Satisfying non-profit hospitals' community benefit obligations by targeting population health programs in partnership with distributed ambulatory practices: The results of a mixed method study

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Abstract: The findings of this study indicate that reimbursement reform will drive population health efforts by hospitals. Until there is a financial imperative to improve the health of communities, hospitals are more likely to focus on their historical business model. However, once the financial case can be made, hospitals are willing to move toward activities that seek to improve population health. Even as hospitals seek to develop population health programs, there remains many silos between hospitals and ambulatory physicians, which make effective partnerships challenging. The findings of this study include:
1) Health reform and new payment models have started discussions about population health, but have not affected reimbursement significantly enough to cause most hospitals to fully embrace population health programs.
2) Hospitals rely on community partnerships to address the community health needs that cannot be addressed in the hospital.
3) There is not an effective link between the community benefit office and community physicians that promotes cooperation in designing and implementing programs that affect population health.
4) In order for community benefit offices and community physicians to create programs that affect population health together in the future, several key requirements will need to be met.

There is a great opportunity for community health advocates to change the way that non-profit hospitals approach community benefit programs and encourage more investment in population health programs that are delivered in partnership with community physicians. There is a lot of work to be done to make these changes happen. The purpose of this paper is to be a first step in that process.

Links: Linking Service

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