

JPS HEALTH NETWORK

REPORT TO THE CITIZENS BLUE RIBBON COMMITTEE



MAY 23, 2017

PERCIVAL
— HEALTH ADVISORS —

CUMMING
Building Value Through Expertise

INTRODUCTION TO AMBULATORY NETWORK PLANNING

- As part of our process, the Cumming/Percival Health Advisors team is developing recommendations and phasing for ambulatory clinic development and deployment in Tarrant County
- Today's meeting is the second one with a component on ambulatory network planning. The focus today is on preliminary recommendations to develop JPS Health Network community-based ambulatory care center (ACC) sites
 - Incorporate, update, and discuss overall HMA primary care target recommendations
 - Evaluation criteria for developing and prioritizing new ACCs with a focus on primary care access
 - Phased planning approach

AMBULATORY CARE CENTER MODEL

- Target 6-10 primary care providers
 - Mix of MD and Advanced Practitioners (NP/PA)
 - New sites may open with 4-6 PCPs and then grow to target
- Pediatrics, Women's Services, and embedded Behavioral Health where needed
- Diagnostic imaging (x-ray, may include ultrasound, mammography, and/or bone densitometry), pharmacy, and lab draw
- Dedicated urgent care sites are not planned (near campus could be considered to alleviate capacity issues), but integrate in the ACC to enhance access
 - Utilize hybrid model: extended hours on nights and weekends and use of advanced practitioners. JPS would benefit from increased marketing, awareness of these services, and visibility
- Other select community health services as needed (e.g., dental, enrollment, etc.)
- Facility size range 20,000-35,000 square feet (note the largest site is the relatively newer Southeast Tarrant site at 56,000; only sites with additional specialists will exceed the above range)

- The focus of the ambulatory care center planning in this report is on medical services
 - Behavioral Health services were covered more extensively in the HMA report (as one of the 3 pillars of care: medical services, behavioral health services, and community support services)
 - o HMA recommends integration of behavioral health supports into community-based, ambulatory primary care and school-based settings while also developing substance abuse services, expanding care management programming and infrastructure, and continuing to invest in diversion services.
- Behavioral health should be embedded in medical home sites as needed
 - Behavioral health embedded in primary care sites utilizing a collaborative care model for appropriate outpatients with separate access, treatment areas, and dedicated care managers
 - JPS currently offers these services in some medical homes (e.g., Stop Six, Cypress, Southeast, Northeast, and Viola Pitts)
- JPS has some dedicated ambulatory sites for Behavioral Health (e.g., Central Arlington)
 - Outpatient behavioral health will also benefit from the full range of comprehensive services and the Central Assessment Center planned for the new Psychiatric Hospital
- Outpatient Behavioral Health can also be expanded with telehealth services

PRIMARY CARE TARGETS

- JPS needs to balance the need for additional primary care, driven by the need to manage the health of their target population most effectively, with reasonable growth rates and responsible use of limited capital resources
- What is the “right” target for PCP Growth
 - Generally, the approach was to move towards balanced capacity with beds (similar share of population, currently 34% for JPS) and a realistic growth plan
 - We assumed conservatively 4 new sites in 10 years with 8-10 FTE primary care providers per site

	2017	2022	2027	2032	2037
Total Needed FTEs	378	423	469	521	573
Number of JPS FTEs to continue same “coverage”	98 (current)	110	122	135	149
Percent of demand met	26%	26%	26%	26%	26%
Number of JPS FTEs needed to reach 50% in 20 years	98 (current)	135	178	229	287
Percent of demand met	26%	32%	38%	44%	50%

Source for Table: **HEALTH MANAGEMENT ASSOCIATES**

30% target would be 140 FTE in 2027, which is reasonable and could be achieved with the 4 sites and a few physicians added to existing sites

If practice/site capacity or available resources or physician recruitment opportunities change the situation, the timeline could be pushed more aggressively

SUB-MARKET CHARACTERISTICS AND PCP NEED

Town	2016 Pop	5 Yr Growth	% PL	ED Share	JPS AC	JPS SBC	PCP Dist	PCP Need
Central	137,001	5,913	63%	23.6%	2	3	10.0	1.1
Grapevine/CV	104,603	7,667	13%	3.4%	0	1	2.9	2.9
HEB	259,576	16,458	32%	8.0%	1	3	11.6	5.1
North Arlington	160,974	6,052	53%	8.0%	1	2	10.3	(5.6)
North Central	303,290	35,449	20%	8.5%	1	0	10.3	5.9
North West	156,816	14,928	30%	11.6%	1	2	6.7	5.0
South Arlington	313,933	25,835	28%	7.5%	0	2	13.0	13.0
South Central	129,767	10,870	34%	10.1%	0	2	6.0	6.0
South East	207,582	9,608	63%	35.9%	6	3	15.1	(12.3)
South West	162,107	13,761	32%	12.7%	0	1	7.3	7.3
West	99,949	5,521	35%	22.3%	1	1	4.8	(5.0)



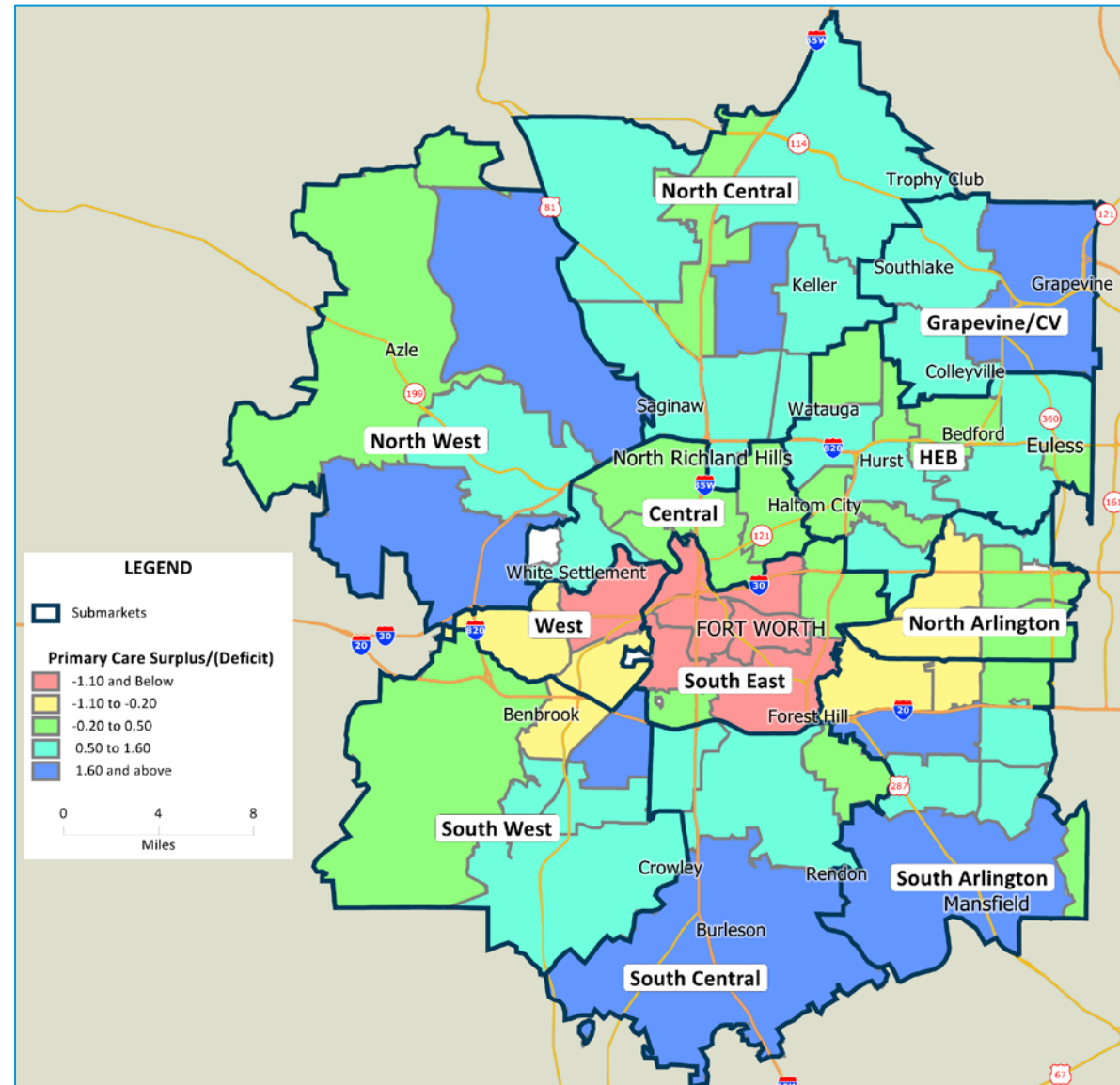
“PCP Dist.” is baseline distribution by demand for the 98 projected FTEs. “PCP Need” subtracts the volume and providers that currently serve JPS, resulting in PCP FTE need by sub-market

- This table represents an expanded view of the same table we reviewed at the last meeting
- Total market that is <250% FPL is 27%

Notes: “% PL” is the % of families that are <250% federal poverty level. “ED Share” is the JPS emergency department market share in each submarket. “JPS AC” (ambulatory clinics, i.e., the 12 JPS medical homes and the Bardin Road Specialty Clinic) and “SBC” (school based clinics) are the number of sites by type in each submarket. “PCP Dist” takes the HMA identified need of 98 additional PCPs in 2017 for Tarrant County and distributes them across the sub-markets based on sub-market population size and the size of the population that is <250% of the federal poverty line (FPL) or uninsured. Weighted 2:1 towards FPL to reflect the JPS payer mix, which is 65.7% underinsured

CONCENTRATION OF PRIMARY CARE DISTRIBUTED

- Physician relative need by zip code based on PCP Distribution of the targeted 98 FTE and PCP Need
- Note that the targeted 98 FTE represent only JPS share of an already underserved market and therefore areas of “surplus” do not imply that these areas are adequately served, only that JPS has a relatively higher concentration of primary care in these zip codes
 - Functionally then these areas of higher concentration currently serve a share of outer geographies
 - The intent of developing the ambulatory network is to more evenly distribute these services conveniently closer to where the population lives



PRIORITIZATION BY ZIP-CODE

- The following methodology was used to prioritize zip codes for continued primary care medical home development at JPS. The methodology emphasizes access and need with a strong focus on the under-insured.

Category	Weight
Population Size	x1
5-Year Population Growth	x1
Number of Families <250% FPL	x2
Percent of Families <250% FPL	x1
ED Market Share	x1
PCP Need	x4

- The methodology was used to score and prioritize each zip code. Additionally, selection of actual zip codes to target included a review of qualitative factors such as adjacent zip codes, geographic barriers and road access, and potential to cannibalize volume from existing sites.
- Note that as discussed previously “PCP Need” includes greater emphasis on <250% FPL

PRIORITIZATION RESULTS (TOP 25 OF 66)

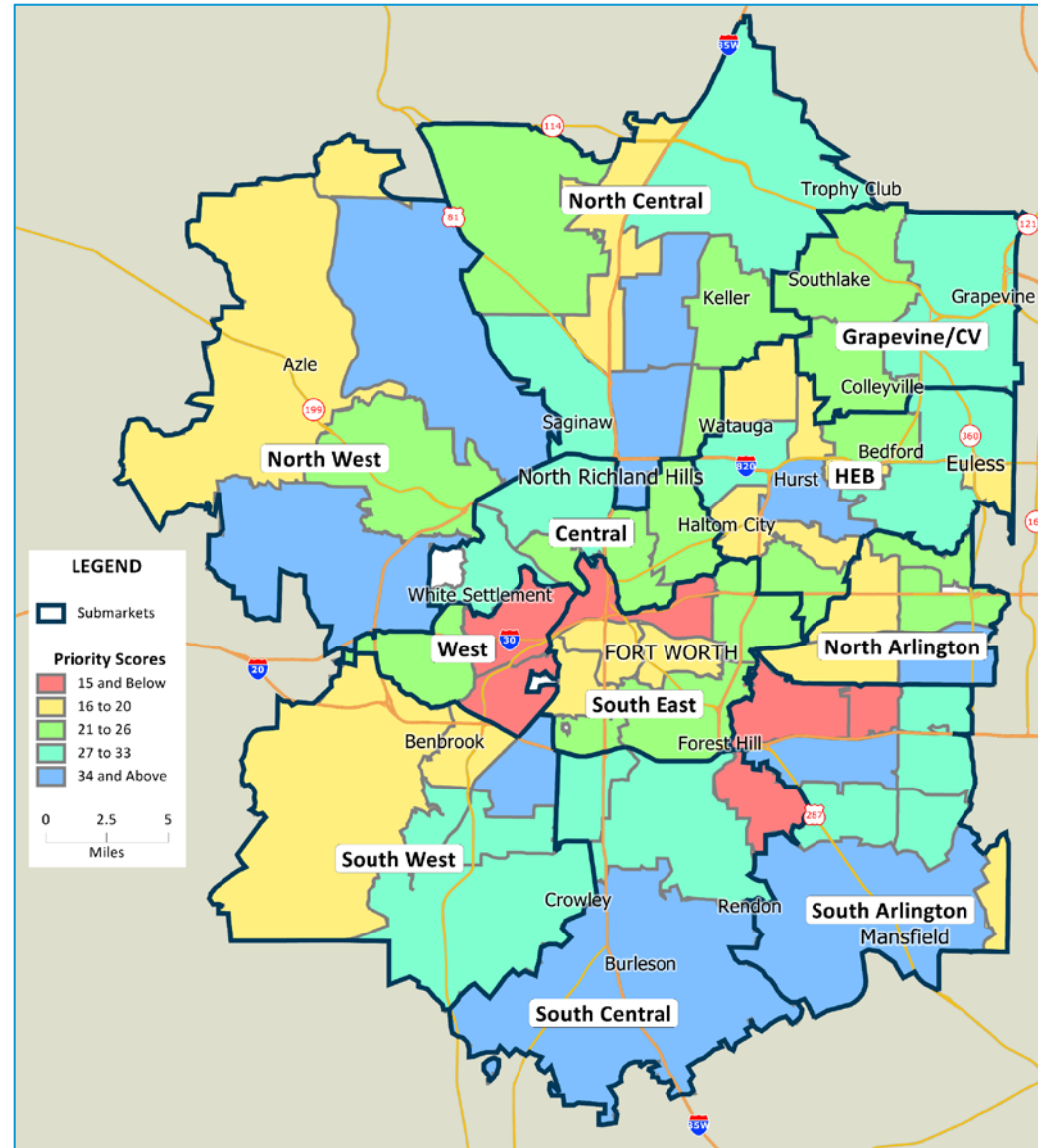
Rank	Zip			5-yr						Scores						Weighted Total
	Code	Town	Submkt	Pop	Growth	FPL	% FPL	ED M/S	PCP Need	Pop	Growth	FPL	% FPL	ED M/S	PCP Need	
1	76028	Burleson*	SC	68,025	9%	4,506	25%	1%	2.9	5	5	5	2	4	5	41
2	76133	Fort Worth	SW	51,709	5%	5,239	42%	16%	2.1	5	4	5	3	3	5	40
3	76063	Mansfield	SA	74,303	12%	3,574	20%	6%	2.6	5	5	4	1	5	5	39
4	76179	Fort Worth	NW	58,345	12%	3,334	24%	12%	2.2	5	5	4	1	4	5	38
5	76017	Arlington	SA	47,349	5%	3,349	28%	10%	2.1	4	4	4	2	4	5	37
6	76108	Fort Worth	NW	43,133	9%	3,401	32%	16%	2.0	4	4	4	2	3	5	36
6	76137	Fort Worth	NC	60,782	8%	3,917	27%	13%	1.0	5	5	4	2	4	4	36
8	76010	Arlington	NA	58,260	5%	8,796	71%	9%	0.4	5	4	5	5	5	2	35
9	76244	Keller	NC	77,417	15%	2,734	16%	6%	1.7	5	5	3	1	5	4	34
9	76053	Hurst	HEB	29,847	5%	3,081	42%	7%	0.9	3	3	4	3	5	4	34
11	76051	Grapevine	GV	50,721	7%	2,677	21%	3%	1.9	5	4	3	1	4	4	32
11	76134	Fort Worth	SC	25,636	7%	3,174	52%	18%	1.1	2	3	4	4	3	4	32
11	76140	Fort Worth	SC	28,970	8%	3,076	42%	17%	1.2	3	3	4	3	3	4	32
11	76018	Arlington	SA	28,866	7%	2,619	38%	8%	1.5	3	3	3	3	5	4	32
11	76180	N Richland Hills	HEB	35,409	6%	3,167	36%	8%	0.6	4	3	4	3	5	3	32
16	76002	Arlington	SA	36,956	13%	1,965	24%	7%	1.4	4	5	2	1	5	4	31
16	76039	Eules	HEB	36,568	8%	2,770	34%	6%	0.7	4	4	3	3	5	3	31
18	76114	Fort Worth	CE	27,666	4%	3,164	55%	21%	1.1	2	2	4	4	2	4	30
18	76001	Arlington	SA	34,004	9%	2,029	26%	9%	1.3	3	4	2	2	5	4	30
18	76123	Fort Worth	SW	34,911	12%	2,071	26%	12%	1.4	4	4	2	2	4	4	30
18	76131	Fort Worth	NC	35,772	14%	2,482	30%	13%	0.5	4	5	3	2	4	3	30
18	76106	Fort Worth	CE	37,365	5%	5,727	75%	25%	0.4	4	3	5	5	2	2	30
23	76036	Crowley	SW	27,173	12%	1,752	28%	8%	1.1	2	4	2	2	5	4	29
23	76040	Eules	HEB	29,709	7%	2,971	42%	7%	0.8	3	3	3	3	5	3	29
23	76014	Arlington	SA	36,199	6%	4,418	56%	8%	(0.2)	4	3	5	4	5	1	29

* Only 21% of Burleson population is in Tarrant County

See appendix for other zip codes

PRIORITIZATION SCORES

- Map of priority scores by zip code
- Only 21% of the Burleson population is in Tarrant County
- Some other towns have a small percentage of the population that is outside of Tarrant County (e.g., Mansfield is 97% Tarrant County, see service area definition in the appendix for County boundary)



PRIORITIZATION RESULTS: TOP SITE CONSIDERATIONS

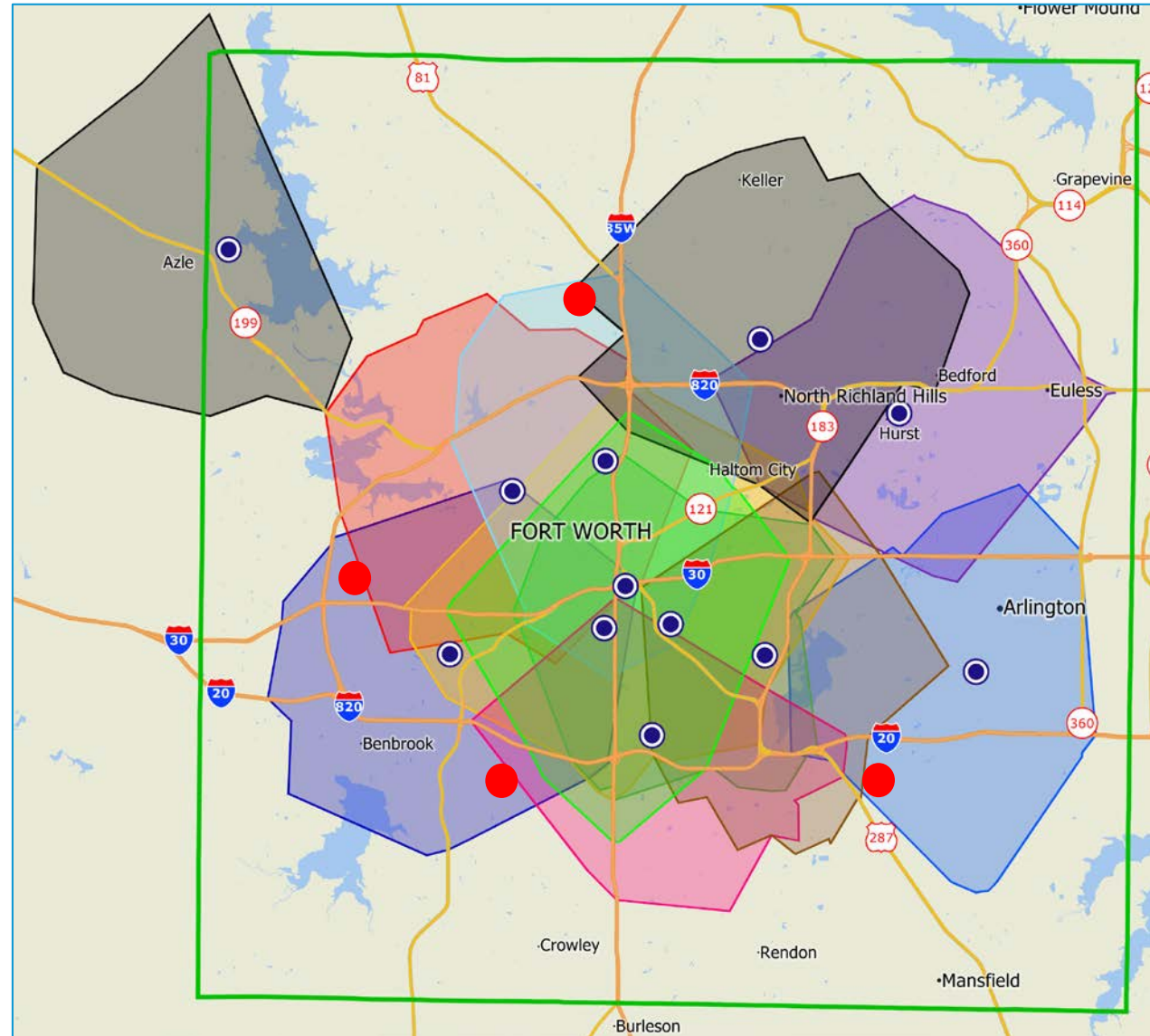
Rank	Zip Code	Town	Submkt	Pop	FPL	% FPL	PCP Need	Weighted Total
1	76028	Burleson*	SC	68,025	4,506	25%	2.9	41
2	76133	Fort Worth	SW	51,709	5,239	42%	2.1	40
3	76063	Mansfield	SA	74,303	3,574	20%	2.6	39
4	76179	Fort Worth	NW	58,345	3,334	24%	2.2	38
5	76017	Arlington	SA	47,349	3,349	28%	2.1	37
6	76108	Fort Worth	NW	43,133	3,401	32%	2.0	36
6	76137	Fort Worth	NC	60,782	3,917	27%	1.0	36
8	76010	Arlington	NA	58,260	8,796	71%	0.4	35
9	76244	Keller	NC	77,417	2,734	16%	1.7	34
9	76053	Hurst	HEB	29,847	3,081	42%	0.9	34
11	76051	Grapevine	GV	50,721	2,677	21%	1.9	32
11	76134	Fort Worth	SC	25,636	3,174	52%	1.1	32
11	76140	Fort Worth	SC	28,970	3,076	42%	1.2	32
11	76018	Arlington	SA	28,866	2,619	38%	1.5	32
11	76180	N Richland Hills	HEB	35,409	3,167	36%	0.6	32
16	76039	Euless	HEB	36,568	2,770	34%	0.7	31
16	76002	Arlington	SA	36,956	1,965	24%	1.4	31
18	76001	Arlington	SA	34,004	2,029	26%	1.3	30
18	76114	Fort Worth	CE	27,666	3,164	55%	1.1	30
18	76123	Fort Worth	SW	34,911	2,071	26%	1.4	30
18	76131	Fort Worth	NC	35,772	2,482	30%	0.5	30
18	76106	Fort Worth	CE	37,365	5,727	75%	0.4	30
23	76036	Crowley	SW	27,173	1,752	28%	1.1	29

Submarket	Area	PCP Score	
		2017	2022
SW	Altamesa	5.1	6.9
SA	S. Arlington	7.9	9.6
NW/NC	Saginaw/BM	4.4	6.9
NW/CE	Westworth	4.6	6.5

- These areas include other zips not shown in the top 25 (see subsequent detail on each).
- “PCP score” is the sum of PCP Need for key zip codes (in-migration was factored for NW/CE).
- “Area” is a preliminary potential center location for a site. This will likely change based on other issues (cost, strategy, JPS or County owned land, etc.) or site selection.
 - In the large table, these are in the bold zip code (per above others may be considered).

MEDICAL HOME CLINICS – 10 MINUTE DRIVE TIME COVERAGE

- The map highlights 10-minute drive times from the medical home clinics (10 minutes is considered standard access for primary care and supported by national patient origin data)
- Drive time access was one of the considerations in suggesting new sites
- The map includes suggested new sites indicated by the red dot (note this represents general vicinity of recommended site and not an actual site recommendation). These are covered in more detail on the following pages.



PHASED PLANNING OF SUGGESTED SITES

The approach to building ambulatory care centers is:

- Phase I (10 Years, 2017-2027):
 Improve access to underserved areas with critical mass need that are the greatest distance from current JPS ambulatory care centers.
- Phase II (20 Years, 2027-2037):
 Reassess overall deployment footprint and meet the needs of a rapidly growing population. This may include expansion of existing sites and/or relocating and replacing existing sites and may include additional new sites.

Submarket	Potential Area	Suggested Open
SA	S. Arlington	2019
SW	Altamesa	2021
NW/NC	Saginaw/BM	2024
NW/CE	Westworth	2026

- Dates are suggested, subjective, and could change depending on circumstance or opportunities (e.g., land or site opportunities in suggested areas)
- Availability of financial resources will be a key consideration in implementation of new sites
- The last 3 target areas are similar enough in terms of need that the order of opening year could easily switch

SOUTH ARLINGTON ACC

Target Area (Highlighted): South Arlington (below highway 20), Kennedale, Mansfield

Zips 76017, 76001, 76002, 76018, 76060, 76063

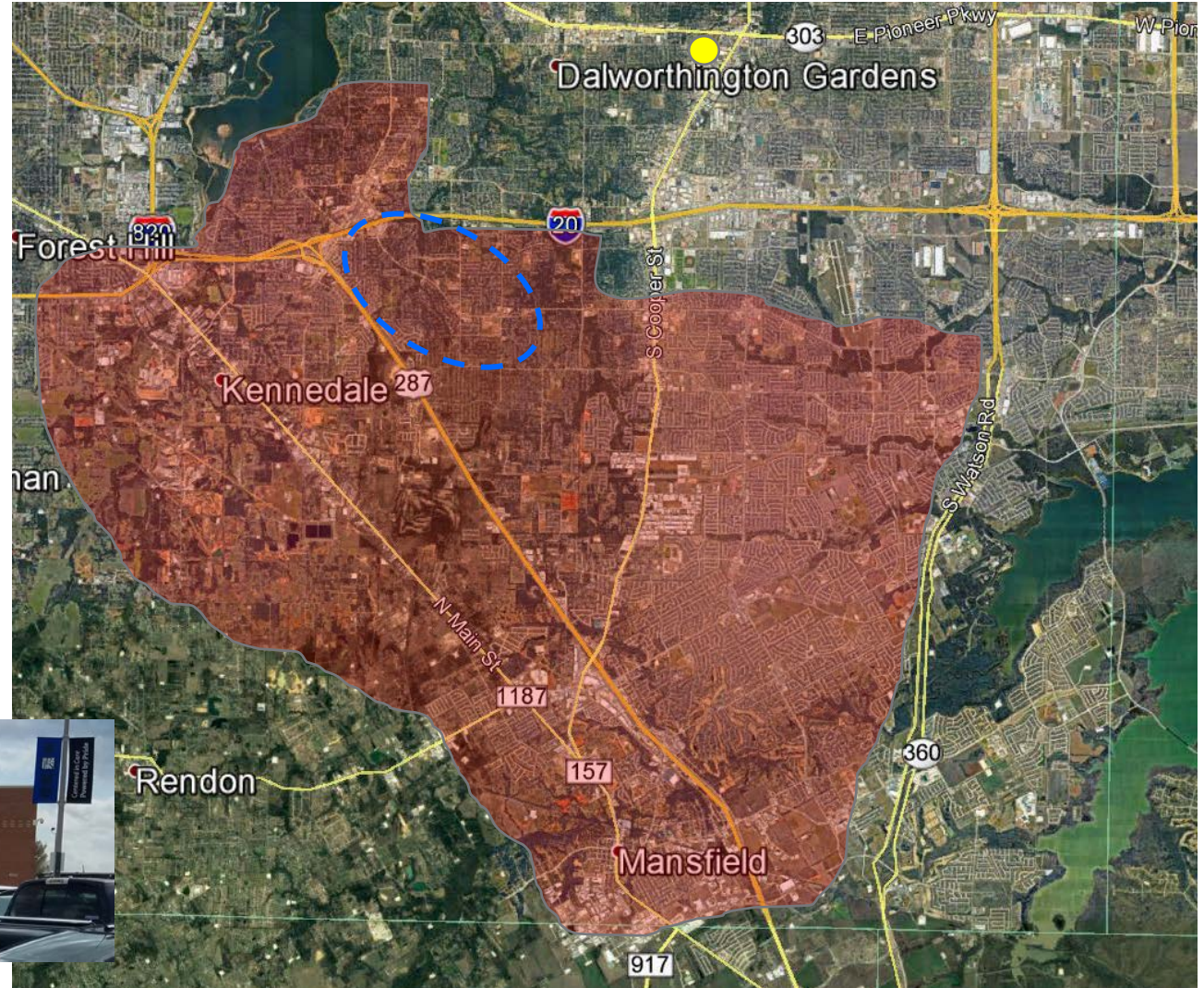
Potential Target Sites (Blue): Walmart near Park Springs/Green Oaks, other Green Oaks or Sublett

Population (5 year Growth): 191,463 (9%)

Families FPL >250% (% of Families): 12,214 (27%)

Focus is on the populations south of the site and South Arlington Residents who access Green Oaks Blvd. and Sublett Rd. The Southeast MH, in a plaza with a site that consolidated other sites in 2015, serves significant density in North Arlington and has double JPS visits compared to other MHs.

The Walmart at the epicenter of circle is a 15 minute drive from Southeast MH.



Medical Home Southeast Tarrant

Yellow Dot

Visit Volume (Growth)

FY14: 52,847

FY15: 50,195 (-5.0%)

FY16: 57,052 (13.7%)



SOUTH WEST ACC

Target Area (Highlighted): Southwest Fort Worth (mostly south of Highway 20), Crowley

Zips 76133, 76134, 76036, 76123, 76132

Potential Target Sites (Blue): On or Altamesa Blvd (south of TCU near Southwest High School and Edgcliff Village

Population (5 year Growth): 166,314 (8%)

Families FPL >250% (% of Families): 14,524 (37%)

The Benbrook population northwest of the golf course will more easily access the Viola M. Pitts MH (not shown). Most of the Burleson population is not in Tarrant County but the NW part could access this proposed site.

SW High Scholl/Kroger is a 15 minute drive from South Campus MH. South Campus does not have a natural direct route to the vast majority of the target area.

South Campus Health Center

Yellow Dot

Visit Volume (Growth)

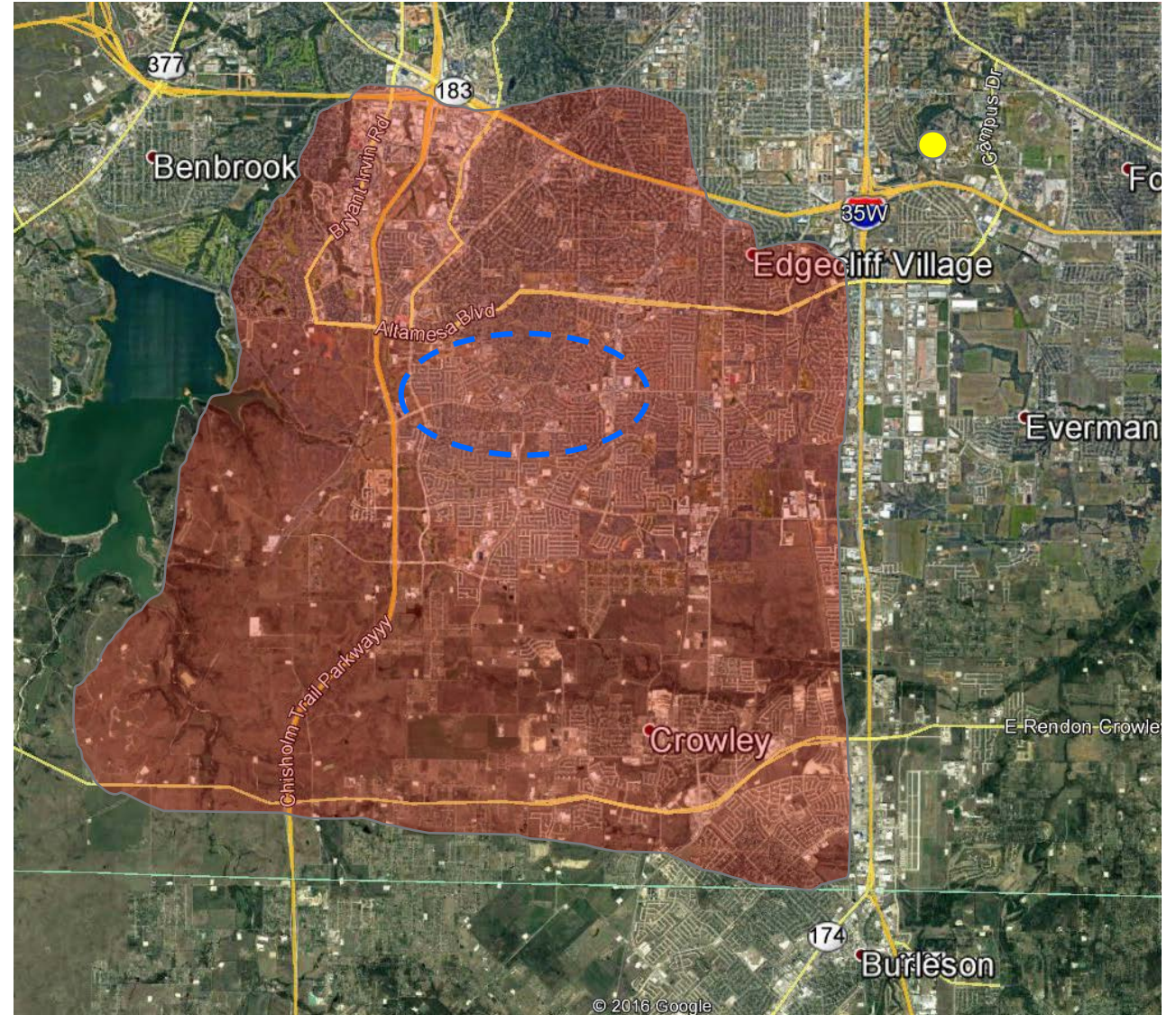
FY14: 16,549

FY15: 14,890 (-10.0%)

FY16: 17,482 (17.4%)



The South Campus clinic achieved an overall performance score of **99.4 out of 100** on patient satisfaction surveys.



NORTH WEST / NORTH CENTRAL ACC

Target Area (Highlighted): Saginaw, Blue Mound, Eagle Mountain & feeder areas north

Zips 76179, 76137, 76131, 76244, 76052

Potential Target Sites (Blue): Bus 287 (McLeroy to Bailey Boswell), Tarrant Pkwy near Hwy 81

Population (5 year Growth): 201,339 (12%)

Families FPL <250% (% of Families): 11,344 (24%)

Road patterns in this area are challenging with some industrial areas, highway 81, natural barriers, and non-intuitive indirect routes.

Bus 287/Bailey Boswell intersection is a 20 minute drive from Gertrude Tarpley MH.

Gertrude Tarpley/Watauga Health Center

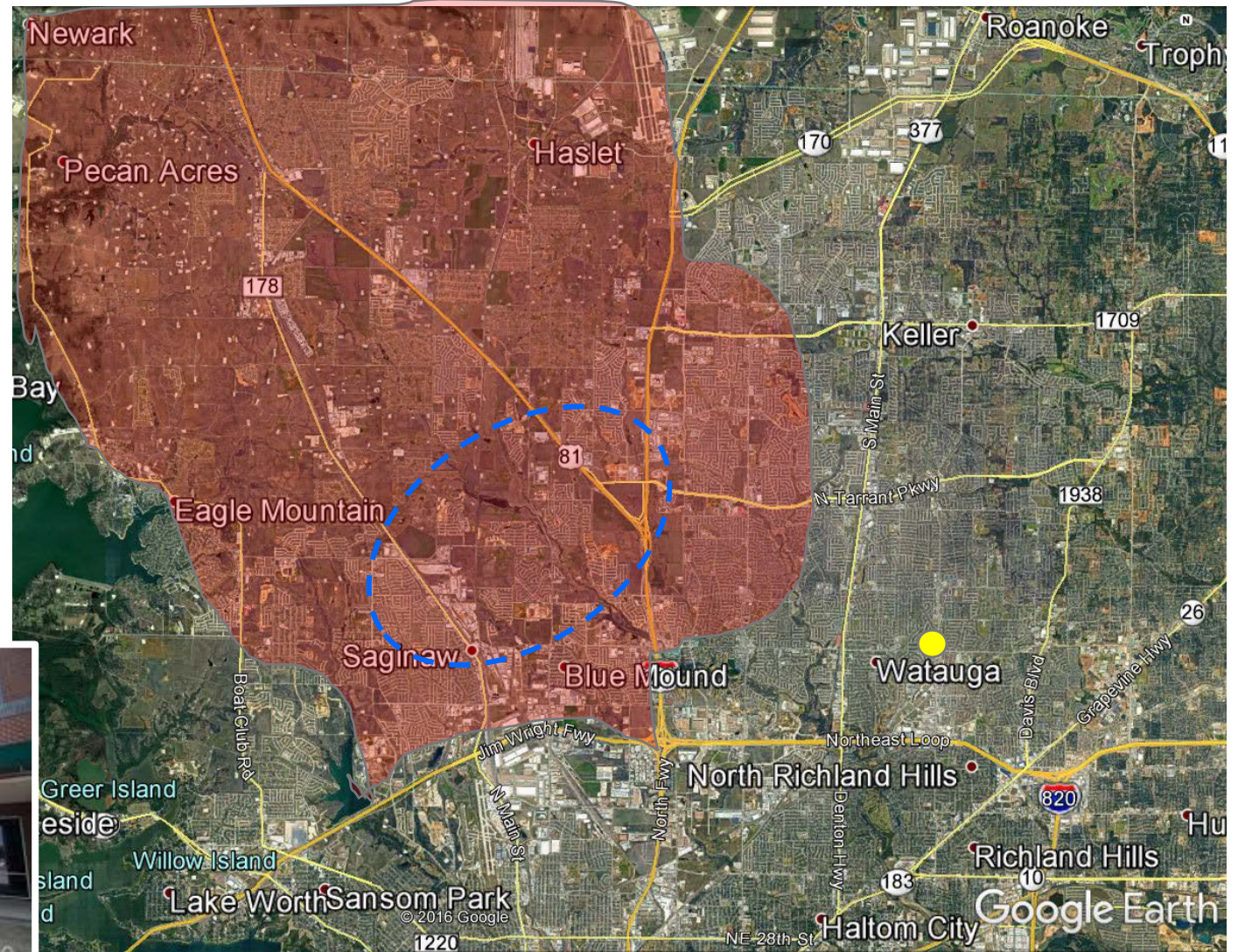
Yellow Dot

Visit Volume (Growth)

FY14: 15,341

FY15: 16,931 (10.4%)

FY16: 16,043 (-5.2%)



NORTH WEST / CENTRAL ACC

Target Area (Highlighted): White Settlement, Westworth Village, River Oaks, Westover Hills

Zips 76114, 76108, 76106, 76164

Potential Target Sites (Blue): White Settlement Rd, east or west of Naval Air Site; Rt. 183 near Westworth Village

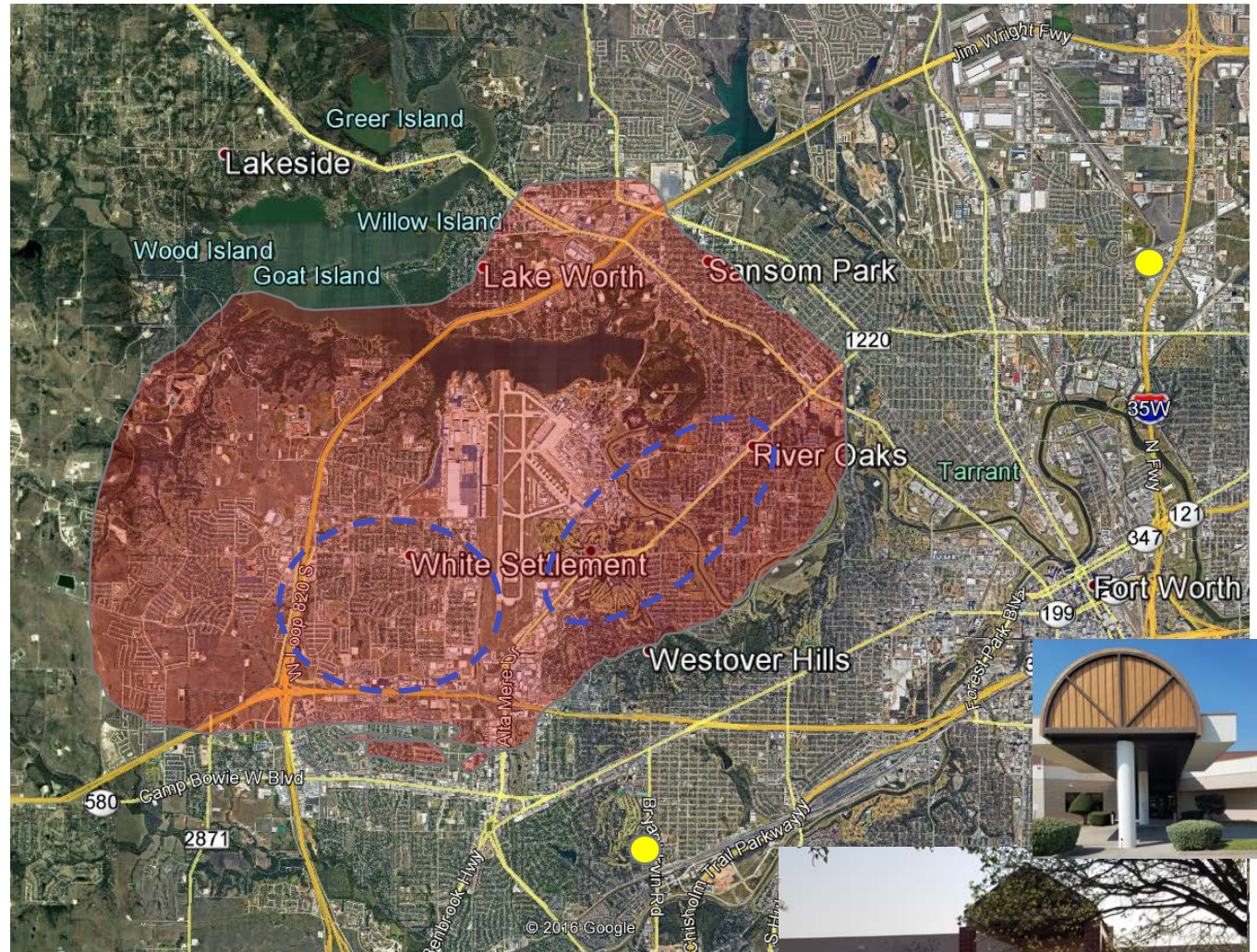
Population (5 year Growth): 124,972 (6%)

Families FPL >250% (% of Families): 14,985 (54%)

There will be some overlap with Diamond Hill, which is in a residential area near schools, in River Oaks and Lake Worth (the latter was not counted in the data, but a new site could draw some population from here).

Based on road patterns, the Viola M. Pitts site does not have natural flow nor natural direct routes to the vast majority of this population.

If done on the west side, this would likely be a smaller site. Both existing sites have large volumes. JPS owns 11 acres at bottom-center of circle.



Diamond Hill

FY14: 31,383
FY15: 30,777 (-1.9%)
FY16: 31,890 (3.6%)

Viola M. Pitts

FY14: 29,903
FY15: 32,526 (8.8%)
FY16: 35,081 (7.9%)

PHASE II PRIORITIZATION RESULTS: 15-YEAR LOOK OUT

Rank	Zip Code	Town	Submarket	2032 Pop	2032 FPL	PCP Need	Total
1	76010	Arlington	NA	66,545	11,050	2.6	44
2	76028	Burleson*	SC	85,774	6,291	4.8	41
3	76051	Grapevine	GV	61,302	3,570	3.0	35
3	76140	Fort Worth	SC	35,320	4,141	2.2	35
3	76180	N Richland Hills	HEB	41,353	4,072	1.6	35
3	76014	Arlington	SA	42,085	5,654	1.0	35
7	76040	Euless	HEB	35,695	3,937	1.8	34
7	76053	Hurst	HEB	34,195	3,883	1.7	34
7	76039	Euless	HEB	45,128	3,778	1.7	34
10	76116	Fort Worth	WE	57,852	6,448	0.8	33
11	76112	Fort Worth	SE	44,684	5,657	1.1	32
12	76135	Fort Worth	NW	29,235	2,949	1.6	30
12	76120	Fort Worth	HEB	23,516	3,275	1.5	30
12	76248	Keller	NC	52,032	1,846	1.5	30
15	76117	Haltom City	CE	36,050	4,480	0.7	29
16	76262	Roanoke	NC	46,687	1,809	1.8	27
16	76111	Fort Worth	CE	25,561	3,974	0.9	27
16	76119	Fort Worth	SE	52,139	8,316	0.0	27
19	76006	Arlington	NA	25,948	3,092	1.2	26
19	76137	Fort Worth	NC	75,180	5,355	-	26
19	76063	Mansfield	SA	98,739	5,287	-	26
22	76021	Bedford	HEB	39,581	2,471	1.0	25
22	76011	Arlington	NA	22,040	3,337	0.6	25
22	76133	Fort Worth	SW	59,356	6,615	-	25
25	76115	Fort Worth	SE	23,031	4,131	0.6	24
25	76106	Fort Worth	CE	42,864	7,228	-	24
25	76244	Keller	NC	109,382	4,335	-	24

- This table re-calculates prioritization with 2032 data as if the 4 new suggested sites were already open
- Based on the results, in Phase II (10-20 years) JPS should be considering additional sites (or potentially expansion or relocation of existing sites) in:
 - HEB (closer to Richland Hills or West Hurst)
 - o The west side of this submarket will be impacted by the recent relocation of the Northeast Health Center. The suggested new site could potentially move into Phase I if capacity becomes an issue or if resources are available and market or JPS conditions warrant it.
 - North Arlington
 - Southlake (covering Grapevine to the east and Keller to the west)

* Only 21% of Burleson population is in Tarrant County

NEXT STEPS

- Finalize Ambulatory report
- Review specialty clinic needs
 - Coordinate with Bardin Clinic
 - Coordinate with future campus specialty clinic plans



APPENDIX

PRIORITIZATION RESULTS (RANK 26-46 OF 66)

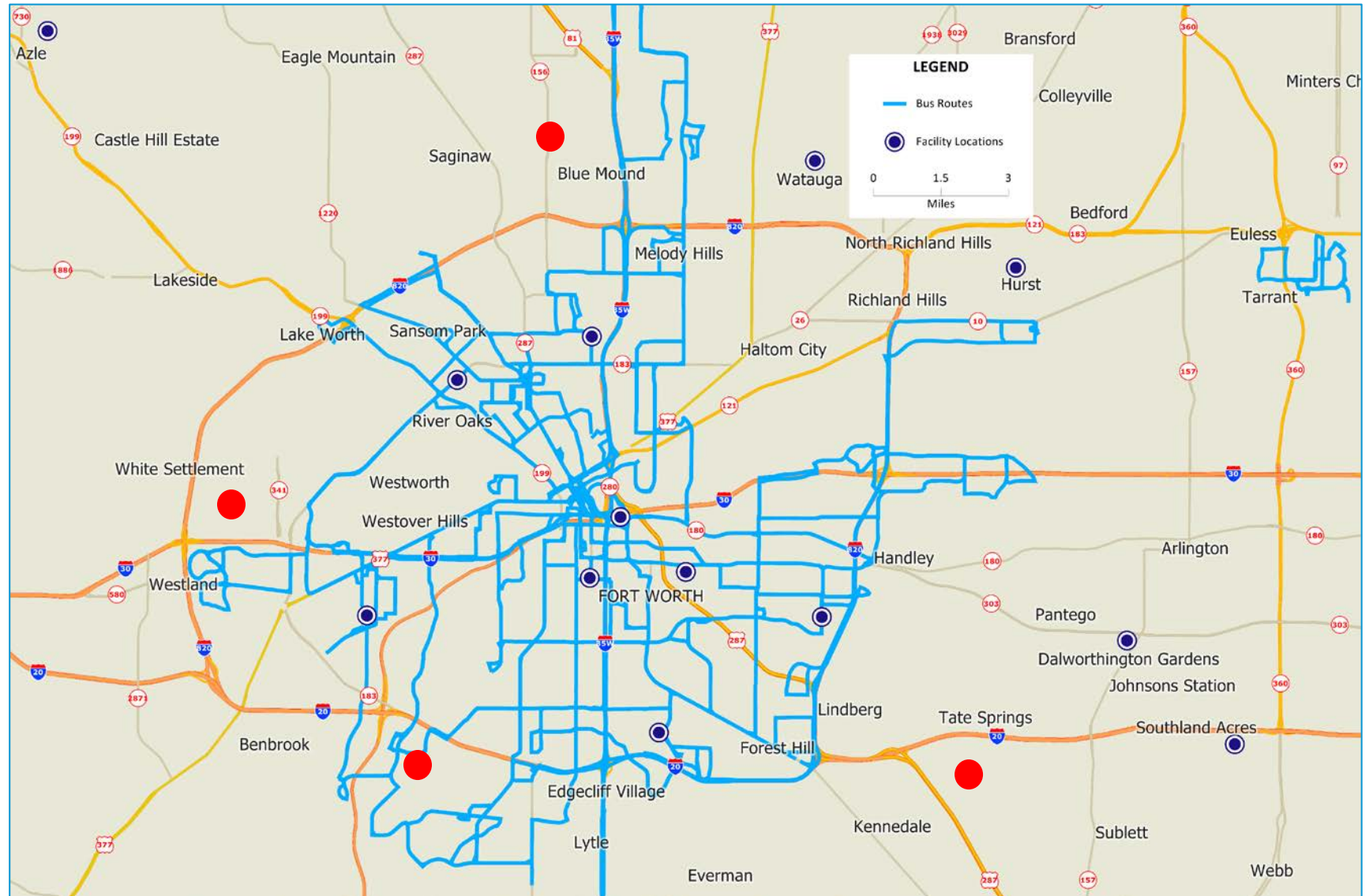
Zip									Scores						Weighted
Rank	Code	Town	Submkt	Pop	FPL	% FPL	ED M/S	PCP Need	Pop	Growth	FPL	% FPL	ED M/S	PCP Need	Total
26	76262	Roanoke	NC	34,683	1,206	13%	1%	1.0	4	4	1	1	4	4	27
27	76006	Arlington	NA	23,420	2,541	49%	6%	0.6	2	1	3	3	5	3	26
27	76112	Fort Worth	SE	40,050	4,614	50%	25%	(0.0)	4	3	5	4	2	1	26
29	76120	Fort Worth	HEB	18,084	2,268	54%	16%	0.7	2	3	2	4	3	3	25
29	76135	Fort Worth	NW	23,366	2,130	38%	14%	0.8	2	3	2	3	4	3	25
29	76248	Keller	NC	40,311	1,289	12%	5%	0.6	4	4	1	1	5	3	25
32	76111	Fort Worth	CE	22,551	3,189	64%	29%	0.1	2	2	4	5	1	2	24
32	76116	Fort Worth	WE	49,220	4,981	44%	22%	(0.7)	5	4	5	3	2	0	24
32	76119	Fort Worth	SE	45,105	6,537	69%	32%	(1.7)	4	4	5	5	1	0	24
35	76052	Haslet	NC	20,634	700	14%	5%	0.6	2	4	1	1	5	3	23
35	76148	Fort Worth	NC	24,728	1,963	33%	11%	0.5	2	2	2	2	4	3	23
35	76117	Haltom City	CE	32,133	3,634	52%	19%	(0.2)	3	2	4	4	3	1	23
38	76034	Colleyville	GV	24,492	456	6%	5%	0.6	2	3	1	1	5	3	22
38	76092	Southlake	GV	29,390	563	7%	2%	0.7	3	3	1	1	4	3	22
38	76021	Bedford	HEB	35,210	2,000	21%	4%	0.4	4	3	2	1	4	2	22
38	76011	Arlington	NA	21,197	2,925	63%	8%	0.0	2	1	3	5	5	1	22
42	76164	Fort Worth	CE	16,808	2,694	75%	26%	0.2	1	1	3	5	2	2	21
42	76115	Fort Worth	SE	20,617	3,365	75%	27%	(0.2)	2	1	4	5	2	1	21
44	76182	N Richland Hills	HEB	30,167	1,362	16%	7%	0.2	3	3	1	1	5	2	20
45	76020	Azle	NW	28,241	2,133	30%	5%	(0.1)	2	3	2	2	5	1	19
46	76105	Fort Worth	SE	24,146	3,354	79%	37%	(1.4)	2	2	4	5	1	0	18
46	76013	Arlington	NA	31,308	2,512	35%	9%	(0.7)	3	1	3	3	5	0	18

PRIORITIZATION RESULTS (RANK 48-66)

Rank	Zip				Scores						Weighted				
	Code	Town	Submkt	Pop	FPL	% FPL	ED M/S	PCP Need	Pop	Growth	FPL	% FPL	ED M/S	PCP Need	Total
48	76118	Fort Worth	HEB	15,711	1,222	32%	11%	0.3	1	2	1	2	4	2	17
48	76177	Fort Worth	NC	8,963	189	13%	5%	0.2	1	2	1	1	5	2	17
48	76022	Bedford	HEB	13,305	1,012	33%	5%	0.3	1	1	1	2	5	2	17
48	76071	Newark	NW	3,731	347	34%	0%	0.2	1	1	1	3	4	2	17
48	76155	Fort Worth	HEB	3,443	302	36%	10%	0.1	1	1	1	3	4	2	17
48	76110	Fort Worth	SE	30,952	3,674	56%	30%	(2.7)	3	1	4	4	1	0	17
48	76012	Arlington	NA	26,789	2,514	36%	7%	(0.4)	2	1	3	3	5	0	17
55	75054	Grand Prairie	SA	7,602	174	9%	1%	0.2	1	2	1	1	4	2	16
55	76054	Hurst	HEB	12,123	483	14%	6%	0.1	1	1	1	1	5	2	16
55	76126	Fort Worth	SW	21,429	1,125	20%	9%	0.0	2	3	1	1	5	1	16
55	76104	Fort Worth	SE	18,865	2,574	77%	48%	(1.6)	2	2	3	5	1	0	16
55	76132	Fort Worth	SW	26,885	2,289	34%	12%	(0.6)	2	3	2	3	4	0	16
60	76060	Kennedale	SC	7,136	467	22%	15%	0.3	1	1	1	1	3	2	14
60	76016	Arlington	SA	31,638	1,536	17%	10%	(1.1)	3	2	2	1	4	0	14
60	76015	Arlington	SA	17,016	1,531	38%	8%	(0.3)	1	1	2	3	5	0	14
63	76107	Fort Worth	WE	27,861	2,070	35%	27%	(1.9)	2	2	2	3	2	0	13
64	76103	Fort Worth	SE	14,843	1,745	55%	33%	(1.8)	1	1	2	4	1	0	11
64	76109	Fort Worth	WE	22,868	833	16%	14%	(0.9)	2	2	1	1	4	0	11
66	76102	Fort Worth	SE	10,173	516	43%	84%	(1.5)	1	1	1	3	1	0	8

PUBLIC TRANSIT SURROUNDING FACILITY LOCATIONS

- Availability of bus routes should be considered a benefit but not a criteria in selecting sites, as sites without bus routes still need more proximate care.
- Suggested sites are indicated by the red dot (note this represents general vicinity of recommended site and not an actual site recommendation)



SUB-MARKET DEFINITION AND POPULATION DENSITY

