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MASSACHUSETTS ATTORNEY GENERAL NEW HOSPITAL COMMUNITY BENEFITS GUIDELINES

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On February 11, 2009 Massachusetts Attorney General Martha Coakley issued new Community Benefits Guidelines for non-profit acute care hospitals. These new guidelines result from the work of an advisory task force and represent the first update in the guidelines since 2002. The AG' Community Benefits Program takes a voluntary, non-regulatory approach to call upon hospitals to identify unmet community health needs and commit resources to address those needs.

The new Guidelines:

- Encourage community input in all phases of plan development
- Require goal setting and measurement for all community benefit programs
- Require that community benefit programs be based on a community health needs assessment and focus on a target population at the beginning of the plan year
- Streamline and standardize reporting
- Address medical debt by encouraging hospitals to adopt fair medical debt collection practices; and
- Encourage hospitals to address the statewide health priorities of supporting health care reform; reducing hospital disparities; improving chronic disease management; and promoting wellness in vulnerable populations (the AG will pay special attention to programs that address these issues for purposes of public recognition and dissemination of best practices)

These new guidelines take effect for the fiscal year beginning October 2009.

Highlights include:

- The hospital's governing body should affirm and make public a Community Benefits Mission Statement.
- The hospital's governing board and senior management should be responsible for overseeing development and implementation of the Community Benefits Plan.
- The hospital should ensure regular involvement of the community, including representatives of targeted underserved populations in planning and implementation of the Community Benefits Plan.

- The hospital should conduct a Community Health Needs Assessment (analyzing community input, available public health data and an inventory of existing programs) to develop its Mission Statement and Community Benefits Plan.
- The Community Benefits Program should include: Target Populations, specific programs or activities, and measurable short and long term goals.
- The hospital should submit to the AG an annual Community Benefits Report detailing the process for developing its Community Benefits Plan, information on community benefit programs including program goals and measured outcomes, and expenditures; and make the Report available to the public.

The Guidelines detail the components of each of these highlighted categories, and, with particular reference to the Community Benefits Plan, list three key elements: Target Population(s), programs and goals, and budget. Only those programs that address the needs of the Target Populations identified in the Community Benefits Plan can be reported as Community Benefits Programs. The common denominator among all community benefit activities is that they are part of a Community Benefits Plan that responds to specific health needs identified through a needs assessment process with the active collaboration of the population to be served.

A hospital should articulate measurable goals for each program, which can be operational goals (associated with process) or outcome goals (the reduction or improvement in a particular health status indicator). Short term goals are for 1 year; long term goals are for 3-5 years.

Hospital reports (on updated reporting forms) are due on April 1, and will be published on June 1. The Guidelines include an appendix with information for completing reports, which will be in an online, standardized format (a full-text report is no longer required), and which allow for including bad debt upon certification that the hospital has in the prior fiscal year adopted and followed the AG's recommended debt collection practices. Community service expenditures which fall outside the scope of the hospital's Community Benefits Plan cannot be counted toward a hospital's community benefits total. Another appendix illustrates a plan timeline.

The published reports allow for public recognition of a hospital's activities in support of its charitable mission. The AG will also annually review a hospital's community benefits expenditures in relation to its operating expenditures, revenues and surplus, and may from time to time conduct audits or publish specific reports based on its analysis.