2025 Community Health Needs Assessment

Methodist Midlothian Medical Center

Methodist HEALTH SYSTEM

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Methodist Health System

Methodist Health System first opened its doors in 1927 as a single, 100-bed facility called Dallas Methodist Hospital. It has since become one of the leading healthcare providers in North Texas, owning and operating multiple individually licensed hospitals that serve the residents across the state. Methodist Midlothian Medical Center opened in 2021 and serves the communities of Ellis County.[1]

Methodist Health System Mission

Mission

To improve and save lives through compassionate, quality healthcare.

Vision

To be the trusted choice for health and wellness.

Values

Methodist Health System core values reflect our historic commitment to Christian concepts of life and learning:

Servant Heart – compassionately putting others first

Hospitality – offering a welcoming and caring environment

Innovation – courageous creativity and commitment to quality

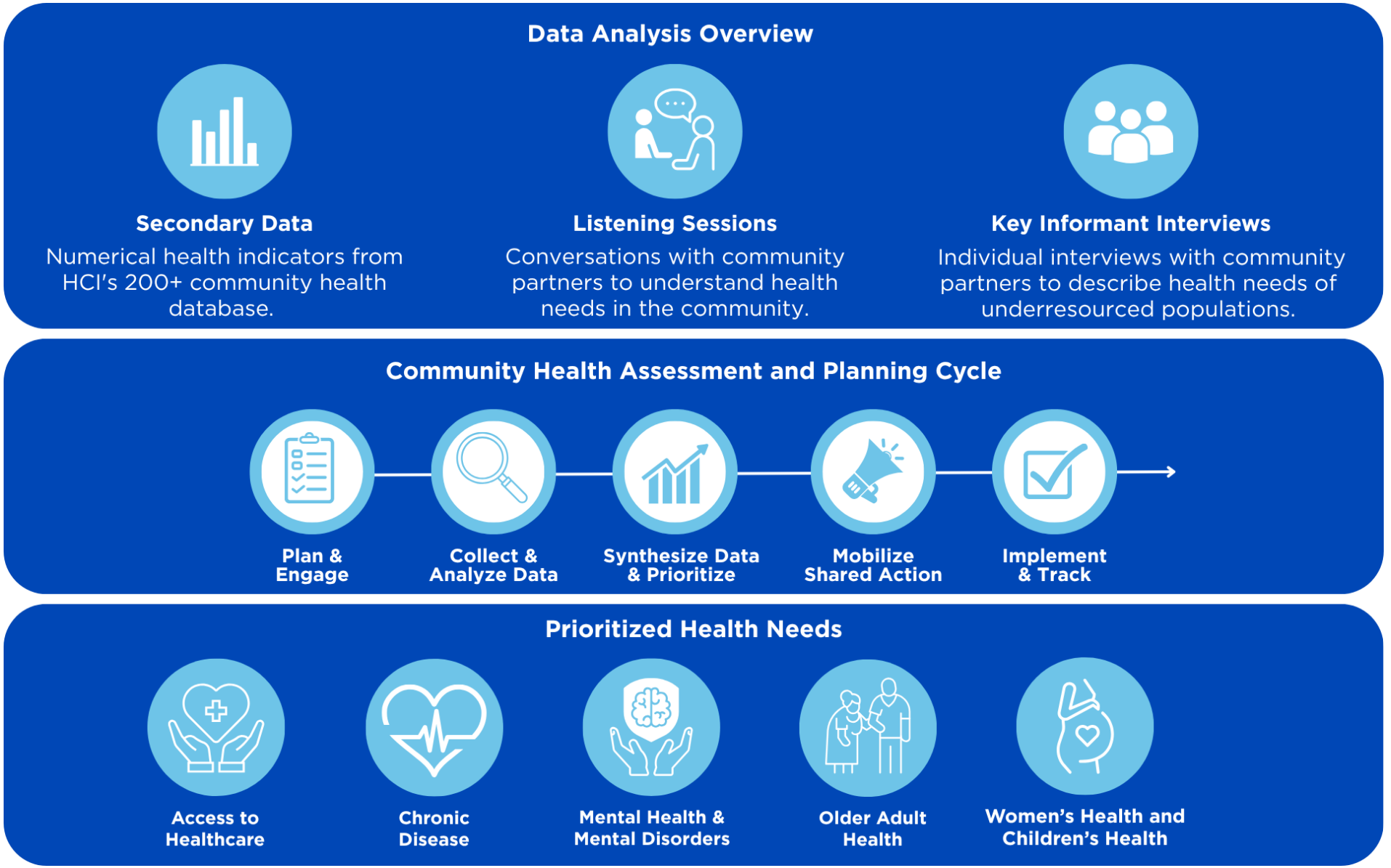
Noble – unwavering honesty and integrity

Enthusiasm – celebration of individual and team accomplishment

Skillful – dedicated to learning and excellence

[1] To learn more about Methodist Health System, please visit https://www.methodisthealthsystem.org/about/history/

Executive Summary: Methodist Midlothian Medical Center



Process

Kick-Off & Planning (Aug-Sept 2024)

- Kick-off meeting
- Create outreach plan for listening sessions
- Finalize listening session and key informant interview guide
- Schedule listening sessions

Synthesis & Prioritization (March-May 2025)

- Complete primary, secondary data analysis
- Synthesize secondary data & community input
- Complete Hospital Prioritization Presentations
- Select health needs

Data Collection & Presentation (Oct 2024-Feb 2025)

- Present secondary data findings and disparities data
- Conduct listening sessions and key informant interviews

Reporting & Sharing Findings (June 2025)

- Finalize CHNA report
- Share for review

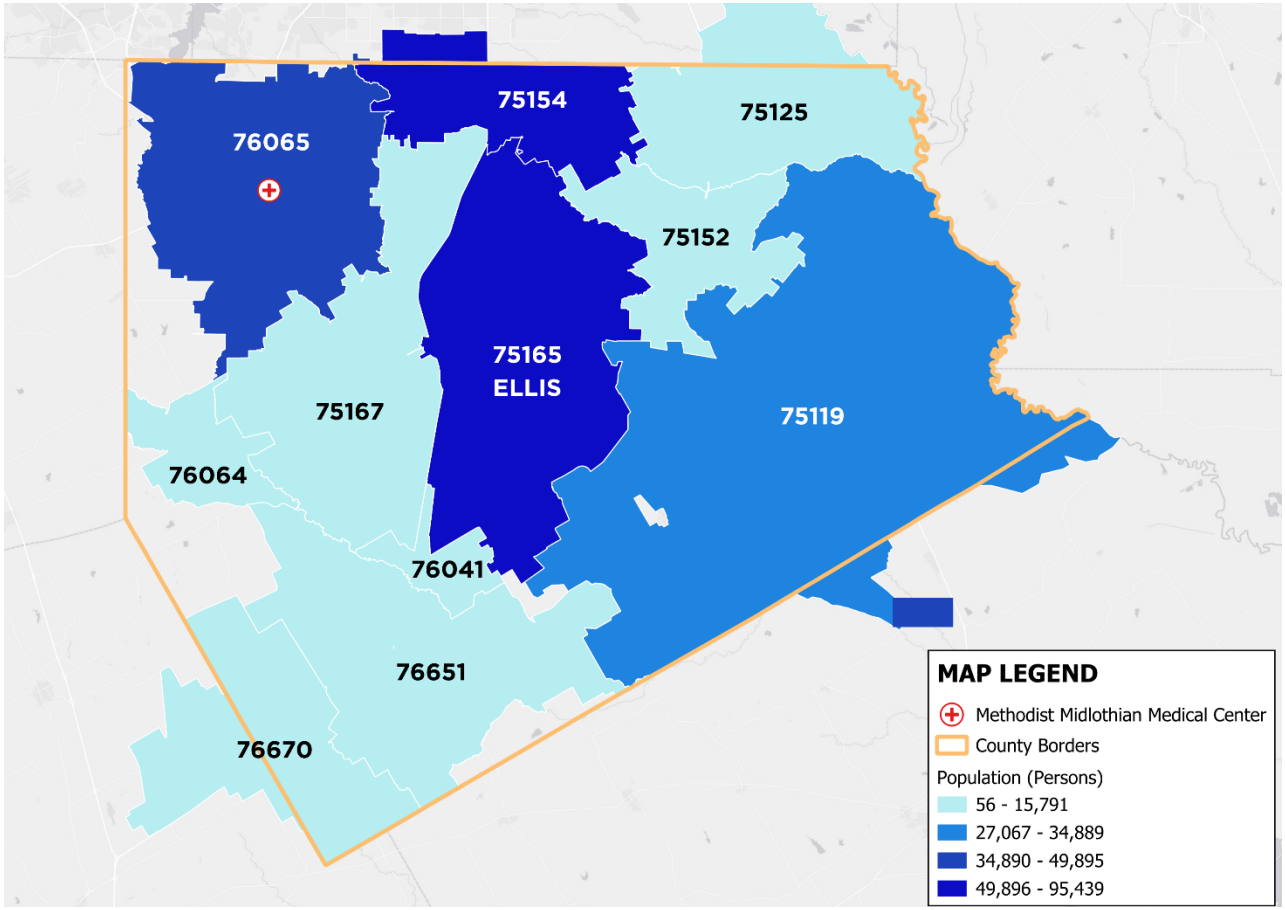
Methodist Health System commissioned Conduent Healthy Communities Institute (HCI) to conduct its 2026-2028 Community Health Needs Assessment (CHNA) in accordance with the requirements of the Patient Protection and Affordable Care Act (PPACA). HCI works with clients across the nation to drive community health outcomes by assessing needs, developing focused strategies, and identifying appropriate intervention programs.[2]

[2] To learn more about Conduent Healthy Communities Institute, please visit https://www.conduent.com/community-population-health.

Community Definition

The community definition sets the limits for the assessment and the strategies for action. The community served by Methodist Midlothian Medical Center is Ellis County and is defined as the geographic area from which a significant number of the patients utilizing hospital services reside. This includes the 11 ZIP codes in Ellis County.

FIGURE 1. ELLIS COUNTY SERVICE AREA



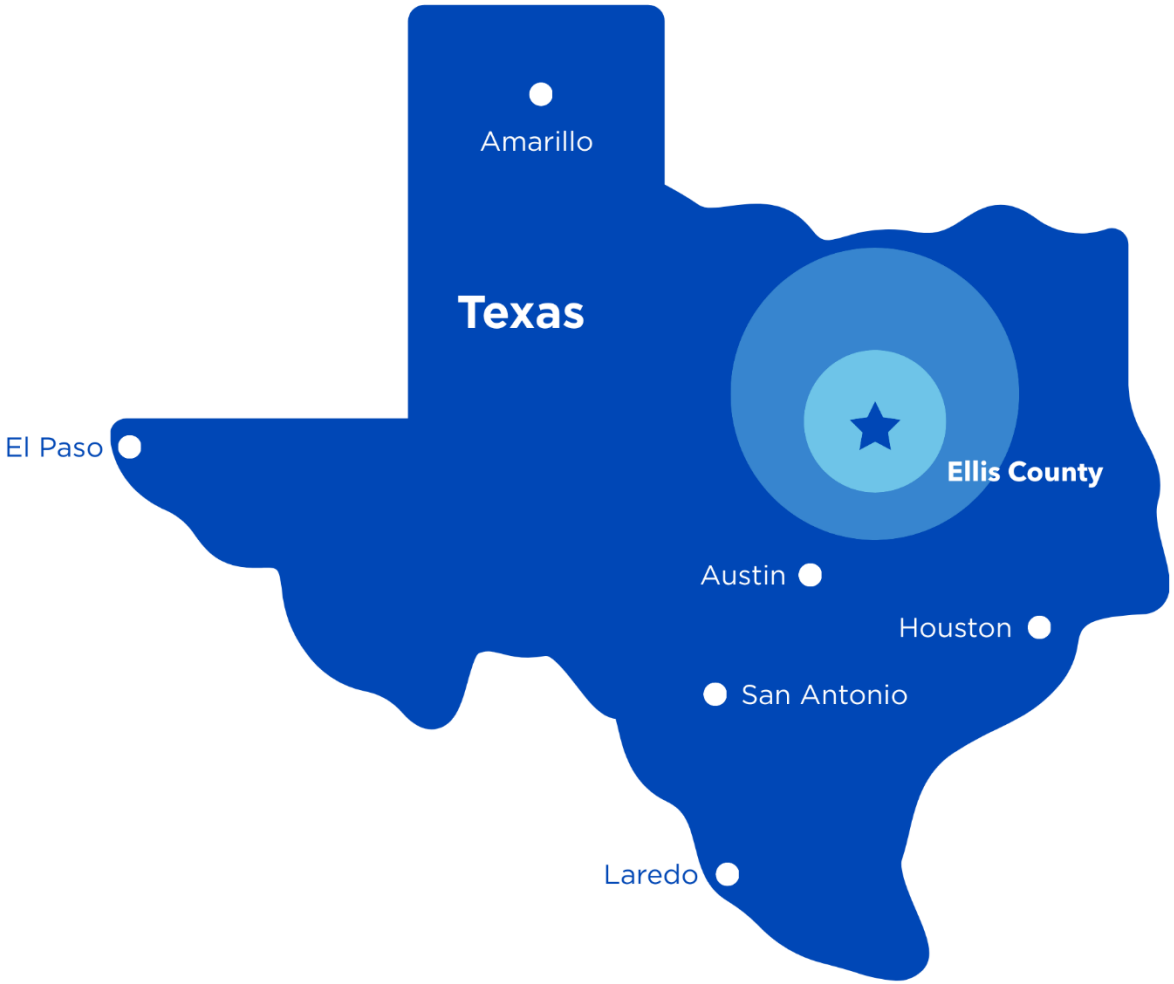
Demographics

A community's demographics influence overall health. Different groups based on race, ethnicity, age, and income levels have unique needs and may require different approaches to improve their health.[3] The next section gives an overview of Ellis County's demographic profile.

Demographics

All demographic estimates are sourced from the U.S. Census Bureau's 2018-2022 American Community Survey (all ZIP code population estimates) and 2022 Population and Housing Unit Estimates (all county and state population estimates), unless otherwise indicated. Some data within this section are presented at the county level while other data are presented at the ZIP code level.

County level data can sometimes hide what could be going on at the ZIP code level in many communities. While indicators may not be concerning when examined at a higher level, ZIP code level analysis can reveal disparities.



[3] National Academies Press (US); 2002. 2, Understanding Population Health and Its Determinants. https://www.ncbi.nlm.nih.gov/books/NBK221225/

Population

The total population of Ellis County is 223,505 persons. The largest ZIP code by population in Ellis County is 75165 and the smallest ZIP code is 76041.

223,505
POPULATION

59.7%
18-64 YEARS OLD

29.4%
HISPANIC/LATINO RESIDENTS

18%
LANGUAGE OTHER THAN ENGLISH

FIGURE 2. PERCENT POPULATION BY RACE: COUNTY

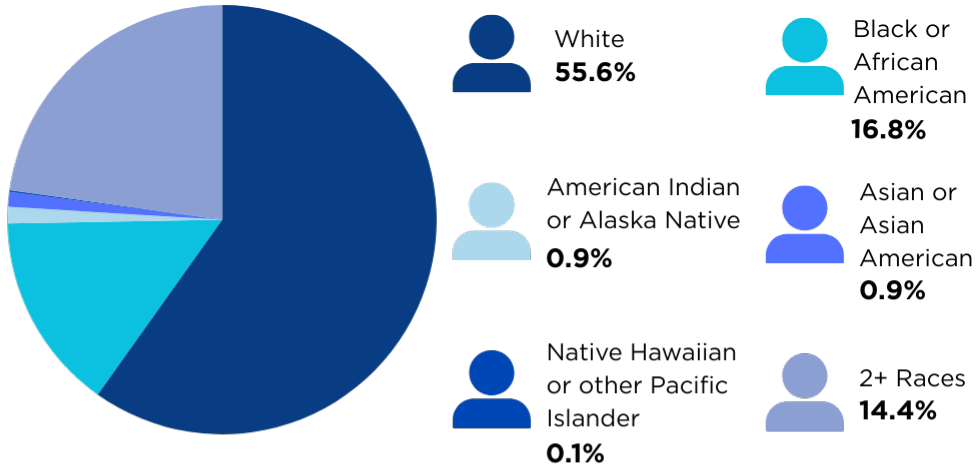
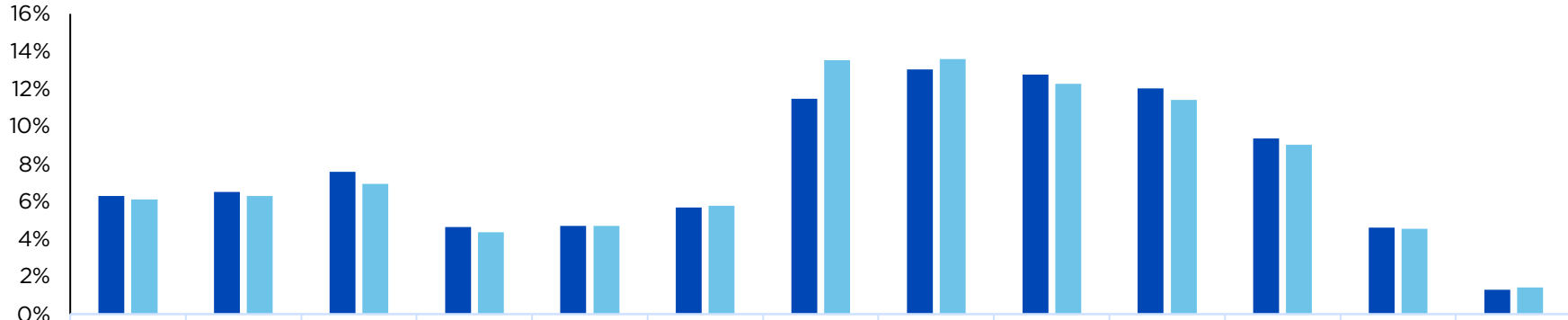


FIGURE 3. POPULATION BY AGE: METHODIST HEALTH SYSTEM



	0-4	5-9	10-14	15-17	18-20	21-24	25-34	35-44	45-54	55-64	65-74	75-84	85+
Ellis County	6.3%	6.5%	7.6%	4.7%	4.7%	5.7%	11.5%	13.1%	12.8%	12.0%	9.4%	4.6%	1.3%
Texas	6.1%	6.3%	6.9%	4.4%	4.7%	5.8%	13.5%	13.6%	12.3%	11.4%	9.0%	4.54%	1.43%

Social Determinants of Health

Social determinants are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life.[4]

Poverty

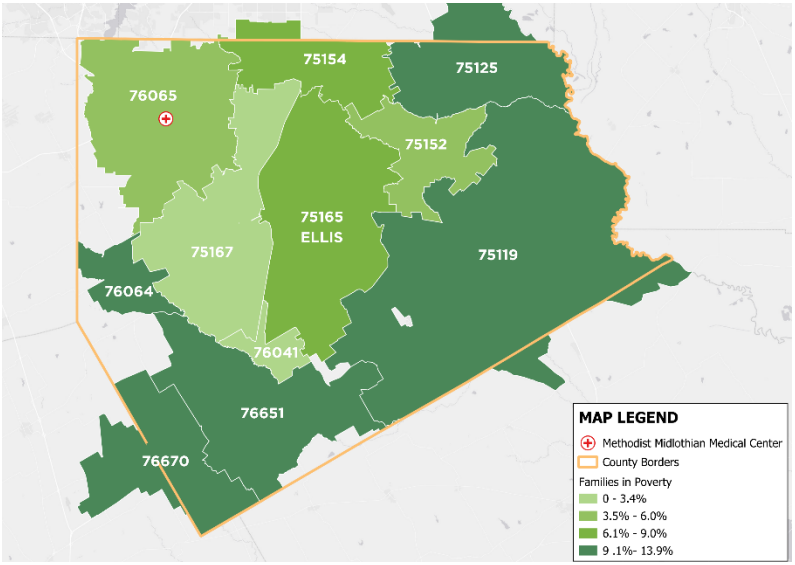
The U.S. Census Bureau sets federal poverty thresholds each year based on family size and the ages of family members. A high poverty rate can be both a cause and a result of poor economic conditions. It suggests that there aren't enough job opportunities in the area to support the local community. Poverty can lead to lower purchasing power, reduced tax revenues, and is often linked to lower-quality schools and struggling businesses.[5]

In Ellis County, 6.5% of families live below the federal poverty level, which is lower than the rate in Texas (10.7%). However, as shown in Figure 4, Poverty levels vary by ZIP code within Ellis County. The highest poverty rates are in ZIP codes 76651 (13.1% of families living below poverty), 75125 (12.2%), and 76670 (10.7%).

TABLE 1. FAMILIES LIVING BELOW POVERTY BY ZIP CODE

Highest Poverty ZIP codes	Percent of Families Living Below Poverty
76651	13.1%
75125	12.2%
76670	10.7%

FIGURE 4. FAMILIES LIVING BELOW POVERTY BY ZIP CODE



[4] Healthy People 2030, U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. Retrieved from https://odphp.health.gov/healthypeople/priority-areas/social-determinants-health

[5] U.S. Department of Health and Human Services, Healthy People 2030. https://health.gov/healthypeople/objectives-and-data/social-determinantshealth/literature-summaries/employment

Economy

6.5%
FAMILIES LIVING BELOW POVERTY LEVEL

$98,034
MEDIAN HOUSEHOLD INCOME

FIGURE 5. POPULATION 16+: UNEMPLOYED

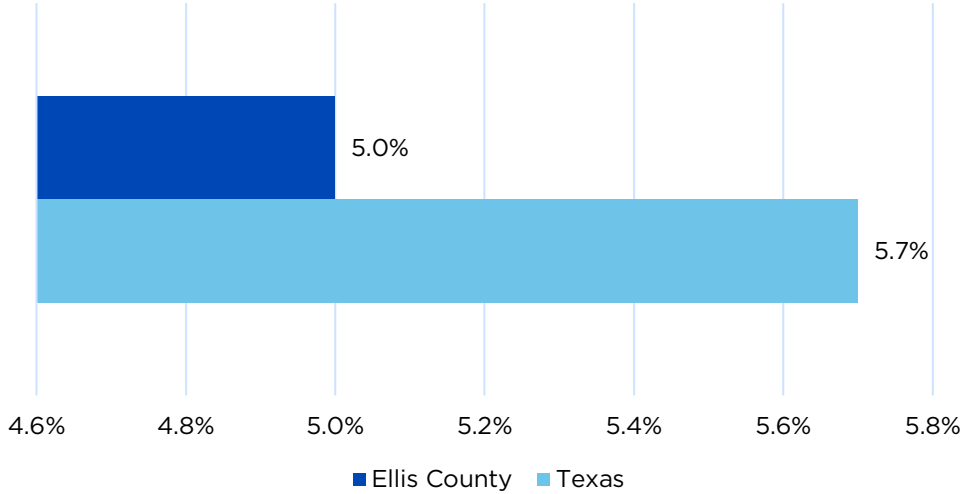
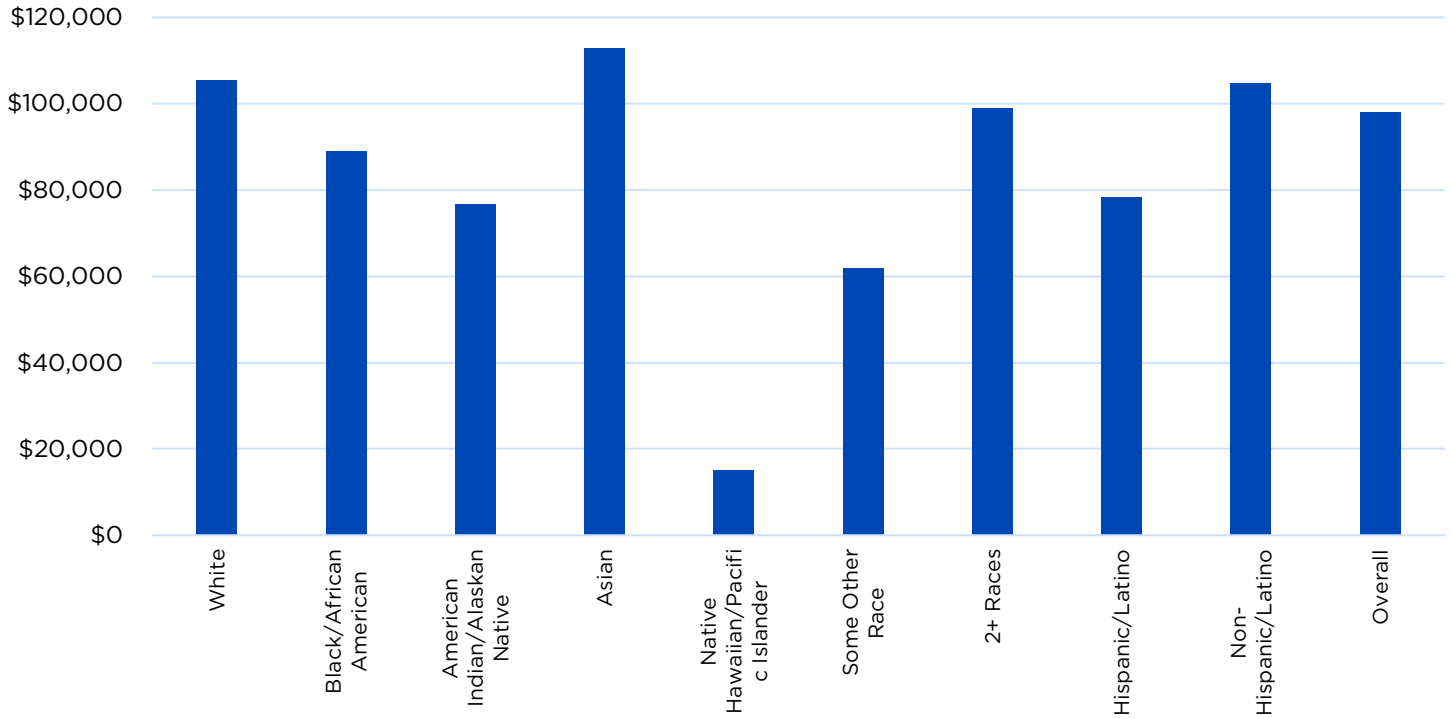


FIGURE 6. MEDIAN HOUSEHOLD INCOME BY RACE/ETHNICITY

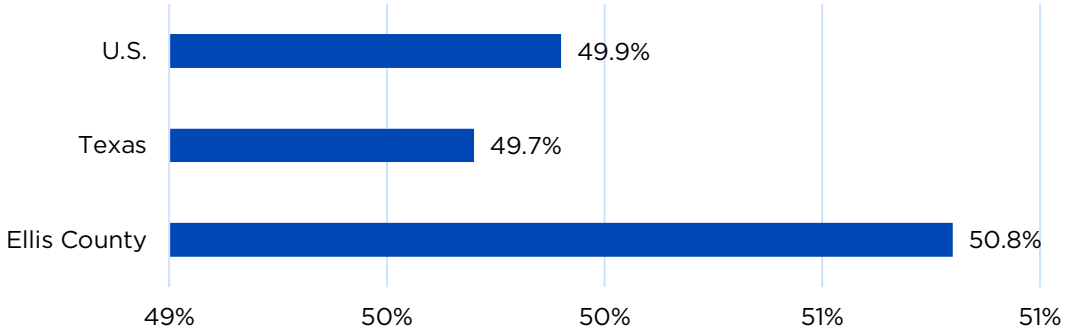


Housing

50.8%
RENTERS SPENDING 30% OR MORE OF INCOME ON RENT

13.2%
SEVERE HOUSING PROBLEMS

FIGURE 7. RENTERS SPENDING 30% OR MORE OF HOUSEHOLD INCOME ON RENT

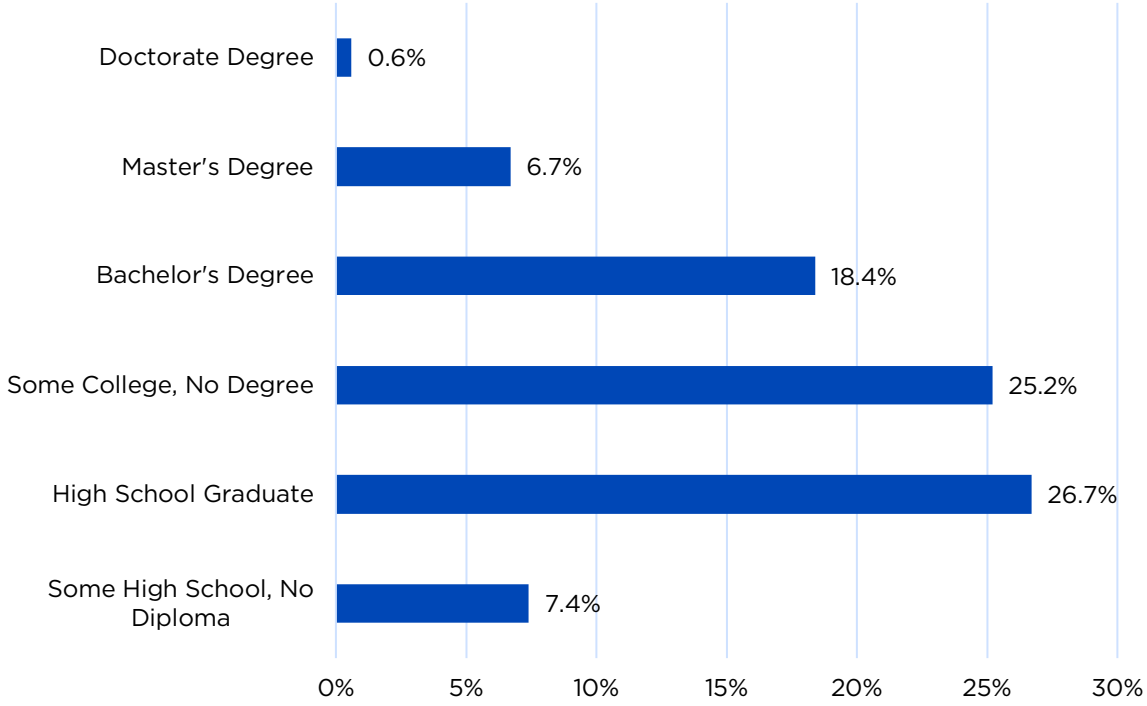


Education

87.7%
HIGH SCHOOL DEGREE OR HIGHER

26.6%
BACHELOR'S DEGREE OR HIGHER

FIGURE 8. PEOPLE 25+ BY EDUCATIONAL ATTAINMENT IN ELLIS COUNTY



Disparities and Health Equity

Identifying disparities by population groups and geographic areas helps guide priorities and strategies for improving health. Understanding these disparities also reveals the root causes of poor health in a community and helps in efforts toward health equity. Health equity means ensuring fair distribution of health resources, outcomes, and opportunities across different communities.[6] National trends show that systemic racism, poverty, and gender discrimination have led to worse health outcomes for groups such as Black/African American and Hispanic/Latino populations, Indigenous communities, those living below the federal poverty level, and LGBTQ+ individuals.[7]

Race, Ethnicity, Age and Gender Disparities: Secondary Data

In Ellis County, community health disparities were analyzed using the Index of Disparity, which measures how far each subgroup (by race, ethnicity, or gender) is from the county's overall health outcomes. For more details on the Index of Disparity, see the Appendix. The tables below highlight indicators where there are statistically significant disparities in Ellis County by race, ethnicity, or gender, based on this analysis.

TABLE 2. QUALITY OF LIFE INDICATORS WITH SIGNIFICANT RACE, ETHNICITY OR GENDER DISPARITIES

Quality of life Indicator	Group(s) Negatively Impacted
People 25+ with a Bachelor's Degree or Higher	American Indian/ Alaska Native
People 25+ with a High School Diploma or Higher	Asian, Native Hawaiian/ Pacific Islander
Persons with an Internet Subscription	65+

[6] Klein R, Huang D. Defining and measuring disparities, inequities, and inequalities in the Healthy People initiative. National Center for Health Statistics. Center for Disease Control and Prevention. https://www.cdc.gov/nchs/ppt/nchs2010/41_klein.pdf

[7] Baciu A, Negussie Y, Geller A, et al (2017). Communities in Action: Pathways to Health Equity. Washington (DC): National Academies Press (US); The State of Health Disparities in the United States. Available from: https://www.ncbi.nlm.nih.gov/books/NBK425844/

TABLE 3. HEALTH INDICATORS WITH SIGNIFICANT RACE, ETHNICITY OR GENDER DISPARITIES

Health Indicator	Group(s) Negatively Impacted
All Cancer Incidence Rate	Male
Prostate Cancer Incidence Rate	American Indian/ Alaska Native; Black/ African American
Age-Adjusted Death Rate due to Cancer	Male, Black/African American
Life Expectancy	Black African/ American, non- Hispanic
Oral Cavity and Pharynx Cancer Incidence Rate	Male
Premature Death	Black African/ American, non- Hispanic
Age-Adjusted Death Rate due to Coronary Heart Disease	Male

TABLE 4. ECONOMY INDICATORS WITH SIGNIFICANT RACE, ETHNICITY OR GENDER DISPARITIES

Economy Indicator	Group(s) Negatively Impacted
Mean Travel Time to Work	Male
Workers who Drive Alone to Work	Asian, Native Hawaiian/ Pacific Islander
Per Capita Income	American Indian/ Alaska Native; Hispanic/ Latino; Native Hawaiian/ Pacific Islander/ Two or More Races; Other
Children Living Below Poverty Level	Hispanic/ Latino, Other
Young Children Living Below Poverty Level	Other
People Living Below Poverty Level	<6; 6-11 year old; Hispanic/ Latino; Other
Families Living Below Poverty Level	Hispanic/ Latino, Other
People 65+ Living Below Poverty Level	Hispanic/ Latino, Two or More Races
Median Household Income	Hispanic/ Latino, Other

Geographic Disparities

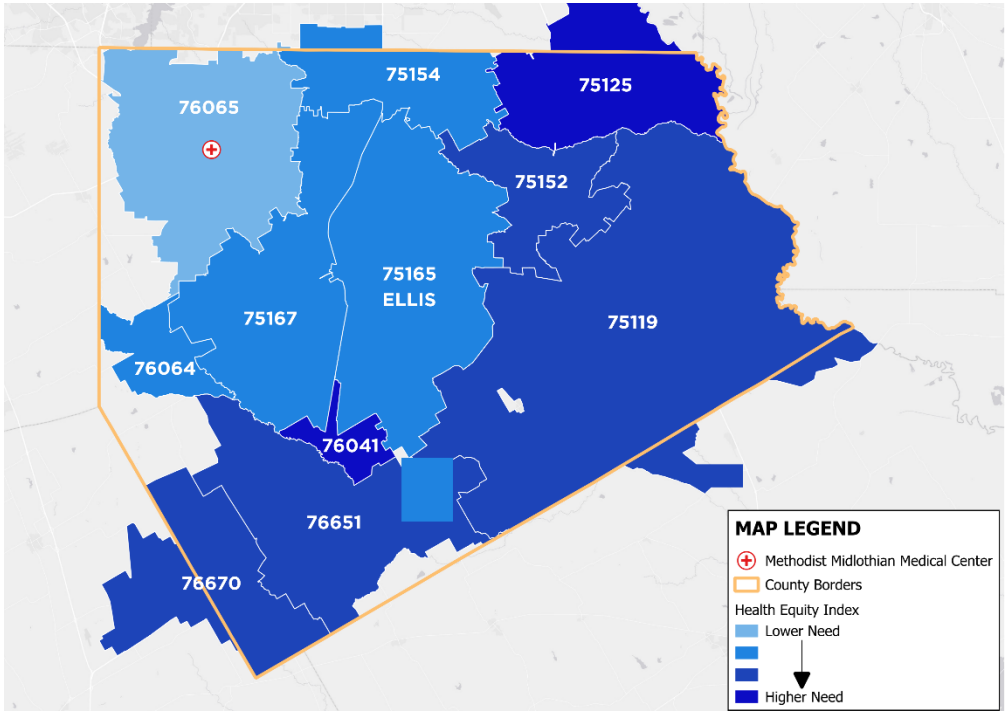
This assessment not only identified health disparities by race, ethnicity, age, and gender, but also found differences in health and social outcomes across specific ZIP codes and municipalities. Geographic disparities were identified using three key indices: the Health Equity Index (HEI), Food Insecurity Index (FII), and Mental Health Index (MHI). These indices were developed by Conduent Healthy Communities Institute to highlight areas with high socioeconomic need, food insecurity, and mental health challenges.

Health Equity Index

TABLE 5. HEALTH EQUITY INDEX BY ZIP CODE

Highest Needs ZIP codes	Index Score 0 (lowest need) – 100 (highest need)
75125	87.4
76041	84.3
76651	68.2

FIGURE 9. ELLIS COUNTY HEALTH EQUITY INDEX



Conduent's Health Equity Index (HEI) estimates areas of high socioeconomic need, which are correlated with poor health outcomes. ZIP codes are ranked based on their index value to identify relative levels of need. Amongst the population, the map displays ZIP codes that show the highest need.

What high index values mean: Communities with the highest values are estimated to have the highest socioeconomic needs correlated with:

- preventable hospitalizations
- premature death
- self-reported poor health and well-being

Food Insecurity Index

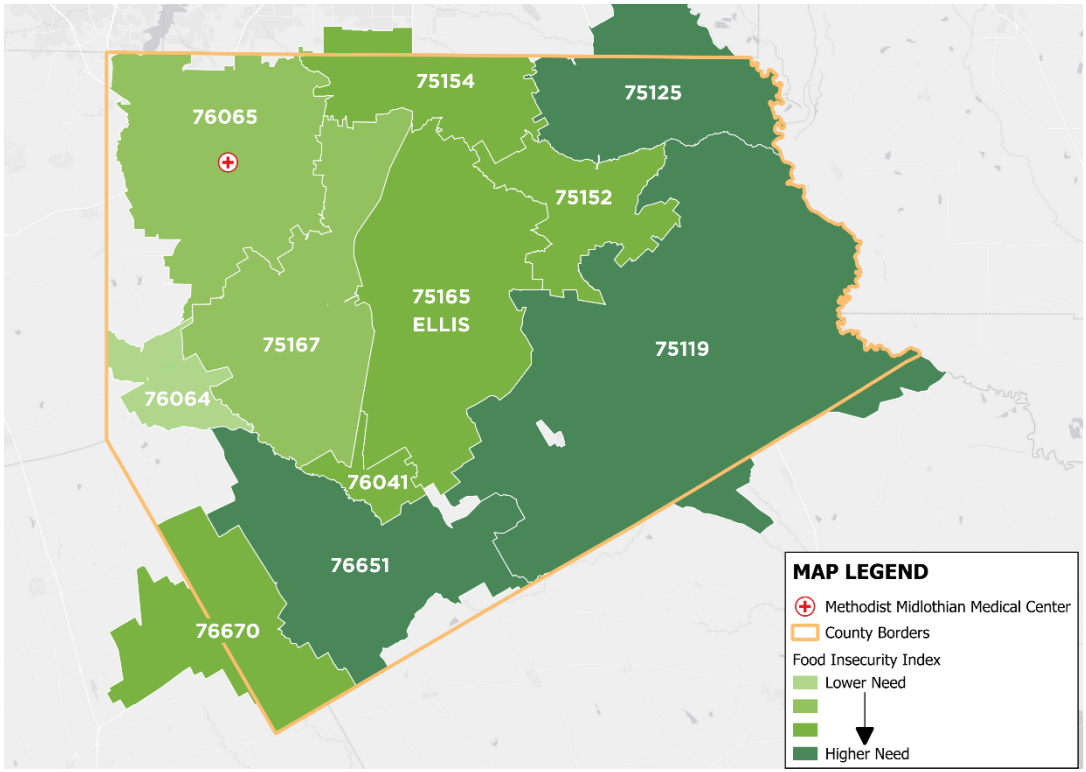
Conduent's Food Insecurity Index measures economic and household hardship correlated with food access. All ZIP codes are given an index value from 0 (low need) to 100 (high need) based on its value compared to all ZIP codes in the U.S. ZIP codes are then ranked from 1 (low need) to 5 (high need) based on their index value compared to other ZIP codes within the local area.

What high index values mean: Communities with the highest index values are estimated to have the highest food insecurity correlated with household and community measures of food-related financial stress such as Medicaid and SNAP enrollment.

TABLE 6. FOOD INSECURITY INDEX BY ZIP CODE

Highest Needs ZIP codes	Index Score 0 (lowest need) – 100 (highest need)
75125	79.2
76651	72.3
75119	63.6

FIGURE 10. ELLIS COUNTY FOOD INSECURITY INDEX



Mental Health Index

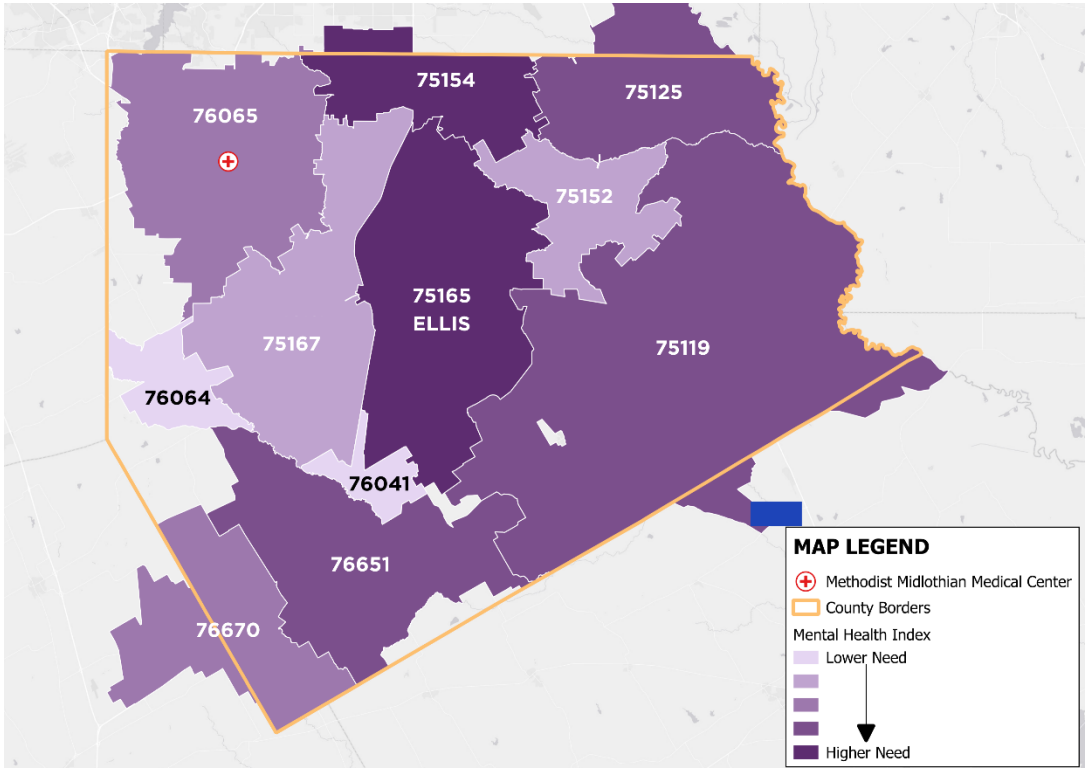
Conduent's Mental Health Index measures social, economic, and health factors that are linked to people reporting poor mental health. ZIP codes are ranked based on their index value to show areas with the worst mental health outcomes. The map in Figure 11 shows that ZIP code 75165 has the poorest mental health outcome in Ellis County, with an index value of 64.7, marked by the darkest purple on the map.

What high index values mean: Communities with the highest index values are estimated to have the highest socioeconomic and health needs correlated with self-reported poor mental health.

TABLE 7. MENTAL HEALTH INDEX BY ZIP CODE

Highest Needs ZIP codes	Index Score 0 (lowest need) – 100 (highest need)
75165	64.7
75154	63.0
76651	58.7

FIGURE 11. ELLIS COUNTY MENTAL HEALTH INDEX



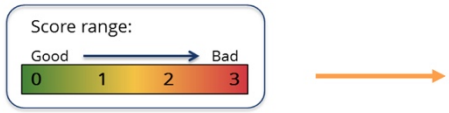
Secondary Data Findings

This CHNA used Conduent HCI's Data Scoring Tool to assess and rank secondary data. We leveraged the HCI database with over 200 indicators in both health and quality of life topic areas for the Secondary Data Analysis of the Methodist Midlothian Medical Center Service Area. Each indicator's value was compared to other communities, national targets, and past time periods.

Data Scoring Tool

HCI's Data Scoring Tool systematically summarizes multiple comparisons and ranks indicators based on the highest need. For each indicator, the Texas County's value was compared to a distribution of state and U.S. counties, state and national values, Healthy People 2030 targets, and significant trends. Each indicator was then given a score based on the available comparisons. These scores range from 0 to 3, where 0 indicates the best outcome and 3 indicates the worst outcome. Availability of each type of comparison varies by indicator and is dependent upon the data source, comparability with data collected from other communities, and changes in methodology over time. These indicators were grouped into topic areas for a higher-level ranking of community health needs.

FIGURE 12. ELLIS COUNTY SECONDARY DATA FINDINGS



Scores range from 0 (Good) to 3 (Worse).

Review "Indicators of Concern" with scores of **1.30** or higher.

Health and Quality of Life Topics	Score
Physical Activity	1.95
Health Care Access & Quality	1.87
Mental Health & Mental Disorders	1.76
Women's Health	1.75
Cancer	1.60
Oral Health	1.52
Respiratory Diseases	1.50
Other Conditions	1.41
Alcohol & Drug Use	1.39
Immunizations & Infectious Diseases	1.38
Older Adults	1.37
Sexually Transmitted Infections	1.36
Environmental Health	1.35
Children's Health	1.35
Mortality Data	1.29
Community	1.26
Heart Disease & Stroke	1.19
Wellness & Lifestyle	1.18
Education	1.13
Maternal, Fetal & Infant Health	1.06
Economy	1.03

Data Scoring Results

Figure 12 shows the results for Ellis County's health and quality of life topics. Topics with a score of **1.30** or higher were flagged as significant health needs. In total, 14 topics scored at or above this threshold. Topic areas with fewer than three indicators were considered data gaps. For a full list of health and quality of life topics and a breakdown of national and state indicators included in the secondary data analysis, refer to the Appendix, which also details the data scoring method used.

Community Input Findings

Community input included Listening Sessions and Key Informant Interviews with a diverse group of community partners representing organizations working in the areas of emergency management, food insecurity, housing/homelessness, economic development, public health, etc.

Listening Sessions

Methodist Health System created a list of community partners working within Collin, Dallas, Ellis, and Tarrant County. Prior to conducting Listening Sessions, all identified community partners were asked to take a short online survey to better understand the populations they serve and their related health needs. Respondents were invited to attend the listening session for the county(s) their organization serves. Survey responses were presented during the 90-minute Listening Sessions that were held for each county, and a discussion followed that centered around the priorities, strengths, inequities, and resources in the communities served by respective organizations.

Key Informant Interviews

Key Informant Interviews were conducted with community leaders and partners to learn about current health needs or issues faced by people living in the county/counties they serve, leading factors that contribute to these health issues, groups or populations disparately affected by identified health issues, barriers or challenges preventing people from accessing healthcare or social services, and community strengths and resources. Findings across both the listening sessions and key informant interviews revealed six topics including:

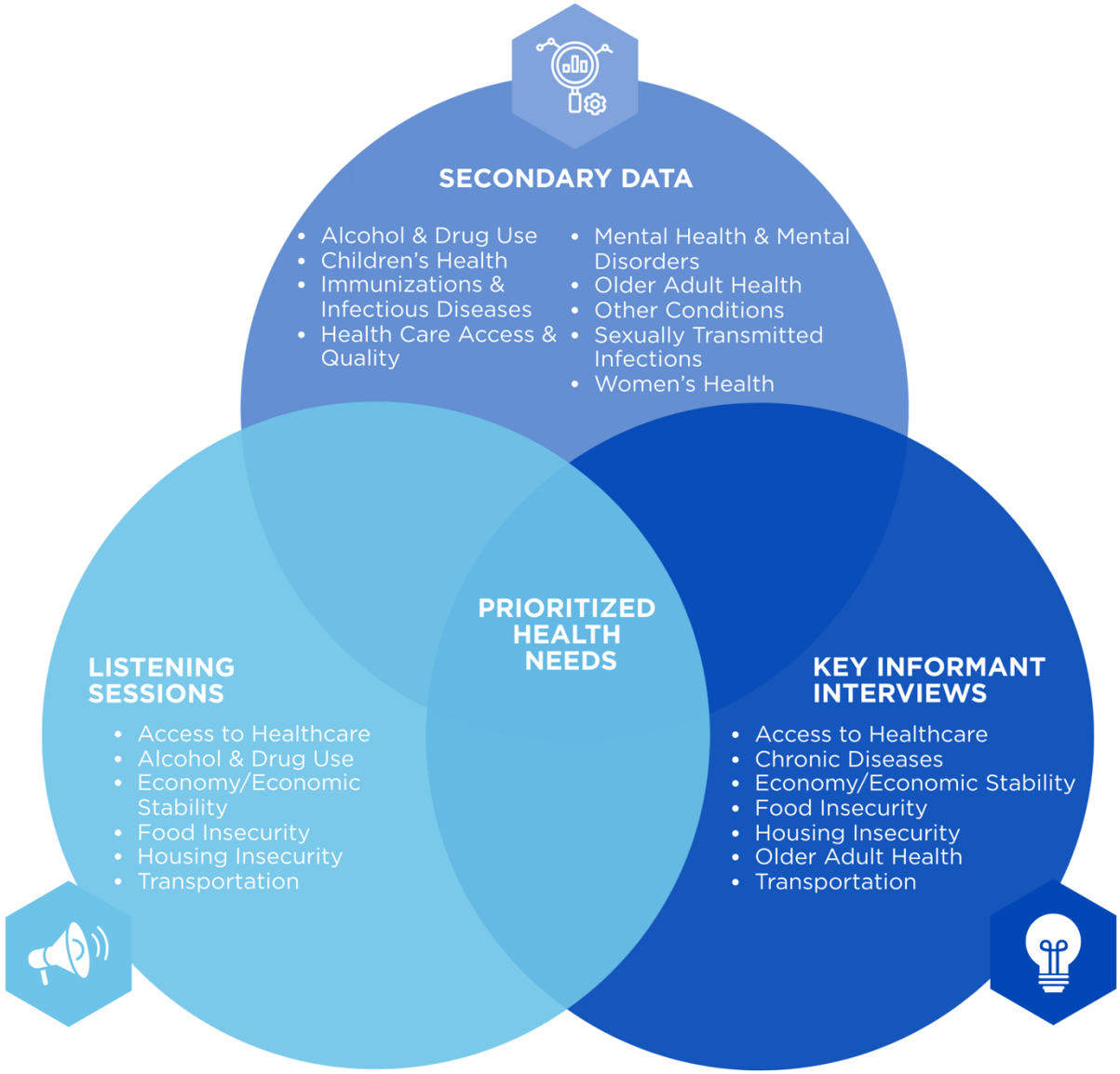
FIGURE 13. COMMUNITY INPUT FINDINGS

Data Synthesis and Significant Needs

The Data Synthesis section of the CHNA report combines various sources of both secondary data (quantitative data) and community input findings (qualitative data) to pinpoint and emphasize critical health challenges facing the community. This process involves a systematic examination of health indicators derived from secondary data sources, alongside insights obtained from community listening sessions and key informant interviews. By prioritizing statistical analysis with community insights, the data synthesis offers a thorough understanding of the health status within the community, effectively identifying the most urgent health needs.

Data synthesis visually represents health topics based on their scores from secondary data sources, with scores of 1.30 or higher, and top themes from listening sessions and key informant interviews. This integrated approach ensures that the assessment is firmly grounded in the community's reality, facilitating targeted and effective health improvement strategies.

FIGURE 14. DATA SYNTHESIS & SIGNIFICANT NEEDS



Prioritization

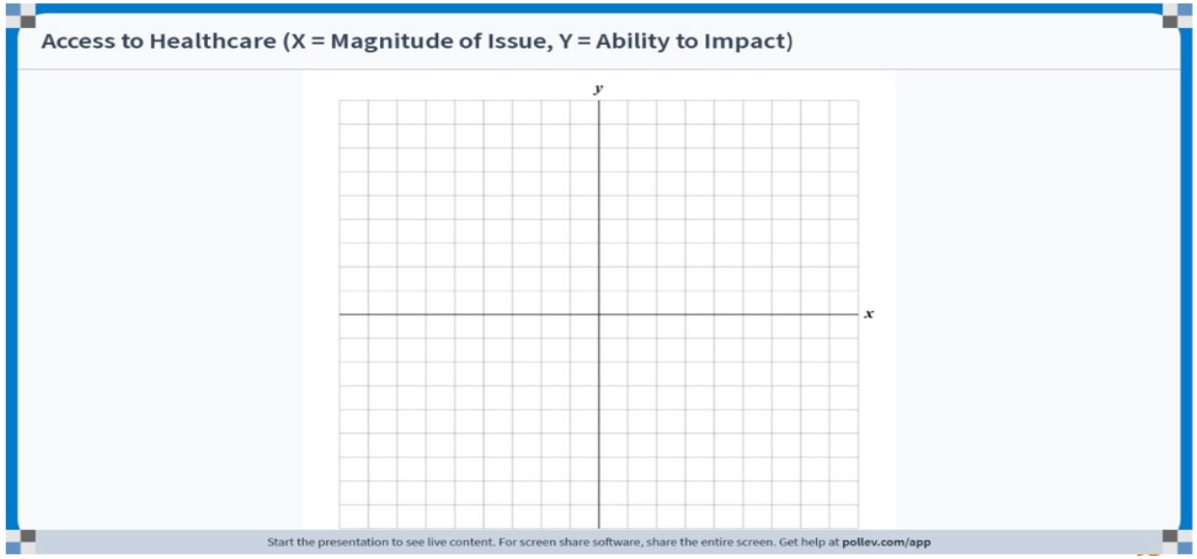
To better target activities to address the most pressing health needs in the community, Methodist Midlothian Medical Center convened members from their hospital leadership to participate in a presentation of data on significant health needs facilitated by HCI. Following the data presentation, participants were given access to an online link to complete Step 1 and Step 2 of the prioritization process, as shown in the figure below. The Appendix includes the detailed criteria and tools used for prioritization.

FIGURE 15. PRIORITIZATION PROCESS OVERVIEW

Prioritization Step 1

In Step 1, each significant health need was reviewed independently and participants determined which quadrant it belongs in based on a set of criteria. Health needs that fell in the lower left quadrant "Low ability to impact/Low magnitude of issue" were eliminated as shown in the figure to the right.

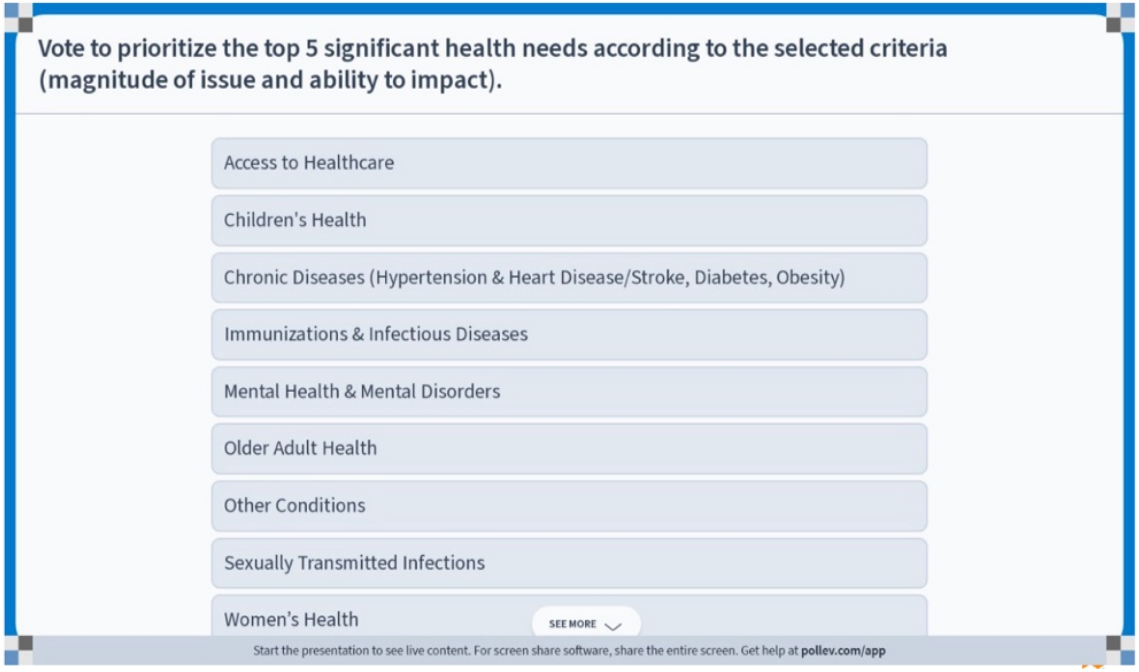
FIGURE 16. STEP 1 OF PRIORITIZATION PROCESS



Prioritization Step 2

In Step 2, participants then ranked the top five significant health needs based on the same set of criteria as shown in the figure to the right.

FIGURE 17. STEP 2 OF PRIORITIZATION PROCESS



Prioritized Health Needs

Through a comprehensive data analysis and community input process, Methodist Health System identified the following health needs as the most pressing in Methodist Midlothian Medical Center's service area:

Access to Healthcare

Chronic Disease

Mental Health & Mental Disorders

Older Adult Health

Women's Health and Children's Health

Access to Healthcare

Overview

Health care access and quality includes key issues, such as access to healthcare, access to preventative care, health insurance coverage, and health literacy/education.[8] Access to healthcare is a critical component to the health and well-being of community members in Ellis County. Access to healthcare by itself is a predictor of health outcomes and is influenced by a variety of social determinants of health (SDOH) including[8]:

- Limited availability/access to providers
- Systemic biases and discrimination
- Lower health literacy levels

Secondary Data

Health Care Access & Quality ranked as the 2nd highest scoring health topic in Ellis County in the secondary data scoring results. The follow page shows warning indicators within Ellis County including comparisons to Texas and the U.S. Some of the most concerning indicators regard routine care, with only 72.6% of adults having visited a doctor for a routine checkup. Moreover, the primary care provider rate is significantly lower in Ellis County (38.0 providers / 100,000 population) as compared to Texas (60.3 providers / 100,000 population) or the U.S. (74.9 providers / 100,000 population).

Secondary data also indicate that Ellis County residents may be less likely to engage in certain forms of preventative care contributing to burdens on hospital systems. Medicare recipients of Ellis County have a higher rate of preventable hospital stays than the statewide or nationwide rates (3,380 discharges / 100,000 Medicare enrollees vs. 2,980 and 2,677, respectively).

[8] Centers for Disease Control and Prevention (March 27, 2023). CDC – Health Care Access and Quality. Retrieved from https://www.cdc.gov/prepyourhealth/discussionguides/healthcare.htm

ACCESS TO HEALTHCARE

3,380
Ellis County:
Rate of preventable hospital stays per 100,000 Medicare enrollees [*1]

2,980
Texas:
Rate of preventable hospital stays per 100,000 Medicare enrollees [*1]

2,677
United States:
Rate of preventable hospital stays per 100,000 Medicare enrollees [*1]

72.6%
Percentage of adults that report having visited a doctor for a routine checkup within the past year [*2]

38.0
Ellis County:
Primary care providers per 100,000 population [*3]

60.3
Texas:
Primary care providers per 100,000 population [*3]

74.9
United States:
Primary care providers per 100,000 population [*3]

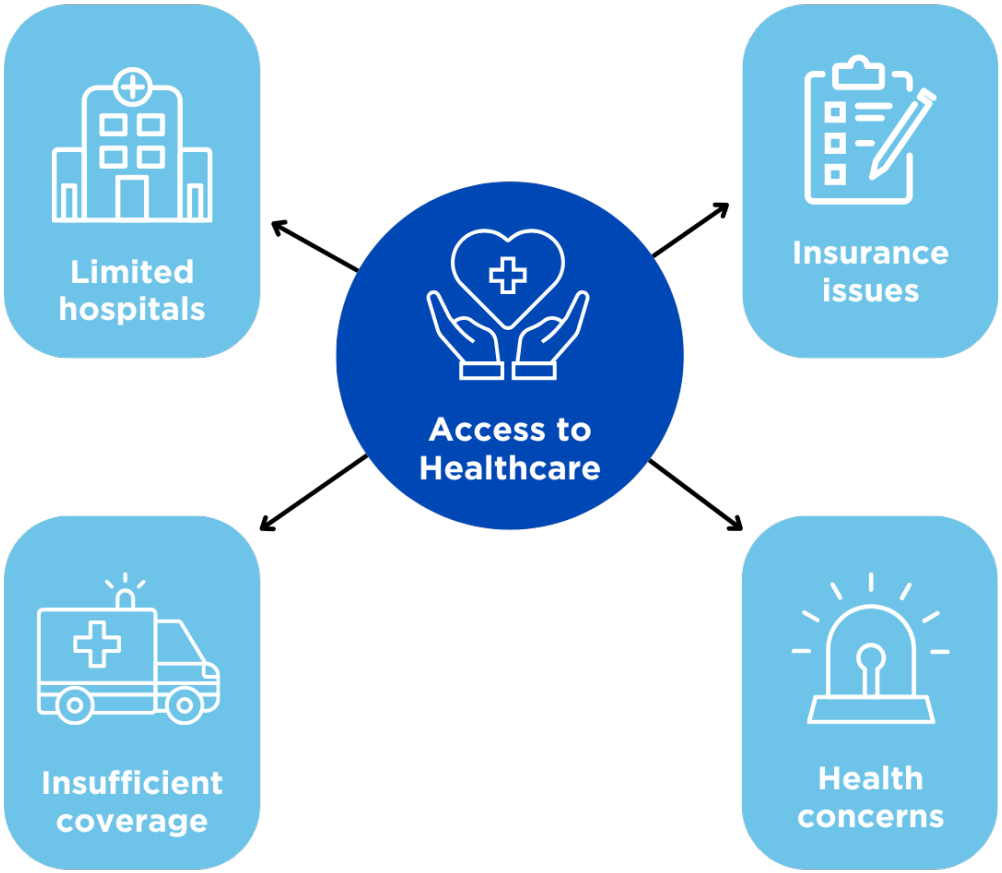
18.3%
Percentage of adults ages 18-64 that do not have any kind of health insurance coverage [*2]

All data points shown are for Ellis County unless otherwise noted.

1 - Centers for Medicare & Medicaid Services, 2022
2 - CDC - PLACES, 2021
3 - County Health Rankings, 2021

Community Input

Access to Healthcare was a top concern in both key informant interviews and listening sessions. This includes limited hospitals and lack of public health facilities; insufficient coverage which forces first responders to transport patients outside of the county; health concerns like trauma, stroke, cardiac problems and mental health; and insurance issues such as limited insurance coverage. The factors contributing to health needs in the community include cost of living and escalating costs of housing which often necessitates that community members choose between healthcare and meeting other basic needs.



> Many of the communities in Ellis County are rural. The lack of access for them, lack of resources in their area and transportation to get anywhere. It's a real issue for people in our rural communities to have access to healthcare of any type. And then even though access may be 15 or 20 minutes up the road, the ability for them to get there is nonexistent.
>
> - Community member -

Chronic Disease

Overview

Like Access to Healthcare, Chronic Diseases are also affected by many different SDOH. SDOH impact health, well-being, and quality of life and contribute to wide health disparities and inequities.[4] Examples of SDOH impacting chronic diseases include[4]:

- Exercise opportunities: Including safe sidewalks, parks, green spaces to promote physical activity.
- Air quality: Polluted air leads to increased asthma rates and even some cancers.

Secondary Data

Chronic Diseases is a health topic that includes hypertension & heart disease/stroke, diabetes, and obesity. The following page shows warning indicators within Ellis County including comparisons to Texas and the U.S. Notably, hyperlipidemia and hypertension in Ellis County are more common than in Texas or the U.S., specifically among Medicare recipients. For example, 66.0% of all Ellis County Medicare recipients have been treated for hyperlipidemia as compared to 65.0% of both Texas Medicare recipients and U.S. Medicare recipients.

Secondary data also indicate that Ellis County residents may be less likely to engage in certain forms of prevention related to heart disease, diabetes and obesity as a result of a lack of exercise opportunity. For example, only 53.7% of Ellis County individuals live reasonably close to a park or recreational facility which is in stark contrast to both the state and county percentage, 81.8% and 84.1%, respectively.

CHRONIC DISEASE

26.0%
Percentage of Medicare beneficiaries treated for diabetes *1

66.0%
Percentage of Medicare beneficiaries treated for hyperlipidemia *1

67.0%
Percentage of Medicare beneficiaries treated for hypertension *1

75.0%
Percentage of adults aged 18+ with high blood pressure who report taking medications for high blood pressure *2

54.0%
Ellis County:
Percentage of individuals who live reasonably close to a park or recreational facility *3

82.0%
Texas:
Percentage of individuals who live reasonably close to a park or recreational facility *3

84.0%
United States:
Percentage of individuals who live reasonably close to a park or recreational facility *3

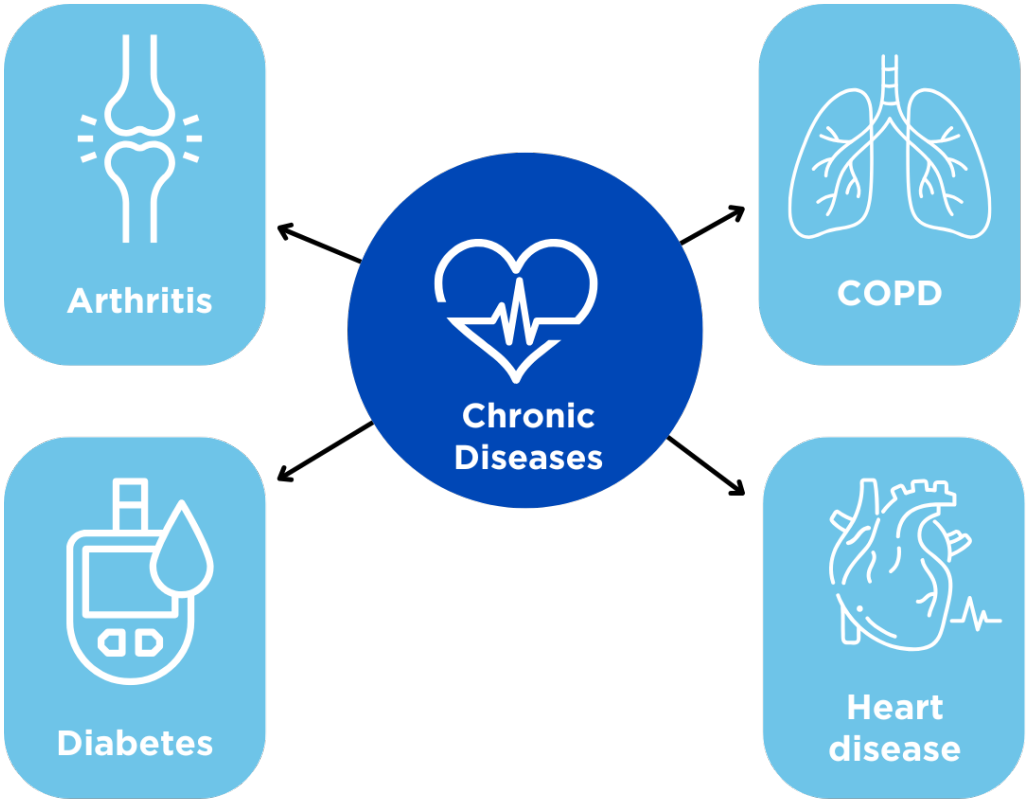
31.0%
Percentage of adults aged 18 and older are obese according to the Body Mass Index (BMI) *4

All data points shown are for Ellis County unless otherwise noted.

1 - Centers for Medicare & Medicaid Services, 2022
2 - CDC - PLACES, 2021
3 - County Health Rankings, 2024
4 - Centers for Disease Control and Prevention, 2021

Community Input

Chronic Disease was a top concern in both key informant interviews and listening sessions. This includes arthritis, diabetes, heart disease and Chronic Obstructive Pulmonary Disease (COPD). Community members highlighted that the root causes of the health issues discussed include limited access to healthcare and systemic policy challenges at the state level. Individuals without insurance or a connection to a primary care provider (PCP) often go without necessary medications to manage chronic conditions, and many may have undiagnosed illnesses.



> There's lots of contributing factors as it relates to stroke. Hypertension, undiagnosed hypertension, people not taking medication for hypertension, and blood clots. So, a lot of times, they're not aware that they have a clot until they actually have a stroke.
>
> - Community member -

Mental Health & Mental Disorders

Overview

Mental Health is among the most pervasive health issues in Ellis County. It is important to recognize the intersection between mental health and the social and economic factors impacting people's ability to live fulfilling lives. These structural conditions people experience across their lives affect individual mental health outcomes and contribute to mental health disparities within and between populations.[9] These factors or structural conditions include:

- Income, Employment, Socioeconomic status
- Food access
- Housing
- Discrimination
- Childhood experiences
- Ability to access acceptable and affordable healthcare

Secondary Data

Mental Health & Mental Disorders ranked as the 3rd highest scoring health topic in Ellis County in the secondary data scoring results. The follow page shows warning indicators within Ellis County including comparisons to Texas and the U.S.

The mental health provider rate is significantly lower in Ellis County (94.3 providers / 100,000 population) as compared to Texas (156.7 providers / 100,000 population) or the U.S. (313.9 providers / 100,000 population). This lack of provider availability contributes to the minimal access to care people experiencing mental health illness have.

[9] Kirkbride JB, Anglin DM, Colman I, et al. The social determinants of mental health and disorder: evidence, prevention and recommendations. World Psychiatry. 2024;23(1):58-90. doi:10.1002/wps.21160

MENTAL HEALTH & MENTAL DISORDERS

19.0%
Percentage of Medicare beneficiaries treated for depression *1

7.0%
Percentage of Medicare beneficiaries treated for Alzheimer's disease or dementia *1

5.1 **Average number of days that adults reported their mental health was not good in the past 30 days** *2

94.3
Ellis County:
Mental Health providers per 100,000 population *3

156.7
Texas:
Mental Health providers per 100,000 population *3

313.9
United States:
Mental Health providers per 100,000 population *3

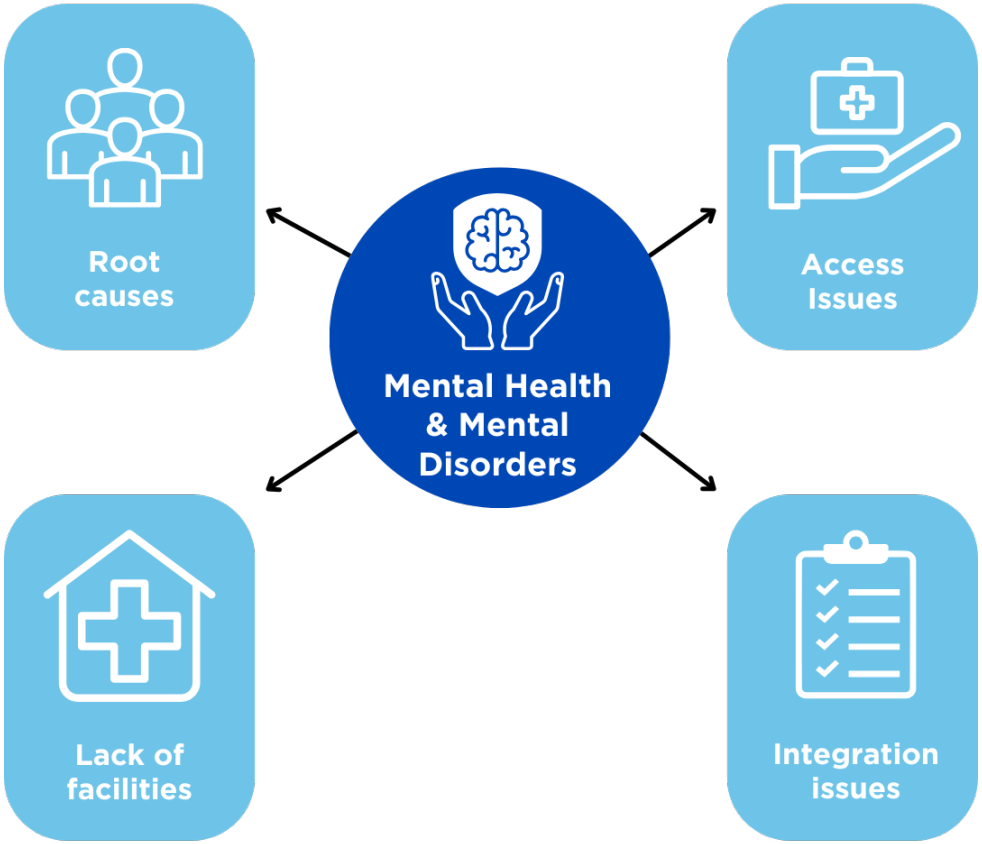
22.0%
Percentage of adults ever diagnosed with depression *4

All data points shown are for Ellis County unless otherwise noted.

1 - Centers for Medicare & Medicaid Services, 2022
2 - County Health Rankings, 2021
3 - County Health Rankings, 2023
4 - CDC - PLACES, 2021

Community Input

Mental Health was also top concern in both key informant interviews and listening sessions. This includes root causes, lack of facilities, integration issues (i.e. integrating mental healthcare into primary care), and access issues. Moreover, the lack of behavioral health facilities/resources leads to increased mental health issues that go undiagnosed and untreated. Community members highlighted the need for better access to treatment and a desire to address the upstream factors or social determinants of health that contribute to the increasing mental health issues people are experiencing.



> Unfortunately, I think there's still a stigma. We've come a long way, but there still is a stigma—is there something wrong with me, is it okay to seek help? It's important to try to change the mindset that we all can benefit from services.
>
> - Community member -

Older Adult Health

Overview

Older Adult Health is another top health concern in Ellis County. There are unique challenges that impact older adults and aging populations including higher risk for chronic health problems. Managing chronic diseases and preventing falls are just some of these challenges this population faces.

Secondary Data

Older Adult Health is a health topic that includes a myriad of indicators largely affecting Medicare beneficiaries. The follow page shows warning indicators within Ellis County including comparisons to Texas and the U.S. In Ellis County, 19.0% of Medicare beneficiaries were treated for depression, which is slightly higher than both Texas and the U.S. (17.0% and 16.0%, respectively). Moreover, 20.0% of Medicare beneficiaries were treated for chronic kidney disease, 7.0% for asthma, and 38.0% for rheumatoid arthritis or osteoarthritis. The prostate cancer incidence rate in Ellis County (100.5 cases / 100,000 males) is lower than both Texas (103.4 cases / 100,000 males) and the U.S. (110.5 cases / 100,000 males).

OLDER ADULT HEALTH

19.0%
Ellis County:
Percentage of Medicare beneficiaries treated for depression *1

17.0%
Texas:
Percentage of Medicare beneficiaries treated for depression *1

16.0%
United States:
Percentage of Medicare beneficiaries treated for depression *1

7.0%
Percentage of Medicare beneficiaries treated for Alzheimer's disease or dementia *1

20.0%
Percentage of Medicare beneficiaries treated for chronic kidney disease *1

100.5
Age-adjusted incidence rate for prostate cancer per 100,000 males *2

38.0%
Percentage of Medicare beneficiaries treated for rheumatoid arthritis or osteoarthritis *1

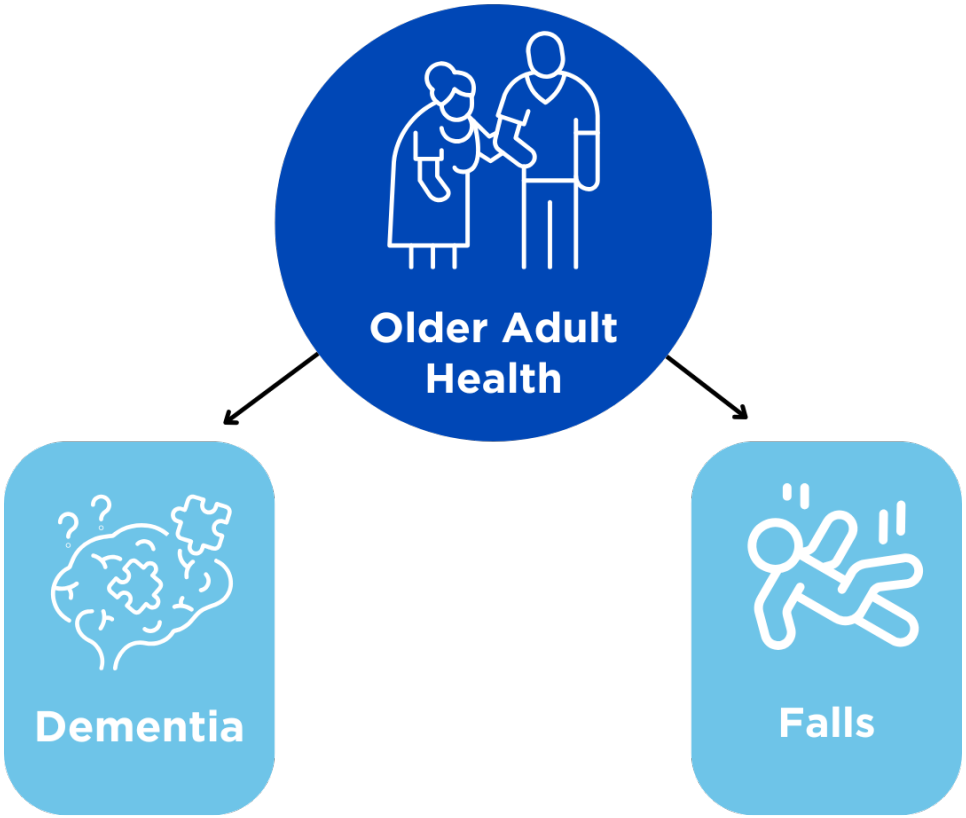
7.0%
Percentage of Medicare beneficiaries treated for asthma *1

All data points shown are for Ellis County unless otherwise noted.

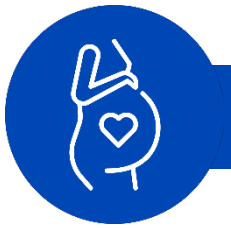
1 - Centers for Medicare & Medicaid Services, 2022
2 - National Cancer Institute, 2016-2020

Community Input

Older Adult Health was a top concern in both key informant interviews and listening sessions. Concerns largely centered around dementia and falls in the older adult population. Seniors and older adults were frequently cited as a disproportionately affected population given their vulnerability and higher risk for chronic health conditions.



> We focus a lot on our elderly population just because right now, we're in the time of social media and a lot of those people don't understand or don't have access to social media.
>
> - Community member -



Women's Health and Children's Health

Overview

Women's Health and Children's Health are additional health concerns in Ellis County. Across the community, these health topics remain a top issue that are affected by a variety of social and economic factors including access to both preventative and timely care, food insecurity, and lack of childcare centers.

Secondary Data

Women's Health and Children's Health ranked as the 4th and 14th highest scoring health topic in Ellis County in the secondary data scoring results, respectively. The following page shows warning indicators within Ellis County including comparisons to Texas and the U.S. Some of the most concerning warning indicators for Ellis County include breast cancer (130.5 cases / 100,000 females) and cervical cancer (10.5 cases / 100,000 females) incidence rates. Both incidence rates are higher than the statewide and nationwide values. The age-adjusted death rate due to cervical cancer in Ellis County, 4.0 deaths / 100,000 females, is also of concern as it is almost double the nationwide rate of 2.3 deaths / 100,000 females.

In Ellis County, 47.0% of food insecure children are likely not income-eligible for federal nutrition assistance as compared to 35.0% statewide. It is well documented that food insecurity has a significantly negative impact on child development, demonstrating just how concerning this warning indicator is.[10]

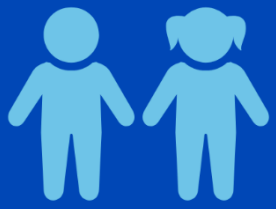
[10] Gallegos D, Eivers A, Sondergeld P, Pattinson C. Food Insecurity and Child Development: A State-of-the-Art Review. Int J Environ Res Public Health. 2021;18(17):8990. Published 2021 Aug 26. doi:10.3390/ijerph18178990

WOMEN'S HEALTH AND CHILDREN'S HEALTH

130.5
Age-adjusted incidence rate for breast cancer per 100,000 females [*1]

10.5
Age-adjusted incidence rate for cervical cancer per 100,000 females [*1]

47.0%
Ellis County:
Percentage of food insecure children likely not income-eligible for Federal Nutrition Assistance [*2]



35.0%
Texas:
Percentage of food insecure children likely not income-eligible for Federal Nutrition Assistance [*2]

4.0
Ellis County:
Age-adjusted death rate due to cervical cancer per 100,000 females [*3]

2.9
Texas:
Age-adjusted death rate due to cervical cancer per 100,000 females [*3]

2.3
United States:
Age-adjusted death rate due to cervical cancer per 100,000 females [*3]

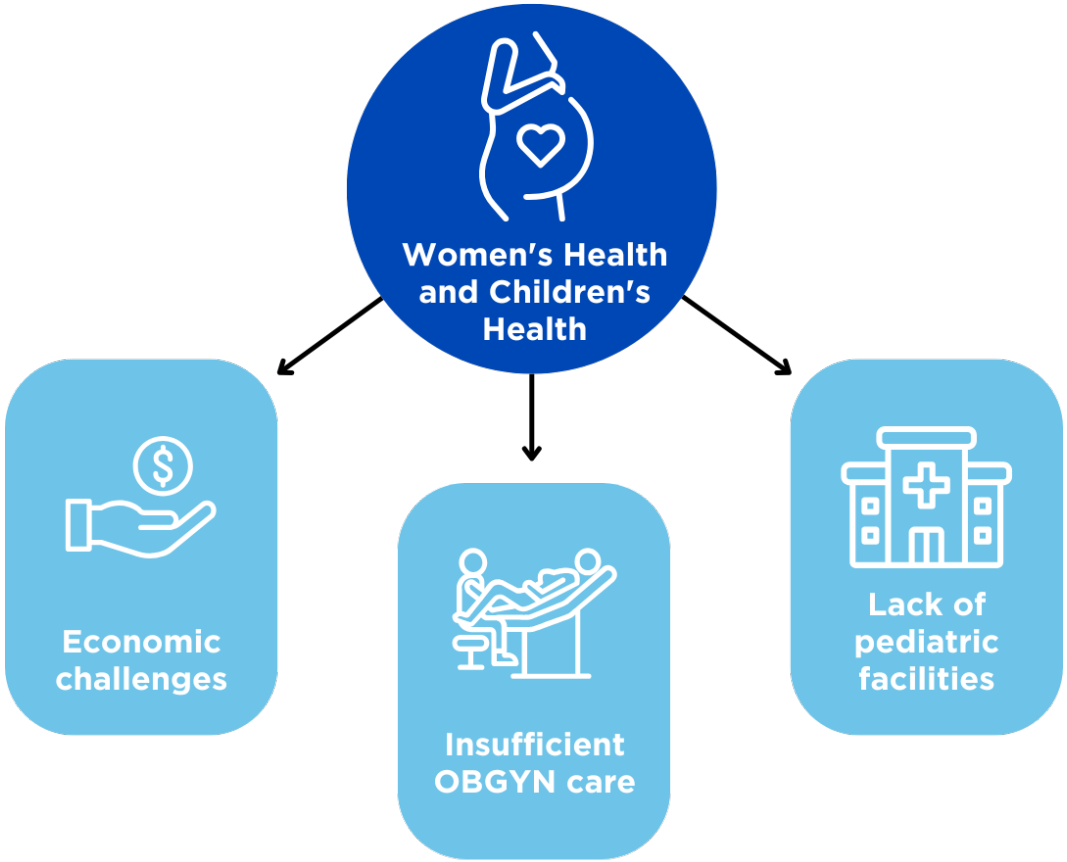
5.1
Child care centers in the region per 1,000 population [*4]

All data points shown are for Ellis County unless otherwise noted.

1 - National Cancer Institute, 2016-2020
2 - Feeding America, 2022
3 - National Cancer Institute, 2014-2018
4 - County Health Rankings, 2022

Community Input

While Women's Health and Children's Health were not top concerns in key informant interviews and listening sessions, they were frequently discussed. Concerns surrounded economic challenges prohibiting families from properly taking care of their children and meeting their needs, the need to expand OBGYN healthcare capacity to meet a growing community, and the lack of pediatric facilities in Ellis County.



> Another challenge that we also have would be pediatric care. We don't have any pediatric facilities located within Ellis County, so if we have a child that's sick or injured, they have to go to Cook's in Fort Worth.
>
> - Community member -

Next Steps

The 2026-2028 Methodist Midlothian Medical Center Community Health Needs Assessment utilized both a comprehensive set of secondary data indicators to measure the health and quality of life needs for Ellis County, and community input from knowledgeable and diverse individuals representing the broad interests of the community. Methodist Midlothian Medical Center was able to identify and prioritize five community health needs for their facility. It is our hope that this assessment will be a launchpad for continued community conversations about health equity and health improvement.

Looking ahead, Methodist Midlothian Medical Center will develop a comprehensive Implementation Strategy in compliance with the Internal Revenue Service (IRS) regulations for non-profit hospitals. This plan will include specific activities, anticipated impact, facility resources and strategic partnerships with local organizations and stakeholders where appropriate to address the identified needs. The Implementation Strategy will prioritize practical initiatives aimed at enhancing preventive care efforts, and improving health literacy throughout the community. The progress of these initiatives will be monitored to ensure ongoing alignment with the hospital's mission to improve and save lives through compassionate quality healthcare.