Background
For many years, nonprofit hospitals have provided and reported publicly on community benefit programs, which are programs and services that address health care and quality-of-life needs that are unique to the individuals of a community and essential to their well-being. However, health care reform has taken the concept of community benefits to a new level.

The 2010 Affordable Care Act (ACA) requires nonprofit hospitals to conduct extensive community health needs assessments (CHNAs) and to develop an implementation strategy to address the needs identified through the process.

Legislative Requirements
Section 9007(a) of the 2010 ACA added Section 501(r) to the IRS Code; this new section of the code requires that tax-exempt, 501(c) (3) hospital organizations conduct a CHNA at least once every three years, make it widely available to the public, and adopt an implementation strategy to address identified needs. The assessment must take into account the perspective and input from the community served by the hospital. If a hospital organization operates more than one hospital facility, the CHNA requirements must be met separately with respect to each facility.

Oakwood CHNA Process
An internal steering committee was convened with representation from various disciplines within Oakwood to provide guidance and oversight in the development of the CHNA. Oakwood partnered with Truven Health Analytics to conduct the CHNA for the four Oakwood hospital sites. Extensive local, national, state and hospital utilization data and statistics were obtained from internal as well as external sources to identify health specific trends. These sources as well as information from key internal and external stakeholders in focus groups and interviews were utilized to identify the health issues impacting the Oakwood communities.

The CHNA steering committee utilized specific criteria in developing a prioritization process to assist in identifying the priority health needs:

- **Magnitude** of the need – the number of people impacted by the problem
- **Severity** of the need – the risk of morbidity and mortality associated with the problem
- **Alignment** of the problem with organizational strengths
- The organization has **existing resources** to address the problem (including dollars, ability to partner, organization infrastructure/leadership support, and organizational capacity)
- **Ability to measure change** – organization impact on the need can be monitored and measured
In addition to the five criteria, the committee emphasized the underlying foundation of the prioritization process should be a focus on serving vulnerable populations.

To prioritize the health needs identified in the assessment, Truven Health facilitated a prioritization process with Oakwood Healthcare representatives. It was agreed to focus on the health needs that were supported by quantitative (health indicators) and qualitative data (interview and focus group feedback). Affinity voting was conducted to prioritize the list to six community health needs. The group identified four needs that were most appropriate to address as a healthcare system.

**Health Needs Identified to be Addressed by Oakwood in the Implementation Strategy**

The following health care needs have been identified as priorities for Oakwood Healthcare:

1) Heart/Cardiovascular Disease  
2) Diabetes  
3) Obesity  
4) Access to Care

**Implementation Plan Development**

Community Benefit leadership met with Hospital Presidents and other key internal stakeholders to identify strategies, partnerships and programs to be included in the three year implementation plans. Oakwood will continue to build on existing community partnerships and programs and gain new partners as these work plans are developed and implemented.

*Please visit [www.oakwood.org/CHNA](http://www.oakwood.org/CHNA) to read the full report.*