



**The Hilltop Institute**

*analysis to advance the health of vulnerable populations*

# Advancing Health Equity through the CHNA/Implementation Strategy Process

---

June 24, 2014

Gayle D. Nelson, JD, MPH

ASTHO Webinar

*Community Health Needs Assessments:*

*A Tool for Achieving Health Equity*

# CHNA/Implementation Strategy Process

---

- Not *just* CHNA. Also includes
  - Prioritizing identified health needs
  - Implementation strategy development
  - Evaluation

# What is Health Equity?

---

“...when everyone has the opportunity to attain their full health potential and no one is disadvantaged from achieving this potential because of their social position or other socially determined circumstance.”

*Promoting Health Equity: A Resource to Help Communities Address Social Determinants of Health*, Centers for Disease Control and Prevention. <http://www.cdc.gov/nccdphp/dch/programs/healthycommunitiesprogram/tools/pdf/SDOH-workbook.pdf>

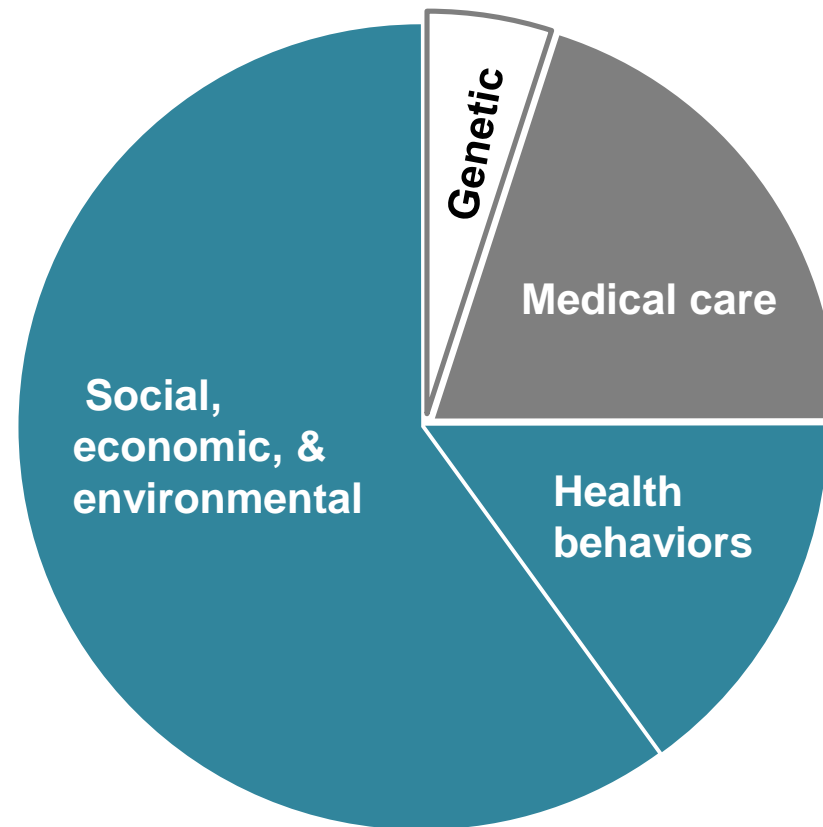
# Connection to CHNA/ Implementation Strategy Process

---

- A primary approach to achieving health equity is to address **the social determinants of health**

# Relative Impact of Health Determinants on Population Health

---



**Based on:** Tarlov, A. (1999). Public policy frameworks for improving population health. *Ann N Y Acad Sci.*, 896, 281-93.

# Basic Propositions

---

- Common interest
- Hospitals must follow requirements of federal CHNA/Implementation Strategy Process
- One such requirement is that hospitals “*must take into account*” health agency input into the Community Health Needs Assessment

# Basic Propositions continued

---

- CHNA/Implementation Strategy Process affords public health agencies three additional opportunities to advance health equity

# Hospital Community Benefits

---

- Initiatives, activities, and investments undertaken by tax-exempt hospitals to improve health in the communities they serve
- Condition of tax exemption



# Federal Oversight

---

- ACA §9007 – Additional Requirements for Charitable Hospitals
- IRS' Proposed rules – Community Health Needs Assessments for Charitable Hospitals 78 Fed. Reg. 20523

# State Agency Opportunities to Advance Health Equity

---

- **Community Health Needs Assessment**
- Prioritization of identified health needs
- Implementation strategy development
- Plan for evaluation

# Hospitals must take into account input from

---

- At least one state, local, tribal, or regional public health department
- and
- Members of medically underserved, low-income, and minority populations or their representatives

# State Health Agency Input could relate to:

---

- A broad social determinants/policy perspective
- Specific health equity/health disparities policies they would like to see advanced
- Policy-relevant data
- Assistance in identifying additional data, if needed

# State Health Agency Role: Prioritizing Needs

---

**Significant** needs are key

# State Health Agency Role: Implementation Strategy

---

- Final Implementation Strategy contains initiatives addressing social determinants related to the state agency's health equity goals

# State Health Agency Role: Evaluation

---

State Health Agencies could assist in evaluating programs and activities that advance health equity

# Hospital Community Benefit State Law Profiles

[http://www.hilltopinstitute.org/hcbp\\_cbl.cfm](http://www.hilltopinstitute.org/hcbp_cbl.cfm)

## Community Benefit State Law Profiles

### A 50-State Survey of State Community Benefit Laws through the Lens of the ACA

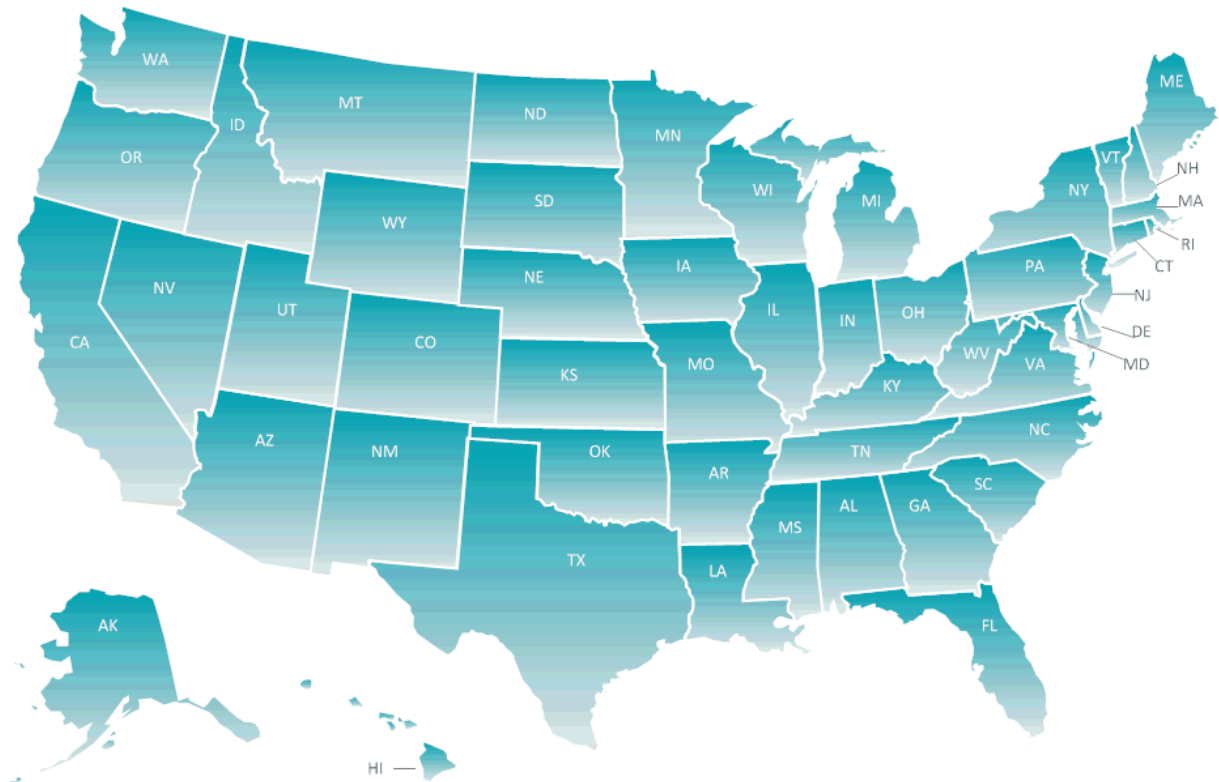
About the Profiles

State Profile Comparison

Issue Briefs:

The State Law Landscape

Policy Implications of the State Law Landscape



Alabama  
Alaska  
Arizona  
Arkansas  
California

Hawaii  
Idaho  
Illinois  
Indiana  
Iowa

Massachusetts  
Michigan  
Minnesota  
Mississippi  
Missouri

New Mexico  
New York  
North Carolina  
North Dakota  
Ohio

South Dakota  
Tennessee  
Texas  
Utah  
Vermont



# State Profile Comparison

## Community Benefit State Law Profiles Comparison

### State Community Benefit Requirements and Tax Exemptions for Nonprofit Hospitals

To see which states have a particular requirement, click on a symbol in the top (yellow) row. For detailed information about the requirement of a particular state, click on the symbol in the field at the intersection of the state's row and the requirement's column. For example, to read about Alabama's financial assistance policy dissemination requirement, click on the square in the field at the intersection of the Alabama row and the Financial Assistance Policy Dissemination column to open a new browser window showing the relevant text in the Alabama profile.

- Unconditional community benefit requirement
- Conditional community benefit requirement
- Requirement (either conditional or unconditional)
- Blank = No requirement

- State tax exemption
- ✕ No state tax exemption
- Blank = State does not impose this tax

Compare	State	Community Benefit Requirement	Mandatory Minimum Community Benefit Requirement	Community Benefit Reporting Requirement	Community Health Needs Assessment	Community Benefits Plan/Implementation Strategy	Financial Assistance Policy	Financial Assistance Policy Dissemination	Limitations on Charges, Billing, and Collections	Income Tax Exemption	Property Tax Exemption	Sales Tax Exemption
	Select:	● ○	■	■	■	■	■	■	■	■ ✕		■ ✕
<input type="checkbox"/>	California	●		■	■	■	■	■	■	■	■	✕
<input type="checkbox"/>	Illinois	○	■	■	■	■	■	■	■	■	■	■
<input type="checkbox"/>	Indiana	●		■	■	■	■	■	■	■	■	■
<input type="checkbox"/>	Maryland	●		■	■	■	■	■	■	■	■	■
<input type="checkbox"/>	New Hampshire	●		■	■	■	■	■		■	■	
<input type="checkbox"/>	New York	○		■	■	■	■	■	■	■	■	■
<input type="checkbox"/>	Rhode Island	○		■	■	■	■	■	■	■	■	✕
<input type="checkbox"/>	Texas	○	■	■	■	■	■	■	■		■	■
<input type="checkbox"/>	Vermont			■	■	■			■	■	■	■
<input type="checkbox"/>	Washington	●		■	■	■	■	■	■	✕	■	✕

Compare States

# Maryland Profile



## Community Benefit Requirement

Maryland requires nonprofit hospitals to provide free or discounted care based on need to specified populations. [Md. Code Ann. Health-Gen. §19-214-1\(b\)](#); [COMAR 10.09.37.26](#).

## Minimum Community Benefit Requirement

Maryland does not specify a minimum level of community benefits that a nonprofit hospital must provide.

## Community Benefit Reporting Requirement

Maryland requires that each nonprofit hospital submit an annual community benefit report to the [Maryland Health Services Cost Review Commission](#) (HSCRC).

Maryland requires that each nonprofit hospital's annual community benefit report include the hospital's mission statement and a list of each community benefit initiative undertaken by the hospital, a specification of its cost and objectives, and a description of the hospital's efforts to evaluate the initiative's effectiveness. Each hospital's community benefit report must also include descriptions of gaps in the availability of specialist providers to serve the uninsured and of the hospital's efforts to track and reduce health disparities in the community that the hospital serves. [Md. Code Ann. Health-Gen., §19-303\(c\)](#).

The HSCRC compiles all of the individual hospital community benefit reports into a consolidated Nonprofit Hospital Community Benefit Report for posting on its website. The report also includes a list of the unmet community needs identified in the most recent community needs assessment conducted by the state health department and by the local health department in each jurisdiction. [Md. Code Ann. Health-Gen., § 19-303\(d\)](#).

## Community Health Needs Assessment

Maryland requires nonprofit hospitals to conduct community health needs assessments.

Maryland law requires that each nonprofit hospital identify the health care needs of its community and, as part of the needs assessment process, consider the most recent community needs assessments developed by the state health department or by the local health department for the jurisdiction in which the hospital is located. Maryland law also provides that a hospital's needs assessment process "may" include consultation with community leaders, local health care providers, and "any appropriate person who can assist the hospital in identifying community health needs." [Md. Code Ann. Health-Gen., §19-303\(b\)](#).

# Conclusion

---

State health agencies can use federal CHNA/Implementation Strategy Process to promote health equity and to reduce health disparities

# About Hilltop's Hospital Community Benefit Program

---

Hilltop's Hospital Community Benefit Program is a resource for state and local policymakers who seek to ensure that tax-exempt hospital community benefit activities are responsive to pressing community health needs. The program provides tools to these and other stakeholders in support of their efforts to improve population health and to promote a more accessible, coordinated, and equitable community health system.

<http://www.hilltopinstitute.org/hcbp.cfm>

# About The Hilltop Institute

---

The Hilltop Institute at UMBC is a non-partisan health research organization—with an expertise in Medicaid and in improving publicly financed health care systems—dedicated to advancing the health and wellbeing of vulnerable populations. Hilltop conducts research, analysis, and evaluations on behalf of government agencies, foundations, and nonprofit organizations at the national, state, and local levels. Hilltop is committed to addressing complex issues through informed, objective, and innovative research and analysis.

[www.hilltopinstitute.org](http://www.hilltopinstitute.org)

# Contact Information

---

Gayle D. Nelson

Director, Hospital Community Benefit Program

The Hilltop Institute

University of Maryland, Baltimore County (UMBC)

410.455.6803

[gnelson@hilltop.umbc.edu](mailto:gnelson@hilltop.umbc.edu)