## **SENATE BILL 774**

#### By: Senator Kelley

Introduced and read first time: February 3, 2020 Assigned to: Finance

Committee Report: Favorable with amendments Senate action: Adopted Read second time: March 9, 2020

CHAPTER \_\_\_\_\_

1 AN ACT concerning

# 2 Hospitals <u>Health Services Cost Review Commission</u> – Community Benefits <u>–</u> 3 <u>Reporting</u>

FOR the purpose of repealing certain provisions governing the identification of community 4  $\mathbf{5}$ health care needs by nonprofit hospitals; repealing certain provisions of law 6 requiring nonprofit hospitals to submit a certain annual community benefits report 7 to the Health Services Cost Review Commission; requiring the Commission to 8 establish a Community Benefit Reporting Workgroup; providing for the composition 9 of the workgroup; requiring the Commission to adopt certain regulations relating to 10 the community health needs of nonprofit hospitals and reporting by nonprofit 11 hospitals regarding community health needs and benefits provided by the hospital; 12 requiring the Commission to establish a method through which State and local 13governing bodies are made aware of certain meetings; requiring the Commission, on 14 or before a certain date, to issue a certain report, conduct a certain assessment, issue 15<del>certain recommendations,</del> certain information and submit a copy of a certain report to certain committees of the General Assembly; altering certain definitions; making 1617conforming changes; and generally relating to community benefits provided by 18 nonprofit hospitals.

- 19 BY repealing and reenacting, with amendments,
- 20 Article Health General
- 21 Section 19–303
- 22 Annotated Code of Maryland
- 23 (2019 Replacement Volume)

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

Strike out indicates matter stricken from the bill by amendment or deleted from the law by amendment.



	2			SENATE BILL 774			
$\frac{1}{2}$	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:						
3	Article – Health – General						
4	19–303.						
5	(a)	(1)	In th	is section the following words have the meanings indicated.			
6		(2)	"Com	mission" means the Health Services Cost Review Commission.			
$7 \\ 8$	oddrogg og	(3)	<u>(I)</u>	"Community benefit" means <del>an activity that is intended to</del> eds and priorities primarily through disease prevention and			
9			•	tatus, including:			
$\begin{array}{c} 10\\ 11 \end{array}$	mulnorable	orund	<del>(i)</del>	[Health] NONREIMBURSABLE HEALTH-services provided to ad populations such as Medicaid, Medicare, or Maryland Children's			
11	Health Pro						
13			<del>(ii)</del>	Financial or in-kind support of public health programs;			
$\frac{14}{15}$	<del>to a commu</del>	<u>initu ni</u>	<del>(iii)</del> rioritu:	Donations of funds, property, or other resources that contribute			
16		iiity pi	<del>(iv)</del>	Health care cost containment activities:			
17			( <u>-</u> )	Health education, screening, and prevention services; and			
18			(vi)	Financial or in-kind support of the Maryland Behavioral Health			
19	<del>Crisis Res</del> p	<del>onse S</del>	` '	A PLANNED, ORGANIZED, AND MEASURED ACTIVITY THAT IS			
20		то м	IEET II	DENTIFIED COMMUNITY HEALTH NEEDS WITHIN A SERVICE			
21	AREA.						
22			<u>(II)</u>	"Community benefit" may include:			
23				<b><u>1.</u></b> <u>A COMMUNITY HEALTH SERVICE;</u>			
24				2. HEALTH PROFESSIONAL EDUCATION;			
25				<u>3.</u> <u>Research;</u>			
26				<u>4.</u> <u>A FINANCIAL CONTRIBUTION;</u>			
$\begin{array}{c} 27\\ 28 \end{array}$	PARTNERS	SHIPS V	WITH C	5. <u>A community-building activity, including</u> community-based organizations;			

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1	<u>6.</u> <u>CHARITY CARE;</u>
$2 \\ 3$	7. <u>AN ACTIVITY DESCRIBED UNDER SUBPARAGRAPH (I)</u> OF THIS PARAGRAPH THAT IS FUNDED BY A FOUNDATION;
4	8. <u>A MISSION–DRIVEN HEALTH SERVICE;</u>
$5 \\ 6$	9. <u>AN OPERATION RELATED TO AN ACTIVITY DESCRIBED</u> UNDER SUBPARAGRAPH (I) OF THIS PARAGRAPH; AND
$7 \\ 8$	<u>10.</u> <u>Financial or in-kind support of the Maryland</u> <u>Behavioral Health Crisis Response System</u> .
9 10 11	(4) "COMMUNITY BENEFIT REPORTING WORKGROUP" MEANS THE COMMUNITY BENEFIT REPORTING WORKGROUP ESTABLISHED IN ACCORDANCE WITH SUBSECTION (B) OF THIS SECTION.
$12 \\ 13 \\ 14 \\ 15 \\ 16$	(5) "Community HEALTH needs assessment" means [the process <u>REQUIRED BY THE AFFORDABLE CARE ACT</u> by which unmet community health care needs and priorities are identified] <u>A COMMUNITY HEALTH NEEDS ASSESSMENT</u> <del>CONDUCTED</del> BY A NONPROFIT HOSPITAL IN ACCORDANCE WITH § 501(R)(3) OF THE INTERNAL REVENUE CODE.
17	(b) In identifying community health care needs, a nonprofit hospital:
17 18 19 20	<ul> <li>In identifying community health care needs, a nonprofit hospital:         <ul> <li>(1) Shall consider, if available, the most recent community needs assessment developed by the Department or the local health department for the county in which the nonprofit hospital is located;</li> </ul> </li> </ul>
$\begin{array}{c} 18\\ 19\end{array}$	(1) Shall consider, if available, the most recent community needs assessment developed by the Department or the local health department for the county in
18 19 20 21	<ul> <li>(1) Shall consider, if available, the most recent community needs assessment developed by the Department or the local health department for the county in which the nonprofit hospital is located;</li> <li>(2) May consult with community leaders and local health care providers;</li> </ul>
18 19 20 21 22 23	<ul> <li>(1) Shall consider, if available, the most recent community needs assessment developed by the Department or the local health department for the county in which the nonprofit hospital is located;</li> <li>(2) May consult with community leaders and local health care providers; and</li> <li>(3) May consult with any appropriate person that can assist the hospital in</li> </ul>
<ol> <li>18</li> <li>19</li> <li>20</li> <li>21</li> <li>22</li> <li>23</li> <li>24</li> <li>25</li> <li>26</li> </ol>	<ul> <li>(1) Shall consider, if available, the most recent community needs assessment developed by the Department or the local health department for the county in which the nonprofit hospital is located;</li> <li>(2) May consult with community leaders and local health care providers; and</li> <li>(3) May consult with any appropriate person that can assist the hospital in identifying community health needs.</li> <li>(c) (1) Each nonprofit hospital shall submit an annual community benefit report to the Health Services Cost Review Commission detailing the community benefits</li> </ul>
<ol> <li>18</li> <li>19</li> <li>20</li> <li>21</li> <li>22</li> <li>23</li> <li>24</li> <li>25</li> <li>26</li> <li>27</li> </ol>	<ul> <li>(1) Shall consider, if available, the most recent community needs assessment developed by the Department or the local health department for the county in which the nonprofit hospital is located;</li> <li>(2) May consult with community leaders and local health care providers; and</li> <li>(3) May consult with any appropriate person that can assist the hospital in identifying community health needs.</li> <li>(c) (1) Each nonprofit hospital shall submit an annual community benefit report to the Health Services Cost Review Commission detailing the community benefits provided by the hospital during the preceding year.</li> </ul>
<ol> <li>18</li> <li>19</li> <li>20</li> <li>21</li> <li>22</li> <li>23</li> <li>24</li> <li>25</li> <li>26</li> <li>27</li> <li>28</li> </ol>	<ul> <li>(1) Shall consider, if available, the most recent community needs assessment developed by the Department or the local health department for the county in which the nonprofit hospital is located;</li> <li>(2) May consult with community leaders and local health care providers; and</li> <li>(3) May consult with any appropriate person that can assist the hospital in identifying community health needs.</li> <li>(c) (1) Each nonprofit hospital shall submit an annual community benefit report to the Health Services Cost Review Commission detailing the community benefits provided by the hospital during the preceding year.</li> <li>(2) The community benefit report shall include:</li> </ul>

1 (iv) The objectives of each community benefit initiative;  $\mathbf{2}$ A description of efforts taken to evaluate the effectiveness of each (v) 3 community benefit initiative; 4 (vi) A description of gaps in the availability of specialist providers to serve the uninsured in the hospital; and  $\mathbf{5}$ 6 A description of the hospital's efforts to track and reduce health (vii) 7 disparities in the community that the hospital serves. 8 (d) The Commission shall compile the reports required under subsection (1)9 (c) of this section and issue an annual Nonprofit Hospital Community Health Benefit 10 Report. 11 (2)In addition to the information required under paragraph (1) of this 12subsection, the Nonprofit Hospital Community Health Benefit Report shall contain a list 13of the unmet community health care needs identified in the most recent community needs 14assessment prepared by the Department or local health department for each county. 15The Nonprofit Hospital Community Health Benefit Report shall be (3)made available to the public free of charge. 1617The Commission shall submit a copy of the annual Nonprofit Hospital (4)Community Health Benefit Report, subject to § 2–1257 of the State Government Article, to 1819 the House Health and Government Operations Committee and the Senate Finance 20Committee. 21(e) The Commission shall adopt regulations, in consultation with representatives 22of nonprofit hospitals, that establish: 23A standard format for reporting the information required under this (1)24section; 25(2)The date on which nonprofit hospitals must submit the annual community benefit reports; and 2627The period of time that the annual community benefit report must (3)cover.] 28THE COMMISSION SHALL ESTABLISH A COMMUNITY BENEFIT 29**(B)** (1) 30 **REPORTING WORKGROUP.** 

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1	(2) THE COMMUNITY BENEFIT REPORTING WORKGROUP SHALL BE					
2	COMPOSED OF INDIVIDUALS AND STAKEHOLDER GROUPS THAT HAVE KNOWLEDGE					
3	OF AND ARE IMPACTED BY HOSPITAL COMMUNITY BENEFIT SPENDING.					
4	(C) THE COMMISSION SHALL ADOPT REGULATIONS, IN CONSULTATION					
<b>5</b>	WITH REPRESENTATIVES OF NONPROFIT HOSPITALS AND TO IMPLEMENT THE					
6	RECOMMENDATIONS OF THE COMMUNITY BENEFIT REPORTING WORKGROUP,					
7	THAT:					
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8	(1) ESTABLISH A STANDARD FORMAT FOR REPORTING THE					
9	INFORMATION REQUIRED UNDER THIS SUBSECTION;					
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10	(2) SPECIFY THE DATE BY WHICH EACH NONPROFIT HOSPITAL IS					
11	REQUIRED TO SUBMIT THE REPORTS REQUIRED UNDER THIS SUBSECTION TO THE					
12	<b>COMMISSION</b> ANNUAL COMMUNITY BENEFIT REPORT;					
13	(3) <b>Require each nonprofit hospital to <del>identify the</del></b>					
14	HOSPITAL'S COMMUNITY HEALTH NEEDS WHEN PREPARING ITS COMMUNITY					
15	HEALTH NEEDS ASSESSMENT BY CONSULTING WITH:					
16	(I) CONSUMERS AND OTHER MEMBERS OF THE PUBLIC;					
17	(II) HEALTH CARE PROVIDERS THAT ARE NOT EMPLOYED BY A					
18	HOSPITAL;					
19	(III) FAITH LEADERS;					
20	(IV) COMMUNITY LEADERS;					
01						
21	(V) Local health care providers;					
00						
22	(VI) THE PUBLIC HEALTH DEPARTMENTS OF THE COUNTIES					
23	WITHIN THE NONPROFIT HOSPITAL'S SERVICE AREA; AND					
24	(VII) ANY OTHER PERSON THAT CAN ASSIST THE NONPROFIT					
$\frac{24}{25}$	HOSPITAL IN IDENTIFYING COMMUNITY HEALTH NEEDS SOLICIT AND TAKE INTO					
$\frac{25}{26}$	ACCOUNT INPUT RECEIVED FROM INDIVIDUALS WHO REPRESENT THE BROAD					
$\frac{26}{27}$	INTERESTS OF THAT COMMUNITY, INCLUDING INDIVIDUALS WITH SPECIAL					
28	KNOWLEDGE OF OR EXPERTISE IN PUBLIC AND BEHAVIORAL HEALTH IN					
29	ACCORDANCE WITH § 501(R)(3) OF THE INTERNAL REVENUE CODE;					
30	(4) <b>Require each nonprofit hospital to hold meetings for</b>					
30 31	THE PURPOSE OF SOLICITING COMMENTS AND FEEDBACK FROM THE GENERAL					
υL	THE FORTOSE OF SOLIOITING COMMENTS AND TEEDDACK TROM THE GENERAL					

32 PUBLIC ON THE NONPROFIT HOSPITAL'S PROPOSED COMMUNITY BENEFIT

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1	INITIATIVES MEANT TO ADDRESS THE IDENTIFIED COMMUNITY HEALTH NEEDS FOR						
2	THE FOLLOWING YEAR; AND						
3	(5) <b>Require each nonprofit hospital to submit an annual</b>						
4	COMMUNITY BENEFIT REPORT TO THE COMMISSION THAT DETAILS THE						
5	COMMUNITY BENEFITS PROVIDED BY THE HOSPITAL DURING THE IMMEDIATELY						
6	PRECEDING YEAR AND THAT INCLUDES:						
7	(4) <b>R</b> EQUIRE EACH NONPROFIT HOSPITAL TO CONDUCT ITS						
8	COMMUNITY HEALTH NEEDS ASSESSMENT IN CONSULTATION WITH COMMUNITY						
9	MEMBERS AS RECOMMENDED BY THE COMMUNITY BENEFIT REPORTING						
10	WORKGROUP AND TO SUBMIT AN ANNUAL COMMUNITY BENEFITS REPORT TO THE						
11	COMMISSION DETAILING THE COMMUNITY BENEFITS PROVIDED BY THE HOSPITAL						
12	DURING THE PRECEDING YEAR THAT INCLUDES:						
13	(I) THE MISSION STATEMENT OF THE HOSPITAL;						
14	(II) A LIST OF THE <del>community benefit initiatives</del>						
15	UNDERTAKEN BY THE HOSPITAL ACTIVITIES THAT WERE UNDERTAKEN BY THE						
16	HOSPITAL TO ADDRESS THE IDENTIFIED COMMUNITY HEALTH NEEDS WITHIN THE						
17	HOSPITAL'S COMMUNITY;						
18	(III) THE COST TO THE HOSPITAL OF EACH COMMUNITY BENEFIT						
19	INITIATIVE ACTIVITY;						
20	(IV) THE IMPACT OF EACH COMMUNITY BENEFIT INITIATIVE ON						
21	IDENTIFIED COMMUNITY HEALTH NEEDS AND AN ITEMIZED ACCOUNTING OF THE						
22	COSTS OF EACH COMMUNITY BENEFIT INITIATIVE A DESCRIPTION OF HOW EACH OF						
23	THE LISTED ACTIVITIES ADDRESSES THE COMMUNITY HEALTH NEEDS OF THE						
24	HOSPITAL'S COMMUNITY;						
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25	(V) A DESCRIPTION OF THE HOSPITAL'S EFFORTS TO EVALUATE						
26	THE EFFECTIVENESS OF EACH COMMUNITY BENEFIT INITIATIVE EFFORTS TAKEN TO						
27	EVALUATE THE EFFECTIVENESS OF EACH COMMUNITY BENEFIT ACTIVITY;						
28	(VI) A DESCRIPTION OF GAPS IN THE AVAILABILITY OF						
29	PROVIDERS TO SERVE UNINSURED INDIVIDUALS AT THE HOSPITAL THE						
30	<u>COMMUNITY;</u>						
31	(VII) A DESCRIPTION OF THE HOSPITAL'S EFFORTS TO TRACK						
$\frac{51}{32}$	AND REDUCE HEALTH DISPARITIES IN THE COMMUNITY THAT THE HOSPITAL						
52 33	SERVES;						
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1	(VIII) A LIST OF THE UNMET COMMUNITY HEALTH NEEDS
2	IDENTIFIED IN THE MOST RECENT COMMUNITY HEALTH NEEDS ASSESSMENT; AND
$3 \\ 4 \\ 5$	(IX) A LIST OF TAX EXEMPTIONS THE HOSPITAL CLAIMED DURING THE IMMEDIATELY PRECEDING TAXABLE YEAR, IN ACCORDANCE WITH STATE LAW.
6	(D) THE COMMISSION SHALL ESTABLISH A METHOD THROUGH WHICH
7	STATE AND LOCAL GOVERNING BODIES ARE MADE AWARE OF THE MEETINGS OF THE
8	COMMUNITY BENEFIT REPORTING WORKGROUP.
9	SECTION 2. AND BE IT FURTHER ENACTED, That:
10 11	(a) On or before <u>October</u> <u>December</u> 1, 2020, the Health Services Cost Review Commission shall <u>compile a report on the steps taken to update the community benefit</u>
12	reporting process that includes:
$13 \\ 14 \\ 15$	(1) issue a report on the steps taken to assess the extent to which each nonprofit hospital's community benefit spending addresses the community health needs of its service area;
16 17 18	(2) conduct an assessment of each nonprofit hospital's process for soliciting public comments on the health needs of the hospital's community and the hospital's process for incorporating the public comments into its community health needs assessment;
$19 \\ 20 \\ 21 \\ 22$	(3) issue recommendations for methodologies and processes for the Maryland Department of Health and local health departments to certify whether a hospital's spending on community benefit initiatives has been directed to a community health need identified in the hospital's community health needs assessment; and
$\frac{23}{24}$	(4) issue recommendations on the process to develop a community health needs assessment.
25 26 27	(1) <u>a description of each hospital's process for soliciting input in the</u> <u>development of the community health needs assessment for the purpose of § 501(r)(3) of</u> <u>the Internal Revenue Code; and</u>
28	(2) recommendations for the Maryland Department of Health and the local
29	health departments to assess the effectiveness of hospitals' community benefit spending to
30	address the community health needs.
91	(b) On an hoferer October December 1, 2020, the Commission shall extend to commission
$\frac{31}{32}$	(b) On or before <u>October</u> <u>December</u> 1, 2020, the Commission shall submit a copy of the <del>report required under subsection (a) of this section</del> <u>annual Nonprofit Hospital</u>
32 33	<u>Community Health Benefit Report</u> to the House Health and Government Operations
33 34	Committee and the Senate Finance Committee in accordance with § $2-1257$ of the State
35	Government Article.

1 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect July 2 1, 2020.

Approved:

Governor.

President of the Senate.

Speaker of the House of Delegates.