

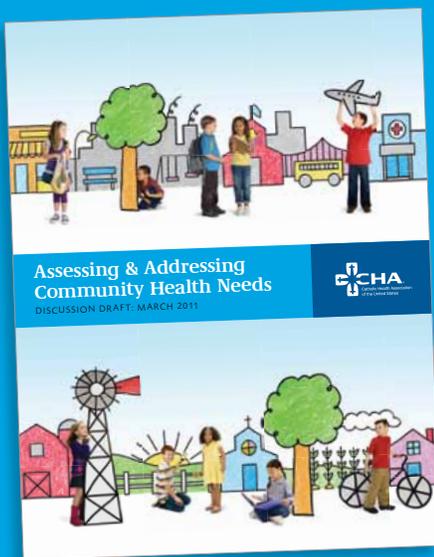


# Assessing & Addressing Community Health Needs

A SUMMARY OF NEW REQUIREMENTS & RECOMMENDED PRACTICES



## “Assessing & Addressing Community Health Needs”



*Assessing & Addressing Community Health Needs*, currently available on the CHA website as a discussion draft, is designed to help not-for-profit health care providers meet new federal requirements for assessing community health needs and developing implementation strategies to address those needs. It will be available in hardcopy once final federal guidance is issued. To view this resource visit [www.chausa.org/assessplanresources](http://www.chausa.org/assessplanresources).

*Assessing & Addressing Community Health Needs* describes a variety of ways hospitals may conduct community health needs assessments and develop implementation strategies. The approach taken may depend on the size of the hospital, the size and makeup of the community, the existence of a current valid assessment, and the presence of on-going community assessment efforts.

This booklet summarizes new federal requirements for tax-exempt hospitals and recommendations from community benefit and public health experts on conducting assessments and developing implementation strategies described in the book.

Please note that as of publication of this resource, final rules have not been issued by the Internal Revenue Service on what constitutes compliance with community health needs assessment and implementation strategy provisions of the Affordable Care Act. The requirements noted here are based on proposed rules issued by the IRS in April 2013. These proposed rules can be viewed at <https://federalregister.gov/a/2013-07959>. The information in this booklet is provided for educational purposes only and should not be considered legal or tax advice.



## Community Health Needs Assessment (CHNA)

**Provisions in the Affordable Care Act require a tax-exempt hospital facility to:**

- ▶ Conduct a CHNA at least every three years
- ▶ Take into account input from persons who represent the broad interests of the community
- ▶ Take into account input from persons with special knowledge of or expertise in public health
- ▶ Make the CHNA widely available to the public

**Additional requirements described in the IRS proposed rules**

- ▶ In defining community to assess, consider geographic area served, and the hospital's target populations and principal functions
- ▶ Community may include populations in addition to patient populations and geographic areas outside of those in which patient populations reside
- ▶ Community may not be defined in a way that excludes certain populations served by the hospital (*for example, low-income persons, and minority groups*)
- ▶ CHNA must take into account input from:
  - At least one state, local, tribal or regional public health department or equivalent and
  - Members of medically underserved, low-income and minority populations or their representatives and may include input on financial and other barriers to care, and
  - Written comments received on most recently conducted assessment and most recently adopted implementation strategy
- ▶ CHNA need only identify, prioritize and otherwise assess significant health needs

- ▶ Hospitals may determine whether a need is significant based on all of the facts and circumstances present in the community it serves
- ▶ Written CHNA report must include:
  - Definition of the community served by the hospital and a description of how the community was determined
  - Description of the process and methods used to conduct the assessment, including all of the following:
    - Data and other information used in the assessment
    - Methods of collecting and analyzing information
    - Any parties the organization worked or contracted with
  - Description of how the hospital took into account input from persons who represent the broad interests of the community, including all of the following:
    - Summary of community and public health input, how it was obtained, and over what period of time
    - Names of organizations providing input and the nature and extent of their input
    - Medically underserved, low-income and minority populations providing input
  - A prioritized description of significant community health needs identified through the community health needs assessment, including a description of the process and criteria used in prioritizing such health needs
    - Hospital may use any criteria to prioritize significant health needs including, but not limited to, the burden, scope, severity, or urgency of the health need, the estimated feasibility and effectiveness of possible interventions, the health disparities associated with the need or the importance the community places on addressing the need
  - A description of the potential measures and resources identified through the CHNA to address the significant health needs

- ▶ Assessment report must be adopted by an authorized body of the hospital
- ▶ Joint CHNA report may be produced if all the following conditions are met:
  - All collaborating hospital facilities define their community to be the same and conduct a joint CHNA process
  - Joint CHNA report must clearly identify each hospital facility to which it applies
  - An authorized body of each collaborating hospital must adopt the joint CHNA as its own
- ▶ CHNA report will be considered widely available only if hospital:
  - Makes a copy of the CHNA report widely available on a website, at least until the date the hospital has made widely available on a website two subsequent CHNA reports, and
  - Makes a paper copy of the CHNA report available for public inspection without charge at the hospital facility at least until the date the hospital facility has made available for public inspection, without charge, a paper copy of its two subsequent CHNA reports
- ▶ Widely available on a website means all the following:
  - A complete and current version of the CHNA report is conspicuously posted on the hospital's website, the hospital system's website or website of another entity (*given certain conditions*)
  - Individuals with access to Internet can access and download copy of CHNA report without special hardware or fee and without having to create an account or otherwise provide personally identifiable information
  - Hospital provides individuals who ask how to access report online with direct website address of the page where the report is posted



## Recommended Practices

- ▶ When possible, conduct the assessment in collaboration with other hospitals, local health departments and/or community partners
- ▶ Form assessment team/advisory committee that includes key staff within the organization and community representatives
- ▶ Define community to include primary and secondary service areas and the types of patients the hospital serves (*age, gender, conditions treated*)
- ▶ Base the assessment on review of public health data collected by government agencies and other authoritative sources
- ▶ Consider the following types of information: demographics (*age, income, race*) health indicators (*leading causes of death and hospitalization*), health risk factors (*tobacco use, obesity*), access to health care (*rates of uninsured, availability of primary care*), and social determinants of health (*education, environmental quality, housing*)
- ▶ Collect community input using one or more of the following methods: community forums, focus groups, interviews and/or surveys
- ▶ Seek community input that reflects the racial, ethnic and economic diversity of the community
- ▶ Analyze data collected using comparisons with other communities and with federal or state benchmarks and, when available, trends within the community. Look for disparities and contributing causes of health problems
- ▶ Validate priorities with community input
- ▶ Use knowledge of community assets in determining priorities
- ▶ Identify from three to 10 priorities
- ▶ Align priorities with organizational, state and national priorities
- ▶ Document how priorities were identified and who was involved in setting priorities
- ▶ Distribute report to all partners and contributors



## Implementation Strategy

Provisions in the Affordable Care Act require a tax-exempt hospital to:

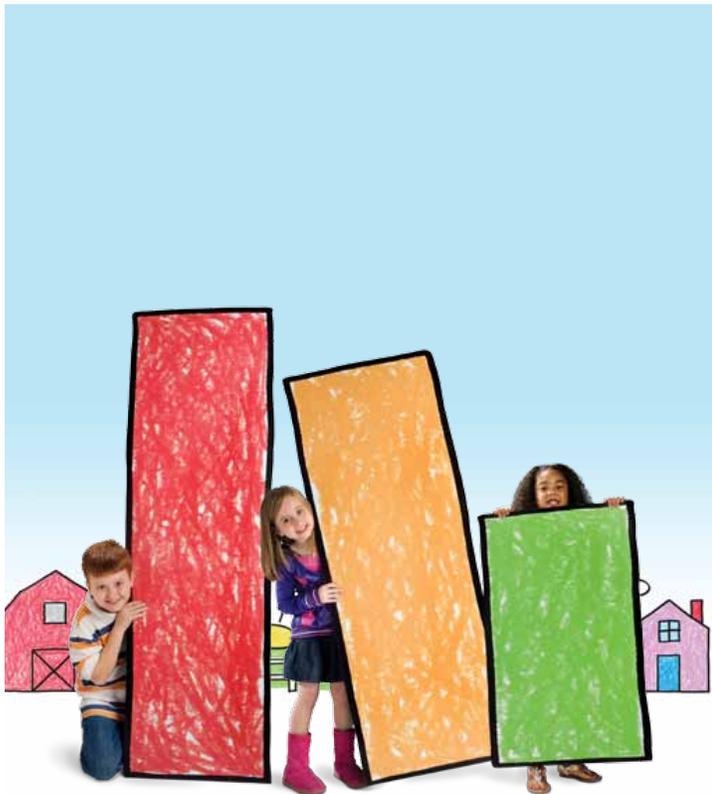
- ▶ Adopt an implementation strategy to meet community health needs identified in the CHNA
- ▶ Describe how it is addressing needs identified in the CHNA
- ▶ Describe any needs identified in the CHNA that are not being addressed and the reasons for not addressing them

Additional requirements described in IRS proposed rules:

- ▶ The written implementation strategy describes either:
  - How the hospital plans to meet the significant health need
    - The actions the hospital facility intends to take to address the significant health need
    - The anticipated impact of these actions
    - A plan to evaluate the impact
    - The programs and resources the hospital plans to commit to address the health need
    - Any planned collaboration between the hospital facility and other facilities or organizations
  - or
  - The significant health need the hospital does not intend to meet, explaining why the hospital does not intend to meet the health need

- ▶ A hospital that collaborates with other facilities and organizations in developing its implementation strategy must still document its implementation strategy in a separate written plan that is tailored to the particular hospital, taking into account its specific programs, resources and priorities
- ▶ Hospitals that develop joint CHNAs may also adopt a joint implementation strategy that either:
  - Describes how the collaborating hospital facilities plan to address the significant health need
  - or
  - Identifies the significant health need as one the hospital facilities do not intend to address and explains why
- ▶ A joint implementation strategy adopted by a hospital must:
  - Be clearly identified as applying to the hospital facility
  - Clearly identify the hospital facility's particular role and responsibilities in taking the actions described in the strategy and programs and resources the hospital plans to commit, and
  - Include a summary or other tool that helps the reader easily locate those portions of the joint implementation strategy that relates to the hospital facility

- ▶ The implementation strategy is "adopted" on the date it is adopted by the governing body of the hospital (*the governing body, a committee of the governing body, or others authorized*)
- ▶ Implementation strategy must be adopted by the end of the same taxable year in which the CHNA is conducted
- ▶ Copy of most recently adopted implementation strategy may be attached to hospital's IRS Form 990 or hospital may provide on the Form 990 the URL(s) of the web page(s) on which the hospital has made the implementation strategy widely available
- ▶ Hospitals must describe on Form 990 actions taken during the taxable year to address the significant health needs identified through its most recent CHNA or, if no actions were taken with respect to one or more of these needs, the reason or reasons why no actions were taken



## Recommended practices

- ▶ Coordinate hospital and community strategies to ensure the most effective use of resources
- ▶ Give priority to persons who are low-income and disadvantaged
- ▶ Build on existing programs and other community assets when possible
- ▶ Understand root causes of needs being addressed and identify a range of possible interventions
- ▶ Investigate evidence-based approaches to ensure effective use of hospital and community resources
- ▶ For each prioritized need, identify the goal to be achieved, measurable objectives(s), indicators for determining whether objectives were met and evaluation measures
- ▶ Make the implementation strategy publicly available by posting on hospital website and in other ways
- ▶ Update the implementation strategy upon major changes in community health status and at least every three years



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