health Indicators Warehouse</u>. US Department of Health & Human Services, <u>Health Indicators Warehouse</u>. 2006-12. Source geography: County



View larger map

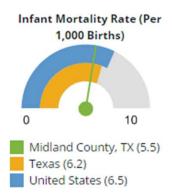
Current Smokers, Adult, Percent of Adults Age 18+ by County, BRFSS 2006-12



Infant Mortality

This indicator reports the rate of deaths to infants less than one year of age per 1,000 births. This indicator is relevant because high rates of infant mortality indicate the existence of broader issues pertaining to access to care and maternal and child health.

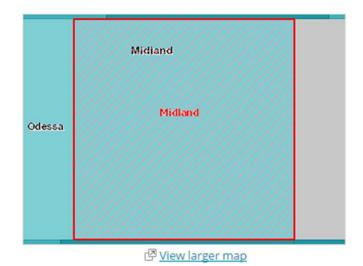
			Download Data
Report Area	Total Births	Total Infant Deaths	Infant Mortality Rate (Per 1,000 Births)
Midland County, TX	11,310	62	5.5
Texas	2,014,555	12,490	6.2
United States	20,913,535	136,369	6.5
HP 2020 Target			<= 6.0



Note: This indicator is compared with the state average.

Data Source: US Department of Health & Human Services, Health Resources and Services Administration, Area Health Resource File.

2006-10. Source geography: County



Infant Mortality, Rate (Per 1,000 Live Births) by County, AHRF 2006-10

Over 10.0

8.1 - 10.0

5.1 - 8.0

No Data or Data Suppressed

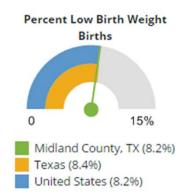
Report Area

Under 5.1

Low Birth Weight

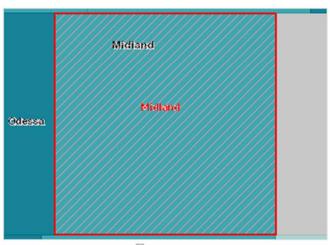
This indicator reports the percentage of total births that are low birth weight (Under 2500g). This indicator is relevant because low birth weight infants are at high risk for health problems. This indicator can also highlight the existence of health disparities.

			Download Data
Report Area	Total Live Births	Low Weight Births (Under 2500g)	Low Weight Births, Percent of Total
Midland County, TX	14,665	1,203	8.2%
Texas	2,759,442	231,793	8.4%
United States	29,300,495	2,402,641	8.2%
HP 2020 Target			<= 7.8%



Note: This indicator is compared with the state average.

Data Source: US Department of Health & Human Services, <u>Health Indicators Warehouse</u>, Centers for Disease Control and Prevention, <u>National Vital Statistics System</u>. Accessed via <u>CDC WONDER</u>, 2006-12. Source geography: County



View larger map

Low Birth Weight, Percent of Live Births by County, NVSS 2006-12



Food Access - WIC-Authorized Food Stores

This indicator reports the number of food stores and other retail establishments per 100,000 population that are authorized to accept WIC Program (Special Supplemental Nutrition Program for Women, Infants, and Children) benefits and that carry designated WIC foods and food categories. This indicator is relevant because it provides a measure of food security and healthy food access for women and children in poverty as well as environmental influences on dietary behaviors.

			Download Data
Report Area	Total Population (2011 Estimate)	Number WIC-Authorized Food Stores	WIC-Authorized Food Store Rate (Per 100,000 Pop.)
Midland County, TX	140,309	8	5.7
Texas	25,733,170	2,357	9.1
United States	318,921,538	50,042	15.6

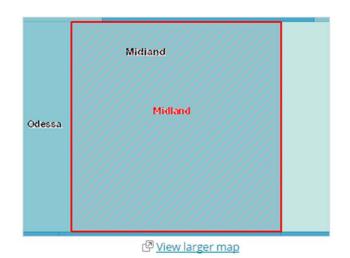
WIC-Authorized Food Stores,
Rate
(Per 100,000 Population)

0 25

Midland County, TX (5.7)
Texas (9.1)
United States (15.6)

Note: This indicator is compared with the state average.

Data Source: US Department of Agriculture, Economic Research Service, <u>USDA - Food Environment Atlas</u>. 2011. Source geography: County



WIC-Authorized Stores, Rate (Per 100,000 Pop.) by County, FEA 2011

Over 30.0

15.1 - 30.0

Under 15.1

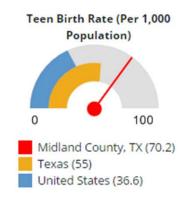
No WIC-Authorized Retailers

No Data or Data Suppressed

Teen Births

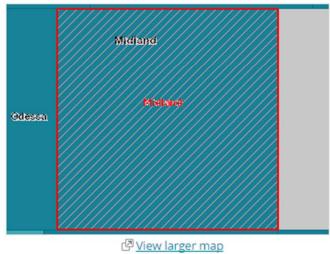
This indicator reports the rate of total births to women age of 15 - 19 per 1,000 female population age 15 - 19. This indicator is relevant because in many cases, teen parents have unique social, economic, and health support services. Additionally, high rates of teen pregnancy may indicate the prevalence of unsafe sex practices.

			Download Data
Report Area	Female Population Age 15 - 19	Births to Mothers Age 15 - 19	Teen Birth Rate (Per 1,000 Population)
Midland County, TX	5,142	361	70.2
Texas	914,438	50,294	55
United States	10,736,677	392,962	36.6

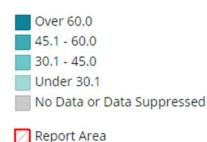


Note: This indicator is compared with the state average.

Data Source: US Department of Health & Human Services, Health Indicators Warehouse. Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2006-12. Source geography: County



Births to Females Age 15-19, Rate (Per 1,000 Pop.) by County, NVSS 2006-12



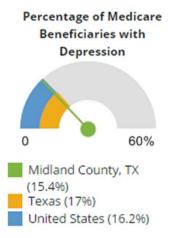
Depression (Medicare Population)

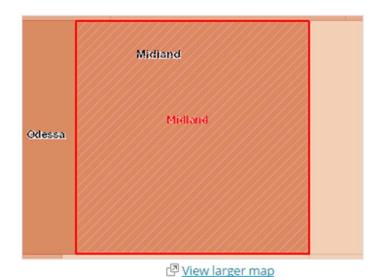
This indicator reports the percentage of the Medicare fee-for-service population with depression.

			Download Data
Report Area	Total Medicare Beneficiaries	Beneficiaries with Depression	Percent with Depression
Midland County, TX	12,974	1,993	15.4%
Texas	2,270,594	385,297	17%
United States	34,096,898	5,537,063	16.2%

Note: This indicator is compared with the state average.

Data Source: Centers for Medicare and Medicaid Services. 2014. Source geography: County





Beneficiaries with Depression, Percent by County, CMS 2014

Download Data

Over 18.0%

15.1 - 18.0%

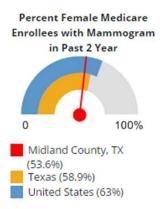
12.1 - 15.0% Under 12.1%

No Data or Data Suppressed

Cancer Screening - Mammogram

This indicator reports the percentage of female Medicare enrollees, age 67-69, who have received one or more mammograms in the past two years. This indicator is relevant because engaging in preventive behaviors allows for early detection and treatment of health problems. This indicator can also highlight a lack of access to preventive care, a lack of health knowledge, insufficient provider outreach, and/or social barriers preventing utilization of services.

				Download Data	
Report Area Total Medicare Enrollees		Female Medicare Enrollees Age 67-69	Female Medicare Enrollees with Mammogram in Past 2 Years	Percent Female Medicare Enrollees with Mammogram in Past 2 Year	
Midland County, TX	11,464	845	452	53.6%	
Texas	1,845,550	162,979	96,006	58.9%	
United States	53,131,712	4,402,782	2,772,990	63%	



Note: This indicator is compared with the state average.

Data Source: Dartmouth College Institute for Health Policy & Clinical Practice, <u>Dartmouth Atlas of Health Care</u>, 2012. Source geography: County



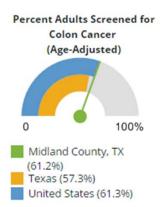
Mammogram (Past 2 Years), Percent of Female Medicare Enrollees, Age 67-69 by County, DA 2012



Cancer Screening - Sigmoidoscopy or Colonoscopy

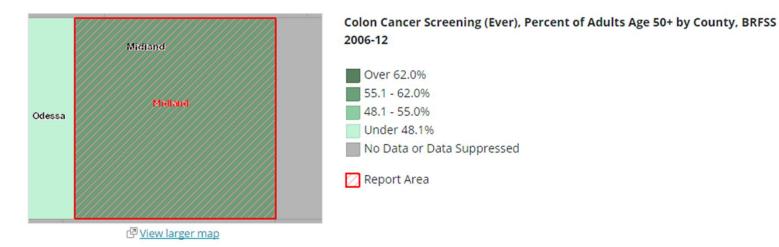
This indicator reports the percentage of adults 50 and older who self-report that they have ever had a sigmoidoscopy or colonoscopy. This indicator is relevant because engaging in preventive behaviors allows for early detection and treatment of health problems. This indicator can also highlight a lack of access to preventive care, a lack of health knowledge, insufficient provider outreach, and/or social barriers preventing utilization of services.

				Download Data	
Report Area	Total Population Age 50+	Estimated Population Ever Screened for Colon Cancer	Crude Percentage	Age-Adjusted Percentage	
Midland County, TX	29,121	18,958	65.1%	61.2%	
Texas	5,055,051	3,058,306	60.5%	57.3%	
United States	75,116,406	48,549,269	64.6%	61.3%	



Note: This indicator is compared with the state average.

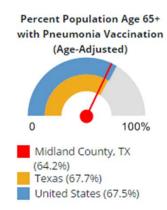
Data Source: Centers for Disease Control and Prevention, <u>Behavioral Risk Factor Surveillance System</u>, Accessed via the <u>Health Indicators Warehouse</u>. US Department of Health & Human Services, <u>Health Indicators Warehouse</u>, 2006-12. Source geography: County



Pneumonia Vaccination

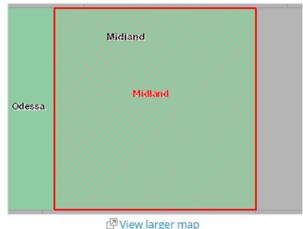
This indicator reports the percentage of adults aged 65 and older who self-report that they have ever received a pneumonia vaccine. This indicator is relevant because engaging in preventive behaviors decreases the likelihood of developing future health problems. This indicator can also highlight a lack of access to preventive care, a lack of health knowledge, insufficient provider outreach, and/or social barriers preventing utilization of services.

				Download Data
Report Area	Total Population Age 65+	Estimated Population with Annual Pneumonia Vaccination	Crude Percentage	Age-Adjusted Percentage
Midland County, TX	14,976	9,630	64.3%	64.2%
Texas	2,543,590	1,709,292	67.2%	67.7%
United States	39,608,820	26,680,462	67.4%	67.5%



Note: This indicator is compared with the state average.

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health & Human Services, Health Indicators Warehouse, 2006-12. Source geography: County



Annual Pneumonia Vaccination, Percent of Adults Age 65+ by County, BRFSS 2006-12

Over 72.0% 68.1 - 72.0% 64.1 - 68.0%

Under 64.1%

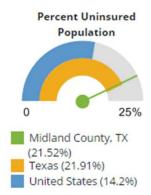
No Data or Data Suppressed

Insurance - Uninsured Population

The lack of health insurance is considered a key driver of health status.

This indicator reports the percentage of the total civilian non-institutionalized population without health insurance coverage. This indicator is relevant because lack of insurance is a primary barrier to healthcare access including regular primary care, specialty care, and other health services that contributes to poor health status.

			Download Data
Report Area	Total Population (For Whom Insurance Status is Determined)	Total Uninsured Population	Percent Uninsured Population
Midland County, TX	145,324	31,272	21.52%
Texas	25,613,334	5,610,908	21.91%
United States	309,082,272	43,878,140	14.2%



Note: This indicator is compared with the state average.

Data Source: US Census Bureau, American Community Survey. 2010-14. Source geography: Tract



Uninsured Population, Percent by Tract, ACS 2010-14

Over 20.0%

15.1 - 20.0%

10.1 - 15.0%

Under 10.1%

No Data or Data Suppressed

Preventable Hospital Events

This indicator reports the discharge rate (per 1,000 Medicare enrollees) for conditions that are ambulatory care sensitive (ACS). ACS conditions include pneumonia, dehydration, asthma, diabetes, and other conditions which could have been prevented if adequate primary care resources were available and accessed by those patients. This indicator is relevant because analysis of ACS discharges allows demonstrating a possible "return on investment" from interventions that reduce admissions (for example, for uninsured or Medicaid patients) through better access to primary care resources.

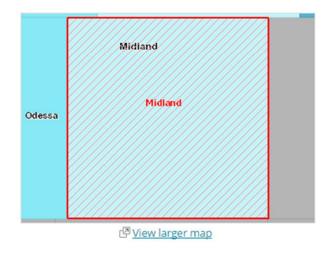
			Download Data
Report Area	Total Medicare Part A Enrollees	Ambulatory Care Sensitive Condition Hospital Discharges	Ambulatory Care Sensitive Condition Discharge Rate
Midland County, TX	12,283	529	43.1
Texas	2,030,887	127,787	62.9
United States	58,209,898	3,448,111	59.2

Note: This indicator is compared with the state average.

Data Source: Dartmouth College Institute for Health Policy & Clinical Practice, <u>Dartmouth Atlas of Health Care</u>, 2012. Source geography: County



Preventable Hospital Events, Age-Adjusted Discharge Rate (Per 1,000 Medicare Enrollees)



Ambulatory Care Sensitive Conditions, Rate (Per 1,000 Medicare Enrollees) by County, DA 2012

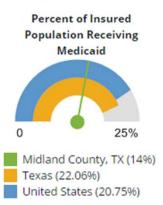
Over 100.0 80.1 - 100.0 60.1 - 80.0 Under 60.1

No Data or Data Suppressed

Insurance - Population Receiving Medicaid

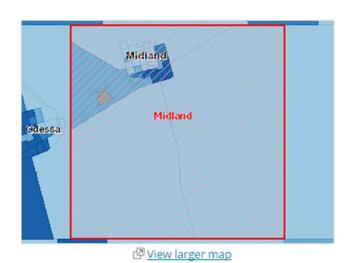
This indicator reports the percentage of the population with insurance enrolled in Medicaid (or other means-tested public health insurance). This indicator is relevant because it assesses vulnerable populations which are more likely to have multiple health access, health status, and social support needs; when combined with poverty data, providers can use this measure to identify gaps in eligibility and enrollment.

Report Area		Population with Any Health Insurance	Population Receiving Medicaid	Percent of Insured Population Receiving Medicaid	
Midland County, TX	145,324	114,052	15,967	14%	
Texas	25,613,334	20,002,428	4,412,903	22.06%	
United States	309,082,272	265,204,128	55,035,660	20.75%	



Note: This indicator is compared with the state average.

Data Source: US Census Bureau, American Community Survey. 2010-14. Source geography: Tract



Insured, Medicaid / Means-Tested Coverage, Percent by Tract, ACS 2010-14

Over 25,0%

20.1 - 25.0%

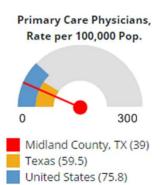
Under 15.1%

No Data or Data Suppressed

Access to Primary Care

This indicator reports the number of primary care physicians per 100,000 population. Doctors classified as "primary care physicians" by the AMA include: General Family Medicine MDs and DOs, General Practice MDs and DOs, General Internal Medicine MDs and General Pediatrics MDs. Physicians age 75 and over and physicians practicing sub-specialties within the listed specialties are excluded. This indicator is relevant because a shortage of health professionals contributes to access and health status issues.

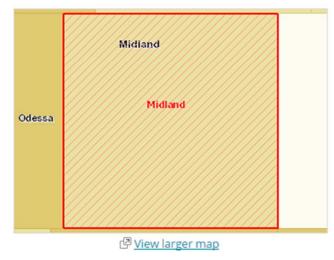
			Download Data
Report Area	Total Population, 2013	Primary Care Physicians, 2013	Primary Care Physicians, Rate per 100,000 Pop.
Midland County, TX	151,468	59	39
Texas	26,448,193	15,745	59.5
United States	316,128,839	239,500	75.8



Note: This indicator is compared with the state average.

Data Source: US Department of Health & Human Services, Health Resources and Services Administration, Area Health Resource File.

2013. Source geography: County



Access to Primary Care Physicians, Rate per 100,000 Pop. by County, AHRF 2013

Over 80.0

60.1 - 80.0

40.1 - 60.0

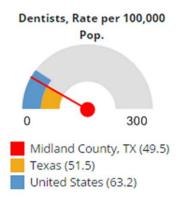
Under 40.1

No Primary Care Physicians or No Data

Access to Dentists

This indicator reports the number of dentists per 100,000 population. This indicator includes all dentists - qualified as having a doctorate in dental surgery (D.D.S.) or dental medicine (D.M.D.), who are licensed by the state to practice dentistry and who are practicing within the scope of that license.

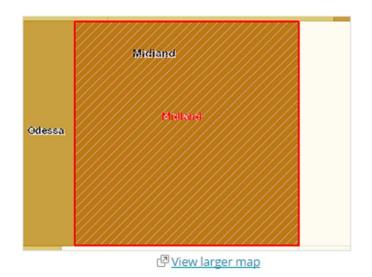
			Download Data
Report Area	Total Population, 2013 Dentists, 2013 Dentists, Rate pe		Dentists, Rate per 100,000 Pop.
Midland County, TX	151,468	75	49.5
Texas	26,448,193	13,631	51.5
United States	316,128,839	199,743	63.2



Note: This indicator is compared with the state average.

Data Source: US Department of Health & Human Services, Health Resources and Services Administration, Area Health Resource File.

2013. Source geography: County



Access to Dentists, Rate per 100,000 Pop. by County, AHRF 2013

Over 50.0 35.1 - 50.0

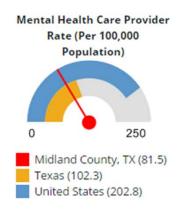
20.1 - 35.0

Under 20.1
No Dentists

Access to Mental Health Providers

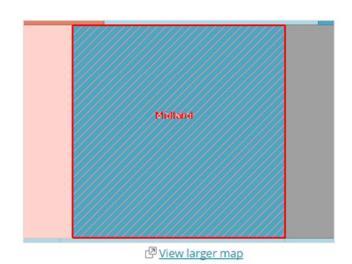
This indicator reports the rate of the county population to the number of mental health providers including psychiatrists, psychologists, clinical social workers, and counsellors that specialize in mental health care.

				Download Data
Report Area	Estimated Population	Number of Mental Health Providers	Ratio of Mental Health Providers to Population (1 Provider per x Persons)	Mental Health Care Provider Rate (Per 100,000 Population)
Midland County, TX	155,828	127	1,227	81.5
Texas	26,667,264	27,294	977	102.3
United States	317,105,555	643,219	493	202.8



Note: This indicator is compared with the state average.

Data Source: University of Wisconsin Population Health Institute, County Health Rankings. 2016. Source geography: County



Access to Mental Health Care Providers, Rank by County, CHR 2016

1st Quartile (Top 25%)

2nd Quartile

3rd Quartile

4th Quartile (Bottom 25%)

Bottom Quintile (Rhode Island Only)

No Data or Data Suppressed; -1

2015 Estimated Uninsured Rate of 18 to 64 year olds: 2013 Estimated Uninsured Rate of 18 to 64 year olds: Decrease from 2013 to 2015:

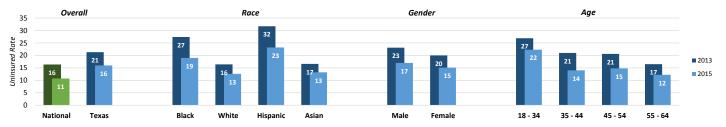
16.0% 21.3% 5.3%





Before the first Affordable Care Act enrollment period began, Enroll America and Civis Analytics used sophisticated data targeting techniques to create a model of the uninsured population in America. Over the last three years, this model has proven to be timely and accurate, and has played a critical role in our ability to understand who and where the uninsured are and get them the help they need to enroll in coverage. This year, the model has been updated and was used to estimate insurance status for over 180 million non-elderly adult Americans. Grouping individual-level estimates by geography, race, age, gender, and other characteristics enables us to understand the landscape of the uninsured population across the country. Here we provide a detailed look at the uninsured population in Texas, put into context by plan selection data from HHS and a comparison with nationwide uninsured rates. All uninsured rates listed in this document are based on the Enroll America/Civis Analytics uninsured model.

Chart 1: Texas Uninsured Rates for 2013 and 2015 of Key Demographic Groups



Quick Summary

- The current uninsured rate in Texas is 16%. This has decreased by 5% since 2013 prior to the first open enrollment period.
- 23% of Hispanics in Texas are uninsured, 19% of African-Americans are uninsured and 22% of young adults (ages 18-34) are uninsured.

Targeting Recommendations

- Geographic More uninsured people live in Harris County (16% of the uninsured population) and Dallas County (10% of the uninsured population) than any other county.
- Geographic The counties with the highest uninsured rates currently are Starr County (34%), Presidio County (34%), Hidalgo County (33%) and Hudspeth County (32%).
- Demographic Hispanic men ages 18 to 34 (32%) have the highest 2015 uninsured rates, followed by Hispanic women ages 18 to 34 (28%) and African American men ages 18 to 34 (28%).

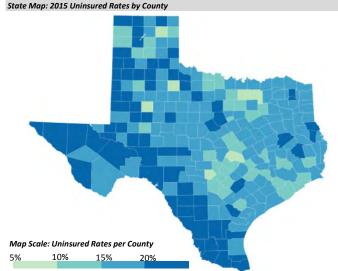


Table 1: Distribution of Uninsured Population by Demographic Groups in Quick Summary

		Race [1]			Gender		Age			
Distribution of Uninsured Population, Ages 18 to 64	Black	White	Hispanic	Asian	Male	Female	18 - 34	35 - 44	45 - 54	55 - 64
% 2013 Uninsured Population in Texas	7.7%	49.1%	40.8%	2.4%	50.5%	49.5%	31.9%	21.8%	30.1%	16.3%
% 2015 Uninsured Population in Texas	6.6%	49.7%	41.2%	2.5%	50.0%	50.0%	36.3%	18.3%	27.7%	17.6%
Change from 2013 to 2015	-1.1%	0.6%	0.4%	0.1%	-0.5%	0.5%	4.5%	-3.5%	-2.3%	1.3%

Table 2: 2015 Uninsured Rates in Most Populous Counties

	Total		Race	е		Gend	ler		Percent			
Top 10 Most Populous Counties, Ordered by Population Size	2015 Uninsured Rate	Black	White	Hispanic	Asian	Male	Female	18 - 34	35 - 44	45 - 54	55 - 64	% of TX Uninsured Population
Harris County	16%	20%	12%	22%	15%	17%	15%	22%	14%	16%	12%	16%
Dallas County	17%	19%	13%	23%	15%	18%	16%	22%	15%	16%	13%	10%
Tarrant County	14%	18%	12%	21%	14%	15%	13%	19%	12%	13%	10%	7%
Bexar County	15%	17%	11%	19%	12%	16%	14%	21%	13%	14%	12%	7%
Travis County	11%	15%	10%	17%	12%	12%	11%	16%	10%	10%	8%	3%
Collin County	7%	9%	7%	12%	7%	8%	7%	12%	6%	6%	5%	2%
El Paso County	25%	21%	20%	27%	21%	27%	24%	33%	22%	23%	20%	5%
Denton County	9%	11%	8%	14%	9%	9%	8%	14%	7%	7%	6%	2%
Fort Bend County	11%	14%	9%	16%	10%	11%	10%	16%	10%	9%	8%	2%
Hidalgo County	33%	28%	25%	34%	27%	35%	31%	41%	29%	31%	26%	5%

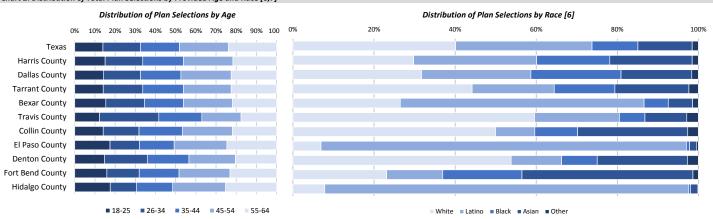
Page 1 of 2 - Texas State Snapshot - Enroll America - October 2015

TEXAS TX

OE2 Plan Selection Data from Health and Human Services	
Total OE2 Plan Selections in Texas: [2]	1,205,174
Effectuated OE2 Plan Selections: [3]	966,412
% Effectuated of Total Plan Selections	80%
Texas plans with Advanced Premium Tax Credit (APTC):	832,334
% APTC of Effectuated Plans	86%

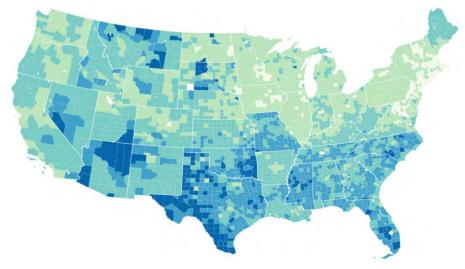
Remaining Uninsured Estimates from June 2015 Kaiser Family Foundation Study Estimated Number of Remaining Uninsured in Texas: [4] 4,425,000 % Medicaid Eligible of Remaining Uninsured 11% % Tax Credit Eligible of Remaining Uninsured 23% % Ineligible for Financial Assistance of Remaining Uninsured [5] 48% % Consumers in Coverage Gap of Remaining Uninsured 17%

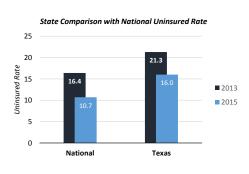
Chart 2: Distribution of Total Plan Selections by Provided Age and Race [6,7]



National Map: 2015 Uninsured Rates by County

- In 2013 before the first open enrollment period, Texas's uninsured rate of 21.3% was 4.9% greater than the national uninsured rate.
- In 2015, Texas's uninsured rate of 16.0% is 5.3% greater than the current national uninsured rate.





Map Scale: Uninsured Rates per County 0% 5% 10% 15% 20%

Footnotes

- [1] Civis Analytics uses a similar scoring method to assign most likely race to consumers which explains why the race distribution adds up to 100%.
- [2] March 10, 2015 ASPE Issue Brief with total plan selections by state from from November 15, 2015 to February 22, 2015. Full memo can be found here:

 $http://aspe.hhs.gov/sites/default/files/pdf/83656/ib_2015 mar_enrollment.pdf$

- [3] March 31, 2015 Effectuated Enrollment Snapshot released by the Department of Health and Human Services (HHS) on June 2, 2015. This includes all new and renewing consumers during the second open enrollment period from November 15, 2015 to February 22, 2015. Additional information can be found at: https://www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-sheets/2015-Fact-sheets-items/2015-06-02.html
- [4] Estimates of Eligibility for ACA Coverage among the Uninsured released by the Kaiser Family Foundation on June 1, 2015. Additional data and methodology can be found at:
- http://kff.org/uninsured/issue-brief/new-estimates-of-eligibility-for-aca-coverage-among-the-uninsured/issue-brief/new-estimates-of-eligibility-for-aca-coverage-among-the-uninsured/issue-brief/new-estimates-of-eligibility-for-aca-coverage-among-the-uninsured/issue-brief/new-estimates-of-eligibility-for-aca-coverage-among-the-uninsured/issue-brief/new-estimates-of-eligibility-for-aca-coverage-among-the-uninsured/issue-brief/new-estimates-of-eligibility-for-aca-coverage-among-the-uninsured/issue-brief/new-estimates-of-eligibility-for-aca-coverage-among-the-uninsured/issue-brief/new-estimates-of-eligibility-for-aca-coverage-among-the-uninsured/issue-brief/new-estimates-of-eligibility-for-aca-coverage-among-the-uninsured/issue-brief/new-estimates-of-eligibility-for-aca-coverage-among-the-uninsured/issue-brief/new-estimates-of-eligibility-for-aca-coverage-among-the-uninsured/issue-brief/new-estimates-of-eligibility-for-aca-coverage-among-the-uninsured/issue-brief/new-estimates-of-eligibility-for-aca-coverage-among-the-uninsured/issue-brief/new-estimates-of-eligibility-for-aca-coverage-among-the-uninsured/issue-brief/new-estimates-of-eligibility-for-aca-coverage-among-the-uninsured/issue-brief/new-estimates-of-eligibility-for-aca-coverage-among-the-uninsured/issue-brief/new-estimates-of-eligibility-for-aca-coverage-among-the-uninsured/issue-brief/new-estimates-of-eligibility-for-aca-coverage-among-the-uninsured/issue-brief/new-estimates-of-eligibility-for-aca-coverage-among-the-uninsured/issue-brief/new-estimates-of-eligibility-for-aca-coverage-among-the-uninsured/issue-brief/new-estimates-among-the-uninsured/issue-brief/new-estimates-among-the-uninsured/issue-brief/new-estimates-among-the-uninsured/issue-brief/new-estimates-among-the-uninsured/issue-brief/new-estimates-among-the-uninsured/issue-brief/new-estimates-among-the-uninsured/issue-brief/new-estimates-among-the-uninsured/issue-brief/new-estimates-among-the-uninsured/issue-brief/new-estimates-among-the-uninsured/issue-brief/new-estimates-among-the-uninsured
- $\hbox{\cite{thm-parabolic} Ineligible for Financial Assistance is due to Income, ESI Offer, or Citizenship.}$
- [6] HHS released county level plan selection data broken down by age and race, among other groupings. These plan selections include all new and renewing consumers during the second open enrollment period. The full data file can be found at: http://aspe.hhs.gov/basic-report/2015-plan-selections-county-health-insurance-marketplace
- [7] Enrollments for which race is unknown was not included in this graphic. This varies between states, but 36% of plan selections had an unknown race. Other includes American Indian/Alaska Native, Native Hawaiian/Pacific Islander and Multiracial.

Additional Enroll America Research, Blogs and Maps can be found at :

https://www.enrollamerica.org/research-maps/



All Counties in Texas- Uninsured Rates by major demographic groups

The Enroll America/Civis Analytics uninsured model provides our best estimate of uninsured rates by geography and demographic group. For smaller geographies — such as ZIP codes and counties — and demographic groups that contain fewer people, Enroll America's estimates may show increased variation from the actual uninsured rate in these areas.

	Tot	al Uninsured F	Rates		Ra	ice		Ger	nder		A	ge		% of Population				
County Name	2015 Uninsured Rate	2013 Uninsured Rate	Decrease from 2013 to 2015	Black	White	Hispanic	Asian	Male	Female	18 - 34	35 - 44	45 - 54	55 - 64	% of Uninsured Population	Uninsured Population Rank	Uninsured Rate Rank	Total Population Rank	
Texas Total	16%	21%	5%	19%	13%	23%	13%	17%	15%	22%	14%	15%	12%					
Anderson County	18%	26%	8%	21%	17%	25%	22%	19%	17%	26%	17%	16%	14%	0.2%	72	159	72	
Andrews County	19%	26%	7%	19%	16%	24%	16%	21%	19%	26%	18%	17%	15%	0.1%	131	123	126	
Angelina County	19%	22%	3%	22%	17%	24%	21%	20%	18%	26%	17%	16%	15%	0.4%	40	122	45	
Aransas County	17%	24%	7%	18%	16%	22%	18%	18%	16%	25%	17%	16%	14%	0.1%	106	190	100	
Archer County	13%	15%	2%	16%	13%	20%	18%	14%	12%	21%	11%	10%	10%	0.0%	190	237	169	
Armstrong County	15%	17%	2%	11%	15%	22%	0%	16%	15%	22%	14%	13%	11%	0.0%	241	221	231	
Atascosa County	20%	28%	8%	18%	16%	23%	20%	21%	19%	28%	18%	18%	16%	0.2%	66	96	70	
Austin County	15%	19%	4%	17%	13%	22%	16%	16%	14%	23%	14%	13%	11%	0.1%	98	220	90	
Bailey County	24%	30%	6%	21%	18%	29%	33%	25%	22%	33%	21%	21%	17%	0.0%	182	34	190	
Bandera County	16%	18%	2%	15%	16%	22%	18%	18%	16%	25%	16%	14%	13%	0.1%	118	208	108	
Bastrop County	16%	21%	5%	18%	15%	22%	16%	18%	16%	25%	15%	15%	13%	0.3%	52	207	48	
Baylor County	17%	23%	6%	18%	16%	20%	20%	17%	16%	23%	15%	15%	14%	0.0%	218	189	208	
Bee County	21%	30%	9%	19%	18%	23%	23%	22%	20%	29%	19%	19%	15%	0.1%	92	72	97	
Bell County	14%	19%	5%	16%	13%	19%	16%	15%	14%	20%	13%	13%	11%	1.1%	17	230	17	
Bexar County	15%	22%	7%	17%	11%	19%	12%	16%	14%	21%	13%	14%	12%	6.5%	4	219	4	
Blanco County	15%	19%	4%	17%	14%	22%	18%	16%	14%	24%	14%	13%	11%	0.0%	170	218	158	
Borden County	10%	17%	7%	7%	10%	15%	0%	11%	10%	15%	8%	8%	8%	0.0%	252	249	251	
Bosque County	17%	24%	7%	21%	16%	25%	23%	18%	16%	26%	15%	15%	13%	0.1%	146	188	132	
Bowie County	17%	23%	6%	21%	15%	22%	18%	18%	16%	23%	15%	15%	13%	0.4%	41	187	42	
Brazoria County	13%	17%	4%	13%	11%	18%	10%	14%	12%	19%	11%	11%	10%	1.0%	19	236	16	
Brazos County	14%	20%	6%	18%	13%	20%	14%	15%	13%	19%	12%	13%	10%	0.6%	26	229	24	
Brewster County	19%	30%	11%	25%	17%	23%	20%	21%	18%	28%	17%	16%	15%	0.0%	162	121	163	
Briscoe County	25%	23%	-2%	29%	23%	36%	45%	27%	24%	36%	23%	22%	20%	0.0%	236	25	239	
Brooks County	28%	38%	10%	25%	23%	28%	29%	30%	26%	36%	26%	25%	22%	0.1%	148	12	168	
Brown County	17%	23%	6%	19%	16%	23%	23%	18%	16%	25%	15%	16%	14%	0.2%	83	186	80	
Burleson County	18%	22%	4%	19%	17%	24%	21%	19%	17%	26%	16%	16%	15%	0.1%	138	158	128	
Burnet County	16%	20%	4%	16%	15%	24%	17%	17%	15%	24%	15%	15%	12%	0.2%	80	206	73	
Caldwell County	20%	26%	6%	22%	17%	24%	22%	21%	18%	29%	17%	17%	15%	0.2%	73	95	81	
Calhoun County	20%	27%	7%	22%	16%	25%	19%	21%	18%	28%	19%	17%	15%	0.1%	104	94	112	
Callahan County	17%	22%	5%	17%	16%	22%	20%	18%	16%	24%	15%	15%	13%	0.1%	153	185	138	
Cameron County	30%	36%	6%	26%	22%	31%	24%	32%	28%	39%	27%	28%	24%	2.6%	8	7	13	
Camp County	22%	27%	5%	24%	20%	29%	24%	23%	21%	30%	20%	20%	17%	0.1%	150	59	151	
Carson County	11%	16%	5%	11%	11%	17%	16%	12%	10%	18%	10%	8%	8%	0.0%	215	246	187	
Cass County	17%	25%	8%	19%	17%	22%	21%	18%	16%	24%	15%	15%	14%	0.1%	96	184	94	
Castro County	26%	30%	4%	23%	19%	31%	24%	27%	24%	35%	23%	23%	19%	0.0%	172	17	189	
Chambers County	12%	16%	4%	13%	12%	17%	15%	13%	12%	19%	11%	11%	10%	0.1%	93	240	71	
Cherokee County	20%	26%	6%	23%	19%	29%	23%	22%	19%	29%	18%	19%	16%	0.2%	71	93	78	
Childress County	16%	25%	9%	18%	15%	22%	24%	17%	15%	24%	15%	15%	13%	0.0%	199	205	192	
Clay County	14%	20%	6%	14%	13%	19%	15%	15%	13%	21%	12%	12%	11%	0.0%	181	228	159	
Cochran County	27%	33%	6%	30%	23%	31%	31%	28%	25%	35%	25%	23%	21%	0.0%	205	16	222	
Coke County	18%	22%	4%	20%	17%	24%	24%	19%	18%	27%	18%	16%	15%	0.0%	228	157	223	
Coleman County	18%	27%	9%	20%	17%	24%	21%	20%	17%	26%	17%	17%	15%	0.0%	171	156	171	
Collin County	7%	11%	4%	9%	7%	12%	7%	8%	7%	12%	6%	6%	5%	1.5%	12	254	6	
Collingsworth County	24%	26%	2%	23%	21%	32%	19%	25%	22%	33%	21%	22%	18%	0.0%	219	33	225	
Colorado County	18%	24%	6%	21%	16%	25%	18%	18%	17%	26%	17%	15%	13%	0.1%	113	155	111	
Comal County	11%	15%	4%	12%	10%	17%	12%	12%	11%	17%	10%	10%	8%	0.4%	46	245	33	
Comanche County	22%	26%	4%	22%	20%	30%	19%	24%	21%	31%	20%	20%	18%	0.1%	140	58	145	
Concho County	19%	20%	1%	14%	17%	25%	19%	20%	18%	28%	18%	16%	15%	0.0%	234	120	234	

														I			
Cooke County	17%	21%	4%	21%	16%	27%	23%	18%	16%	25%	16%	15%	14%	0.2%	79	183	77
Coryell County	15%	20%	5%	16%	15%	19%	18%	16%	14%	22%	14%	13%	11%	0.2%	58	217	52
Cottle County	23%	21%	-2%	15%	21%	31%	12%	24%	23%	32%	22%	19%	18%	0.0%	240	47	241
Crane County	19%	30%	11%	17%	16%	22%	18%	21%	17%	27%	18%	16%	14%	0.0%	201	119	202
Crockett County	22%	26%	4%	24%	18%	25%	21%	22%	21%	29%	21%	18%	16%	0.0%	204	57	212
Crosby County	22%	30%	8%	18%	18%	26%	19%	24%	21%	30%	21%	20%	17%	0.0%	192	56	195
Culberson County	29%	39%	10%	22%	25%	30%	34%	30%	28%	38%	26%	24%	23%	0.0%	217	9	229
Dallam County	24%	30%	6%	21%	21%	30%	28%	25%	22%	31%	22%	22%	19%	0.0%	175	32	186
Dallas County	17%	24%	7%	19%	13%	23%	15%	18%	16%	22%	15%	16%	13%	9.7%	2	182	2
Dawson County	23%	30%	7%	22%	18%	27%	21%	24%	22%	31%	21%	21%	17%	0.1%	141	46	148
Deaf Smith County	23%	30%	7%	19%	16%	26%	21%	24%	21%	31%	21%	21%	17%	0.1%	122	45	134
Delta County	20%	24%	4%	23%	20%	25%	22%	21%	19%	27%	18%	17%	18%	0.0%	200	92	201
Denton County	9%	12%	3%	11%	8%	14%	9%	9%	8%	14%	7%	7%	6%	1.7%	10	252	8
DeWitt County	18%	24%	6%	22%	15%	23%	21%	19%	17%	25%	16%	16%	14%	0.1%	124	154	118
Dickens County	18%	24%	6%	20%	16%	24%	21%	19%	17%	28%	15%	17%	14%	0.0%	238	153	236
Dimmit County	25%	37%	12%	19%	20%	26%	26%	27%	23%	33%	23%	22%	20%	0.1%	143	24	157
Donley County	18%	21%	3%	16%	18%	25%	24%	19%	18%	27%	17%	15%	14%	0.0%	223	152	220
Duval County	24%	33%	9%	21%	21%	26%	22%	26%	23%	32%	22%	21%	19%	0.1%	136	31	147
Eastland County	20%	26%	6%	18%	19%	26%	27%	21%	19%	28%	18%	18%	17%	0.1%	120	91	123
Ector County	23%	29%	6%	24%	19%	28%	23%	25%	22%	30%	21%	22%	18%	0.8%	23	44	29
Edwards County	25%	29%	4%	0%	19%	29%	0%	26%	24%	35%	23%	21%	18%	0.0%	237	23	240
Ellis County	14%	17%	3%	17%	12%	20%	15%	15%	13%	20%	12%	12%	10%	0.6%	27	227	25
El Paso County	25%	30%	5%	21%	20%	27%	21%	27%	24%	33%	22%	23%	20%	4.7%	6	22	7
Erath County	21%	26%	5%	20%	20%	29%	25%	22%	20%	28%	18%	18%	15%	0.2%	75	71	84
Falls County	20%	29%	9%	24%	17%	25%	20%	21%	18%	27%	19%	18%	16%	0.1%	135	90	135
Fannin County	17%	23%	6%	21%	17%	23%	19%	18%	17%	25%	16%	15%	14%	0.1%	94	181	92
Fayette County	15%	19%	4%	20%	14%	22%	19%	16%	14%	23%	14%	13%	12%	0.1%	121	216	103
Fisher County	18%	26%	8%	23%	17%	22%	22%	19%	17%	26%	17%	15%	14%	0.0%	213	151	207
Floyd County	22%	29%	7%	19%	17%	27%	19%	24%	21%	31%	20%	19%	17%	0.0%	188	55	193
Foard County	27%	29%	2%	35%	25%	33%	32%	28%	26%	35%	24%	23%	21%	0.0%	242	15	244
Fort Bend County	11%	14%	3%	14%	9%	16%	10%	11%	10%	16%	10%	9%	8%	1.8%	9	244	9
Franklin County	17%	24%	7%	21%	16%	24%	21%	17%	16%	24%	15%	14%	12%	0.0%	184	180	175
Freestone County	16%	22%	6%	20%	16%	24%	22%	17%	15%	24%	15%	15%	13%	0.1%	145	204	125
Frio County	23%	33%	10%	21%	18%	25%	22%	25%	21%	31%	21%	20%	18%	0.1%	115	43	133
Gaines County	25%	25%	0%	23%	21%	31%	26%	26%	24%	33%	22%	21%	19%	0.1%	123	21	140
Galveston County	13%	18%	5%	17%	11%	18%	12%	14%	12%	18%	11%	11%	10%	1.1%	18	235	15
Garza County	18%	26% 18%	8%	19%	15%	22%	24%	19%	17%	25%	16%	15% 14%	14%	0.0%	212	150	206 98
Gillespie County			2%	16%	15%	25%	19%	18%	15%	25%	15%		13%	0.1%	110	203	
Glasscock County	12% 15%	14% 20%	2%	5% 14%	10%	19%	0%	13% 17%	10% 14%	18% 23%	10% 15%	9% 12%	8% 12%	0.0%	249 193	239	245 177
Goliad County	23%	20%	5% 6%	23%	13% 19%	21%	16% 24%	24%	22%	31%	21%	20%	17%	0.0%	193	215 42	117
Gonzales County	19%	25%	6%	22%	17%	27%	24%	20%	18%	26%	18%	18%	15%	0.1%	102	118	109
Gray County Grayson County	16%	22%	6%	20%	16%	25%	18%	17%	15%	23%	15%	15%	13%	0.1%	32	202	35
	17%	23%	6%	20%	15%	25%	18%	18%	16%	23%	16%	16%	13%	0.5%	31	179	36
Gregg County Grimes County	18%	23%	5%	22%	16%	23%	19%	19%	16%	25%	16%	15%	14%	0.5%	101	149	101
Guadalupe County	13%	17%	4%	13%	11%	19%	13%	14%	13%	19%	12%	12%	11%	0.1%	33	234	27
Hale County	23%	30%	7%	22%	18%	27%	20%	24%	22%	31%	22%	21%	18%	0.5%	74	41	88
Hall County	24%	28%	4%	30%	21%	31%	31%	25%	23%	33%	23%	21%	20%	0.0%	211	30	219
Hamilton County	18%	24%	6%	21%	18%	24%	23%	19%	17%	26%	16%	16%	15%	0.0%	185	148	178
Hansford County	19%	25%	6%	18%	16%	26%	22%	21%	17%	28%	15%	17%	14%	0.0%	198	117	197
Hardeman County	20%	25%	7%	20%	19%	26%	20%	21%	19%	28%	18%	18%	16%	0.0%	207	89	210
Hardeman County Hardin County	14%	20%	7% 6%	19%	19%	18%	17%	15%	19%	28%	18%	18%	11%	0.0%	64	226	53
Harris County	16%	20%	6%	20%	12%	22%	15%	15%	15%	21%	13%	16%	11%	16.1%	1	226	1
Harris County Harrison County	18%	22%	4%	20%	16%	26%	15%	17%	17%	26%	15%	15%	14%	0.3%	49	147	47
Hartley County	13%	14%	1%	14%	12%	19%	14%	19%	13%	21%	11%	10%	10%	0.3%	227	233	205
Haskell County	20%	29%	9%	21%	18%	26%	19%	21%	13%	21%	18%	18%	16%	0.0%	195	88	198
Hays County	13%	18%	5%	20%	12%	18%	15%	14%	13%	29%	11%	11%	8%	0.6%	25	232	23
Hemphill County	15%	18%	4%	18%	14%	22%	16%	16%	13%	23%	12%	13%	11%	0.6%	25	232	209
Henderson County	17%	26%	9%	19%	17%	24%	21%	19%	16%	25%	16%	16%	15%	0.0%	48	178	46
Henderson County	1/%	20%	9%	19%	1/%	24%	21%	19%	10%	25%	10%	10%	15%	0.5%	48	1/8	40

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Hidalgo County	33%	37%	4%	28%	25%	34%	27%	35%	31%	41%	29%	31%	26%	5.0%	5	4	10
Hill County	19%	25%	6%	23%	18%	26%	22%	20%	18%	27%	17%	17%	15%	0.2%	81	116	83
Hockley County	19%	26%	7%	18%	15%	24%	18%	20%	18%	26%	17%	16%	14%	0.1%	100	115	105
Hood County	16%	19%	3%	15%	15%	23%	17%	17%	14%	23%	15%	15%	12%	0.2%	60	200	55
Hopkins County	20%	24%	4%	22%	19%	28%	24%	21%	19%	27%	17%	18%	16%	0.2%	86	87	87
Houston County	21%	27%	6%	24%	20%	29%	26%	22%	20%	30%	19%	19%	17%	0.1%	108	70	117
Howard County	21%	28%	7%	21%	18%	26%	21%	22%	19%	28%	19%	19%	16%	0.2%	87	69	91
Hudspeth County	32%	34%	2%	24%	26%	36%	34%	33%	31%	42%	30%	26%	23%	0.0%	220	5	232
Hunt County	17%	22%	5%	21%	16%	25%	19%	19%	16%	24%	16%	16%	14%	0.4%	45	177	44
Hutchinson County	17%	23%	6%	20%	16%	24%	19%	18%	16%	24%	16%	15%	13%	0.1%	112	176	107
Irion County	19%	23%	4%	13%	17%	26%	33%	20%	18%	27%	17%	14%	13%	0.0%	235	114	235
Jack County	17%	24%	7%	17%	16%	23%	22%	18%	17%	24%	15%	15%	14%	0.0%	191	175	181
Jackson County	17%	22%	5%	21%	15%	22%	19%	18%	16%	24%	15%	15%	13%	0.1%	154	174	139
Jasper County	18%	27%	9%	22%	17%	24%	21%	19%	17%	25%	16%	16%	14%	0.1%	89	146	86
Jeff Davis County	20%	23%	3%	17%	18%	27%	19%	21%	19%	32%	19%	17%	15%	0.0%	232	86	230
Jefferson County	18%	26%	8%	23%	15%	25%	21%	20%	17%	25%	17%	17%	15%	1.1%	15	145	19
Jim Hogg County	25%	36%	11%	28%	23%	26%	26%	28%	23%	33%	22%	21%	19%	0.0%	179	20	191
Jim Wells County	24%	31%	7%	22%	18%	26%	21%	25%	22%	32%	22%	21%	18%	0.2%	54	29	69
Johnson County	16%	19%	3%	17%	15%	22%	18%	17%	15%	22%	14%	15%	12%	0.6%	24	199	26
Jones County	19%	26%	7%	20%	18%	25%	23%	20%	18%	27%	17%	17%	16%	0.1%	134	113	130
Karnes County	17%	28%	11%	21%	14%	22%	16%	19%	16%	25%	16%	15%	13%	0.1%	157	173	144
Kaufman County	14%	17%	3%	20%	14%	19%	17%	15%	14%	21%	12%	13%	12%	0.4%	39	225	37
Kendall County	10%	14%	4%	11%	9%	16%	10%	11%	10%	17%	9%	8%	7%	0.1%	105	248	75
Kenedy County	18%	28%	10%	0%	15%	19%	20%	19%	16%	24%	13%	13%	12%	0.0%	251	144	252
Kent County	17%	24%	7%	15%	16%	22%	14%	17%	16%	23%	14%	14%	13%	0.0%	248	172	250
Kerr County	18%	22%	4%	18%	16%	24%	21%	19%	16%	26%	16%	16%	13%	0.2%	67	143	62
Kimble County	20%	26%	6%	18%	19%	27%	25%	22%	19%	30%	19%	19%	16%	0.0%	208	85	211
King County	8%	14%	6%	0%	8%	14%	0%	9%	8%	15%	8%	6%	5%	0.0%	254	253	253
Kinney County	20%	32%	12%	27%	16%	24%	24%	21%	19%	28%	17%	17%	14%	0.0%	225	84	226
Kleberg County	22%	33%	11%	21%	19%	24%	23%	24%	21%	30%	20%	20%	17%	0.2%	77	54	89
Knox County	23%	27%	4%	25%	20%	29%	30%	25%	22%	32%	21%	21%	18%	0.0%	203	40	214
Lamar County	18%	22%	4%	23%	17%	24%	22%	19%	17%	25%	16%	16%	15%	0.2%	61	142	59
Lamb County	24%	31%	7%	21%	19%	29%	27%	25%	23%	32%	22%	22%	19%	0.1%	139	28	149
Lampasas County	17%	23%	6%	17%	16%	23%	18%	18%	16%	25%	16%	15%	14%	0.1%	116	171	110
La Salle County	25%	35%	10%	24%	21%	27%	21%	27%	24%	34%	23%	22%	20%	0.0%	176	19	188
Lavaca County	16%	21%	5%	20%	15%	23%	19%	17%	15%	23%	15%	14%	13%	0.1%	127	198	114
Lee County	15%	19%	4%	18%	14%	23%	17%	17%	14%	23%	14%	14%	12%	0.1%	152	213	131
Leon County	18%	21%	3%	20%	18%	26%	22%	19%	18%	27%	17%	16%	14%	0.1%	137	141	127
Liberty County	20%	23%	3%	22%	19%	27%	23%	21%	19%	27%	18%	18%	16%	0.3%	47	83	49
Limestone County	19%	27%	8%	21%	18%	25%	22%	20%	18%	26%	18%	17%	14%	0.1%	111	112	113
Lipscomb County	19%	21%	2%	24%	17%	29%	23%	20%	18%	27%	17%	15%	13%	0.0%	224	111	221
Live Oak County	19%	25%	6%	20%	16%	24%	22%	20%	17%	27%	18%	15%	14%	0.0%	166	110	167
Llano County	15%	20%	5%	16%	14%	23%	19%	16%	14%	23%	15%	14%	11%	0.1%	144	212	120
Loving County	19%	25%	6%	0%	18%	27%	0%	20%	19%	28%	19%	18%	15%	0.0%	253	109	254
Lubbock County	15%	22%	7%	21%	12%	20%	15%	16%	14%	20%	13%	14%	11%	1.0%	20	211	18
Lynn County	20%	25%	5%	22%	16%	26%	24%	22%	19%	29%	18%	17%	16%	0.0%	194	82	194
McCulloch County	20%	27%	7%	22%	18%	25%	18%	21%	18%	28%	17%	18%	16%	0.0%	169	81	176
McLennan County	16%	22%	6%	21%	14%	23%	16%	17%	15%	22%	14%	15%	12%	0.9%	21	197	20
McMullen County	17%	23%	6%	13%	15%	19%	0%	17%	16%	25%	15%	14%	13%	0.0%	247	170	247
Madison County	18%	24%	6%	20%	17%	25%	24%	19%	17%	26%	17%	16%	15%	0.0%	160	140	155
Marion County	20%	26%	6%	22%	20%	25%	20%	21%	19%	28%	19%	18%	17%	0.0%	161	80	164
Martin County	21%	25%	4%	14%	18%	27%	17%	22%	20%	29%	19%	17%	14%	0.0%	214	68	215
Mason County	19%	20%	1%	24%	17%	27%	25%	20%	18%	29%	16%	16%	14%	0.0%	216	108	213
Matagorda County	20%	28%	8%	20%	17%	25%	20%	21%	19%	28%	19%	18%	15%	0.2%	78	79	85
Maverick County	34%	36%	2%	29%	29%	34%	30%	36%	32%	43%	29%	30%	27%	0.4%	36	3	57
Medina County	17%	25%	8%	17%	14%	22%	18%	18%	17%	25%	16%	15%	13%	0.2%	69	169	64
Menard County	25%	22%	-3%	0%	22%	33%	33%	26%	24%	35%	23%	22%	20%	0.0%	231	18	237
Midland County	16%	20%	4%	19%	12%	23%	16%	17%	15%	21%	14%	15%	11%	0.6%	28	196	28
Milam County	18%	24%	6%	21%	16%	24%	20%	19%	17%	25%	16%	16%	14%	0.1%	107	139	106
ivinairi Courty	10/0	24/0	070	21/0	10/0	24/0	2070	13/0	1//0	23/0	10/0	10/0	14/0	0.170	107	133	100

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Mills County	19%	22%	3%	15%	18%	28%	13%	20%	18%	29%	18%	16%	15%	0.0%	202	107	203
Mitchell County	19%	30%	11%	17%	17%	24%	24%	21%	18%	27%	18%	18%	15%	0.0%	183	106	179
Montague County	18%	23%	5%	17%	18%	25%	18%	19%	17%	26%	16%	16%	15%	0.1%	117	138	115
Montgomery County	11%	15%	4%	13%	10%	17%	10%	11%	10%	16%	10%	10%	8%	1.4%	14	243	11
Moore County	21%	26%	5%	21%	17%	27%	28%	23%	20%	29%	19%	19%	16%	0.1%	114	67	124
Morris County	17%	25%	8%	17%	18%	24%	19%	19%	17%	26%	16%	16%	13%	0.1%	159	168	146
Motley County	19%	21%	2%	18%	18%	28%	0%	19%	19%	27%	16%	16%	16%	0.0%	245	105	249
Nacogdoches County	18%	25%	7%	22%	17%	25%	20%	19%	17%	24%	16%	16%	14%	0.2%	53	137	54
Navarro County	20%	25%	5%	22%	18%	27%	24%	21%	19%	28%	19%	19%	16%	0.2%	62	78	68
Newton County	18%	28%	10%	17%	18%	22%	18%	19%	17%	25%	17%	15%	14%	0.0%	173	136	173
Nolan County	21%	29%	8%	23%	18%	26%	22%	22%	20%	28%	20%	19%	17%	0.1%	132	66	136
Nueces County	17%	25%	8%	17%	13%	20%	14%	18%	16%	23%	16%	16%	13%	1.4%	13	167	14
Ochiltree County	21%	28%	7%	18%	18%	27%	27%	22%	20%	28%	18%	20%	15%	0.1%	158	65	162
Oldham County	14%	18%	4%	31%	13%	21%	19%	14%	13%	21%	12%	11%	10%	0.0%	239	224	228
Orange County	16%	21%	5%	20%	16%	21%	20%	17%	15%	23%	15%	15%	13%	0.4%	44	195	41
Palo Pinto County	22%	26%	4%	25%	20%	30%	28%	23%	21%	31%	20%	20%	17%	0.2%	85	53	93
Panola County	17%	23%	6%	18%	16%	24%	21%	18%	16%	24%	15%	15%	13%	0.1%	103	166	99
Parker County	12%	15%	3%	13%	11%	17%	12%	12%	11%	17%	10%	10%	9%	0.4%	38	238	31
Parmer County	22%	29%	7%	19%	18%	28%	23%	24%	21%	32%	20%	21%	16%	0.0%	164	52	174
Pecos County	23%	31%	8%	22%	18%	26%	25%	25%	22%	32%	21%	20%	16%	0.1%	130	39	141
Polk County	21%	25%	4%	23%	21%	28%	26%	23%	20%	30%	20%	19%	17%	0.2%	57	64	67
Potter County	21%	28%	7%	26%	18%	27%	25%	22%	20%	27%	19%	20%	17%	0.5%	29	63	39
Presidio County	34%	33%	-1%	18%	24%	38%	38%	36%	33%	45%	31%	27%	25%	0.0%	174	2	200
Rains County	18%	25%	7%	17%	17%	24%	18%	18%	17%	25%	17%	16%	14%	0.0%	167	135	165
Randall County	11%	15%	4%	12%	10%	16%	12%	12%	10%	16%	10%	9%	8%	0.4%	42	242	30
Reagan County	22%	26%	4%	22%	17%	26%	23%	23%	20%	31%	20%	19%	16%	0.0%	209	51	216
Real County	20%	24%	4%	13%	18%	27%	16%	21%	19%	29%	19%	17%	15%	0.0%	222	77	224
Red River County	19%	27%	8%	22%	18%	25%	18%	21%	18%	27%	17%	17%	16%	0.1%	156	104	150
Reeves County	28%	36%	8%	22%	23%	29%	28%	30%	26%	36%	26%	25%	22%	0.1%	128	11	154
Refugio County	18%	26%	8%	21%	15%	21%	25%	19%	17%	25%	17%	15%	14%	0.0%	187	134	180
Roberts County	10%	16%	6%	7%	10%	17%	0%	11%	10%	16%	9%	9%	7%	0.0%	250	247	246
Robertson County	19%	24%	5%	21%	17%	24%	22%	20%	18%	26%	17%	16%	15%	0.1%	126	103	122
Rockwall County	9%	12%	3%	9%	8%	13%	10%	9%	8%	14%	8%	7%	6%	0.2%	65	251	40
Runnels County	18%	26%	8%	19%	16%	24%	21%	19%	17%	26%	18%	16%	15%	0.0%	163	133	160
Rusk County	17%	23%	6%	20%	16%	24%	19%	18%	16%	24%	16%	15%	13%	0.2%	70	165	65
Sabine County	18%	25%	7%	18%	18%	23%	22%	19%	17%	27%	17%	16%	14%	0.0%	168	132	166
San Augustine County	21%	30%	9%	24%	19%	26%	28%	22%	20%	29%	19%	19%	16%	0.0%	180	62	182
San Jacinto County	18%	24%	6%	19%	18%	24%	22%	19%	17%	26%	17%	17%	14%	0.1%	97	131	96
San Patricio County	18%	25%	7%	17%	14%	22%	16%	19%	17%	25%	16%	16%	14%	0.3%	51	130	50
San Saba County	20%	26%	6%	20%	19%	27%	22%	21%	19%	30%	18%	18%	16%	0.0%	195	76	198
Schleicher County	21%	28%	7%	33%	18%	26%	23%	22%	20%	31%	20%	17%	15%	0.0%	229	61	227
Scurry County	19%	25%	6%	18%	16%	25%	24%	20%	18%	26%	17%	17%	14%	0.1%	133	102	129
Shackelford County	16%	21%	5%	15%	16%	23%	21%	18%	15%	24%	15%	14%	13%	0.0%	226	194	217
Shelby County	22%	29%	7%	25%	21%	30%	28%	24%	22%	31%	20%	20%	18%	0.1%	95	50	104
Sherman County	23%	25%	2%	26%	20%	33%	21%	25%	22%	33%	19%	17%	17%	0.0%	230	38	233
Smith County	16%	21%	5%	21%	14%	25%	17%	17%	15%	22%	14%	15%	12%	0.9%	22	193	22
Somervell County	14%	17%	3%	14%	13%	20%	16%	15%	14%	22%	13%	12%	10%	0.0%	189	223	172
Starr County	34%	39%	5%	26%	30%	34%	31%	36%	32%	42%	30%	30%	26%	0.4%	37	1	58
Stephens County	20%	25%	5%	18%	19%	27%	25%	21%	19%	28%	19%	18%	16%	0.0%	165	75	170
Sterling County	17%	21%	4%	21%	15%	25%	16%	18%	17%	26%	15%	14%	12%	0.0%	244	164	242
Stonewall County	18%	25%	7%	15%	17%	25%	0%	19%	16%	26%	17%	15%	13%	0.0%	243	129	243
Sutton County	18%	27%	9%	13%	14%	23%	18%	20%	17%	26%	17%	16%	14%	0.0%	210	128	204
Swisher County	20%	29%	9%	20%	17%	26%	16%	22%	19%	28%	18%	18%	16%	0.0%	186	74	185
Tarrant County	14%	18%	4%	18%	12%	21%	14%	15%	13%	19%	12%	13%	10%	6.6%	3	222	3
Taylor County	16%	21%	5%	19%	14%	22%	17%	17%	15%	21%	15%	14%	12%	0.5%	30	192	32
Terrell County	18%	17%	-1%	0%	16%	20%	14%	19%	16%	27%	16%	14%	12%	0.0%	246	127	248
Terry County	23%	30%	7%	25%	19%	28%	23%	25%	22%	32%	22%	21%	18%	0.1%	147	37	153
Throckmorton County	23% 24%	23%	0%	20%	23%	29%	0%	25%	22%	32%	22%	19%	19%	0.0%	233	36	238
Titus County		29%	5%	24%	21%	32%	26%	25%	22%	32%	21%	22%	18%	0.2%	84	27	95

Tom Green County	17%	23%	6%	18%	14%	22%	17%	18%	16%	23%	15%	16%	13%	0.4%	35	163	38
Travis County	11%	19%	8%	15%	10%	17%	12%	12%	11%	16%	10%	10%	8%	3.2%	7	241	5
Trinity County	19%	23%	4%	20%	19%	26%	26%	20%	18%	28%	18%	17%	16%	0.1%	151	101	143
Tyler County	18%	26%	8%	22%	18%	22%	19%	19%	17%	26%	17%	16%	15%	0.1%	129	126	121
Upshur County	17%	22%	5%	20%	17%	23%	20%	18%	16%	25%	16%	15%	13%	0.2%	76	162	74
Upton County	23%	26%	3%	21%	20%	27%	25%	24%	21%	31%	21%	18%	16%	0.0%	206	35	218
Uvalde County	24%	33%	9%	21%	18%	26%	24%	25%	22%	32%	22%	21%	17%	0.1%	90	26	102
Val Verde County	27%	33%	6%	21%	21%	29%	24%	28%	25%	34%	24%	24%	21%	0.3%	50	14	66
Van Zandt County	19%	24%	5%	21%	19%	26%	22%	20%	18%	27%	17%	16%	15%	0.2%	63	100	63
Victoria County	17%	23%	6%	20%	14%	22%	15%	18%	16%	24%	16%	16%	13%	0.4%	43	161	43
Walker County	18%	22%	4%	20%	17%	25%	23%	19%	17%	25%	17%	16%	13%	0.2%	55	125	56
Waller County	19%	22%	3%	22%	18%	24%	21%	20%	18%	26%	16%	15%	13%	0.2%	59	99	60
Ward County	21%	29%	8%	20%	18%	25%	23%	22%	20%	28%	20%	19%	16%	0.1%	155	60	156
Washington County	16%	19%	3%	19%	14%	23%	19%	17%	15%	23%	14%	14%	12%	0.1%	91	191	82
Webb County	28%	34%	6%	25%	22%	28%	23%	30%	26%	36%	24%	26%	22%	1.6%	11	10	21
Wharton County	20%	25%	5%	23%	17%	26%	23%	22%	19%	28%	18%	18%	16%	0.2%	68	73	76
Wheeler County	19%	23%	4%	21%	18%	27%	21%	20%	17%	27%	16%	16%	14%	0.0%	197	98	196
Wichita County	15%	21%	6%	21%	14%	21%	16%	16%	14%	21%	14%	14%	12%	0.5%	34	210	34
Wilbarger County	19%	25%	6%	22%	17%	24%	22%	20%	18%	26%	18%	17%	15%	0.1%	149	97	142
Willacy County	30%	43%	13%	40%	23%	31%	30%	30%	29%	37%	27%	27%	25%	0.1%	99	6	137
Williamson County	9%	13%	4%	10%	8%	13%	8%	9%	8%	14%	8%	7%	7%	1.1%	16	250	12
Wilson County	13%	18%	5%	12%	11%	18%	14%	14%	12%	20%	12%	11%	10%	0.1%	88	231	61
Winkler County	22%	31%	9%	21%	19%	27%	25%	24%	21%	30%	21%	20%	17%	0.0%	178	49	184
Wise County	15%	19%	4%	14%	14%	21%	17%	15%	14%	22%	13%	13%	11%	0.2%	56	209	51
Wood County	17%	24%	7%	20%	17%	25%	21%	18%	17%	25%	16%	15%	14%	0.2%	82	160	79
Yoakum County	22%	27%	5%	13%	17%	26%	23%	23%	21%	30%	20%	19%	16%	0.0%	177	48	183
Young County	18%	23%	5%	21%	18%	25%	19%	19%	17%	26%	16%	16%	14%	0.1%	119	124	116
Zapata County	29%	35%	6%	24%	25%	29%	24%	31%	27%	37%	25%	24%	22%	0.1%	125	8	152
Zavala County	27%	38%	11%	21%	24%	28%	25%	30%	25%	34%	25%	24%	22%	0.1%	142	13	161

HPSA AND MUA/P INFORMATION





Medically Underserved Areas / Populations

- Medically Underserved
 Areas/Populations (MUA/P) are areas or
 populations designated by HRSA as
 having too few primary care providers,
 high infant mortality, high poverty or a
 high elderly population.
- The Index of Medical Underservice (IMU) is applied to data on a service area to obtain a score for the area.
- The IMU scale is from 1 to 100, where 0 represents 'completely underserved' and 100 represents 'best served' or 'least underserved.'
- Each service area or population group found to have an IMU of 62.0 or less qualifies for designation as a Medically Underserved Area or Medically Underserved Population.

Midland County

- County Name: Midland County
- County FIPS Code: 329
- Service Area Name: Midland
 Service Area
- MUA/P Source ID Number: 03511
- Designation Type: Medically Underserved Area
- Index of Medical UnderserviceScore: 57.00
- MUA/P Designation Date: 05/11/1994
- MUA/P Update Date: 05/11/1994



Health Professional Shortage Areas

- Health Professional Shortage Area (HPSA) designations are based on general HPSA designation criteria, plus additional criteria and guidelines specific to each of the three types of designations:
 - Primary Care
 - Dental
 - Mental Health
- All Federally Qualified Health Centers and those Rural Health Clinics that provide access to care regardless of ability to pay receive automatic facility HPSA designation.
- HPSA Scores range from 1 to 26, where the higher the score, the greater the priority for assignment of clinicians.



Midland County

- County Name: Midland County
- County FIPS Code: 329
- HPSA Name: Midland County
- **Designation Type**: HPSA Geographic
- HPSA Status: Designated
 - HPSA Discipline Class: Mental Health
 - o **HPSA ID:** 748329
 - o HPSA Score: 11
 - HPSA Designation Last
 Update Date: 12/27/2013

MIDLAND HEALTH

Midland County

- County Name: Midland County
- County FIPS Code: 329
- HPSA Name: Midland County
- Designation Type: HPSA Geographic High Needs
- HPSA Status: Designated
 - HPSA Discipline Class: Primary
 Care
 - o **HPSA ID:** 1487890526
 - o HPSA Score: 6
 - HPSA Designation Last
 Update Date: 06/29/2015



Midland County

Midland Community Healthcare Services, Inc.

- County Name: Midland County
- County FIPS Code: 329
- HPSA Name: Midland Community Healthcare Services, Inc.
- <u>Designation Type</u>: Federally Qualified Health Center Look A Like
- HPSA Status: Designated
- HPSA Discipline Class:Primary Care
 - o **HPSA ID:** 14899948E8
 - HPSA Score: 13
 - HPSA Designation Last
 Update Date: 03/20/2014
- HPSA Discipline Class: Dental –
 Health
 - o **HPSA ID:** 64899948E4
 - o HPSA Score: 19
 - HPSA Designation Last
 Update Date: 03/20/2014
- HPSA Discipline Class: Mental Health
 - o **HPSA ID:** 74899948F2
 - o HPSA Score: 20
 - HPSA Designation Last
 Update Date: 03/27/2014

Source: U.S. Department of Health and Human Services, Health Resources and Services Administration, http://www.hrsa.gov/; data accessed August 3, 2016.



INTERVIEWEE BIOGRAPHIES





Midland Memorial Hospital 2016 Community Health Needs Assessment Interviewee Biographies

	·				•			
Name	Organization	Interview Date	Title	County	Interviewer	A	В	С
Michael Austin	Midland Community Healthcare Services	8/19/2016	Chief Executive Officer	Midland County	Valerie Hayes		х	
Michael Austin is the Chie	f Executive Officer of Midland Community Healthcare S	Services, and ha	s served in his current role for about eigh	nt years. He has also lived in the local commu	nity for more than fift	een y	ears.	
Bobby Burns	Midland Chamber of Commerce	8/31/2016	President and Chief Executive Officer	Midland County	Valerie Hayes			x
Bobby Burns is the President	and Chief Executive Officer of the Midland Chamber of	Commerce. He	has been with the Chamber of Commerc	e for nearly thirty years, and has served as Pr	esident and Chief Exe	cutive	Offic	er
	for a	bout six years.	He has lived in the community since 1978	3.				
Richard Coats	OGX Resources LLC	8/30/2016	Vice President	Midland County	Valerie Hayes			Х
Richard Coats	s is the Vice President of OGX Resources LLC, and also s	erves as the Ch	airman of the Board of Trustees of Midlar	nd Memorial Hospital. He has lived in the com	nmunity since 1983.			
Barbara Cobos	Midland Memorial Hospital	8/19/2016	Director of Case Management and Social Services	Midland County	Valerie Hayes		х	
Barbara Cobos is the Direct	or of Case Management and Social Services at Midland	Memorial Hosp	oital. She has worked within the case mar	nagement department of the hospital since it	was established in 20	03, an	d has	;
ı	served as Direct	or for about se	ven years. She has lived in the community	y since 1996.				
Imo Jean Douglas	Midland Independent School District	8/31/2016	Health Services Supervisor	Midland County	Valerie Hayes		х	
Imo Jean Douglas is the Healt	h Services Supervisor at Midland Independent School [District. She has	worked within the Midland Independent	School District for five years in various capac	ities, and has served	in her	curre	nt
	role for nearl	y two years. Sh	e has lived in the community for about ei	ght years.				
Michelle Evans	United Way of Midland	8/22/2016	Director of Community Impact	Midland County	Valerie Hayes		х	
Michelle Evans is th	ne Director of Community Impact for the United Way o	f Midland. She l	has served within her current role for abo	out one year, and has lived in the community	for about thirty six ye	ars.		
Sal Garcia	Midland County Health Department	8/23/2016	Director	Midland County	Valerie Hayes	х		
Sal Garcia i	is the Director of the Midland County Health Departme	ent. He has serv	ed within his current role for about thirte	en years, and has lived near the community f	for his entire life.			
Vicki Jay	Midland Shared Spaces	8/24/2016	Executive Director	Midland County	Valerie Hayes		х	
Vicki Jay is the Executive Direc	ctor of Shared Spaces, a local non-profit organization in		ty. She originally founded the organizatio I in the community since 1988.	n, and has served as Founding and Executive	Director for about th	ree ye	ars. S	he
Jessica Jones	Springboard Center	8/17/2016	Director of Nursing	Midland County	Valerie Hayes		х	
Jessica Jolles			ard Center, a non-profit substance abuse t		valerie nayes		Х	
Renee Meiner	Community Children's Clinic	8/31/2016	Executive Director	Midland County	Valerie Haves		х	
	ve Director of the Community Children's Clinic that ser	_, _, _						
Kenee Weiner is the Executi	•		ived within the community since 1990.	ole since 2014, and previously worked at the	Wildiana Cililaren 3 Ke	:IIabili	tatioi	'
Russell Meyers	Midland Memorial Hospital		President and Chief Executive Officer	Midland County	Valerie Hayes			х
	·	, ,		,		\Box		
Russell Meyers is the Presid	dent and Chief Executive Officer of Midland Memorial I			s Masters of Healthcare Administration, and h	nas been with Midland	d Mem	ıorial	
			tal for about fourteen years.					
Jerry Morales	City of Midland	8/19/2016	Mayor	Midland County	Valerie Hayes			Х
	Jerry Morales is the Mayor of Midland, a		· · · · · · · · · · · · · · · · · · ·					
Sari Nabulsi	Midland Memorial Hospital	8/24/2016	Chief of Staff	Midland County	Valerie Hayes			Х
Dr. Sari Nabulsi is the Chief of S	Staff for Midland Memorial Hospital, and has served wi		•	ters of Business Administration in Hospital an	nd Medical Managemo	ent, an	ıd he	has
			community for nearly nineteen years.					
Elsa Reed	Midland Memorial Hospital	8/22/2016	Cultural Diversity Coordinator	Midland County	Valerie Hayes		X	
Elsa Reed is	the Cultural Diversity Coordinator for Midland Memori	al Hospital. She		2007, and has lived within the community for	about nine years.			
Barbara Rila	Premier Physicians	8/24/2016	Child and Adolescent Behavioral Psychologist	Midland County	Valerie Hayes		x	
Dr. Barbara Rila is a Child and	Adolescent Behavioral Psychologist at Premier Physicia	ans in Midland (County. She has served within her current	t role for nearly two years, and has been a ps	ychologist for over th	irty ye	ars. S	he
1		has lived within	the community for about two years.					
			•					

Midland Memorial Hospital 2016 Community Health Needs Assessment Interviewee Biographies

Name	Organization	Interview Date	Title	County	Interviewer	Α	В	С
Eliseo Rivera	Midland Community Healthcare Services	9/16/2016	Chief Medical Officer	Midland County	Valerie Hayes		х	
Dr. Eliseo Rivera is the Chie	f Medical Officer of the Midland Community Healthcare	Services Federa	ally Qualified Healthcare Center (FQHC) i	n Midland, Texas. He has served in his current ro	ole for five years, a	nd ha	s live	t
	Wi	ithin the Permi	an Basin area for about fifteen years.					
Laura Roman	Weaver Accounting	8/16/2016	Partner	Southwest Region, including Midland County	Valerie Hayes			x
Laura Roman is a Partner w	vith Weaver Accounting, a large regional public accounting	ng firm. She has	s been with the firm since 2002, and mo	ved to the area from Houston that same year. Sh	ne has lived in the	area f	or the	,
			majority of her life.					
Jody Sneed	Senior Link Midland	8/18/2016	Executive Director	Midland County	Valerie Hayes		х	
Jody Sneed is the Executive D	irector of Senior Link Midland, which covers Midland Cou ye 	•	en with the organization for about five yed within the community since 1985.	years, and has served within his current role as E	xecutive Director	for ne	arly fo	our
Ramona Thomas	Permian Basin Community Mental Health and Mental Retardation Centers	8/22/2016	Chief Executive Officer	8 County Area, including Midland County	Valerie Hayes		х	
Ramona Thomas is the Chief	Executive Officer of the Permian Basin Community Center	er. She has serv	ved in her current role for almost 1 year, years.	but has been with the agency for over 25 years.	. She has lived in tl	he are	a for 2	25
Steve Thomason	Springboard Center	8/17/2016	Executive Director	Midland County	Valerie Hayes		х	
Steve Thomason is the Executi	ve Director of the Springboard Center a non-profit substa	ance abuse trea	atment center in Midland County. He is a	a Licensed Chemical Dependency Counselor, and	l a Licensed Maste	r Soci	al Wo	rker.
Eric Uresti	International Rescue Committee	8/29/2016	Site Manager	Multiple County Area, including Midland County	Valerie Hayes		x	
Eric Uresti is the Site Manage	er and Area Director for the International Rescue Commit	tee Midland Of	ffice, which is a local resettlement agenc	ry that works with refugees coming into the area	. He has served as	Area	Direct	or
	fo	r less than one	year, and grew up in the community.					
Lawrence Wilson	Midland Memorial Hospital	8/29/2016	Vice President of Medical Affairs and Chief Medical Officer	Midland County	Valerie Hayes			x
Dr. Lawrence Wilson is	the Vice President of Medical Affairs and Chief Medical C Administration from University of Texas at Dallas				as his Masters of E	Busine	SS	

A: Work for a State, local, tribal, or regional governmental public health department (or equivalent department or agency) with knowledge, information, or expertise relevant to the health needs of the community

Source: Midland Memorial Hospital Community Health Needs Assessment Phone Interviews Conducted by Community Hospital Consulting, August 16, 2016 – September 16, 2016.

B: Member of a medically underserved, low-income, and minority populations in the community, or individuals or organizations serving or representing the interests of such populations

C: Community Leaders

INPUT REGARDING THE HOSPITAL'S CURRENT CHNA





CHNA Feedback Invitation

- Midland Memorial Hospital invites all community members to provide feedback on its previous and existing CHNA and Implementation Plan.
- To provide input on this or the previous CHNA, please see details at the end of this report or respond directly to the hospital online at the site of this download.



Feedback, Questions or Comments?

Please address any written comments on the CHNA and Implementation Plan and/or requests for a copy of the CHNA and Implementation Plan to:

Midland Memorial Hospital

ATTN: Reagan Twum-Barimah, Project Manager- Population Health 400 Rosalind Redfern Grover Pkwy Midland, TX 79701

Phone Number: (432) 221 - 4239

Email: reagan.twum-barimah@midlandhealth.org

Please find the most up to date contact information on the Midland Memorial Hospital website:

http://www.midlandhealth.org/CHNA



Thank you!

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Valerie Hayes - vhayes@communityhospitalcorp.com

