



# NYS Prevention Agenda for 2019-2024

# Hospital Community Benefit Spending

Presentation to WE ACT for Environmental Justice

Symposium on Community Benefits & Community Needs Assessments

NYS Department of Health Office of Public Health Practice May 16, 2018

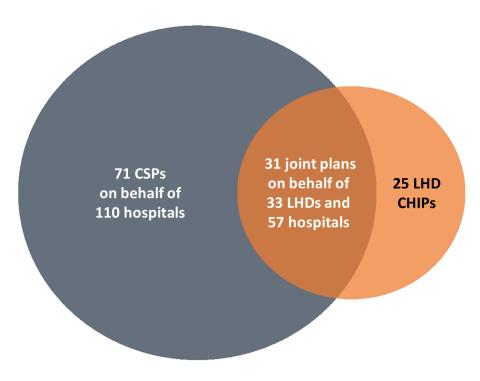
# Prevention Agenda 2019-2024 Updated Vision and Priorities

VISION: New York is the Healthiest State for People of all Ages

#### PRIORITIES:

- Prevent Chronic Disease
- Promote a Healthy and Safe Environment
- Promote Healthy Women, Infants and Children
- Promote Well-Being and Prevent Mental and Substance Use Disorders
- Prevent HIV/STDs, Vaccine Preventable Diseases, Antimicrobial Resistance and Healthcare Associated Infections

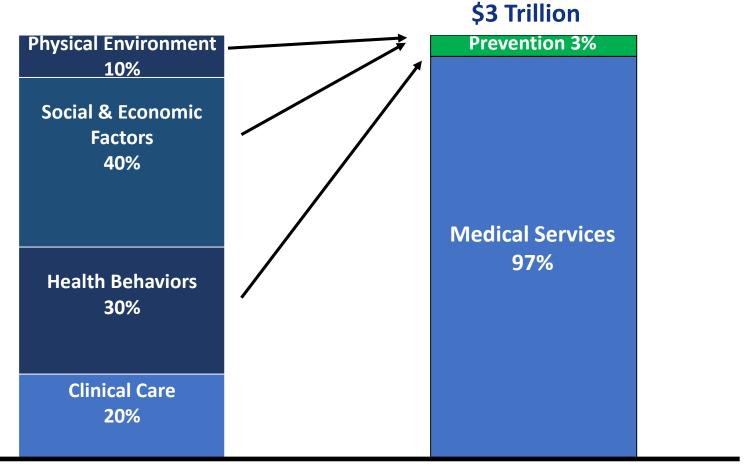
#### **Community Health Improvement Planning in NYS**



127 plans by 58 LHDs and 167 Hospitals

- Local Health Departments and Non Profit Hospitals are required by NYS Public Health Law to conduct community health improvement planning
  - LHDs complete community health assessment and community health improvement plan
  - Hospitals complete a community service plan
- IRS requires non profit hospitals to conduct a community health needs assessment
- Prevention Agenda has developed framework for a collaborative community health improvement effort
  - LHDs and hospitals asked to work together to assess local health issues and identify at least two Prevention Agenda Priorities selected by diverse partners in a county
  - Develop joint plan with common goals, complementary best practice/evidence-based interventions and measures to track progress
  - At least one priority addresses a disparity

# Determinants of Health and Health Spending



Social Determinants of Health

**National Health Expenditures** 

**Source:** Booske BC, Athens JK, Kindig DA, Park H, Remington PL. County Health Rankings working paper: different perspectives for assigning weights to determinants of health. University of Wisconsin Population Health Institutes. 2010. Available at: <a href="http://uwphi.pophealth.wisc.edu/publications/other/different-perspectives-for-assigning-weights-to-determinants-of-health.pdf">http://uwphi.pophealth.wisc.edu/publications/other/different-perspectives-for-assigning-weights-to-determinants-of-health.pdf</a> (Accessed September 20, 2016).

**Source:** National health expenditure accounts: methodology paper, 2014 definitions, sources, and methods. Centers for Medicare & Medicaid Services. 2014. Available at: <a href="https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/NationalHealthExpendData/downloads/dsm-14.pdf">https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/NationalHealthExpendData/downloads/dsm-14.pdf</a> (Accessed September 20, 2016).

## Governor's Action to Leverage Hospital Community Benefit Spending to Support Prevention

- NYS will require non profit hospitals to include budgets in their community service plans to demonstrate investments in evidence based community health interventions tied to the NYS Prevention Agenda.
- Data on spending will serve as a guide for future decisions about spending requirements needed to achieve public health goals.

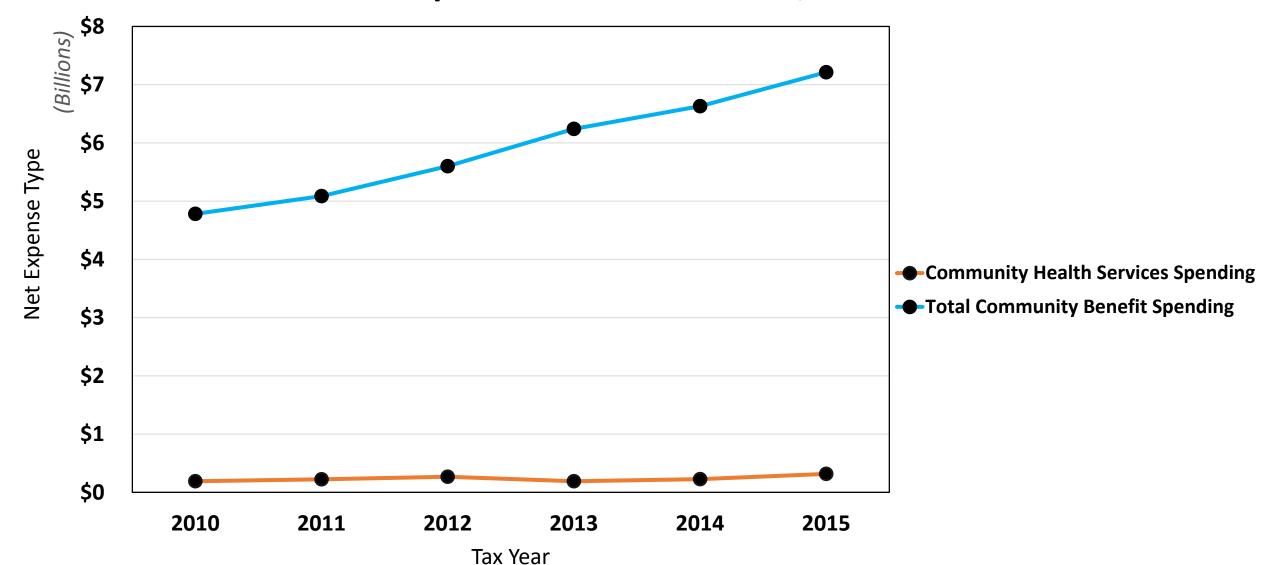
# Hospital Community Benefit

- Not for profit hospitals are required to report community benefit expenses to IRS on Schedule H
- Schedule H includes 7 categories of spending with several related to charity care and 1 for **Community Health Improvement:**

"...activities or programs, subsidized by the health care organization, carried out or supported for the express purpose of improving community health. Such services do not generate inpatient or outpatient revenue, although there may be a nominal patient fee or sliding scale fee for these services."

Modifying Hospital Community Benefit Tax Policy: Easing Regulation, Advancing Population Health. <u>Health Affairs Blog</u>. Sara Rosenbaum, Maureen Byrnes and Gary Young. December 1, 2016, http://healthaffairs.org/blog/2016/12/01/modifying-hospital-community-benefit-tax-policy-easing-regulation-advancing-population-health/

#### Cumulative Community Benefit Expense Among Private Non-Profit Hospitals in New York State, 2010-2015



# Hospital Community Benefit Investment

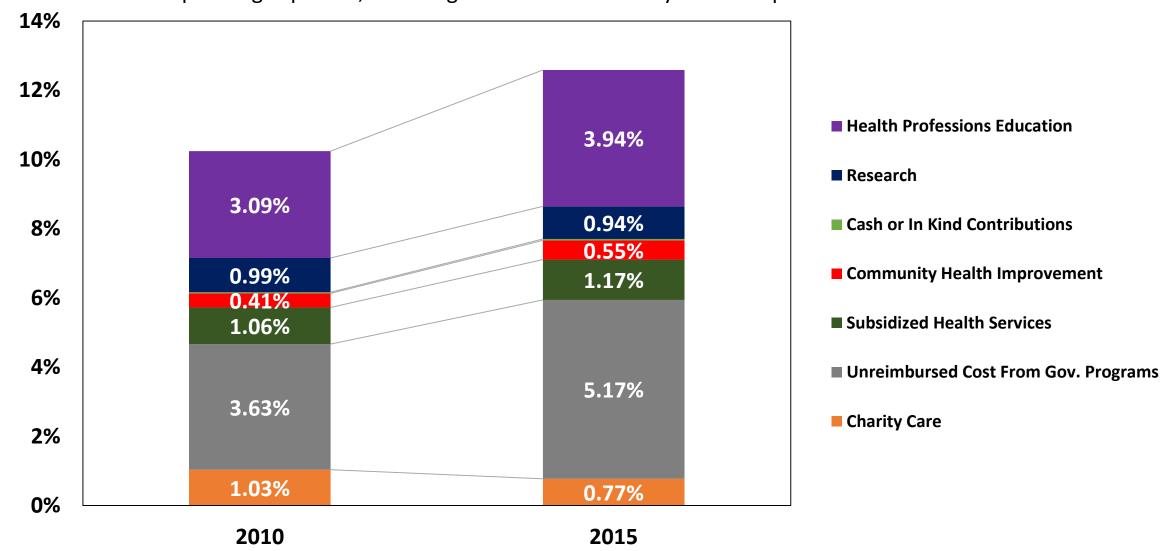
In 2015, community benefit accounted for 12.6% of NYS hospitals' total expenses, including 0.55% of expenses for community health improvement.

#### Percentage of Total Operating Expenses among Hospitals in New York State

Community Benefit	2010	2011	2012	2013	2014	2015
All Categories	10.2%	10.8%	11.1%	11.3%	12.0%	12.6%
<b>Charity Care</b>	1.03%	1.25%	1.03%	1.04%	0.85%	0.77%
Unreimbursed Cost for Means Tested Government Programs	3.63%	3.54%	3.83%	4.40%	5.02%	5.17%
Subsidized Health Services	1.06%	0.98%	1.01%	1.07%	1.13%	1.17%
Community Health Improvement	0.41%	0.47%	0.53%	0.35%	0.41%	0.55%
Cash or In Kind Contributions	0.03%	0.04%	0.04%	0.07%	0.04%	0.04%
Research	0.99%	1.10%	1.19%	0.75%	0.95%	0.94%
Health Professions Education	3.09%	3.37%	3.45%	3.61%	3.62%	3.94%

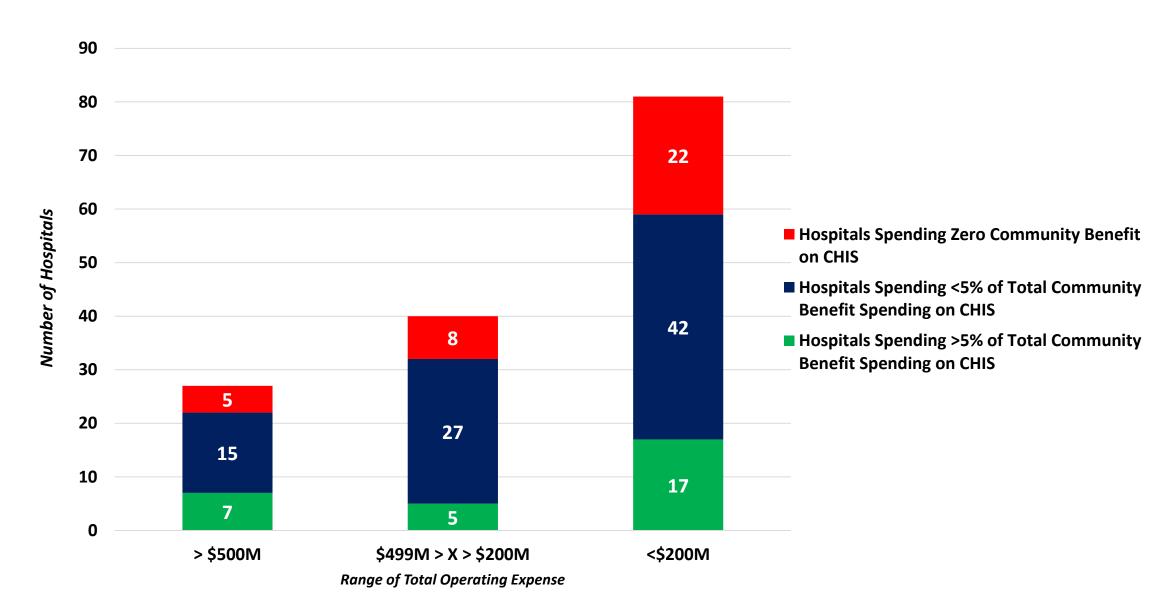
### Changes in Total Community Benefit Spending By Category

In 2015, private non-profit hospitals in NYS (n=148) spent \$7.21 billion on community benefit. This accounted for 12.6% of their total operating expenses, including 0.55% for community health improvement.



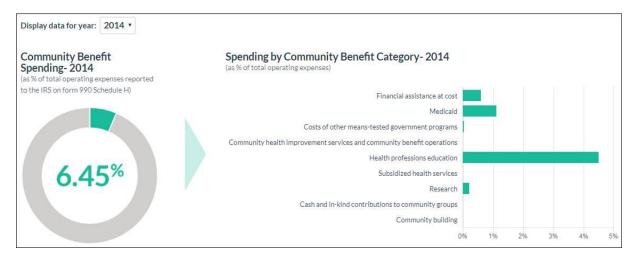
New York State Department of Health Office of Public Health Practice - data current as of March 8th 2018

# Distribution of Community Health Improvement Services Spending As a Percentage of Total Community Benefit Spending (2015)



# Accessing hospital specific reports





- Community Benefit Insight
   (www.communitybenefitinsight.org)
   displays facility-level information filed
   by hospitals on IRS Form 990 Schedule
   H, including hospitals' net spending in
   each of eight community benefit
   categories.
- Enter "New York" and county name into the search fields on the homepage to bring up community benefit profiles for your local hospitals.
- Profiles visualize and report community benefit spending by category, by year, and as a percentages of total operating expenses.

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