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ENGROSSED SUBSTITUTE HOUSE BILL 2341

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State of Washington

62nd Legislature

2012 Regular Session

By House Health Care & Wellness (originally sponsored by Representatives Jenkins, Cody, Ladenburg, Van De Wege, Green, Reykdal, Moeller, Tharinger, McCoy, Darneille, and Hunt)

READ FIRST TIME 01/31/12.

1 AN ACT Relating to community benefits provided by hospitals; and  
2 adding a new section to chapter 70.41 RCW.

3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

4 NEW SECTION. **Sec. 1.** A new section is added to chapter 70.41 RCW  
5 to read as follows:

6 (1) As of January 1, 2013, each hospital that is recognized by the  
7 internal revenue service as a 501(c)(3) nonprofit entity must make its  
8 federally required community health needs assessment widely available  
9 to the public within fifteen days of submission to the internal revenue  
10 service. Following completion of the initial community health needs  
11 assessment, each hospital in accordance with the internal revenue  
12 service, shall complete and make widely available to the public an  
13 assessment once every three years.

14 (2) Unless contained in the community health needs assessment under  
15 subsection (1) of this section, a hospital subject to the requirements  
16 under subsection (1) of this section shall make public a description of  
17 the community served by the hospital, including both a geographic  
18 description and a description of the general population served by the  
19 hospital; and demographic information such as leading causes of death,

1 levels of chronic illness, and descriptions of the medically  
2 underserved, low-income, and minority, or chronically ill populations  
3 in the community.

4 (3)(a) Each hospital subject to the requirements of subsection (1)  
5 of this section shall make widely available to the public a community  
6 benefit implementation strategy within one year of completing its  
7 community health needs assessment. In developing the implementation  
8 strategy, hospitals shall consult with community-based organizations  
9 and stakeholders, and local public health jurisdictions, as well as any  
10 additional consultations the hospital decides to undertake. Unless  
11 contained in the implementation strategy under this subsection (3)(a),  
12 the hospital must provide a brief explanation for not accepting  
13 recommendations for community benefit proposals identified in the  
14 assessment through the stakeholder consultation process, such as  
15 excessive expense to implement or infeasibility of implementation of  
16 the proposal.

17 (b) Implementation strategies must be evidence-based, when  
18 available; or development and implementation of innovative programs and  
19 practices should be supported by evaluation measures.

20 (4) For the purposes of this section, the term "widely available to  
21 the public" has the same meaning as in the internal revenue service  
22 guidelines.

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