



Community Health Needs Assessment

August 2020

Parmer Medical Center
1307 Cleveland Street
Frona, Texas 79035

Introduction

Operated by the Parmer County Hospital District, Parmer Medical Center (PMC) is committed to meeting the health needs of the residents of Parmer County and surrounding communities.

Parmer Medical Center Mission Statement

We are dedicated to serving the health needs of the people of our area, utilizing the skills of our healthcare family to provide compassionate and effective care.

As a local, tax supported institution and the only provider in Parmer County, PMC has its literal finger on the pulse of local residents, with the demands of patients and District taxpayers serving as the fundamental driver of community need.

To further enhance the organization's understanding of community need, and help ensure that investments in the community are focused on those areas of greatest health care need, PMC also maintains a formal health needs assessment that integrates internal data collection and analysis with external data collection and analysis.

The 2020 community health needs assessment process adopted by PMC is divided into three major components:

- ▲ INTERNAL DATA COLLECTION AND ANALYSIS;
- ▲ EXTERNAL DATA COLLECTION AND ANALYSIS; AND
- ▲ COMMUNITY BASED ASSESSMENT OF COMMUNITY NEED

The data and information obtained from this process is used by PMC to establish goals and strategies to address community health needs identified.

Please note that data are derived from various state and federal resources, which may disagree

A summary of the results of this process appear on the following pages.

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Parmer Medical Center

Hospital and Clinic Services

Parmer Medical Center is committed to preserving local access to healthcare.

PMC is a Critical Access Hospital located in the City of Friona in the Texas Panhandle. The hospital is operated by the Parmer County Hospital District.

Licensed for 25 inpatient beds, PMC cares for inpatients with acute conditions such as heart attack, congestive heart failure, pneumonia and influenza, chronic obstructive pulmonary disease, diabetes, etc. As part of the Swing Bed Program established by Medicare, all of the acute care beds may be used as skilled nursing beds for qualified patients who need additional time to strengthen and heal before returning home.

The Emergency Department at PMC serves as the first responder for injured and ill patients living, working or visiting in the area.

Also operated by the hospital, Friona Rural Health Clinic (Friona RHC), a federally designated Rural Health Clinic, is devoted to keeping the whole family healthy through the prevention, early diagnosis, treatment and rehabilitation of illnesses and injuries. The clinic is also committed to helping patients better manage chronic health conditions and enjoy a healthier life.

Other hospital services supporting the Inpatient Unit, Emergency Department and Clinic include: MRI, CT scanning, general x-ray and ultrasound; physical, occupational and speech therapy; and laboratory testing.

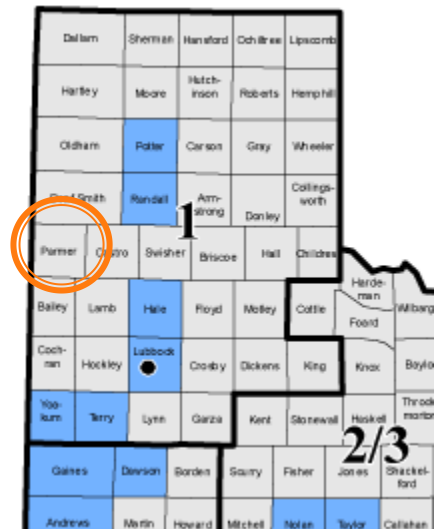
Together these services minimize the need for area residents to travel long distances to obtain care. This is particularly important for older patients and their families who find travel to other communities very difficult, as well as patients whose access to care is adversely impacted by their uninsured status.

Service Area Definition

Based on patient origin data, Parmer County comprises the primary service area of PMC.

PMC is located in Friona, Texas, approximately 70 miles and 70 minutes southwest of Amarillo, Texas, 100 miles and 90 minutes northwest of Lubbock, Texas. Parmer County is included in Public Health Service Region #1 as defined by the Texas Department of State Health Services (TDSHS).

Over 70 percent of acute care and swing bed patients, 82 percent of emergency department patients and 84 percent of clinic patients were residents of Parmer County in FY19.



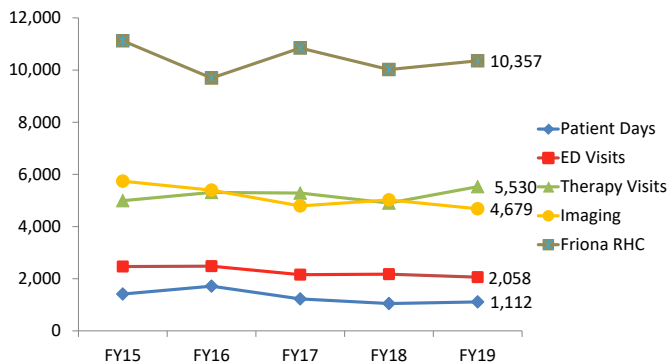
Hospital and Clinic Utilization Trends

Medicare and Medicaid beneficiaries rely heavily on PMC and Friona RHC for routine, emergency and inpatient healthcare services.

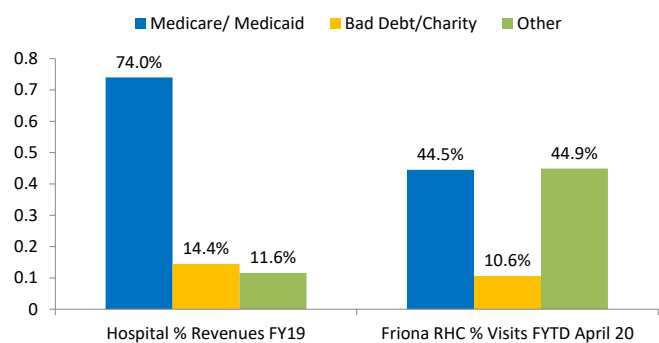
PMC and Friona RHC utilization have declined somewhat from FY15 through FY19. This is largely due to provider turnover.

Almost three-quarters of hospital utilization as measured by net revenues was generated by Medicare and Medicaid beneficiaries and half of clinic utilization, as measure by office visits, were generated by Medicare, Medicare Advantage, Medicaid and Medicaid Managed care beneficiaries. Bad Debt and Charity represented at least 10 percent of hospital and clinic utilization.

Parmer Medical Center Utilization



Parmer Medical Center Payer Mix



A review of Emergency Department visits in FY19 reveals that almost 6 percent of patients were diagnosed with chest pain, heart failure and other cardiovascular diagnoses; 5.8 percent with influenza and pneumonia; 4.6 percent with a gastrointestinal diagnosis and almost 4 percent with an injury.

Emergency Department Visits		
Diagnosis	Visits	% Total
Cardiovascular System	121	5.9%
Influenza & Pneumonia	120	5.8%
Gastrointestinal	104	5.1%
Otorhinolaryngology	94	4.6%
Injury	81	3.9%
Urinary Tract	71	3.4%
Respiratory	65	3.2%
Viral	30	1.5%
Mental Health	29	1.4%

Influenza and pneumonia was the leading category for inpatient discharges, followed by surgery aftercare and cardiovascular disease.

Demographic Profile

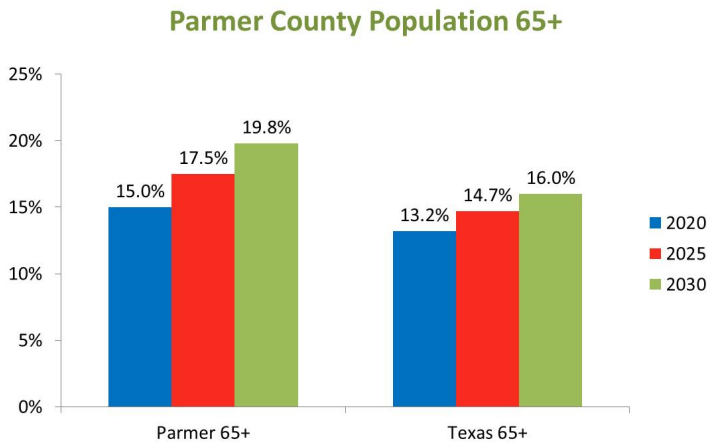
The number of Parmer County residents is declining.

According to the U.S. Census Bureau, the population of Parmer County declined by 6.5 percent from 2010 through 2019, reaching 9,600, while the population of the state as a whole increased by 15.3 percent. With an estimated population of 3,800 persons, Friona is the largest city in the county, followed by Bovina with 1,780 persons and Farwell with 1,300 persons.

Based on data obtained from the Texas Data Center – Population Estimate and Projection Project, the population of Parmer County will continue to decline through 2025.

Population			
Statistic	Parmer County	Texas	U.S.
Population Estimates, July 1, 2019, (V2019)	9,605	28,995,881	328,239,523
Population Estimates Base, April 1, 2010, (V2019)	10,269	25,146,091	308,758,105
Population, percent change - April 1, 2010 (Estimates Base) to July 1, 2019, (V2019)	-6.5%	15.3%	6.3%

Ageing of the population, however, will continue to have a major impact on Parmer County healthcare needs.



According to the Texas Data Center, the percentage and absolute number of Parmer County residents age 65 and over will increase over the next 10 years, reaching over 1,600 persons in 2030 and representing almost 20 percent of the population.

Overall rates for fair or poor health, chronic health conditions, and difficulties with physical and social activities increase with advancing age.

Correspondingly the 65-plus age group utilizes a disproportionate share of physician and hospital services with demand for health care services expected to increase.

A growing percentage of Parmer County residents is of Hispanic or Latino descent, with distinct health care needs.

As detailed in the accompanying table, an estimated two-thirds of the population of Parmer County is of Hispanic or Latino descent, more than 1.5 times the state average.

According to the Office of Minority Health, U.S. Department of Health and Human Services, residents of Hispanic or Latino descent:

- ▼ SUFFER FROM HIGHER RATES OF OBESITY AND DIABETES;
- ▼ ARE MORE LIKELY TO HAVE TO HAVE ASTHMA AND COPD; AND
- ▼ ARE LESS LIKELY TO HAVE RECEIVED THE INFLUENZA SHOT OR PNEUMONIA SHOT;
- ▼ ARE LESS LIKELY TO BE FULLY IMMUNIZED AGAINST HEPATITIS

In addition, children of Hispanic or Latino descent age 19-35 months have lower rates of immunization for hepatitis, influenza, MMR and polio.

Factors contributing to health disparities include language/cultural barriers, lack of access to preventive care, and the lack of health insurance.

Racial/Ethnic Distribution				
Statistic	Parmer County	Texas	U.S.	Parmer/Texas Ratio
Black or African American alone, percent, 2019	1.7%	12.8%	13.4%	0.13
American Indian and Alaska Native alone, percent, 2019	1.7%	1.0%	1.3%	1.70
Asian alone, percent, 2019	0.9%	5.2%	5.9%	0.17
Native Hawaiian and Other Pacific Islander alone, percent, 2019	0.3%	0.1%	0.2%	3.00
Two or More Races, percent, 2019	1.4%	2.0%	2.7%	0.70
Hispanic or Latino, percent, 2019	64.3%	39.6%	18.3%	1.62
White alone, not Hispanic or Latino, percent, 2019	33.3%	41.5%	60.4%	0.80

Socioeconomic Profile

Income levels in Parmer County remain below the Texas average despite lower unemployment rates.

Per capita income in Parmer County is just below 80 percent of the Texas average. Median household income is slightly higher due to the larger household size.

Unemployment rates in Parmer County declined from 2.5 percent in 2017 to 2.2 percent in 2019, lower than the state average of 3.5 percent.

Income				
Statistic	Parmer County	Texas	U.S.	Parmer/Texas Ratio
Median household income (in 2018 dollars), 2014-2018	\$54,184	\$59,570	\$60,293	0.91
Per capita income in past 12 months (in 2018 dollars), 2014-2018	\$23,686	\$30,143	\$32,621	0.79
Persons in poverty, percent	13.5%	14.9%	11.8%	0.91

The percentage of Parmer County residents in poverty is also lower than the Texas average, but still significant at 13.5 percent.

Literacy and healthcare literacy may be a problem for some Parmer County residents.

Education Level				
Statistic	Parmer County	Texas	U.S.	Parmer/Texas Ratio
High school graduate or higher, percent of persons age 25 years+, 2014-2018	70.8%	83.2%	87.7%	0.81
Bachelor's degree or higher, percent of persons age 25 years+, 2014-2018	17.7%	29.3%	31.5%	0.56
Limited English Proficiency				
Statistic	Parmer County	Texas	U.S.	Parmer/Texas Ratio
Foreign born persons, percent, 2014-2018	21.1%	17.0%	13.5%	1.56
Language other than English spoken at home, percent of persons age 5 years+, 2014-2018	50.4%	35.5%	21.5%	2.34
Technology Access				
Statistic	Parmer County	Texas	U.S.	Parmer/Texas Ratio
Households with a computer, percent, 2014-2018	80.1%	89.2%	88.8%	0.90
Households with a broadband Internet subscription, percent, 2014-2018	59.9%	79.3%	80.4%	0.75

Approximately 29 percent of Parmer County residents do not have a high school degree while over 50 percent speak a language other than English at home. Given the high percentage of residents of Hispanic or Latino descent, this language is likely Spanish.

In addition, 20 percent do not have computers at home and only 60 percent have subscriptions to high speed internet.

Lack of awareness and information regarding available healthcare services and resources, and the inability to understand how to access those services and resources can adversely impact health status.

Health Insurance Coverage

Lack of health insurance coverage adversely impacts how and when healthcare is accessed.

Although the percentage of uninsured residents in Parmer County has declined from 34 percent in 2008, Insurance coverage estimates provided by the U.S. Census Bureau, Small Area Health Insurance Estimates Program, indicate that over 28 percent of the residents of Parmer County did not have health insurance in 2018.

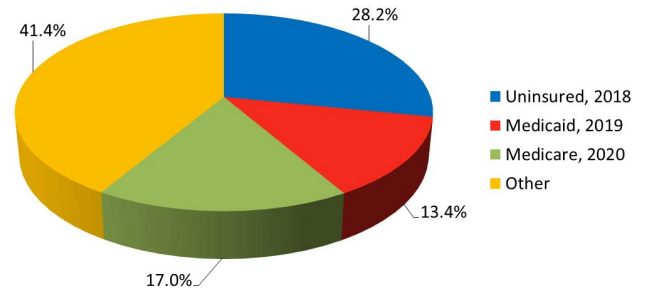
This is 40 percent higher than the Texas average and almost three times higher than the U.S. average.

Not surprisingly, persons without healthcare insurance:

- ▼ ARE LESS ARE LESS LIKELY TO HAVE A PRIMARY CARE PROVIDER, HAVE RECEIVED APPROPRIATE PREVENTIVE CARE OR HAVE HAD A RECENT MEDICAL VISIT;
- ▼ ARE MORE LIKELY TO USE THE EMERGENCY DEPARTMENT FOR ROUTINE CARE;;
- ▼ HAVE A HIGHER INCIDENCE OF PREVENTABLE HOSPITAL ADMISSIONS,
- ▼ HAVE A HIGHER PERCENTAGE OF UNMET MEDICAL NEEDS;
- ▼ ARE MORE LIKELY TO HAVE DELAYED CARE AS A RESULT OF THE COST OF CARE;
- ▼ ARE SUBJECT TO AVOIDABLE HOSPITAL ADMISSIONS; AND
- ▼ ARE SICKER AND DIE EARLIER THAN THE INSURED.

In addition, while underinsured residents may have access to primary care services available in Parmer County, continuity of care and the availability of needed specialty services is often more restricted.

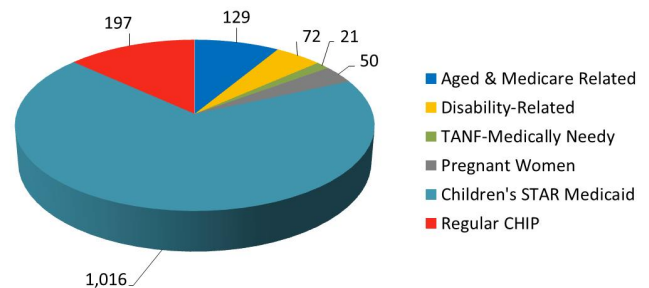
Parmer County Insurance Coverage



According to the Texas Health & Human Services Commission, almost 1,400 Parmer County residents were covered by Medicaid in SFY19.

Almost 95 percent of Medicaid beneficiaries are children enrolled in a STAR Medicaid managed care plan or the Medicaid Children’s Health Insurance Program.

Parmer County Medicaid Enrollment



Approximately 17 percent of Parmer County residents are eligible for Medicare, with 14.7 percent enrolled in Medicare Advantage plans. These plans are offered by commercial insurance companies.

While Medicare Advantage plans appear to offer more benefits than traditional Medicare, with no to low premiums, care is often subject to pre-authorization which may not be granted or are later denied resulting in higher out-of-pocket costs.

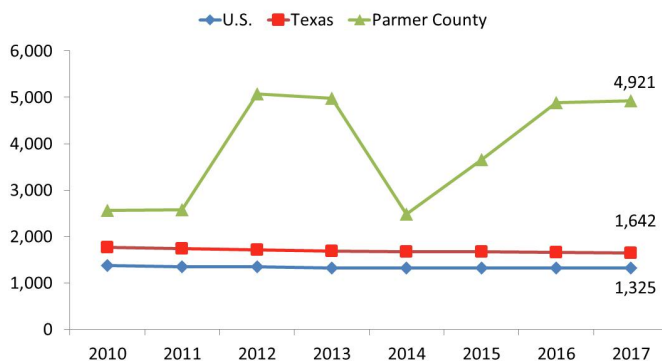
Medicare			
Statistic	Medicare Eligible	Medicare as Percent of Total Population	Medicare Advantage as Percent of Medicare Eligible
Parmer County	1,637	17%	14.7%
Texas	4,646,695	16%	37.4%
U.S.	68,258,080	21%	34.9%

Access to Care

Parmer County is designated as a whole county MUA and HPSA.

Parmer County is a federally designated Medically Underserved Area, with a score of 61.8 on a scale of 0 to 100 in 2019.

Persons/Primary Care Physician



Due to the small size of Parmer County, access to primary care changes dramatically with the addition or loss of a single primary care physician.

As illustrated by the graph to the left, the ratio of persons per primary care physician in Parmer County has been 1.5 to 3 times higher than the Texas average

Parmer County is also designated as a Health Professional Shortage Area (HPSA) for primary, dental and mental health care.

HPSA scores for the range from 0-25 for primary care and mental health, and 0-26 for dental health. A higher HPSA score is intended to demonstrate a greater the level of need

Parmer County HPSA Designation	
Discipline	Score
Primary Care	16
Dental Care	17
Mental Health Care	16

Health Status

While opportunities for improvement exist, the overall health status of Parmer County residents ranks higher than the majority of Texas Counties.

The *Behavioral Risk Factor Surveillance System (BRFSS)* maintained by the Texas Health and Human Services Commission, is a federally supported landline and cellular telephone survey that collects data about Texas residents regarding their health-related risk behaviors, chronic health conditions, and use of preventive services.

Health Outcomes				
Statistic	Parmer County	Texas		Parmer/Texas Ratio
Percentage of Adults Reporting Poor or Fair Health, 2016	23%	18%		1.28
Reported Poor Mental Health Days in Last Month, 2016	3.6	3.4		1.06
Years of Potential Life Lost Before Age 75 per 100,000 Population, 2015-2017 Average	7,609	6,651	6,940	1.14
Crude Mortality Rates, All Causes, 2015, U.S. 2018	802.8	688.6	866.7	1.17

Parmer County residents reported a higher rate of poor or fair health than the Texas average in 2016. Residents also have a higher rate of years of productive life lost, with a corresponding higher mortality rate.

Behavioral Risk Factors				
Statistic	Parmer County	Texas	U.S.	Parmer/Texas Ratio
Physical Inactivity, 2017	31%	24%	23%	1.29
Adult Obesity, 2017	40%	30%	29%	1.33
Percentage Adults Who Currently Smoke, 2017	16%	15%	14%	1.07
Percentage of Adults Reporting Binge or Heavy Drinking, 2017	18%	20%	23%	0.90
STD - Chlamydia/100,000	366	535	525	0.68

Contributing factors include higher reported rates of physical activity and adult obesity

In contrast, Parmer County residents are less likely to smoke or drink, and have a lower rate of STDs.

In addition, Medicare enrollees in Parmer County are less likely to get annual flu vaccinations, while women age 40 and older are less likely to get mammograms.

Use of Preventive Services				
Statistic	Parmer County	Texas	U.S.	Parmer/Texas Ratio
Flu Vaccinations, Medicare Enrollees, 2017	31%	44%	43%	0.70
Mammography Screening, 2016	38%	69%	64%	0.55

Disease Incidence/Prevalence				
Statistic	Parmer County	Texas	U.S.	Parmer/Texas Ratio
Diagnosed Diabetes, Age 18+, 2016	8.3%	5.8%	9.1%	1.43
Cancer Incidence/100,000, 2017	351.3	400.1	434.8	0.88

The percentage of Parmer County residents of Hispanic or Latin descent combined with the higher percent of Parmer County residents who are obese likely contributes to a rate of diagnosed diabetes that exceeds the Texas average by more than 40 percent.

Injury/Illness				
Statistic	Parmer County	Texas	U.S.	Parmer/Texas Ratio
Motor Vehicle Deaths/100,000, 2017	22	13	11.2	1.69
Violent Crimes/100,000	83	435	399	0.19
Potentially Preventable Hospitalizations/100,000 Medicare Enrollees	3,325	5,011	4,710	0.66

Deaths in Parmer County due to motor vehicle accidents are almost 70 percent higher than the state average, while deaths resulting from violent crime are 80 percent lower.

Parmer County has a much lower rate of potentially preventable Medicare hospitalizations.

County Health Rankings, 2020, a program sponsored by the Robert Wood Johnson Foundation compares selected health data obtained from the BFRSS, National Center for Health Statistics, CDC and other sources across all Texas counties, and ranks the status of each county from 1 to 244. Counties with lower scores are considered to be the healthiest.

Parmer County rank for selected categories of health data in 2019 and 2020 appears to the right. The county is better than average across all categories with the exception of “Clinical Care” which encompasses insurance coverage, availability of medical, dental and mental health care providers, preventable hospital stays, mammography screening and flu vaccinations. Although changes may not be statistically reliable, county rank fell in all but one category from 2019 to 2020.

Parmer County Health Rank		
Category	2019	2020
Length of Life	56	71
Quality of Life	89	103
Healthy Behaviors	109	155
Clinical Care	182	182
Socioeconomicis	28	27
Physical Environment	17	25

Community Assessment of Community Need

Texas Department of State Health Services

Parmer County does not have a local health department. As a result, the hospital relies on data regarding community need provided by the TDSHS for Public Health Region 1 and Parmer County. This includes data regarding Health Status provided by the BRFSS.

The Texas Healthy Communities Program was developed by TDSHS to focus on reducing the burden of chronic disease through community wide actions. The eight areas of focus identified included:

1. Physical Activity: Physical activity areas and opportunities are designated, safe, accessible, and promoted throughout the community.
2. Healthy Food Access: Healthy food options are accessible, affordable, and promoted to all members of the community.
3. Healthy Worksites: Worksite wellness programs are in place for most employees.
4. Environmental Health: Efforts are made to improve indoor and outdoor air quality.
5. **Healthcare Quality and Access: Healthcare sites in the community utilize quality improvement programs to support prevention of chronic disease, improve maternity care, and improve access to affordable services for older adults.**
6. Healthy Aging: The community supports healthy aging and provides resources and services for adults.
7. Mental Health: Reduce the incidence and increase awareness of mental health and substance use issues.
8. Emergency Preparedness: Provide access to training and information on emergency preparedness as it relates to chronic disease management.

Panhandle Community Services

Based in Amarillo, Texas, Panhandle Community Services (PCS) is a non-profit, community based organization offering a variety of programs and services to assist low-income individuals and families. Their service area encompasses 26 counties in the Texas Panhandle including Parmer County.

In 2018, PCS completed a comprehensive community needs assessment to determine the unmet or under-met needs of low-income families and the communities in the Panhandle. According to PCS, the needs assessment combined quantitative data with qualitative data from PCS clients, the public community, area leaders and key informants and

others to determine the most important needs and gaps. Data collection methods included surveys, focus groups and key informant interviews.

Parmer County health concerns resulting from poverty were:

1. lack of dental care and/or affordability with Medicaid insurance;
2. lack of health insurance;
3. not eligible for Medicaid; and
4. lack of mental health services.

The report also noted language barriers and computer literacy as concerns. The report incorrectly stated that Parmer County does not have a hospital or Rural Health Clinic.

Parmer County and City of Friona Leadership/Community Members

Interviews were conducted with county and city leadership including the county judge, city manager, school superintendent and manager of the Texas Regional Advisory Council (RAC) responsible for trauma oversight in the Panhandle. Community members were also interviewed.

Interview results are highlighted below:

1. Health Education: Additional education programs would be beneficial. Diabetes education classes were well received in the community.
2. Home Visits for Homebound Patients: Home visits were initiated prior to the COVID 19 quarantine and have been very successful. The feedback from the patients and families has been positive, grateful and supportive
3. Home Laboratory Visits: Homebound patient would also benefit if laboratory specimens could be drawn by home health personnel.
4. Meal Delivery: When Senior Citizen's organization is meeting, meals are delivered to individuals at home on Monday and Thursday. This service has been discontinued due to COVID 19.
5. Sharps/Medicine Disposable Program: It would be great to offer this as a service to the community.

Provider Assessment of Community Need

The providers who cover the PMC Emergency Department and staff the Friona Rural Health Clinic provide primary care to the majority of Parmer County residents and have first-hand knowledge of healthcare needs and concerns. Issues and opportunities identified by the providers are detailed below.

1. Specialty Care: PMC has physician specialists who come to PMC to provide consultation and care for the following specialties: Orthopedics and Gastrointestinal Intervention. While it would be optimal to have many specialists come to the county to provide care, this is not a real possibility. The providers have identified that having a gynecologist for women's health needs would be beneficial for the patient population served.
 2. Preventive Care: There is an opportunity for continued improvement in rates of immunization – including childhood immunizations, and flu and pneumonia vaccinations.
 3. Chronic Disease Management: Quality of life among older patients can be enhanced through a focus on Medicare patients with two or more chronic diseases.
-

Community Benefits Plan

PMC will continue to focus on maintaining and enhancing access to care, increasing use of preventive services and chronic disease management.

Goal:

1. Maintain and enhance Access to Care.

Strategies:

Enhance Access to Emergency Care

Provide access to emergency medicine physicians and critical care nurses in the PMC Emergency Department through Avera eCare, a telemedicine service that allows emergency medicine specialists to work “virtually” side by side with local PMC providers via a network of cameras and monitors installed in the trauma and cardiac rooms.

Maintain and Enhance Availability of Primary Care Providers

Continue efforts to recruit a new physician to Parmer County.

Maintain and Expand Access to Specialty Care

Maintain local access to physicians specializing in orthopedics and gastroenterology.

Explore opportunity to add gynecology to specialty clinics.

Translation Services

Current providers are bilingual. Identify Spanish fluency as an important criteria for new provider selection.

Maintain translation services for residents of Hispanic or Latino descent or other patients with Limited English Proficiency with various resources i.e. Avera eCare provides translation services for over 100 languages and dialects including American Sign Language.

Publish selected brochures and handouts in Spanish.

Improve Access for Older Adults

Continue to focus on special needs of Medicare population through full-time Director of Senior Services.

Enhance Medicare home visit program initiated prior to COVID 19 quarantine to maintain care for homebound patients and those with limited mobility.

Explore options to enhance community meal delivery for homebound patients working in partnership with other community organizations.

Goal:

2. Increase use of Preventive Services.

Strategies:

Increase rate of flu vaccination among residents age 65 and older in clinic, inpatient and including the Medicare home visit program.

Maintain certification as a Texas Health Steps provider, and provide Immunization reminders for all patients including those of Hispanic or Latino Descent

Goal:

3. Work with patients to achieve more effective Chronic Disease Management.

Strategies:

A Chronic Care Management program has been established to help Medicare patients with two more chronic conditions – such as diabetes, arthritis, high blood pressure, heart disease or stroke – play a more active and effective role in the management of their health.

Sources and Resources

Demographics

U.S. Census Bureau

Texas Data Center

Socioeconomics

U.S. Census Bureau; Local Area Unemployment Statistics,

U. S. Bureau of Labor Statistics

Education

U.S. Census Bureau

Insurance

U.S. Census Bureau

Texas Health and Human Services Commission

Healthcare Status

Behavioral Risk Factor Surveillance System, Texas Health and Human Services

County Health Rankings and Road Maps, Robert Wood Johnson Foundation

U.S. Diabetes Surveillance System

Texas Health and Human Services, Cancer Registry

Texas Health Data

National Center for Health Statistics, CDC

National Cancer Institute, SEER Data

Access to Care

U.S. Health Resources & Services Administration