



General Assembly

February Session, 2000

Amendment

LCO No. 2887

Offered by:
REP. PRELLI, 63rd Dist.

To: Subst. House Bill No. 5292 File No. 131 Cal. No. 147

***"An Act Establishing The Reporting Of Community
Benefit Programs By Managed Care Organizations And
Hospitals."***

1 Strike out everything after the enacting clause and substitute the
2 following in lieu thereof:

3 "(NEW) (a) On or before January 1, 2001, and annually thereafter,
4 each nonprofit hospital and each nonprofit clinic shall submit to the
5 Commissioner of Public Health, or the commissioner's designee, a
6 report on whether such hospital or clinic has in place a community
7 benefits program. If a nonprofit hospital or nonprofit clinic elects to
8 develop a community benefits program, the report required by this
9 subsection shall comply with the reporting requirements of subsection
10 (c) of this section.

11 (b) A nonprofit hospital or nonprofit clinic may develop community
12 benefit guidelines intended to promote preventive care and to improve
13 the health status for working families and populations at risk, whether
14 or not those individuals are patients of such hospital or clinic. The
15 guidelines shall focus on the following principles:

16 (1) Adoption and publication of a community benefits policy
17 statement setting forth such hospital's or clinic's commitment to a
18 formal community benefits program;

19 (2) The responsibility for overseeing the development and
20 implementation of the community benefits program, the resources to
21 be allocated and the administrative mechanisms for the regular
22 evaluation of the program;

23 (3) Seeking assistance and meaningful participation from the
24 communities within such hospital's or clinic's geographic service areas
25 in developing and implementing the program and in defining the
26 targeted population and the specific health care needs it should
27 address. In doing so, the governing body or management of such
28 hospital or clinic shall give priority to the needs outlined in the
29 Department of Public Health's recommendations on public health
30 issues; and

31 (4) Developing its program based upon an assessment of the health
32 care needs and resources of the identified populations, particularly
33 low and middle-income, medically underserved populations and
34 barriers to accessing health care, including, but not limited to, cultural,
35 linguistic and physical barriers to accessible health care, lack of
36 information on available sources of health care coverage and services,
37 and the benefits of preventive health care. The program shall consider
38 the health care needs of a broad spectrum of age groups and health
39 conditions.

40 (c) Each nonprofit hospital and each nonprofit clinic that chooses to
41 participate in developing a community benefits program shall include
42 in the annual report required by subsection (a) of this section the status
43 of the program, if any, that such hospital or clinic established. If such
44 hospital or clinic has chosen to participate in a community benefits
45 program, the report shall include the following components: (1) The
46 community benefits policy statement of such hospital or clinic; (2) the
47 mechanism by which community participation is solicited and

48 incorporated in the community benefits program; (3) identification of
49 community health needs that were considered in developing and
50 implementing the community benefits program; (4) a narrative
51 description of the community benefits, community services, and
52 preventive health education provided or proposed, which may include
53 measurements related to the number of people served and health
54 status outcomes; (5) measures taken to evaluate the community
55 benefits program results and proposed revisions to the program; (6) to
56 the extent feasible, a community benefits budget and a good faith
57 effort to measure expenditures and administrative costs associated
58 with the community benefits program, including both cash and in-
59 kind commitments; and (7) a summary of the extent to which such
60 hospital or clinic has developed and met the guidelines listed in
61 subsection (b) of this section. Each nonprofit hospital and each
62 nonprofit clinic shall make a copy of the report available, upon
63 request, to any member of the public.

64 (d) The Commissioner of Public Health, or the commissioner's
65 designee, shall develop a summary of the community benefits
66 program reports submitted under this section, review the reports for
67 adherence to the guidelines stated in this section and report, on or
68 before October 1, 2001, and annually thereafter, to the joint standing
69 committee of the General Assembly having cognizance of matters
70 relating to public health, in accordance with the provisions of section
71 11-4a of the general statutes, with an analysis of each report submitted
72 by nonprofit hospitals and nonprofit clinics pursuant to this section."