

Population Health Challenges for Appalachian Children

UnitedHealthcare Community Plan of Ohio (UHC) is collaborating with the Foundation for Appalachian Ohio and other local experts to bring greater awareness of health issues impacting children in Appalachia. This data serves as a foundation for discussions on programs and specific interventions to help improve health outcomes for this specific population.

Population Health Background

- Children in Appalachia face significant health disparities in behavioral health, wellness checks and childhood immunizations, and oral health.
- More than 450,000 children live in Appalachian Ohio.
- Approximately 1 in 6 Ohio children live in Appalachian Ohio.
- In 2013, Ohio Medicaid provided health coverage for 3 out of 5 (60.5%) Appalachian children.
- The four Appalachian counties with the highest rates of Medicaid enrollment were Pike(85.3%), Vinton (80%), Adams (78.2%), and Jackson (74.8%).
- United Healthcare Community Plan of Ohio (UHC) serves 45,192 children who call Appalachian Ohio home
- The data is a combination of UHC claims and quality reporting, and public health data sets.

Data from Ohio Appalachian Children's Report 2016 and UHC Ohio Plan

	Food Insecurity Rate	Obesity & Overweight Rate
Ohio	25.2	34.7
Appalachia	26.2	40.0
Adams	29.7	48.8
Athens	27.9	40.4
Belmont	25.3	40.5
Carroll	25.7	43.3
Coshocton	28.2	40.2
Gallia	26.9	44.3
Guernsey	28.5	45.3
Hocking	26.1	41.3
Jackson	32.4	45.0
Lawrence	24.6	51.0
Meigs	30.5	44.4
Monroe	28.2	44.5
Pike	31.5	46.9
Scioto	30.3	44.5
Trumbull	26.5	43.3
Washington	24.0	40.4

Behavioral Health Issues	Total
Childhood-onset psychiatric disorders	1159
Mood disorder, depression	911
Other mental health	695
Anxiety disorders/phobias	285
Mood disorder, bipolar	285
Substance Use	143

Dental Concerns

- > 20% Children never visited Dentist
- Or > 40% Dental Decay
- Or **Both**



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Opportunities for Impact

- Expand access through support provided in community-based settings, including schools and after-school programs.
- Focus on social determinants of health including food insecurity, technology, and health promotion.
- Address poor health drivers including dental outcomes, behavioral health disorders, and childhood poverty as a driver.
- Collectively impact childhood immunizations and lead screening gaps in care.
- Develop small-scale interventions focused on addressing health disparities.

