

2025

Yuma District Hospital and Clinics **Community Health Needs Assessment**



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COLORADO **HEALTH** INSTITUTE

MAY 2025

Executive Summary

Yuma District Hospital and Clinics (YDHC) serves a community grappling with significant health challenges. Many residents struggle to afford basic needs, don't have health insurance, or can't access timely medical care. Gaps in services and lack of service awareness further restrict access to primary, specialty, behavioral, and preventive care. These challenges disproportionately affect vulnerable groups, including older adults, youth, and Spanish-speaking residents.

Exacerbating factors, such as high health care costs, limited transportation options, and staff turnover, are common in rural areas and weaken both patient trust and continuity of care. Shifting state and federal policies may bring new budgetary constraints.

Despite these challenges, opportunities exist for YDHC to strengthen its efforts to address local health needs. This 2025 Community Health Needs Assessment identifies nine recommendations:

1. Improve transparency and increase awareness about available hospital services and limitations, referral options, and policy changes.
2. Continue to offer and expand efforts to assist patients and community members with enrolling in Medicaid, Medicare, and plans on Connect for Health Colorado.
3. Develop communications and community engagement plans to gain visibility and trust among residents.
4. Expand medication availability to patients following emergency room discharge.
5. Explore service delivery options that reduce barriers to health care.
6. Improve staff retention and expand skills to address service gaps, staff shortages, and patient communication.
7. Create a plan to improve the hospital's administration and operational processes.
8. Expand partnerships with public health, human services, and community-based organizations to provide more opportunities for patients to connect with regional services and resources.
9. Strengthen partnerships with regional hospitals and health providers.

This assessment was led by the Colorado Health Institute and provides more detail on each recommendation and the research behind their development.

2025 Yuma District Hospital and Clinics Community Health Needs Assessment

Introduction

Yuma District Hospital and Clinics (YDHC) provides vital health care services within 14 service lines. It is a Critical Access Hospital serving residents of Yuma and Washington counties.

In 2025, YDHC partnered with the Colorado Health Institute (CHI) to conduct a Community Health Needs Assessment (CHNA). This assessment aims to help YDHC better understand local health needs and service gaps as its team works to improve services and determine community priorities it can address. This report summarizes CHI's findings and recommendations for addressing community priorities.

Methods

CHI and YDHC identified three research questions to guide this CHNA:

1. How does YDHC fit into the Eastern Plains health care ecosystem?
2. How do current YDHC services meet the community's needs, and where are there gaps?
3. What are current and emerging community health issues the hospital and other health care entities need to be aware of?

To answer these research questions, CHI analyzed over 100 pieces of health, economic, social, and demographic information for Yuma County and the surrounding area; conducted eight key informant interviews with community and clinical partners; collected feedback from a focus group with the regional Patient and Family Advisory Council; and surveyed 58 community members.

Data collected through these methods, as well as guidance from YDHC leadership, informed the recommendations included in this report.

Recommendations

Recommendations must meet three criteria to be included in this assessment. First, they must be feasible for YDHC to implement. Second, they must be grounded in community input and based on information from multiple data sources. And finally, recommendations must consider the ongoing state and federal changes to health care, social programs, and public health.

This assessment offers nine recommendations to address ongoing community health needs and service gaps in the region. These recommendations reflect identified hospital strengths and opportunities for improvement under three broad categories: increasing patient outreach and engagement, strengthening service availability and workforce, and increasing YDHC's regional presence. Relevant findings that inform recommendations are listed under each recommendation and further detailed in the Findings section.

Increase Patient Outreach and Engagement

Three recommendations focus on increasing patient outreach and engagement.

Recommendation 1. Improve transparency and increase awareness about available hospital services and limitations, referral options, and policy changes.

Many residents are not aware of all the available services at YDHC, highlighting a need for increased transparency and community education promoting service lines and hospital resources.

The community and surrounding region would benefit from additional promotion of available services, especially telehealth options for mental health care, acute and post-acute care via "swing beds," prenatal care and other women's health services, home health, general surgery, medical-surgical services, sleep studies and remedies, oncology, and extended walk-in clinic hours.

Local leaders proposed the following strategies to promote existing service lines to community members:

- Increasing the hospital's use of social media
- Sharing information with community organizations that frequently engage with community members
- Hosting community activities such as health fairs
- Advertising service availability and options at local events

In addition to increasing service awareness in the community, transparency about hospital service limitations and service gaps can help patients navigate their health care. For example, hospital staff and providers can set expectations with patients about how long services take, such as the processing time for lab readings and when to expect follow-up calls. Additionally, improved transparency among providers and care coordinators can ensure patients are aware of the resources and services available at other medical providers in the region. For example, there should be patient communication on why some services, such as labor and delivery, cannot be offered at YDHC but are available at other facilities.

This recommendation addresses findings related to **service transparency and awareness, specialty care services, access to primary care, individualized care needs,** and **staff challenges and patient communication.**

Recommendation 2. Continue to offer and expand efforts to assist patients and community members with enrolling in Medicaid, Medicare, and plans on Connect for Health Colorado.

Many residents are uninsured yet may be eligible for Medicaid or subsidized private insurance through Connect for Health Colorado, the state's health insurance exchange. Older adults also need greater support enrolling in Medicare and Medicaid, including accessing home and community-based services waivers for long-term care. While YDHC has supported enrollment efforts in recent years, the need remains to expand both insurance enrollment assistance and navigation services to ensure residents can access the coverage and care they need.

Strategies to offer and expand enrollment efforts include:

- Offering enrollment services in the emergency room
- Sharing enrollment information on social media platforms and hospital flyers
- Bringing enrollment specialists to health fairs and hospital-hosted events
- Collaborating with community organizations to host enrollment and insurance education events

This recommendation addresses findings related to **insurance, income and poverty,** and **aging and long-term care needs.**

Recommendation 3. Develop communications and community engagement plans to gain visibility and trust among residents.

Community residents and leaders say the hospital would benefit from increased engagement with the community, noting that inconsistent community engagement has led to limited service awareness and mistrust of the hospital.

Strategies to gain more visibility in the community may include the following.

- Developing a communications plan for broad health promotion and hospital service messaging
- Developing a community engagement plan that outlines best practices on how to increase service awareness and build trust among hard-to-reach populations, such as people who are geographically, medically, or linguistically isolated.
- Joining the board of the Yuma County Chamber of Commerce

- Collaborating with the Northeast Colorado Health Department to discuss relationship building and community engagement
- Partnering with daycare centers and schools to identify and address health issues early, gaining a community presence among families and school systems
- Continuing to appear on the Yuma County Chamber of Commerce's morning show, "Good Morning Yuma"
- Continuing to attend and support community events such as police department events, the annual 5K, and summer picnics

In addition to public outreach, YDHC can strengthen its presence in the community by increasing the number of health fairs it offers each year and resuming the mobility clinic for residents who use accessibility equipment. These provide a way to advertise services and offer preventive care opportunities and patient navigation.

This recommendation addresses findings related to **community engagement**.

Strengthen Hospital Service Availability and Workforce

Four recommendations focus on expanding hospital services and the operational structures that support them.

Recommendation 4. Expand medication availability to patients following emergency room discharge.

Both residents and community leaders expressed a need for additional medication access from the hospital. To meet this need, YDHC can explore options for making medication available to patients after they are discharged from the emergency room. While YDHC does not have an onsite pharmacy, supply options of three to 10 days can be offered until patients are able to get to a pharmacy for refills.

This recommendation addresses findings related to **access to primary care**.

Recommendation 5. Explore service delivery options that reduce barriers to health care.

YDHC could employ several strategies to address gaps in different service areas.

Preventive care. YDHC can meet the high demand for preventive care services by increasing the number of wellness clinics and expanding walk-in clinic hours. This will support access to basic health screenings and immunizations, especially during the fall and winter months.

Mental health. For ongoing community mental health needs, YDHC can promote and expand available mental health telehealth services and contract with providers who specialize in these services.

Chronic disease. YDHC can address gaps in chronic disease services by hosting blood pressure clinics to increase patient access to screenings and working with hospital staff to expedite lab and imaging result availability for patients.

Specialty care. YDHC may consider contracting with traveling specialists who visit on a weekly or monthly basis. This can expand availability for the most in-demand services, such as cardiology, urology, and home health. YDHC can also participate in the Colorado Department of Health Care Policy and Financing's [eConsult Platform](#), which connects patients to specialists for lower-acuity needs via telehealth.

This recommendation addresses findings related to **chronic disease prevention and management, access to primary care, preventive health care screenings and immunizations, behavioral health, specialty care services, youth health services, and aging and long-term care needs.**

Recommendation 6. Improve staff retention and expand skills to address service gaps, staff shortages, and patient communication.

Staff retention, consistency, and communication challenges at the hospital have led to inconsistent care for patients and mistrust of providers.

Given that some YDHC providers are only contracted for a certain number of years, the hospital and providers can be transparent about when providers are leaving and creating a care transition plan for patients. YDHC can address some retention issues by conducting a salary survey analysis across all staff positions to ensure an equitable salary process is in place.

Community leaders and patients praised the hospital for listening and accepting feedback and concerns but encouraged YDHC to continue creating and maintaining feedback processes. Additionally, the hospital can explore strategies and processes to improve timely communication with patients and provide clear guidance on when providers will reach out about test results and appointments.

YDHC can continue recruiting and retaining bilingual staff and providers to meet the growing demand for Spanish-speaking employees. Investments in staff certification (e.g., interpretation) and cultural competency training for current staff can develop staff skills appropriately tailored to provide patient care.

This recommendation addresses findings related to **hospital staff and patient communication** and **individualized care needs**.

Recommendation 7. Create a plan to improve the hospital's administration and operational processes.

To address patient frustrations with slow billing and administrative processes, YDHC can continue to build from the hospital's operational audit by improving revenue and billing processes. Additionally, the hospital can conduct market surveys regarding billing and operational inefficiencies.

This recommendation addresses findings related to **hospital administration and operations**.

Increase YDHC's Regional Presence

Two recommendations focus on YDHC's regional presence and partnerships.

Recommendation 8. Expand partnerships with public health, human services, and community-based organizations to provide more opportunities for patients to connect with regional services and resources.

YDHC and other local organizations can expand their cross-sector regional partnerships to bolster care coordination and resource sharing among rural communities where health care and behavioral health service options are often limited.

It is important for YDHC to actively work with other local health, public health, and community-based organizations on sharing resources and information about social needs. This includes housing and food resources, as well as environmental concerns such as heat-related illness risk and health risk related to oil and gas site exposure.

Strategies to grow cross-sector partnerships include:

- Collaborating with local providers to host health fairs and organize wellness and immunization clinics, oral health exams, and screening opportunities
- Creating referral pathways from YDHC to community organizations that offer chronic disease prevention and management classes and other health education opportunities
- Collaborating with the local pharmacy to increase medication delivery options for patients beyond the hospital's supply period

This recommendation addresses findings related to **chronic disease prevention and management, environmental and health-related needs, access to primary care,**

preventive health care screenings and immunizations, specialty care services, and oral health care services.

Recommendation 9. Strengthen partnerships with regional hospitals and health providers.

Many residents and community leaders are eager for YDHC to bolster partnerships with other local health providers and hospitals to close or reduce service gaps.

YDHC can work with the Eastern Plains Healthcare Consortium to coordinate with other area hospitals about regional service gaps, such as labor and delivery, so that community members can get the care they need. Additionally, the hospital can work with health care organizations and hospitals that are already partnering with traveling providers or offering specialty care clinics. For example, the Northeast Colorado Health Department partners with Children’s Hospital to bring pediatric specialists offering neurology, orthopedic, and rehab services at northeast Colorado clinics.

YDHC can also increase service access for its patients by exploring options with other facilities for sharing or splitting contract costs for specialty care providers to address regional service gaps.

Lastly, strengthened partnerships among providers can create trust and provide opportunities for partners to expand referral pathways or forge agreements related to taking on Medicaid patients, especially for oral health care services since no dental providers in the area accept Medicaid.

This recommendation addresses findings related to **oral health care services, insurance, regional partnerships, service transparency and awareness, youth health care services, and specialty care services.**

Findings

Recommendations in this report address 17 findings identified in CHI’s research.

Finding 1: Income and Poverty. Many Yuma County residents are not earning enough money to meet their basic needs.¹

A family of four needs to earn at least \$97,600 annually to meet their basic needs, while a single person needs to earn at least \$44,200.² However, only about 45% of Yuma County residents individually earn at least that much each year. People who earn lower incomes are more likely to report poor health outcomes and have reduced access to health care.³

Finding 2: Health Insurance. Insurance options are limited in the region, and 15% of people are uninsured, almost double the state average of 8%.⁴ Among Hispanic and Latino residents, this rate is more than double (31%).⁵ Without health coverage, people often work when they are sick and may only use hospital services when illnesses or conditions have gotten worse. Federal budget discussions have raised concerns about the future of Medicaid and the Child Health Plan *Plus*, which could lead to even higher rates of uninsurance.

Finding 3: Access to Primary Care. Over half of the community survey respondents (59%) said out-of-pocket costs or high costs of care were a barrier to getting any health care services. About 25% of residents in Health Statistics Region 1 (Morgan, Logan, Washington, Yuma, Phillips, Sedgwick counties) did not get needed care because they couldn't get an appointment as soon as it was needed, according to a 2023 survey.⁶ Community leaders reported that some residents, especially those who are Spanish-speaking, will use the emergency department a higher rate because of limited appointment availability.

Finding 4: Aging and Long-Term Care Needs. Aging and long-term care services do not meet the demands of the county's growing older adult population.

Community survey respondents identified aging and long-term care services as the community's biggest need, and nearly a third (30%) would like to see services for this population expanded. Over two-thirds (69%) of adults over the age of 60 said the availability of long-term care services in their community was fair or poor.⁷ Many community members and leaders reported that some older adults cannot age in place and must move closer to aging services in more urban areas while others choose to stay at home without getting support, often resulting in more comorbidities.

Community members and key informants reported notable gaps in aging services, including ombudsman services, insurance navigation, assisted living and nursing home access, wellness clinics, recreation programming, and assistance with home and community-based services waivers.

Finding 5: Chronic Disease Prevention and Management. Community survey respondents cited chronic illnesses as one of the most pressing issues in the community. Community members and leaders said that more chronic disease education, screening and early diagnosis, and disease management are needed. About 9% of residents have diabetes, 28% have obesity, and 26% have high blood pressure (hypertension).⁸

Finding 6: Behavioral Health. Yuma County has higher suicide and drug overdose death rates than the state overall.⁹ However, accessing needed services was a challenge for many residents, especially for young people. About one in six residents in this region

(16%) did not get needed mental health care according to a 2023 survey.¹⁰ Residents specifically noted that some outpatient behavioral health services are available, but inpatient services require getting care outside of the community.

Finding 7: Environmental and Health-Related Social Needs. Various environmental and health-related social needs affect the community. About 13% of residents, including 30% of Hispanic or Latino residents, reported that they are food insecure.¹¹ And nearly one in five regional residents (19%) reported having trouble paying their rent or mortgage between 2022 and 2023, with 20% of renters being housing cost burdened, meaning they spend at least a third of their income on rent.^{12, 13}

Compared with other Coloradans, Yuma County has a higher proportion of children, older adults, people with chronic illnesses, and people who work outdoors. These are all populations disproportionately impacted by high heat and drought days.

Finding 8: Youth Health Care Services. Over one in four residents are under 18 (27%), higher than the state average of 21%.¹⁴ Yet youth with any specialty care needs have few options. Many young families living in Yuma County speak Spanish, suggesting a growing need for bilingual providers to serve families and children. County residents and YDHC staff would like to see more local pediatric care to avoid having to travel beyond county lines.

Finding 9: Preventive Health Care and Screenings. While 84% of people in the region visited a provider in the past year, only 75% of had a preventive care visit.¹⁵ Yuma County residents had lower rates of mammograms, Pap smears, and colorectal screenings than the state average.¹⁶ In 2023, just 7% of Medicare enrollees received a flu vaccination, compared with 43% statewide.¹⁷

Some residents reported limited options for health screenings and said there's an assumption that people need to drive to the Front Range to get basic screening services. Additionally, only about half (51%) of adults 60 and older said preventive health care services were good or excellent in the community, indicating that service quality is a barrier.¹⁸

Finding 10: Specialty Care Services. Access to specialty care services is limited in the region. Most community survey respondents (57%) said one of the top reasons they seek health care outside of YDHC is because they need a specialist that is not available locally, like labor and delivery. Many survey respondents (42%) want to see specialty care service options expanded at YDHC. Residents noted that specialty care appointments often book up quickly, while others noted it's difficult to know what services are offered where.

Residents, community leaders, and YDHC staff noted that the following services are needed in the community, even if they are provided by traveling providers on a scheduled basis: cardiology care, urology, radiation and cancer treatment, access to oxygen, dialysis, physical therapy, asthma and allergy services, surgical services, labor and delivery, and specialty care for middle-age to older adults.

Finding 11: Oral Health Care Services. Many residents in Yuma are delaying dental care or not getting it at all. Only 69% of regional residents visited a dentist in the past year, and almost half of Yuma County adults (45%) have lost teeth due to periodontal disease or decay.^{19, 20} Oral health care is tied to other health issues like diabetes and pregnancy complications, and some populations, such as children, older adults, and immigrants, are at higher risk for oral health issues.²¹

Over one in four older adults (27%) said getting oral health care is tough in their community.²² There are also no dental providers that accept Medicaid in Yuma County, forcing many residents to travel outside the community.

Finding 12: Hospital Staff and Patient Communication. While 79% of community survey respondents said the quality of care they received at YDHC was good or excellent, almost half (45%) sought care elsewhere because staff changes in recent years have made it hard to form a trusting relationship with providers. Many community leaders and residents said they must constantly repeat their story when meeting with new providers, and that new providers aren't as familiar with the community or hospital procedures.

Residents and community leaders also reported that inconsistent patient communication from the hospital has contributed to negative perceptions and access challenges for patients. Some patients and community members said that the hospital has felt more profit-centered. Others said it takes weeks to hear back from their providers.

Finally, the hospital's administrative staff garnered mixed feedback. Some community leaders noted an appreciation for the front desk and reception staff who are bilingual and can help the Spanish-speaking population. However, others said that some of the staff are unprofessional and often gossip, creating a perception of "acrimony in the building," according to a community survey respondent.

Finding 13: Individualized Care Needs. YDHC has made strides in ensuring its services are culturally competent and meeting people's individualized needs, but there is room for improvement, especially for Medicaid enrollees and Hispanic or Latino and Spanish-speaking patients.

About 18% of community survey respondents said they often seek care elsewhere because YDHC providers do not relate to them or their family. Almost a third of the

population is Hispanic/Latino (29%) and about a quarter of people (23%) speak a language other than English at home.²³ YDHC has invested more in hiring bilingual staff and creating Spanish materials, but some people said more can be done to meet the demand of the region's changing population. Yuma County's seasonal and agricultural work has helped attract a higher-than-average immigrant population in the county. About 16% of residents are immigrants with 14% being non-citizens — compared with the state averages of 10% and 5%, respectively.²⁴

Finally, community leaders reported that Medicaid patients sometimes feel stigmatized because of their income and are not treated well by hospital staff.

Finding 14: Hospital Administration and Operations. Community leaders and residents reported frustration with the hospital's slow billing processes and the high cost of care compared with other health facilities in the region. Patients have also reported frustration with receiving payment plans, itemized bills, and upfront costs, leading to about a quarter (23%) of survey respondents seeking care elsewhere due to inconsistent operational processes.

Finding 15: Service Transparency and Awareness. A perceived lack of service transparency from the hospital is contributing to negative perceptions and access to care challenges for patients. Many people reported difficulty finding out what services are available. Even though the hospital is doing due diligence to promote services, residents said it's not enough.

Services that community survey respondents were most familiar with were family medicine (86%), lab services (71%), emergency services (64%), radiology (57%), and rehabilitation/therapy (57%). Community survey respondents were less familiar with home health (26%), general surgery (21%), women's health (21%), medical-surgical services (19%), sleep studies and remedies (17%), oncology (14%), and swing beds (12%).

In addition to these services, residents may not know about early morning walk-in care options at the hospital. Community leaders said enhanced communication to the public about services is needed, because there's a difference between the perception and the reality of what services are being offered. Community leaders also said the hospital needs to be more transparent about community health needs and services gaps. For example, some issues, such as mental health, are nationwide issues that will not be solved quickly. Additionally, while some services like labor and delivery are needed in the community, there's not enough volume every year to financially support those services at the hospital.

Finding 16: Community Engagement. Community leaders and residents indicated that the hospital lacks engagement with the community, leading to mistrust among leaders and residents. Community leaders and residents suggested that YDHC needs to be more involved in community events and invest in community relationships. Leaders said the hospital would benefit from creating and/or maintaining relationships with community groups and other health organizations in the region. Leaders and residents said being active and engaged through events (such as fundraisers for the hospital or supporting other organizations' fundraisers) goes a long way in a small town. As one key informant interviewee put it, "When the community feels like they're being supported by the hospital, they'll support the hospital."

Finding 17: Regional Coordination. With limited service options across the region, community leaders and residents want to see improved collaboration with external providers to enhance care options. Community leaders said that YDHC is good at coordinating with Front Range hospitals, but much less so with other Eastern Plains facilities. Despite the rivalry between Yuma and Wray hospitals, patients said that if they have a health issue that can't be served in Yuma, they'll go to Wray.

Next Steps

YDHC has made strides in addressing community health needs and improving services at the hospital. This report outlines the recommendations and associated findings that provide actionable areas for YDHC to address ongoing community needs and service challenges in its strategic plan. While some challenges are systemic, YDHC is well positioned as a community leader to ensure residents have access to quality health care services.

Endnotes

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