**Key Findings**

The picture of health is vastly different in connected communities and digitally isolated communities. This holds true across access to care, quality of care and health outcome metrics.

- **Outcomes:** The least connected counties generally have the highest rates of chronic disease. Obesity prevalence is 25% higher and diabetes prevalence is 35% higher in these counties (i.e., where 60% of households lack broadband access and over 60% lack basic Internet connections at home.)

- **Access:** Most of the counties with the worst access to primary care physicians are also the least connected (i.e., 40-60% of consumers in these counties do not subscribe to even basic Internet at home).

- **Quality:** Preventable hospitalizations (i.e., hospital stays that could have been avoided with appropriate care) are almost three times higher in counties with the lowest Internet adoption (0-20%) compared to those with the highest Internet adoption (80-100%).

The rural/urban gap is sizeable.

- Almost half of U.S. counties have high burdens of chronic disease (e.g., diabetes) as well as a need for greater broadband connectivity (e.g., these counties are below 80% access to broadband at 25/3 mbps). That translates to over 35 million people who live in counties with a “double burden” of need.

- Almost 60% of rural Americans live in these “double burden” counties; while less than 5% of urban America falls into the same category. The rural/urban gap holds true even if the broadband benchmarks are set at 80%, 70%, or 60% access.

- Rural counties are 10 times as likely as urban areas to be in low broadband access (below 50%), high diabetes areas (above 10%).

The distribution of “double burden” counties is not random, but includes sizeable clusters that could be targeted for intervention.

- The majority of “double burden” areas — high chronic disease, lower broadband access — fall into “clusters” of five or more counties with total populations over 100,000. This has significant implications for crafting successful and sustainable business models for connected health in rural areas.

The neediest counties at the intersection of broadband and health are concentrated in the South and Midwest.

- These counties average 8% fixed broadband access, have a diabetes prevalence rate that is 34% above the national average and an obesity prevalence that is 24% above the national average. See our *Priority 100* and *Rural 100* lists for more information.

To learn more, visit www.fcc.gov/health/maps.