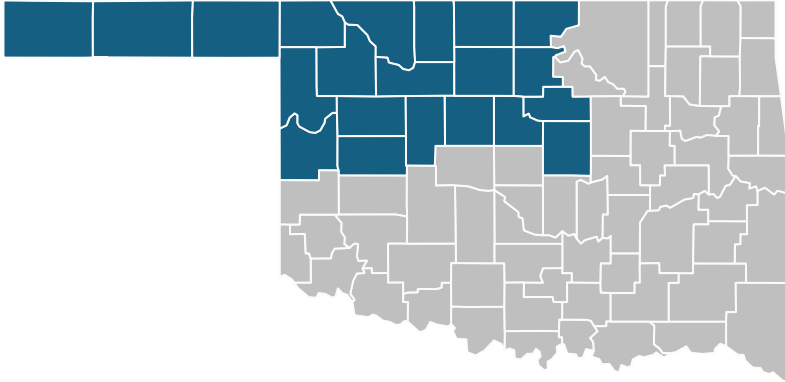


Regional Objectives Plan: Northwest and North Central Oklahoma

Geographic coverage:



Counties include Alfalfa, Beaver, Blaine, Cimarron, Custer, Dewey, Ellis, Garfield, Grant, Harper, Kay, Kingfisher, Lincoln, Logan, Major, Noble, Payne, Roger Mills, Texas, Woods, and Woodward.

Geographic coverage spans OSDH Districts 1, 2, and 3.

Prioritized areas of need:

These prioritized areas of need were identified through available data and stakeholder input and reflect a focused set of priorities rather than every challenge present in these communities. While communities across the region face a wide range of needs, they also demonstrate significant strengths, and many areas could merit attention. Further needs are likely to emerge over time, and future planning will continue to evolve as new information and community input becomes available.

The first four needs below are present statewide across all Oklahoma regions and are listed alphabetically. The ordering does not reflect any ranking of priority or importance.

Need	Supporting Details
High prevalence and co-occurrence of obesity, hypertension, diabetes, and cardiovascular disease, worsened by limited engagement with preventive care and chronic disease management	- Heart disease is the leading cause of death in Oklahoma (CDC, 2026). Oklahoma has been identified as having one of the highest cardiovascular disease rates and ranks 43rd in prevalence of heart disease (America's Health Rankings, 2024). - OSDH District 3 exceeds the Oklahoma benchmark on nine selected disease-prevalence measures (Disability, Asthma, High Blood Pressure, Cancer, High Cholesterol, COPD, Coronary Heart Disease, Obesity, and Stroke). OSDH District 1 has elevated rates of coronary heart disease (7.5% relative to 6.3% national average) and obesity (40.9% relative to national benchmark of 33.3%). OSDH District 2 has 38.1% prevalence of high cholesterol (relative to national rate of 36.4%), and 39.6% rate of obesity among adults (CDC, 2025). - Licensed cardiology physician supply is fewer than 3 physicians per 100,000 residents across the region, versus an Oklahoma benchmark of 7.4 and Oklahoma City/Tulsa benchmark of 15.4 (Association of

	American Medical Colleges, 2023; OK Medical Board, 2026; OK State Board of Osteopathic Examiners, 2026). • OSDH Districts 1 and 2 report 75.1 to 76.0% of adults with high blood pressure taking blood pressure medication, below the state average, and OSDH Districts 1 and 3 fall below state and national averages for cholesterol screening (CDC, 2025). • Additional risk factors affect the prevalence of chronic diseases, including 17.2% of adults in OSDH District 3 currently smoking cigarettes (above state and national averages of 16.3% and 12.8%) and 14.3 to 15.4% of adults across the region reporting binge drinking (CDC, 2025).
High prevalence of mental health conditions and substance use disorder, with limited access to care and insufficient coordination across the continuum	• In OSDH District 3, 18.3% of adults report frequent mental distress, averaging 6.1 poor mental health days per month (CDC, 2025; UWPHI, 2025). • The Northwest and North Central region of Oklahoma ranges from 1.0 to 6.8 licensed mental health physicians per 100,000 residents, well below the state average of 13.6 and the national average of 15.1 (Association of American Medical Colleges, 2023; OK Medical Board, 2026; OK State Board of Osteopathic Examiners, 2026). • Methamphetamine overdose death rates in the panhandle and surrounding counties are above the Oklahoma state average, with 19.7 overdose deaths per 100,000 residents (OSDH Drug Overdose Dashboard, 2024). • Further, the region has limited access to buprenorphine providers, with 3.5 to 8.7 buprenorphine providers per 100,000 residents, relative to the state average of 10.6 (SAMHSA, 2025). • There are few dedicated inpatient psychiatric beds available in the Northwest and North Central region, and patients have to travel 60 to 90+ miles for mental health care in OSDH Districts 1 and 3 (OSDH, 2024; Oklahoma Inpatient Encounter Data, 2023-2024).
Limited access to and utilization of comprehensive primary and preventive care, contributing to avoidable health outcomes	• The Northwest and North Central region has limited access to primary care physicians, ranging from 39.5 to 49.5 licensed primary care physicians per 100,000 residents across districts in the region, relative to a state benchmark of 71.4 (Association of American Medical Colleges, 2023; OK Medical Board, 2026; OK State Board of Osteopathic Examiners, 2026). • OSDH District 1 (panhandle and neighboring counties) performs under Oklahoma averages across four preventive care uptake measures, with only 40.1% of Medicare fee-for-service enrollees receiving an annual flu vaccine, 56.0% of adults completing a dental visit in the past 12 months, 76.9% of adults holding a routine check-up in the past 12 months, and 76.0% of adults with high blood pressure taking a blood pressure medication (UWPHI, 2025; CDC, 2025). • Similarly, OSDH Districts 1 and 3 fall below state and national benchmarks for cholesterol screening, colorectal cancer screening, and mammograms (CDC, 2025).

	Additional social factors affect access to primary and preventive care, including a poverty rate of 17.0% in OSDH District 3, a food insecurity rate of 19.0% among adults in OSDH District 1, and no household broadband connectivity for 11.6 to 13.8% of households in OSDH Districts 1 and 3 (ACS 5-Year, 2024; CDC, 2025).
Limited access to women's health services across all life stages	- Low rates of OB/GYN physicians in the Northwest and North Central region limit patient access to women's health care, with 2.0 to 9.7 licensed OB/GYN physicians per 100,000 residents, well below the state average of 11.3 and national average of 12.9 (Association of American Medical Colleges, 2023; OK Medical Board, 2026; OK State Board of Osteopathic Examiners, 2026). - Average distance traveled for inpatient labor and delivery exceeds 50 miles in OSDH District 1, and is above the state average across all Northwest and North Central districts (Oklahoma Inpatient Encounter Data, 2023-2024). Incremental travel distance can become detrimental to urgent/emergency deliveries as well as a barrier to pre- and post-natal care. - Furthermore, relatively few facilities throughout the region are equipped with on-site bassinets, reflecting a broader pattern of limited infrastructure to support maternal and newborn care (Oklahoma Inpatient Encounter Data, 2023-2024).
Limited access to and utilization of as-needed urgent care services drives improper utilization of emergent services	- Most counties in the panhandle and neighboring Northwest region have limited access to urgent care services, with only 1 to 2 urgent care centers per county (IQVIA, 2026). - Limited access to urgent care services may drive increased utilization of emergent services, which are already capacity-constrained in parts of the region. For instance, residents in OSDH District 1 travel an average of 17 miles for emergency care, exceeding the state benchmark of 8 miles (Oklahoma Emergency Department Data, 2024). - Grant and Alfalfa counties do not have emergency department services. Residents of Alfalfa County travel an average of 40+ miles for in-state emergency department services (Oklahoma Emergency Department Data, 2024).

Disclosure:

This Regional Objectives Plan draws on data-driven findings from public sources (cited with each finding) and OSDH encounters data (2023-2024). To allow comparison across regions of different sizes, rates were calculated by dividing figures from the cited source by the relevant population data from the US Census Bureau (2024). These findings were supplemented by stakeholder input to validate findings, surface additional regional priorities, and capture insights not reflected in available data. All attendees of publicly accessible RRR Regional Virtual Kickoffs or County Cluster Kickoffs were invited to meet with their facilitator to discuss organizational challenges and share perspectives on regional needs. Virtual Kickoff sessions and materials were also recorded and posted publicly for broader accessibility. Facilitators combined data and community input, where possible, to ground the plan in both evidence and lived experience.

Organizations consulted while developing perspectives for this plan:

Note: Listing an organization reflects its participation in the input process and not its endorsement of the plan.

Beaver CHD
Beaver County Memorial Hospital
Blackwell Primary Care
Blaine CHD
Buffalo Family Health Clinic
Buster Rural Health Clinic
Cimarron Memorial Hospital
Cimarron Memorial Rural Health Clinic
Clinton Indian Health Center
Clinton Regional Hospital
Community Clinic of Beaver
Community Clinic of Turpin
Community Medical Clinic
Cushing Medical Specialist
Custer CHD
Dorothy M. Smith Family Medical Center
Drumright Regional Hospital
Fairview Family Clinic
Fairview Regional Medical Center Authority
Garfield CHD
Grant CHD
GSP Health Canton
GSP Health Cherokee
GSP Health East Enid
GSP Health Enid Central
GSP Health Enid Downtown
GSP Health Enid West
GSP Health Medford
Harper CHD
Harper County Community Hospital
Hillcrest Hospital Cushing
INTEGRIS Health Enid Hospital
INTEGRIS Health Medical Group
INTEGRIS Health Ponca City
INTEGRIS Health Woodward
Iowa - Perkins
Kay CHD
Kay Nation - Kanza
Kickapoo - FQHC
Kingfisher CHD
Laverne Family Health Clinic
Lincoln CHD
Logan CHD

Major CHD
Mary Mahoney Health Center at Langston
Medford Family Clinic
Memorial Hospital of Texas County
Mercy Hospital Kingfisher
Mercy Hospital Logan County
Mercy Hospital Logan County-Crescent
Mercy Hospital Logan County - Guthrie
Mercy Hospital Watonga
Newkirk Family Health Center
Newman Healthcare Associates
Newman Memorial Hospital
Noble CHD
Northwest Center for Behavioral Health
Okeene Municipal Hospital
Panhandle Counseling and Health Center, Inc.
Payne CHD
Perry Family Physicians
Ponca - White Eagle
Ponca City Family Health Center
Prague Community Hospital - Prague Family Clinic
Prague Regional Memorial Hospital
Roger Mills Memorial Hospital
Rural Wellness Stroud Hospital
Sac & Fox - Blackhawk
Seiling Municipal Hospital
SHARE Medical Center
SMC - Physicians Clinic
SMC West End RHC
SMHA - RHC
Stillwater Medical-Blackwell
Stillwater Medical Center
Stillwater Medical - Perry
St. Mary's Regional Medical Center
Texas CHD
Variety Care Clinton
Watonga Indian Health Center
Watonga Family Care
Waynoka Family Clinic
Weatherford Regional Hospital
Woods CHD
Woodward CHD
Xpress Wellness Urgent Care