Health Reform and Community Benefit

Jeff Harness/January 16, 2014
Understanding Community Benefit

So Many Big Questions....

• Why and how is health care changing?
• What is the role of non-profit hospitals?
• What is community benefit?
• What are the community benefits requirements of the ACA?
• How do I get involved?
This Is Why the Status Quo Is Intolerable

**What Drives Our Debt?**

*Government Spending as Share of Economy*

- **Projected Tax Revenue**
- **Medicare**
- **Medicaid & Other Health**
- **Social Security**

*Source: CBO*

*Transforming Healthcare Together™*
This Is Why the Status Quo Is Intolerable
Improving Population Health: *Focus on extremes or shift the curve?*

- The 90%
- The 10%

Healthier

Less healthy
Improving Population Health:
Focus on the 10%

- Reimbursement changes
- Focus on value (cost and quality) not volume
- Patient satisfaction
- Decrease readmissions
- Patient active in decision making
- Improved coordination and communication
What Does a Transformed Health Care System Look Like?

<table>
<thead>
<tr>
<th>Medical resources not used efficiently</th>
<th>Only the sickest patients receive care in the hospital</th>
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<td>Patients are discharged from the hospital and given instructions</td>
<td>Regular contact with patients</td>
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<td>Focus on discrete activity</td>
<td>Keeping patient as a customer</td>
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<tr>
<td>Focus on individual patient</td>
<td>Focus on whole patient</td>
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<tr>
<td>Focus on revenue</td>
<td>Focus includes community</td>
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<td>Focus on cost</td>
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Healthy Environments
Policies, Systems, Culture
Partners, Coalitions
Integration Strategy: Bridge Public Health and Medical Care Systems

Example: COPD

Medical Home

Community Health System

Integration

Medical Care System

Smoke-Free Policies

Wellness

Tobacco Treatment

Medication Oxygen Home Care

Prevention

Community Partnerships

Acute & Chronic Disease Care

Behavioral Health

Original Adapted by Y. Goldsberry, R. Fedrezzi, D. Bazos, and L. Ayers LaFave from CDC
ACA and Community Benefit

• Section 9007 of The Patient Protection and Affordable Care Act (ACA) revises the federal tax-exempt status requirements for nonprofit hospitals to ensure that hospitals’ “community benefit” investments (a condition of their tax-exempt status) are transparent, concrete, measurable, and both responsive and accountable to identified community need.

• To this end, the ACA requires hospitals to conduct a “community health needs assessment” (CHNA) and to adopt an “Implementation Strategy.”
Fragmented to Integrated

Enhanced Health Outcomes with Alignment

Fragmented system

Integrated system

Food environment
Providers  Non-profits  Schools  Civic Groups
Government  Businesses  Public Health  Faith-based

Some Outcome

Enhanced Health Outcomes

Adapted from Paul Epstein Results that Matter Team

Cheshire Medical Center
Dartmouth-Hitchcock Keene
Why Conduct a Health Assessment?

- Fit with strategy
- Compliance with regulations
  - Massachusetts Attorney General voluntary community benefit guidelines
  - IRS Form 990 Section H requirements
    - (community benefit)
Community Health Data

Community Health Assessment
Cooley Dickinson Hospital
March 2011

- Demographics
- Birth & Death data
- Chronic Diseases
- Substance Abuse
- Food and Fitness Environment
- Health Behaviors
- Health Care Access
Population by Age, Towns, and Counties, 2008

- Hampshire
- Franklin
- Amherst
- Easthampton
- Northampton
- Mass
Leading Causes of Death, by Towns and Counties, 2008

- Heart Disease
- Cancer
- Cerebrovascular Disease
- Injuries
- Diabetes

Hampshire
Franklin
Amherst
Easthampton
Northampton
Mass
Community Survey Data

Do you garden?

All survey respondents: 61% Garden, 39% Don't Garden

By neighborhood surveyed—respondents who said “yes”:

- South St. Neighborhood: 60%
- Hawley St. Neighborhood: 52%
- Bridge St. Neighborhood: 48%
- State St. Neighborhood: 46%
- Baystate Village: 45%
- Florence Heights: 32%
- Meadowbrook: 22%
- Hampshire Heights: 10%

Source: Northampton Survey Project, 2010
People who don’t currently garden— but would like to

Source: Northampton Survey Project, 2010
Involving the Community in Community Health Assessment

• Regional Health Survey
  • With other hospitals in the Pioneer Valley
• Focus groups (real people who use services)
• Key informant interviews
• Community forums (mix of residents and leaders)
  – Easthampton
  – Mental Health
  – Health Access
Community Forum Highlights

• All said transportation

• Easthampton
  – Health access; tobacco prevention and treatment

• Mental Health
  – Better coordination and communication; patient centered; bilingual/bicultural staff

• Health Access
  – Better coordination and communication; health center satellite in Amherst
Program Planning Criteria

- Based on evidence
- Based on local data
- Assessment of local needs/community engagement
- Includes community partners
- Patient-centered
- Cost-effective
- Measurable outcomes
Reporting

- Plan and budget approved by the hospital’s board
- Plan made available to the public (website usually)
- Report prior fiscal year results:
  - Massachusetts Attorney General’s website
  - IRS Form 990 Section H
What’s Next?

• Pilot projects in 2014 based on health assessment
  – Announce grants and RFPs in December /January
• Develop a shared vision
• Create collective action to improve health
• Work through the big questions:
  – Who’s involved? Who leads? Who pays?
  – How will we know we’re improving things?
How to Get Involved in Community Benefit at Your Non-Profit Hospital

• Go to the hospital’s website and review the health assessment and plan
• Go to the Massachusetts Attorney General’s website and review community benefit reports
• Meet with the hospital’s community benefits coordinator and discuss ways to get involved in projects
• Collaborate with the hospital on future health assessments
• Looks for ways to partner on projects