



# **Geographic Differences in Health Access & Outcomes**

## **Marylanders Online: 2025 Empowering Health Webinar Series**

**June 13, 2025**

**Sara Seitz, Director, State Office of Rural Health**

# Presentation Road Map

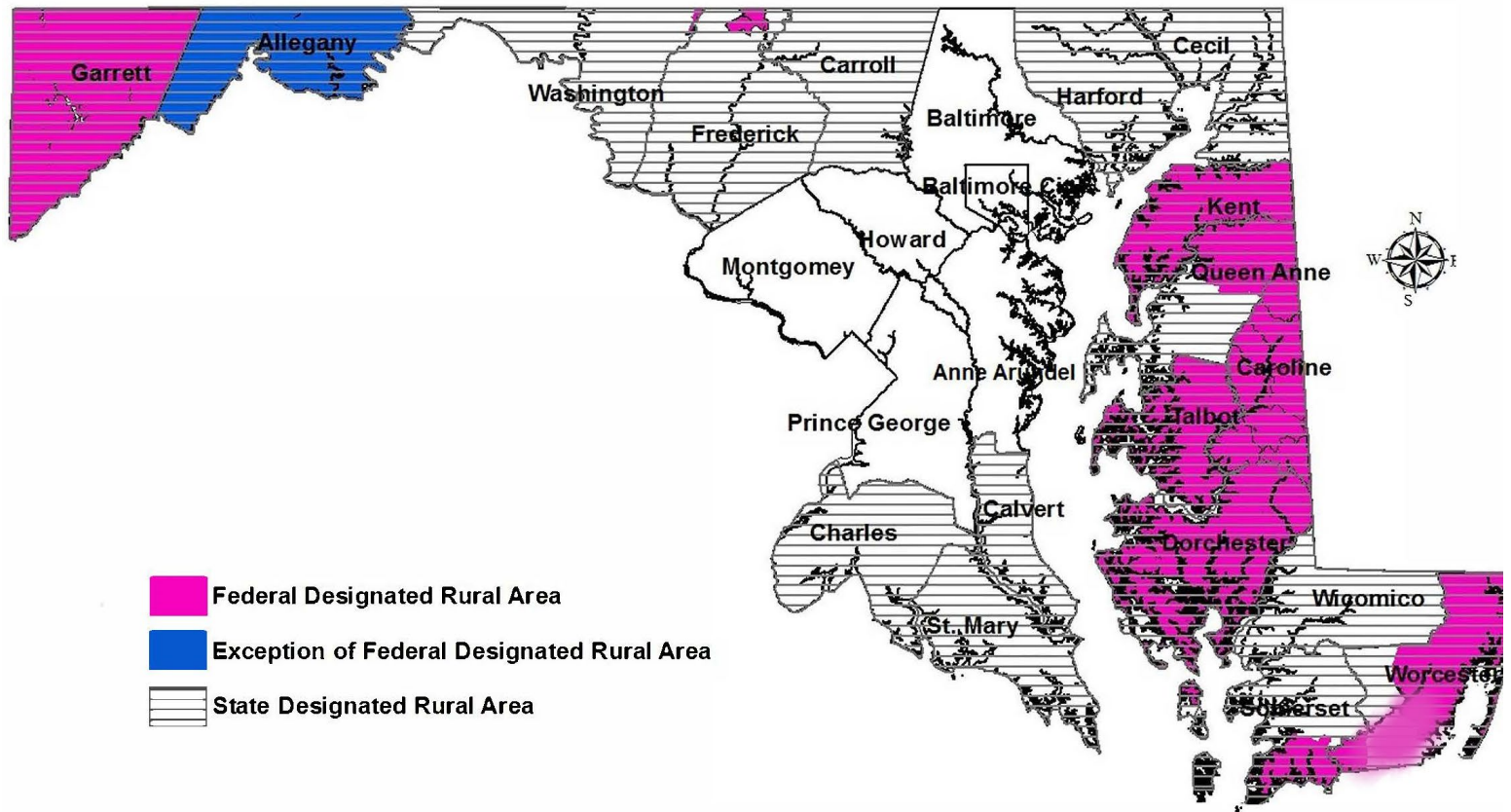
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- Rural Maryland: Geographic and Demographic Landscape
- Introduction to Health Outcomes
- Assets and Challenges
- Digital Health Potential and Considerations
- Opportunities and Resources
- Open Discussion

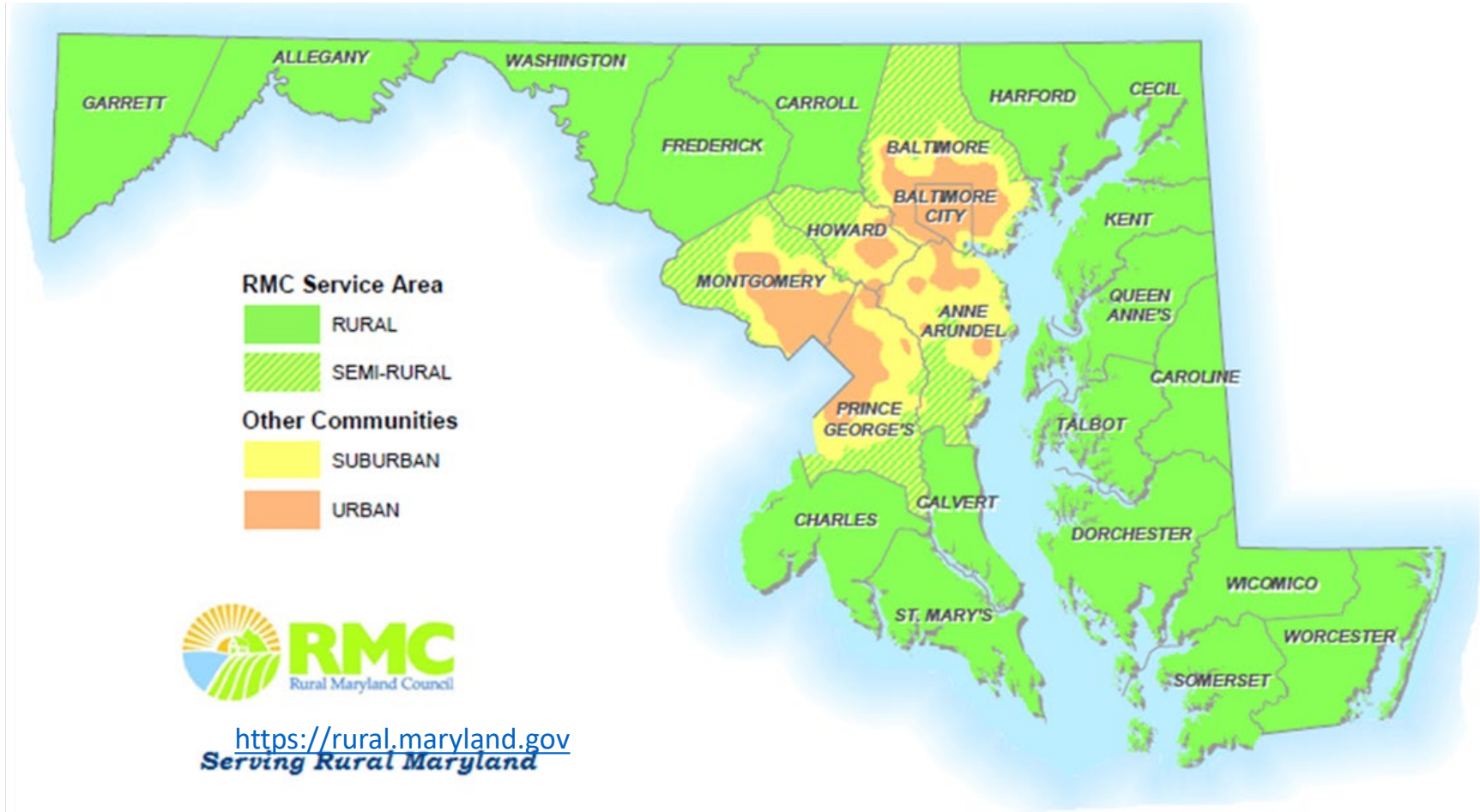
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# Geographic and Demographic Landscape

# Rural Maryland Defined



# Rural Maryland Defined



# Rural Maryland Demographics

## Demographics of Maryland Population, by Region and Rural Designation

Maryland Jurisdictions	Population	Population per Square Mile	% 65+ Years of Age	% Racial Minority (Non-White)	% Hispanic Ethnicity	% Education: Bachelors or Higher	Median Household Income	% Poverty	% Broadband Internet Subscription
	2020	2020	2020	2020	2020	2015-2019	2015-2019	2020	2015-2019
<b>State</b>	<b>6,177,224</b>	<b>594.8</b>	<b>15.9</b>	<b>41.5</b>	<b>10.6</b>	<b>40.2</b>	<b>\$84,805</b>	<b>9.0</b>	<b>86.4</b>
By Region									
<b>Western</b>	2,019,426,267	181.9	20.4	10.9	3.0	20.6	\$53,123	13.3	76.8
<b>North Central</b>	1,011,908,175	429.0	16.2	16.3	6.4	38.2	\$94,549	5.9	88.0
<b>Southern</b>	671,678,728	343.6	13.9	33.1	5.4	31.1	\$99,720	6.7	87.1
<b>Eastern Shore</b>	335,839,364	139.4	21.4	22.9	5.3	27.4	\$63,987	12.5	80.7
<b>Central (Non-Rural)</b>	4,390,083	2,537.5	15.1	48.8	11.1	44.6	\$90,491	9.5	87.5

United States Census Bureau. Quick Facts Maryland.

<https://www.census.gov/quickfacts/fact/table/MD/PST045221>

# Rural Maryland Demographics

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Characteristic	MD Average	State- Designated Rural	Federally- Designated Rural
% 65+ Years of Age	16.3	19.1	23.7
% Racial Minority (Non-White)	42.2	21.4	17.7
% Hispanic Ethnicity	11.1	5.1	5.4
% Education: Bachelors or Higher	41.6	28.0	26.1
% Poverty	10.3	10.8	12.5
Median Household Income	\$91,431	\$70,423	\$55,387
% Broadband Internet Subscription	89.7	79.6	75.8

U.S. Census Bureau (2020)

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# Rural Maryland Health Outcomes



# Protective Health Behaviors/Outcomes

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Health Indicators	% Babies Low Birth Weight	% Early Prenatal Care	% Children with Dental Visit in Last Year	% Having PCP	% Uninsured ED Visits
State	8.9	70	64	83	8.6
State-Designated Rural	8.4	76	63	86	5.4
Federally-Designated Rural	8.7	77	67	89	5

# Detrimental Health Behaviors/Outcomes

Maryland Jurisdictions	% Not Overweight/ Obese	% Adults Who Currently Smoke	% Affordable Housing	Years Life Expectancy
State	32.6	13.8	48.1	79.2
State-Designated Rural	31.4	18.9	60.1	78.1
Federally-Designated Rural	31.4	19.2	62.0	78.2
<b>Region by Rural Designation</b>				
Western Maryland	30.3	20.5	77.9	77.2
North Central Maryland	33.2	15.0	37.9	79.3
Southern Maryland	30.1	17.4	45.2	79.1
Eastern Shore	31.7	20.1	66.5	77.6
No Rural Designation	33.1	13.9	48.4	79.7

# Preventable Emergency Visits

**Maryland Emergency Department Visit Rates Due to Generally Preventable Acute Needs Related to Chronic Conditions (per 100,000 population), 2017**

<b>Maryland Jurisdictions</b>	<b>Asthma</b>	<b>Dental Care</b>	<b>Diabetes</b>	<b>Hypertension</b>	<b>Mental Health</b>
State	68.4	362.7	243.7	351.2	4,291.5
State-Designated Rural	75.6	670.3	300.2	413.5	5,772.8
Federally-Designated Rural	90.8	913.7	365.9	467.1	9,619.9
<b>Region by Rural Designation</b>					
Western Maryland	69.8	538.3	321.5	358.4	5,562.7
North Central Maryland	44.5	234.9	177.6	272.3	3,433.4
Southern Maryland	65.8	391.6	272.7	449.4	3,996.6
Eastern Shore	91.2	952.3	343.1	466.9	7,214.7
No Rural Designation	74.0	325.1	245.6	352.4	4,564.6

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# Assets and Challenges in Rural Maryland

## Identified Assets

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- Decentralized infrastructure, with tailored local approach
- Jacks of all trades, ingenuity and flexibility necessary
- Robust history of community support and innovation to serve community needs
- Networking and collaboration with common goals
- Volunteerism (health transportation, EMS, fire)
- State/Federal resources

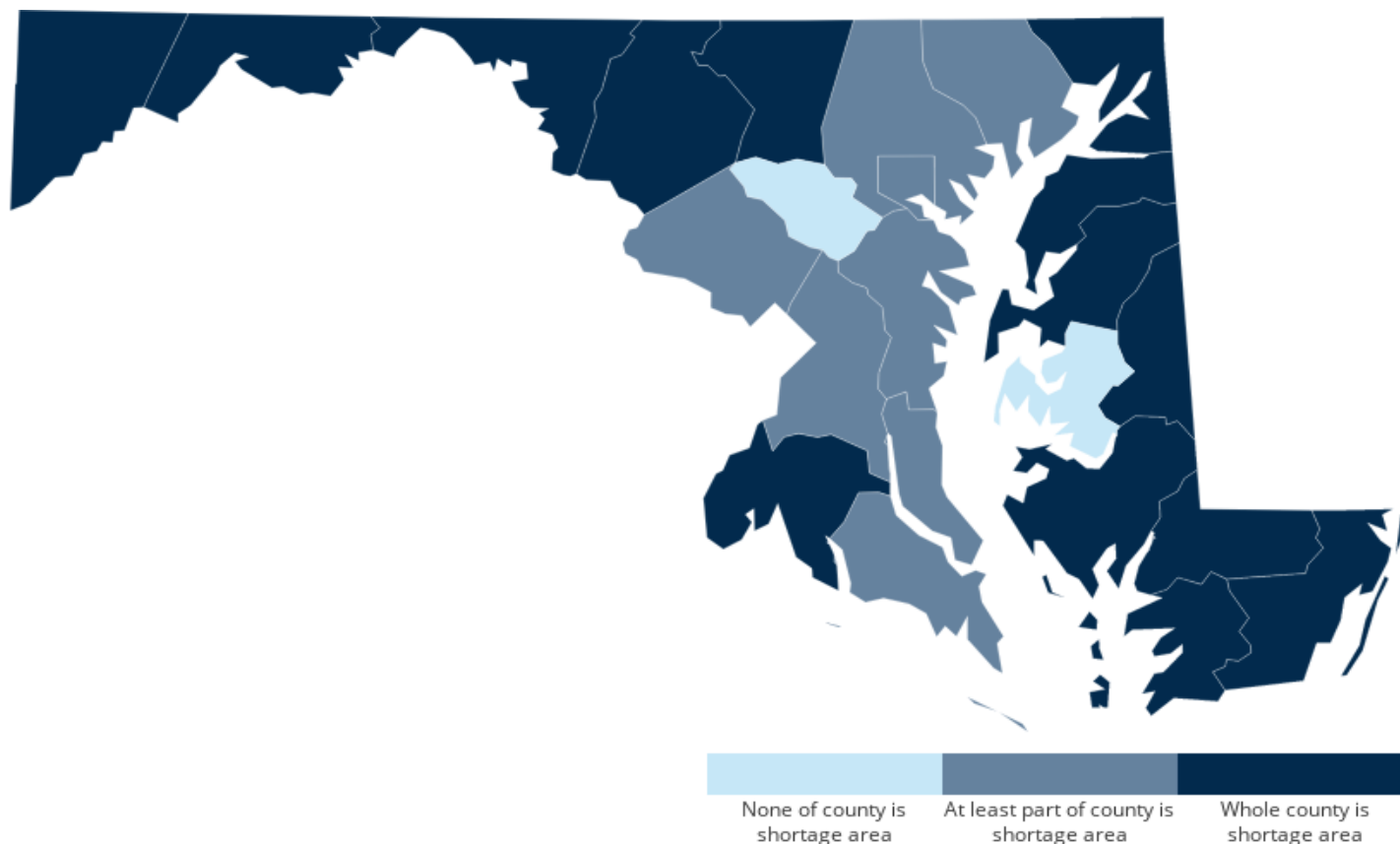
# Identified Challenges

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- Geographic diversity
- Isolation – physical, social
- Relative demographic homogeneity
- Aging infrastructure – roads, towns, water, electric
- Private water, sewer, driveways
- Broadband/ cell coverage limitations
- Limited healthcare facilities, staff, specialists
- Reliance on volunteers/ non-profit organizations
- State/Federal resource limitations based on population #s
- Exacerbation of existing SDOH, disparities

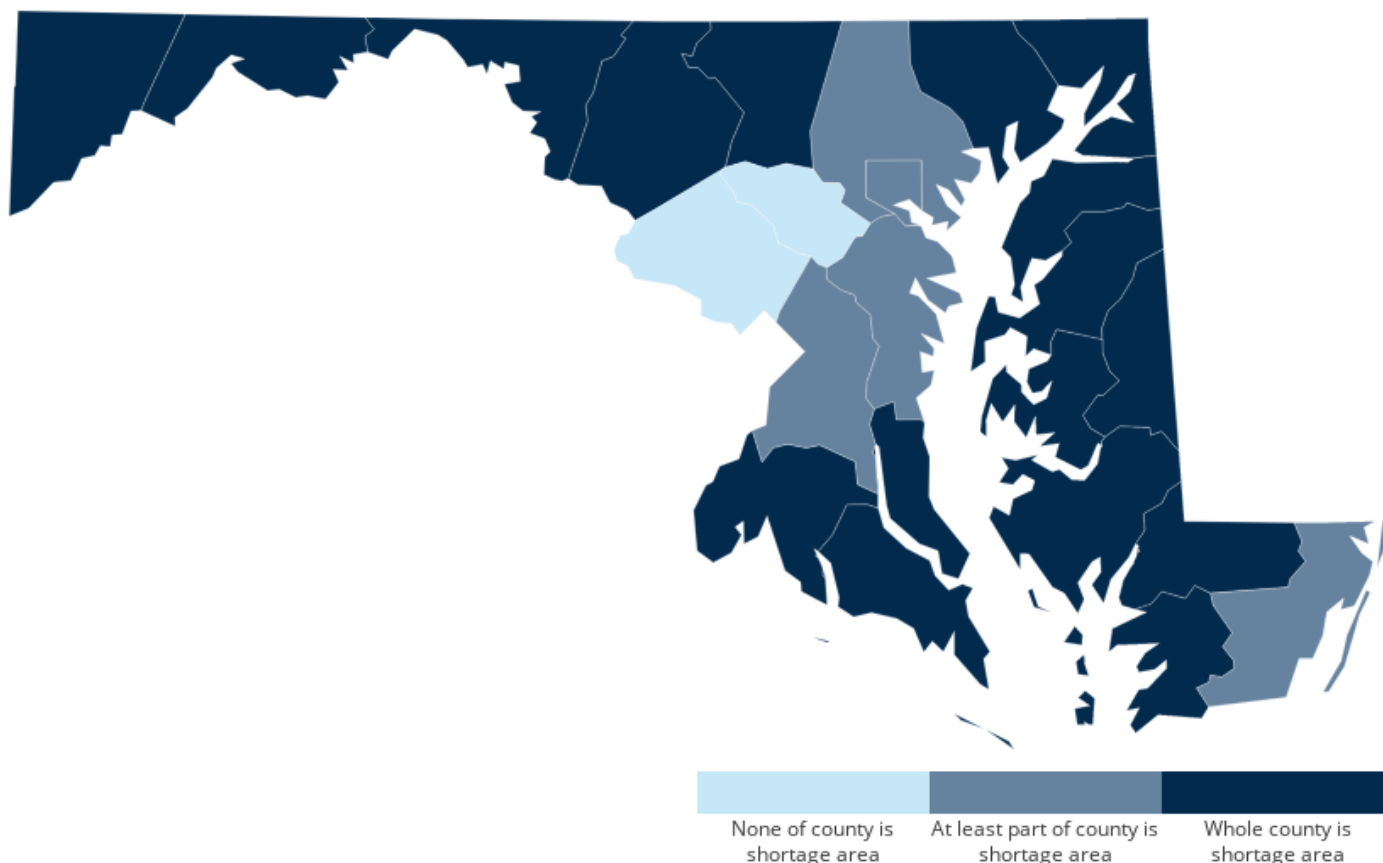
# Health Professional Shortage Areas

## Primary Care HPSAs in Maryland, by County, April 2025



# Health Professional Shortage Areas

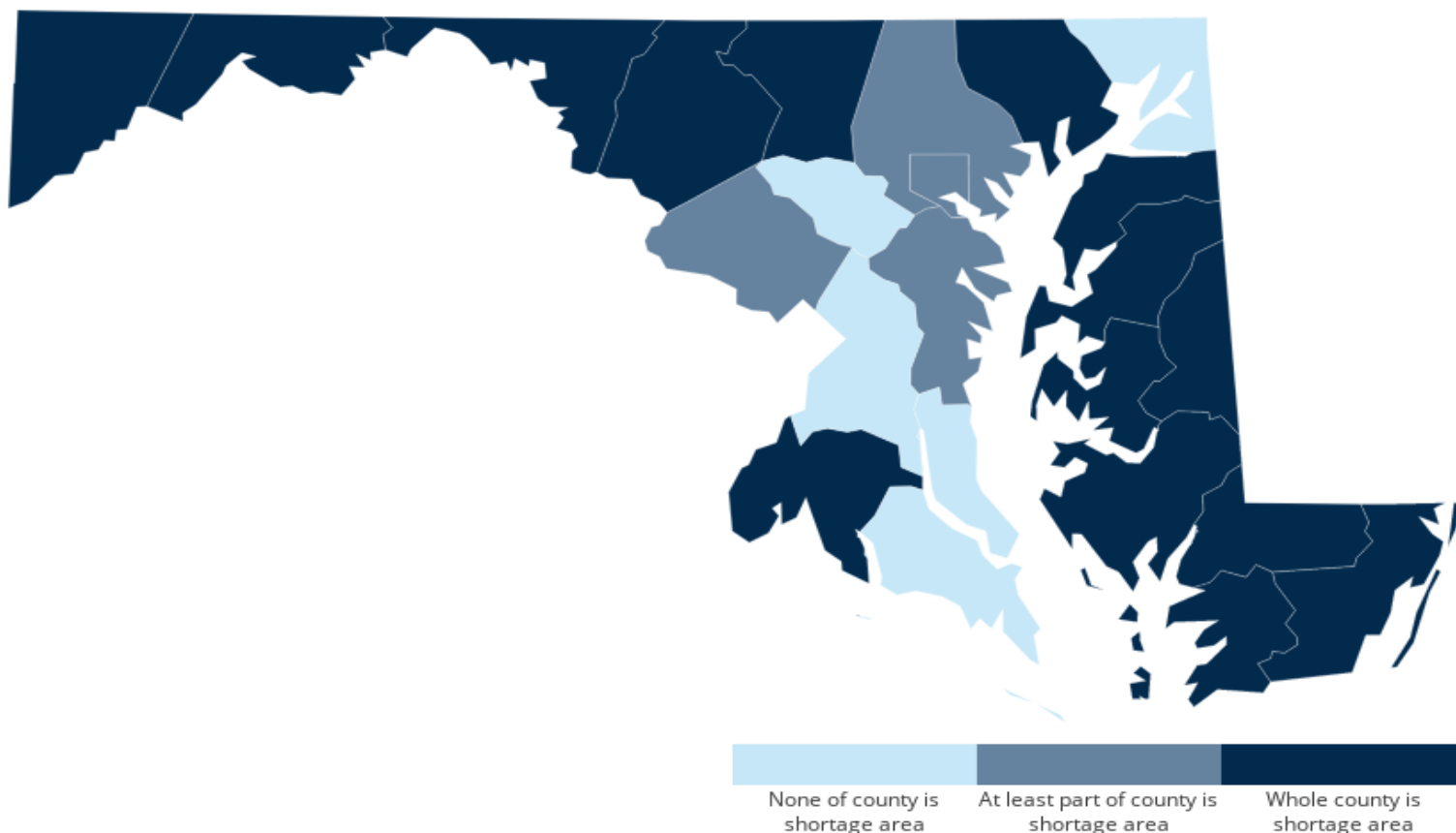
## Mental Health HPSAs in Maryland, by County, April 2025





# Health Professional Shortage Areas

## Dental Care HPSAs in Maryland, by County, April 2025



# Identified Assets and Challenges

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## ASSETS

- Decentralized infrastructure, with tailored local approach
- Jacks of all trades, ingenuity and flexibility necessary
- Robust history of community support and innovation to serve community needs
- Networking and collaboration with common goals
- Volunteerism (health transportation, EMS, fire)
- State/Federal resources

## CHALLENGES

- Geographic diversity
- Relative demographic homogeneity
- Aging infrastructure – roads, towns, water, electric
- Private water, sewer, driveways
- Isolation – physical, social
- Broadband/ cell coverage limitations
- Limited facilities, staff
- Reliance on volunteers/ non-profit organizations
- State/Federal resource limitations
- Exacerbation of existing SDOH, disparities

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# Digital Health Potential

# Digital Health Potential

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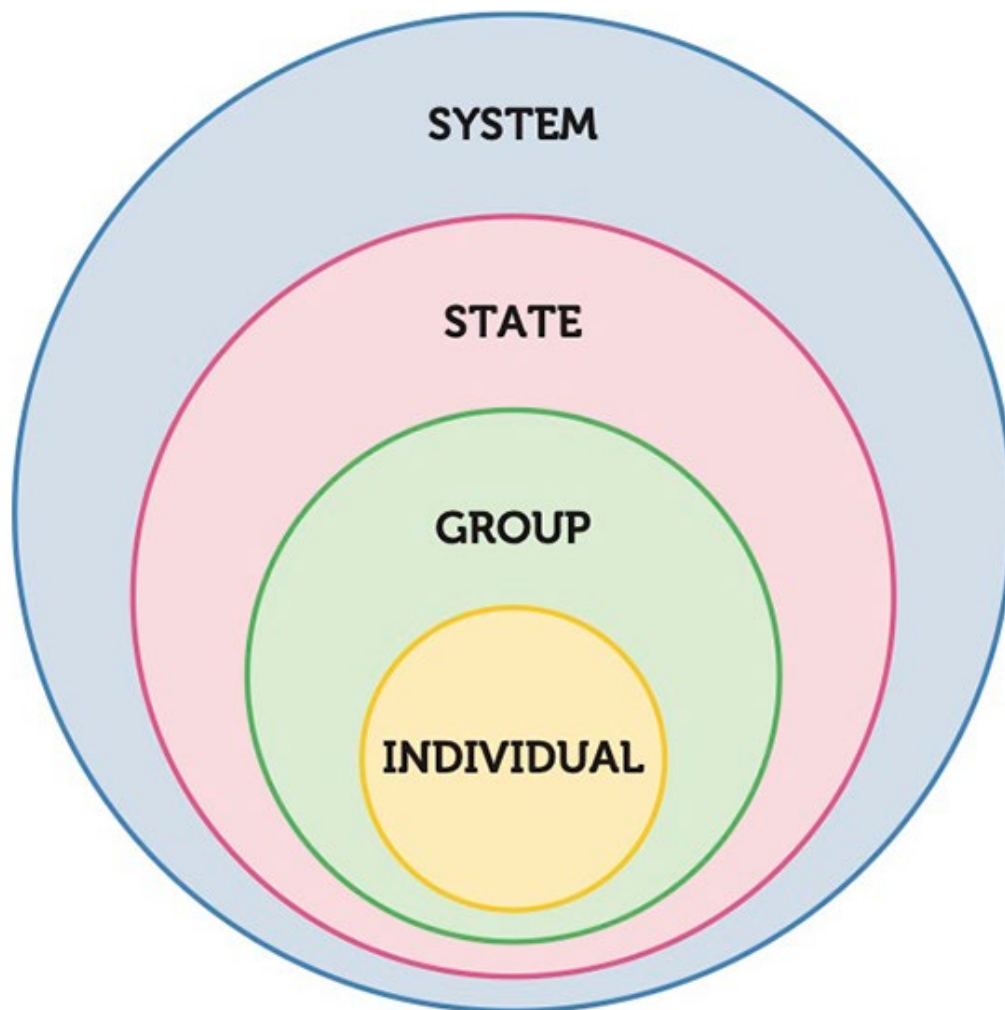
- Enable remote care
- Enhance efficiency
- ↑ access
- ↓ health outcome disparities

## AID IN OVERCOMING CHALLENGES

- Geographic diversity
- Relative demographic homogeneity
- Aging infrastructure – roads, towns, water, electric
- Private water, sewer, driveways
- Isolation – physical, social
- Broadband/ cell coverage limitations
- Limited facilities, staff
- Reliance on volunteers/ non-profit organizations
- State/Federal resource limitations
- Exacerbation of existing SDOH, disparities

# **If access is equitable...**

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## **Digital Health Considerations: Private Industry**

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### **Digital Redlining**

- Perpetuating inequities based on neighborhood income, race, rurality through underinvestment in broadband, online delivery services, etc.
- Help alleviate by:
  - Identify, address inequitable practices;
  - Support communities via “last mile” broadband;
  - Open access to private spaces in public areas;
  - SDOH screening and navigation to identify need;
  - Make right devices accessible at the right times, in the right places

## **Digital Health Considerations: Public Health/Policy**

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### **Methods, Payment, Policies**

- Audio-only vs. audio-visual technologies
- Payment parity (insurers paying the same for telehealth vs. in-person)

#### **Resource:**

- Preserve Telehealth Access Act of 2025 ([Maryland House Bill 869 \(HB869\)](#))

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# Opportunities and Resources to Improve Digital Health Access Differences



# Opportunities and Resources

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## ASSETS

- Decentralized infrastructure, with tailored local approach
- Jacks of all trades, ingenuity and flexibility necessary
- Robust history of community support and innovation to serve community needs
- Networking and collaboration with common goals
- Volunteerism (health transportation, EMS, fire)
- State/Federal resources: Engagement, data, policy



**Statewide Telehealth**  
**Interest Group**



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# Open Discussion

## ***Continued conversation:***

*Sara Seitz, Director*

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## ***Maryland State Office of Rural Health:***

<https://health.maryland.gov/pophealth/Pages/Rural-health.aspx>

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# Questions/Response