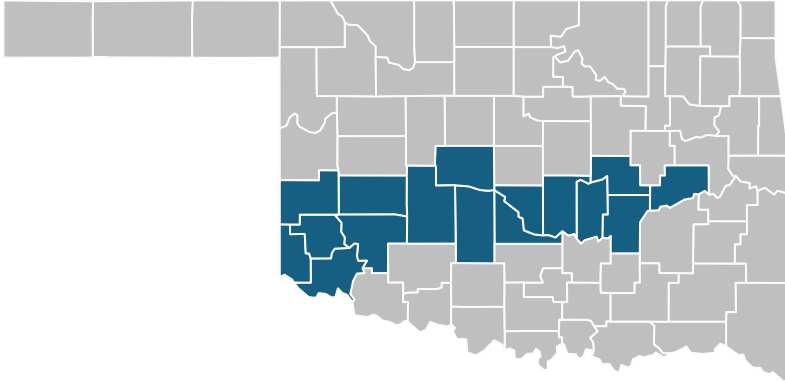


Regional Objectives Plan: Southwest and Central Oklahoma

Geographic coverage:



Counties include Beckham, Caddo, Canadian, Cleveland, Grady, Greer, Harmon, Hughes, Jackson, Kiowa, McClain, McIntosh, Okfuskee, Pottawatomie, Seminole, and Washita.

Geographic coverage spans OSDH Districts 2, 5, 6, 7, and 10.

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	• OSDH Districts 5 and 7 have preventable hospitalization rates more than 20% above the Oklahoma benchmark (AHRQ, 2023). • OSDH District 7 (McIntosh and Okfuskee counties) has the highest prevalence of obesity (44.0%), diabetes (15.8%), and coronary heart disease (9.0%); in this district, high cholesterol is also prevalent in 39.7% of adults compared to the national average of 36.4% (CDC, 2025). • Central parts of the region (OSDH District 6) experience high rates of high cholesterol (39.3%), coronary heart disease (7.5%), and obesity (40.3%). Southwestern parts of the region (OSDH District 5) experience high rates of coronary heart disease (7.4%), diabetes (13.5%), and obesity (42.0%) (CDC, 2025). • Access to specialty services across this region remains severely limited. For example, the region ranges from 0.9 to 4.3 licensed cardiologists per 100,000 residents, relative to the Oklahoma

	benchmark of 7.4 and national benchmark of 9.3 (Association of American Medical Colleges, 2023; OK Medical Board, 2026; OK State Board of Osteopathic Examiners, 2026). In southwestern parts of the region (OSDH District 5), patients travel 37 miles on average to receive inpatient cardiology care (Oklahoma Inpatient Encounter Data, 2023-2024). • Related preventive care uptake remains low: OSDH District 2 (75.1%) is below the Oklahoma benchmark (76.3%) for the rate of people with high blood pressure taking blood pressure medication; District 5 has the lowest prevalence of cholesterol screening and one of the highest prevalences of obesity, 42% compared to 33% for the national benchmark, and OSDH District 5 also falls below the Oklahoma benchmark on all selected preventive care and screening utilization measures. Districts 6 and 7 are below the Oklahoma benchmark on dental visits and annual flu vaccinations. District 10 is below the Oklahoma benchmark for routine check-ups in past 12 months and those with high blood pressure taking blood pressure medication (CDC, 2025; UWPHI, 2025). • Controlling blood pressure is a vital step in managing the progression of heart disease; high blood pressure prevalence in OSDH Districts 2, 5, 6, and 7 ranges from 37.5 to 43.6%, while the national rate is 34.4% (CDC, 2025). • Elevated obesity, hypertension, diabetes, and cardiovascular disease rates are compounded by social risk factors; Oklahomans in Caddo (10%), Jackson (10%), Kiowa (19%), Pottawatomie (9%), Seminole (12%), and Washita (16%) counties are affected by limited access to healthy foods compared to the state average of 9%, and in 12 of the 16 counties, 30% or more of adults reported participating in no physical activity outside of work (County Health Rankings, 2025).
High prevalence of mental health conditions and substance use disorder, with limited access to care and insufficient coordination across the continuum	• Beckham, Caddo, Hughes, Kiowa, McIntosh, Pottawatomie, Seminole, and Washita counties exceed the state suicide rate of 22 deaths per 100,000 people (County Health Rankings, 2025). • In Oklahoma, 24% of school-age children have a diagnosis of ADHD, depression or anxiety or have been told by a physician or educator they have a behavior or conduct problem (America's Health Rankings, 2026). • All of the counties in this 16-county region, with the exception of Cleveland, are approximately 30% or more below the national benchmark for mental health physicians per capita (Association of American Medical Colleges, 2023; OK Medical Board, 2026; OK State Board of Osteopathic Examiners, 2026). Primary care stakeholders in the region report limited to no capacity to conduct routine behavioral health screenings such as PHQ-2, PHQ-9, or GAD-7. If screenings are completed and a need is identified, trained staff to provide brief interventions or coordinate behavioral healthcare are nearly non-existent.

	During public touchpoints, stakeholders shared that “our ERs are full due to EODs or mental health issues”, “we had an open position for behavioral health for 3 years”, and another expressed “there are no inpatient psych beds”.
Limited access to and utilization of comprehensive primary and preventive care, contributing to avoidable health outcomes	14 out of 16 counties in this region have fewer primary care physicians per capita than the state average, with 33.5 to 54.8 licensed primary care physicians per 100,000 residents, relative to the Oklahoma average of 71.4 (Association of American Medical Colleges, 2023; OK Medical Board, 2026; OK State Board of Osteopathic Examiners, 2026). - There is low preventive care uptake in the region - for example, in 14 out of 16 counties, 39.7 to 43.1% of Medicare fee-for-service enrollees received an annual flu vaccine relative to a national benchmark of 48.0% (UWPHI, 2025). - In OSDH District 5 (including Beckham, Caddo, Greer, Harmon, Jackson, Kiowa, and Washita counties), only 82.9% of adults received a cholesterol screening in the past 5 years, below the national benchmark of 86.2% (CDC, 2025). - OSDH District 7 (including McIntosh and Okfuskee) has the state's lowest colorectal cancer screening rate - just 57.5% of adults ages 45-75 have been recently screened, versus 63.7% nationally (CDC, 2025). - Between 65.2 and 69.9% of women ages 50-74 in the region have received a mammogram in the past two years, below the national average of 76.1% (CDC, 2025).
Limited access to women's health services across all life stages	- Rural counties in Southwest and Central Oklahoma have among the lowest ratios of OB/GYNs per capita, with 3.2 to 8.9 licensed OB/GYNs per 100,000 residents, relative to the Oklahoma benchmark of 11.3 and the national benchmark of 12.9 (Association of American Medical Colleges, 2023; OK Medical Board, 2026; OK State Board of Osteopathic Examiners, 2026). 13 of the 16 counties in the Southwest and Central region are considered maternity care deserts or low-access maternity care areas (March of Dimes, 2026). - In 9 out of 16 counties in the Southwest and Central region, women travel 31 to 60 minutes to reach their closest hospital with labor and delivery services (March of Dimes, 2026). Incremental travel distance can become detrimental to urgent/emergency deliveries as well as a barrier to pre- and post-natal care. - Limited access to prenatal ultrasound, fetal monitoring, and postpartum follow-up continues to drive poor maternal outcomes. Among women giving birth in Oklahoma, 14.2% receive no or inadequate prenatal care, and women with chronic health conditions (e.g., hypertension, unhealthy weight, and diabetes) are more likely to have a preterm birth or experience other poor birth outcomes (March of Dimes, 2025).

Limited access to comprehensive and coordinated oncology and cancer care services	• Oklahoma’s rural counties experience markedly higher cancer mortality than urban areas, despite similar incidence rates, due to limited local oncology services, delayed diagnosis, and long travel distances for cancer specialty treatment (OU Health Stephenson Cancer Center, 2025). • Cancer affects 8.3% of adults in OSDH Districts 6 and 7, exceeding the state average of 7.8% (CDC, 2025). • Most rural Southwest and Central counties lack on-site oncology, radiation, or infusion services, leaving patients and caregivers to travel 60 to 120 miles to Lawton or Oklahoma City for cancer care. Licensed oncology physicians range from 0.3 to 3.0 per 100,000 residents across Southwest and Central Oklahoma, below the Oklahoma and national benchmarks of 3.9 and 8.1, respectively (Association of American Medical Colleges, 2023; OK Medical Board, 2026; OK State Board of Osteopathic Examiners, 2026). • Only 57.5 to 58.6% of adults in OSDH Districts 5, 6, and 7 have received a recent colorectal cancer screening, compared to the national average of 63.7%. Across Southwest and Central Oklahoma, fewer than 70% of women ages 50-74 have received a mammogram in the past two years, compared to the national average of 76.1% (CDC, 2025). • Across OSDH Districts 5, 6, and 7, rural residents face compounded risk factors including smoking prevalence of 17.7 to 21.2% and obesity rates of 40.3 to 44.0%, all exceeding Oklahoma averages (CDC, 2025). • Additional social factors affect access to cancer care, including poverty rates of 15.5 to 19.0% across OSDH Districts 5, 6, and 7, lack of reliable transportation among 12.5% of adults in OSDH District 7, and 12 to 18% of households lacking broadband connectivity in OSDH Districts 5, 6, and 7 (ACS 5-Year, 2024; CDC, 2025).
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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.

A Path to Care
Absentee Shawnee Tribal Health System
Access Care Oklahoma
Anadarko Chamber of Commerce
Anadarko Fire Department/EMS
Anadarko Rural Wellness
Cancer Centers of Southwest Oklahoma
Central Oklahoma Family Medical Center
CHCI Shawnee Family Medical Center
Cheyenne and Arapaho Tribe of Oklahoma
Chickasaw Nation
Chickasha Community Foundation
Community Health Centers of Oklahoma
Cordell Memorial Hospital
CrossCheck Health
CURA
East Central Oklahoma Family Health Care Center
Elkview General Hospital/Elkview Physician Group
Elmore City EMS
Gaines Government Services, Inc.
Grady Memorial Hospital Authority
Great Plains Regional Medical Center
Harmon Memorial Hospital
Heritage Home Care, Inc.
Holdenville General Hospital
iMed Supply
Immediate Care of Oklahoma
Inner Circle
INTEGRIS Canadian Valley Hospital
Integrity Care Group (Xpress Wellness Urgent Care)
Jackson County Memorial Hospital Authority and Clinic
Kiowa Tribe
Kirks EMS
Lawton Community Health Centers
Lawton Indian Hospital
Legal Aid Services of Oklahoma
LifeCare Health Services Grant Consultant
Mangum Regional Medical Center
Memorial Health System
Muscogee Nation Department of Health / Creek Nation Community Hospital

MyDirectives
MyHealth
NexaPoint Health
Norman Regional Health System
NorthCare
Oklahoma Complete Health
Oklahoma Impact Investing Collaborative
Oklahoma Primary Care Association
Oklahoma State Department of Education
Pottawatomie Go
Purcell Municipal Hospital
Red Rock Behavioral Health Services
Regional Medical Response System (RMRS) Region 3
RN-ARC HHC - Maternal & Postpartum Health Model
Saint Francis Health System
Shortgrass Community Health Center
South Central Medical and Resource Center
Southern Plains Tribal Board
SSM Health St. Anthony Hospital - Seminole
SSM Health St. Anthony Hospital - Shawnee
SSM Rural Health
Stigler Health and Wellness Center Inc.
SWOSU Rural Health Center
The Virtue Care Center
Tiger Mountain Fire Department
Variety Care
Volunteers of America Oklahoma
Warren Clinic
Weatherford Regional Medical Center
Youth and Family Resources Center