

Financial Disclosure

- I have no financial relationships to disclose.

Overview

- Background
- Instrument and methods
- Results
- Best practices and lessons learned

Background

- Health Agency CFO Peer Network
- Community benefit as an innovative financing approach
- Action steps
 - Assess current levels of health agency involvement
 - Identify lessons learned and best practices

Instrument and Methods

■ Instrument

- 10-item online survey
- Quantitative and qualitative questions

■ Major sections

- Community Health Needs Assessment
- Community Benefit

■ Distributed to all ASTHO member agencies

■ Primary respondents: Health agency Chief Financial Officers

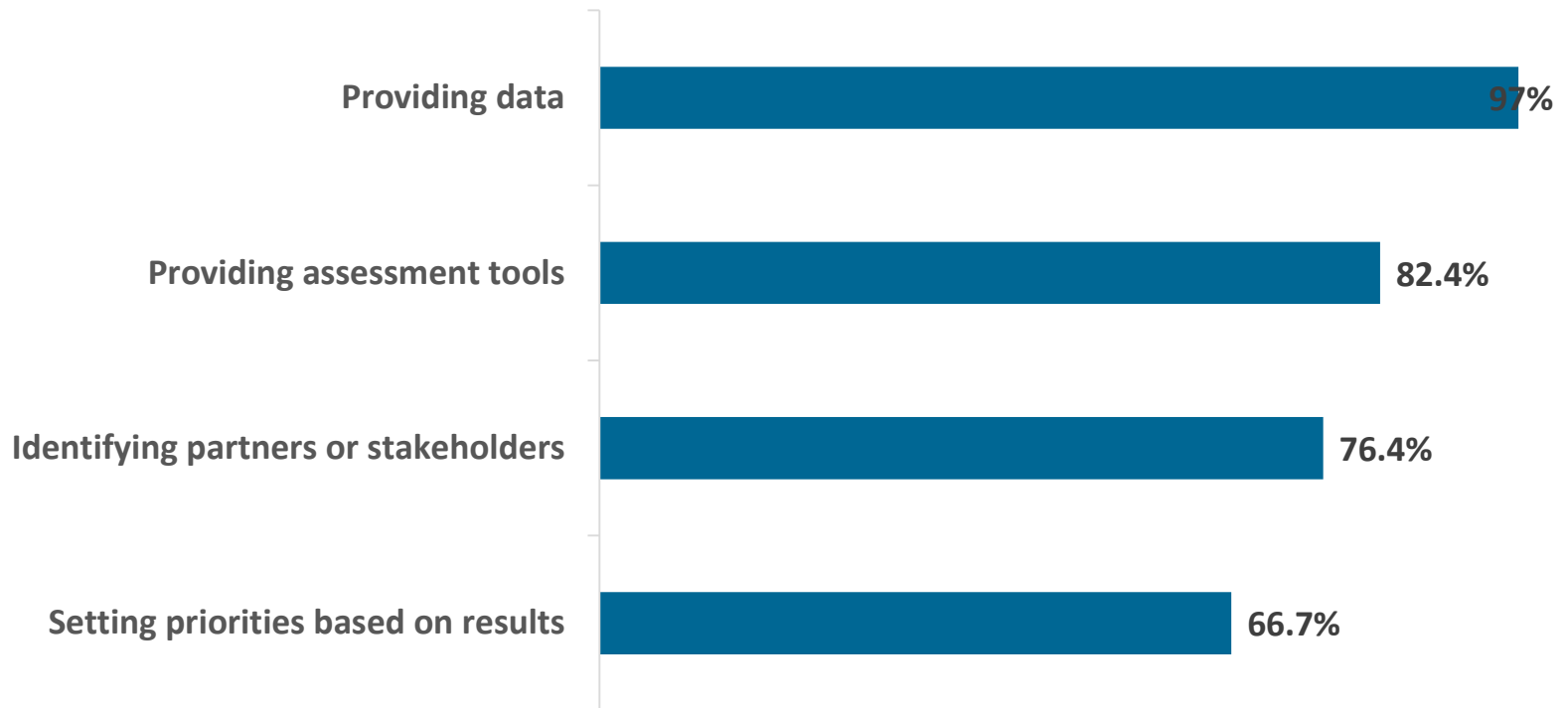
■ Additional contributors: Senior Deputies and other health agency staff

Results: Community Health Needs Assessment

- 67.6% contacted by a hospital, hospital system, or state hospital association to help in the development of a CHNA
- In some jurisdictions, other bodies coordinate CHNAs
 - Local/regional health departments
 - State health agencies
 - Other, e.g. university

Results: Community Health Needs Assessment

Types of CHNA involvement undertaken or planned



Results: Community Benefit

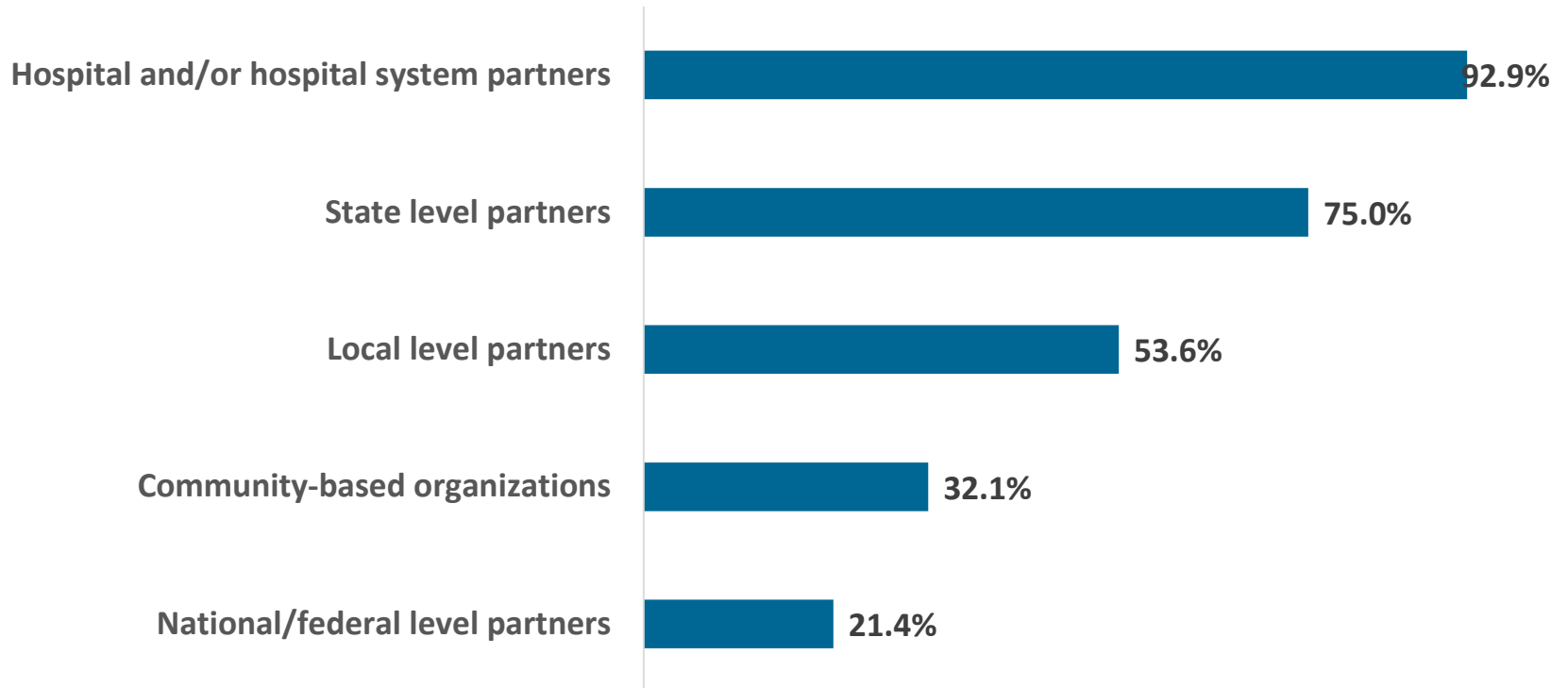
- Few rules or formal agreements
 - Regulations or guidelines – 21.2%
 - Legally-binding agreements between partners – 9.4%
 - Legislation around setting priorities – 9.1%

- Alignment with public health frameworks – 60.6%

- Community benefit recipients
 - Community-based organizations
 - Local health departments
 - S/THAs

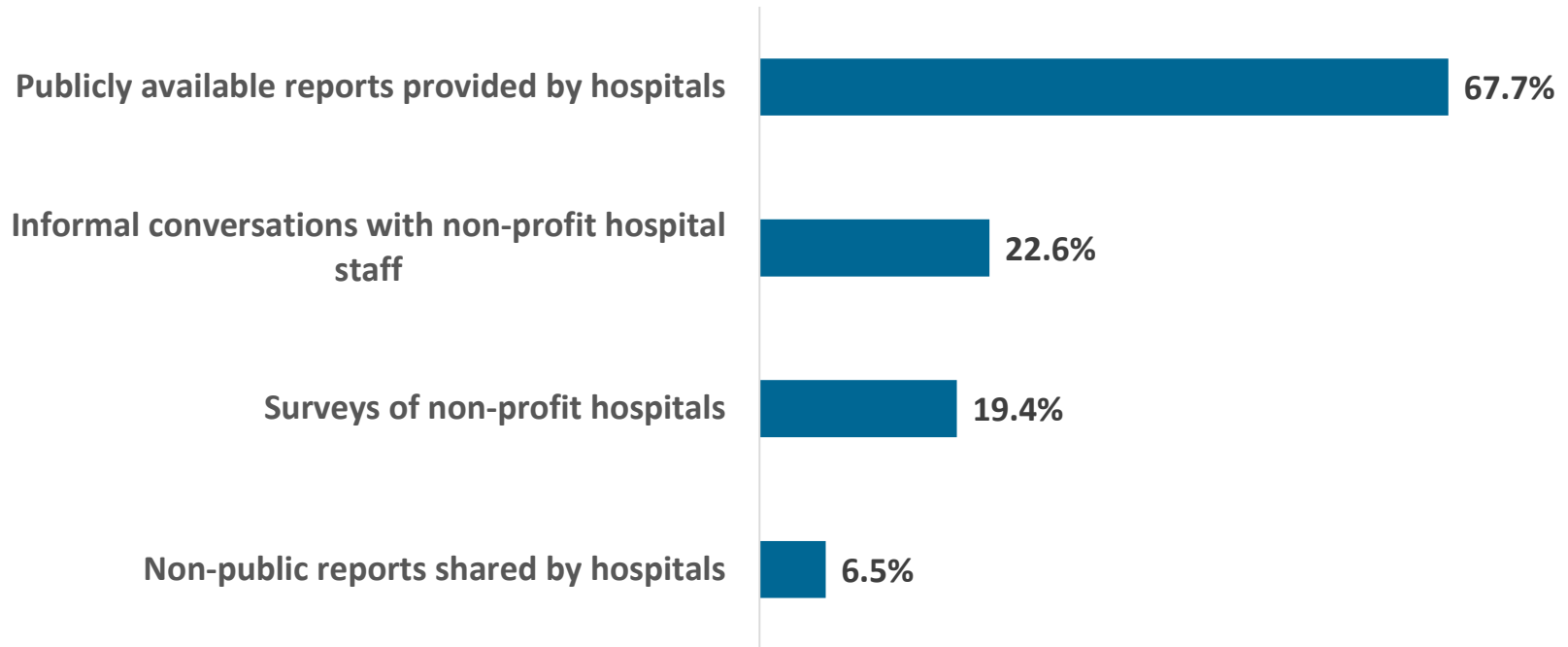
Results: Community Benefit

Stakeholders



Results: Community Benefit

Information sources on investment of community benefit dollars or resources



Best Practices and Lessons Learned

■ Best practices

- *Partnership, including entities and collaborative activities*
- *Alignment with accreditation requirement*
- *Framing community benefit as investment*
- *Having designated CB staff in health systems leads to greater PH integration*
- *House coordination in health agencies*

■ Challenges

- *Difficult to determine funding source of services provided*
- *IRS community benefit reporting may not reflect total community health spending*