

Central PA HFMA Healthcare Industry Tax Update 2024



htmacentral pennsylvania chapter



Presenters



Scott J. Mariani, JD Partner, Practice Leader **Healthcare Services** smariani@withum.com (973) 532 8835



John A. Smith Tax Senior Manager **Healthcare Services** jsmith@withum.com (973) 532 8875

Agenda

Part 1: November 2024 Election Results

Part 2: IRS Update and IRC Section 501(r)

Part 3: Form 990 Schedule H Community Benefit and Commonwealth of PA

Part 4: Employment Tax



Post Election Tax Reform – Federal

1. Corporation

- A. Reduction in the corporate income tax rate
- B. Excise tax on compensation >\$1M WRT covered persons for Code Section 501(c)(3)'s

2. Individual income taxation

- A. No tax on tips and No tax on Social Security income
- B. SALT Cap \$10K
- C. Reduced rates
- D. Form 1099-K payments
- E. Elimination of FIT and replaced with consumption tax on new purchases



Corporate Transparency Act (CTA)

- 1. Congressional members request delay 11/5/2024 letter
- 2. Beneficial ownership information (BOI) reporting requirements
- Treasury Department's Financial Crimes Enforcement Network (FinCEN)
- 4. As of 11/1/2025 FinCEN reports it has received just 10 percent of required submissions



Employee Retention Credit (ERC)

- 1. Processed, approved and received refunds.
- 2. Denied and opportunity to appeal.
- 3. Filed, acknowledged and assigned.
- 4. Filed and received by the IRS.
- 5. The future of the ERC?!



IRA Clean Energy Tax Credits

- 1. Expands access to various energy tax credits making them available to certain tax-exempt and government entities; refundable tax credits even if no tax is paid by the organization.
- 2. Effective for tax years beginning after December 31, 2022.
- 3. Refundable production tax credits and investment tax credits for wind, solar, geothermal, combined heat and power and other technologies.
- 4. Refundable electric cars and ambulances tax credit.
- 5. Refundable electric charging stations investment tax credit.
- 6. Energy efficient building deduction under Section 179D.



Polling Question #1

- 1. What is the current Federal excise tax rate on covered person executive comp greater than \$1 million for tax-exempt organizations?
 - a) 15%
 - b) 18%
 - c) 21%
 - d) 24%



IRS Update

- Continued IRS delays
- Erroneous IRS notices and disallowance of credits and postings due to the employer FICA tax deferral and payback one-half on December 31, 2021, and the other one-half on December 31, 2022; respectively.
- Erroneous IRS notices, particularly regarding Forms 941 payroll tax filings including incorrect late deposits and late filings.
- Misapplied Tax Deposits
- IRS TE/GE Update



TE/GE's Program Letter for FY 2025

- Service (Better Taxpayer Experience)
- Issue Resolution (Faster Issue Resolution)
- Enforcement (Smarter Enforcement)
- Modernization (Advanced Technology and Analytics)
- Workforce (Empowered Employees)
- In March 2024, the IRS announced it would conduct examinations to "verify whether taxexempt hospitals are complying with their statutory obligations under Internal Revenue Code Section 501(c)(3), including community benefit standard, and Section 501(r)"



EO Examination Results FY 2024

- Started 2,538 total exams; closed 1,606
 - 74.6% overall change rate
- Started 97 compliance strategy exams (4% of exam starts); closed 187
 - 65.2% change rate on closed compliance strategy exams
- Started 251 data driven exams (10% of exam starts); closed 492
 - 67.9% change rate on closed data driven exams
- Started 2,190 referrals, claims and other casework exams (86% of exam starts); closed 927
 - 80% change rate on closed referrals, claims and other casework exams



Hospital IRS and Commonwealth of PA Areas of Focus

- 1. IRC Section 501(r) initiatives
- 2. Form 990 Schedule H Community Benefit and Commonwealth of PA municipality challenges to exemption
- 3. Employment tax



Schedule H – IRS Initiatives

- IRS Review of Form 990 Schedule H "desk audits."
 - Review Schedule H once every three years.
- IRS Review of your website and reconciliation to Form 990 Schedule H
 - Part I Community benefit costs and categories,
 - Community health needs assessment/implementation plan, and
 - Financial assistance policy and billing/collection policy.
- IRS Audits and Examinations
 - IRS to audit 35 hospitals with a focus on community benefit compliance.



Form 4564			e Treasury-Internal Revenue Service Request Number TION DOCUMENT REQUEST
To:			Tax Period Ending: 2014/12
			Subject: IRC § 501 (r)(3): CHNA and Implementation Strategy Plan.
Ý			EIN: Submitted to:
×		¥	Dates of Previous Requests

Description of Documents Requested:

The following information is being requested for the examination of the organization's Form 990 for the tax year ended December 31, 2014. The information requested will be used to determine if the organization is in compliance with IRC § 501(r)(3), which requires that each of your hospital facilities conduct a Community Health Needs Care Assessment (CHNA) once every three years and adopt an implementation strategy to meet the community health needs identified in the CHNA. Please provide a cover sheet with each response, identifying the IDR number and question number(s) related to the response.

Your Form 990, Schedule H, for 201412 shows in Part V, section A, that you operated multiple hospital facilities (HFs) within your healthcare system:

- Please provide a copy of each HF's CHNA conducted during the 2014/12 tax year or in either of the two immediately preceding tax years.
- 2. Provide the dates that each CHNA was adopted by an authorized body of the hospital facility and evidence of each CHNA's adoption (i.e., copies of board meeting minutes or resolutions, etc.).



- 3. In your response to question #7a on Schedule H, Part V, Section B, you indicated that you made each HF's CHNA report widely available on We could not locate any CHNAs posted to that particular website. Please provide the exact website address (or URL) where each HF's CHNA was posted on this website or explain how you otherwise made each CHNA widely available to the public.
- 4. Provide a copy of the written implementation strategy (IS) that each HF adopted with respect to the CHNA you provided in your response to request #1,
- 5. Provide the dates that each IS was adopted by an authorized body of the hospital facility and evidence of each IS's adoption (i.e., copies of board meeting minutes or resolutions, etc.).
- 6. In your response to question #10 within Part V, section B of Schedule H, you stated that you posted the most-recently adopted IS for any of your HF's on a website and you did not attach each HF's most-recent IS to your 2014/12 Form 990. Please explain why you have not attached the IS to your 2014/12 return.
- 7. Identify a person from each HF who has knowledge of actions taken to solicit public input from persons who represent the broad interest of your community and who was responsible for the content of the CHNA and the IS.

Return a copy of this request with the requested documents.

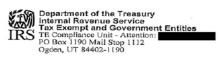


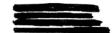
IRC 501(r) Most Common Mistakes

IRC 501(r)(3)

- 1. Current and prior CHNA not posted on hospital website
- 2. CHNA's that do not address the impact of actions taken since prior CHNA
- 3. Implementation strategy not posted on hospital website (not required; industry best practice recommendation)







May 09, 2024 Taxpayer ID numb Website Tax periods ended: Website Person to contact: ID number Telephone: Fax: Manager's contact inform Name: ID number. Telephone: June 10, 2024

Dear Taxpayer:

Why you're receiving this letter

This review is a compliance check, not a request to inspect your books and records, within the meaning of Internal Revenue Code Section 7605(b), nor an audit for purposes of Section 530 of the Revenue Act of 1978.

Review the enclosed Compliance Check Information Request. Attach a copy of this letter to the front of your reply and send the information to us by the response due date shown above, using one of the following methods:

- · Mail: Send copies of your documents to the address at the top of this letter.
- · Fax: You may fax your documents to the number shown above, using either a fax machine or an online fax service. Protect yourself when sending digital data by understanding the fax service's privacy and security

We encourage you to send the information by fax. Using the fax number is the most efficient way to send your

How you can pay if you owe

If you have a balance due on any filed return, you can pay:

- · Online, by phone, or with a mobile device.
- · Visit IRS.gov/Payment or the IRS2Go mobile app for all IRS payment options.
- · If you plan to mail a payment, consider the electronic options at IRS.gov/Payment first. It's free to pay from a bank account (Direct Pay) or the Electronic Federal Tax Payment System (EFTPS).
- · You can also schedule payments and receive email notifications.
- · If you pay by check, money order, or eashier's check, make sure it's payable to the U.S. Treasury.

Where you can find more information

Publication 3114, Compliance Checks, explains the difference between a compliance check and an examination.

For general information about penalties, see the instructions to the form you are filing. If you think you have reasonable cause for penalty relief, send us your request in writing. You can find information on penalty relief, including reasonable cause, at IRS.gov/PenaltyRelief.

Letter 4204 (Rev. 11-2023)



Enclosed are Publication 1, Your Rights as a Taxpayer, and Notice 609, Privacy Act Notice. Find tax forms, instructions or publications by visiting IRS.gov/forms or calling 800-TAX-FORM (800-829-3676). Visit IRS.gov/charities for information and tools related to your tax-exempt organization responsibilities, including: · Online educational programs and training. · Publications, forms and official guidance for exempt organizations. · Tips on filing Form 990-series forms. · Free newsletter EO Update, with information for exempt organizations and the tax practitioners who When you reply, include a copy of this letter and write the contact's name, title, telephone number and the hours we can reach them. If you have questions, you can call the contact person shown on the first page of this letter. way to Senior Manager, TE/GE Compliance Units Enclosures: Publication 1 Notice 609 Form 13837, Compliance Check Information Request - 8014 Letter 4204 (Rev. 11-2023)



Form 13837 (March 2023)		Treasury - Internal Revenue Service cck Information Request	Request type 8014
To (name of organ	ization/plan sponsor/taxpayer/issuer)	Taxpayer Identification number	
		Periods ended Website	
		Response due date June 10, 2024	
Description of infe	ormation requested		
Why you're re-	ceiving this letter		
a Financial Assi You must also n	stance Policy (FAP) and a policy r nake these documents, as well as a	evenue Code (IRC) Section 501(c)(3) and elating to emergency medical care under IR a plain language summary of the FAP and ing your organization's website, we found	RC Section 501(r)(e an FAP application
☐ We could	n't locate the FAP.		- 20
₩ we could	n't locate the FAP plain language	summary.	
We could ✓ We could ✓ We will ✓ We will ✓ We will ✓ We will ✓ We will ✓ We wi	n't locate the FAP application.		
(URL) so we ca		ave the correct website. Provide the correct sted the required documents and make sur	
☐ Your orga	mization didn't include certain req	uirements in the FAP.	
corrects the FAI		information below in the FAP. After your on and post it to a website, provide us the	
C 7211-1		nce, and whether that assistance includes f	ree or discounted
care.			
care.	basis for calculating amounts char	ged to patients,	
□ The I	basis for calculating amounts char method for applying for financial	assistance.	
□ The I	basis for calculating amounts char method for applying for financial e case of a hospital facility that do	•	
care. The land the may If appropriate the land	basis for calculating amounts char method for applying for financial is e case of a hospital facility that doe be taken in the event of nonpayme plicable, any information the hosp eligible and whether (and under v	assistance. esn't have a separate billing and collection	ng to credit agencie an Individual is sibility
care. The land the l	basis for calculating amounts char method for applying for financial is e case of a hospital facility that do be taken in the event of nonpayme plicable, any information the hosp eligible and whether (and under v minations. This information must cial assistance.	assistance, esn't have a separate billing and collection at including collections action and reportis tital uses to presumptively determine that what circumstances) it uses prior FAP-elig be obtained from sources other than an in tal facility itself, delivering emergency or st specify which providers are covered by	ng to credit agencie an Individual is dibility dividual seeking medically-necessa
care. The land the l	basis for calculating amounts char method for applying for financial is e case of a hospital facility that doe be taken in the event of nonpayme plicable, any information the hosp- eligible and whether (and under v minations. This information must cial assistance. to f providers, other than the hospi in the hospital facility. The list mu	assistance, esn't have a separate billing and collection at including collections action and reportis tital uses to presumptively determine that what circumstances) it uses prior FAP-elig be obtained from sources other than an in tal facility itself, delivering emergency or st specify which providers are covered by	ng to credit agencie an Individual is dibility dividual seeking medically-necessa



	Page 2 of 2
☐ Your organization didn't include	e certain requirements in the FAP plain language summary.
Explain why your organization didn't organization corrects the summary to website address (URL) so we can revi	include the information below in the plain language summary. After your include the missing information and posts it to a website, provide us the few the information.
A brief description of the e	eligibility requirements and assistance offered under the FAP.
A brief summary of how a	patient may apply for assistance under the FAP.
application form.	cal locations where an individual can get copies of the FAP and FAP
Instructions on how an indi	ividual can get a free copy of the FAP and FAP application form by mail.
The contact information, in office or department that ca	ncluding telephone number and physical location, of the hospital facility an provide information about the FAP, and either:
process, or	ce or department that can provide assistance with the FAP application
nonprofit organization or available source of assista	esn't provide assistance with the FAP application process, at least one government agency that the hospital facility has identified as an ance with FAP applications.
plain language summary of	
 A statement that an FAP-cli (AGB) for emergency or off 	igible individual can't be charged more than the amounts generally billed ther medically-necessary care.
What you need to do	
Provide a complete response below to t the front page of this letter to send your	the information we're requesting above. Use the mailing instructions on response to us.
instructions: Attach a copy of this form to the finformation requested in the letter.	front of the requested information along with a copy of the accompanying letter and any
You can send the information using one of the f	following methods:
Mail: Send copies of your documents to the add	dress at the top of the cover letter,
Fax: Fax your documents to the fax number at to yourself when sending digital data by understan number on each page.	the top of the cover letter using either a fax machine or an online fax service. Protect diling the fax service's privacy and security policies, include your taxpayer identification
	•
	1
	·



IRC 501(r) Most Common Mistakes

IRC 501(r)(4)(5) & (6)

- 1. No reference to AGB/AGB not updated
- Lack of LEP translations/all required documents not translated into LEP languages
- 3. Missing provider listing/provider listing not updated
- 4. No reference to billing & collection policy
- 5. Reference to appendix/exhibits that do not exist
- Broken website links
- 7. FAP information not easily found within website



Polling Question #2

- 1. How often is a tax-exempt hospital required to complete a Community Health Needs Assessment and implementation plan?
 - a) One year
 - b) Two years
 - c) Three years
 - d) Four years



Part 3: Form 990 Schedule H Community **Benefit and Commonwealth of PA** withum# | withum.com 2024 WithumSmith+Brown, PC

Form 990, Schedule H - Community Benefit

- 1. Supports Federal, state and local tax-exempt status.
 - a. Federal
 - i. Exempt from corporate income tax
 - ii. Allows the issuance of tax-exempt borrowings, and
 - iii. Permitted to receive Federal and state government grants and also charitable contributions.
 - b. State
 - Exempt from corporate income tax
 - ii. Exempt from sales and use taxes.
 - c. Local
 - i. Generally, exempt from property (real estate) taxes.



AMA calls for Tougher Oversight of Nonprofit Hospitals

- 1. November 11, 2024 during their semi-annual meeting.
- 2. "Federal and state authorities should toughen enforcement of community benefit requirements and penalize or revoke the taxexempt status of nonprofit hospitals that "provide little or no community benefit," the AMA said in a news release Monday."
- 3. The link above is to a Modern Healthcare 3/26/2024 article titled "Hospital charity care falls short of nonprofit tax breaks: Lown".



Tax Benefit of US Nonprofit Hospitals

- JAMA Network (Journal of the American Medical Association) released study on September 26, 2024. Researchers at Johns Hopkins Bloomberg School of Public Health, Johns Hopkins Carey Business School, and Texas Christian University. Please click <u>here</u> to view the full study.
- 2. Analyzed financial data from nearly 3,000 U.S. nonprofit hospitals and reported that nonprofit hospitals in U.S. received \$37.4 billion in tax benefits in 2021.
- 3. AHA released study shortly thereafter. Please click <u>here</u> to view the full article. Nonprofit hospitals tax exemptions amounted to \$13.2 Billion in 2020.
- 4. Nonprofit hospitals provided \$129 billion in total benefits to the community, nearly 10 times the value of the tax exemptions.



Majority Staff Report 10/10/2023

- 1. Majority Staff Report of the Senate Health, Education, Labor, and Pensions Committee, chaired by Senator Bernie Sanders.
- 2. Hold tax-exempt hospitals more accountable for the tax benefits they receive and ensure these taxexempt hospitals are fulfilling their obligation to provide accessible healthcare in their communities.
- 3. Reviewed tax documents of 16 of the largest U.S. tax-exempt hospitals and determined:
 - A. 12 of these 16 hospitals dedicated less than 2% of their revenue to charity care.
 - B. Six dedicated less than 1% of total revenue to charity care.
 - C. The 16 hospitals' CEOs averaged more than \$8M in annual compensation in 2021.



Majority Staff Report 10/10/2023

- The report cites a study that 86% of tax-exempt hospitals spent less on charity care than they received in tax benefits between 2011 and 2018.
- Tax-exempt hospitals spent only an estimated \$16B on charity care in 2020, or about 57% of the value of their tax breaks in the same year.
- Tax-exempt hospitals billed \$2.7B to patients who would have likely been eligible for charity care during 2017.



United States Senate HEALTH, EDUCATION, LABOR, AND PENSIONS COMMITTEE

Bernard Sanders, Chair Majority Staff Report October 10, 2023

Executive Charity

Major Non-Profit Hospitals Take Advantage of Tax Breaks and Prioritize CEO Pay Over Helping Patients Afford Medical Care

Introduction

In 2007, Carrie Barrett needed a heart catherization after experiencing chest pain and shortness of breath.¹ She went to a Methodist Le Bonheur ("Methodist") hospital in Memphis, Tennessee, and walked out with the needed procedure completed and a \$12,019 bill for her medical stay.² Ms. Barrett made less than \$12 an hour and had no hope of paying back that bill. But the hospital not only refused to help Barrett afford her bill, it instead piled on interest and sent the bill to collections. By June 2019, Ms. Barrett owed over \$33,000, nearly three times the original cost of the procedure and more than twice what she earned in a year.³

Stories like Ms. Barrett's are far too common. But they are even more egregious when the hospital is a non-profit that is required to be "organized and operated exclusively for charitable purposes." Nearly half of American hospitals are non-profits, a status that affords them an incredible benefit: exemption from federal, state, and local taxation. In 2020, the nation's 2,978 non-profit hospitals receive an estimated \$28 billion in federal, state, and local tax benefits as a result of not paying those taxes—an average of \$9.4 million per hospital. One study also found that tax breaks accounted for 44 percent of non-profit hospitals' net income in that same year.



IRS Community Benefit Standard Rev. Rul. 69-545

- 1. Operates a full-time emergency room and no one requiring emergency care is denied treatment;
- 2. Uses surplus funds to improve the quality of patient care, expand its facilities, and advance its medical training, education, and research programs;
- 3. Control of the hospital rests with its board of trustees, which is composed of independent civic leaders; and
- 4. Maintains an open medical staff, with privileges available to all qualified physicians.



Pennsylvania Institutions of Purely Public Charity

Hospital Utilization Project v. Commonwealth, 507 PA 1 (1985) - "HUP test"

- 1. Advance a charitable purpose;
- 2. Operate entirely free from private profit motive;
- 3. Donate or render gratuitously a substantial portion of its services
- 4. Benefit a substantial and indefinite class of persons who are legitimate subjects of charity; and
- 5. Relieve the government of some of its burden.



Form 990, Schedule H, Part I

7 Financial Assistance and Certain Other Community Benefits at Cost

Financial Assistance and Means-Tested Government Programs		activities or	(b) Persons served (optional)	(c) Total community benefit expense	(d) Direct offsetting revenue	(e) Net community benefit expense	(f) Percent of total expense
a	Financial Assistance at cost						
	(from Worksheet 1)			13,743,896.		13,743,896.	1.39
b	Medicaid (from Worksheet 3,			V2007 1000 1000 1000 1000 1000	222222222		
	column a)			135,993,539.	78,137,247.	57,856,292.	5.86
С	Costs of other means-tested government programs (from Worksheet 3, column b)						
d				149,737,435.	78,137,247.	71,600,188.	7.25
	Other Benefits				f f		
е	Community health improvement services and community benefit operations (from Worksheet 4) •			2,509,190.		2,509,190.	0.25
f	Health professions education						
	(from Worksheet 5)		100000000000000000000000000000000000000	36,503,215.	10,822,962.	25,680,253.	2.60
g	Subsidized health services (from			63 43 1,000,000,000			
	Worksheet 6)			11,327,598.	4,354,550.	6,973,048.	0.71
h	Research (from Worksheet 7)			4,249.		4,249.	
i	Cash and in-kind contributions for community benefit (from Worksheet 8)			13,946.		13,946.	
i	Total, Other Benefits	-		50,358,198.	15,177,512.	35,180,686.	3,56
k	Total. Add lines 7d and 7j .			200,095,633.	93,314,759.	106,780,874.	10.81



Schedule H Planning Areas

- 1. Health Professionals Education
 - A. Nurse Residency Program
 - B. Medical residents; do not include indirect GME reimbursement provided by Medicare or Medicaid
- 2. Subsidized Health Services
 - A. The service meets an identified community need
 - B. Inpatient programs and outpatient programs
 - C. Community health needs assessment (CHNA)



American Hospital Association Total Benefits to the Community Model

- 1. Starts with Form 990 Schedule H, Part I
- 2. AHA model also includes the following from the Schedule H
 - A. Community Building Activity Form 990 Schedule H, Part II
 - B. Bad Debt Expense Attributable To Financial Assistance Form 990 Schedule H, Part III
 - C. Medicare Shortfall Form 990 Schedule H, Part III



Form 990, Schedule H, Part III

Pa	rt III Bad Debt, Medicare, & Collection Practices	1602370		
Sec	tion A. Bad Debt Expense		Yes	No
1	Did the organization report bad debt expense in accordance with Healthcare Financial Management Association Statement No. 15?	1	х	
2	Enter the amount of the organization's bad debt expense. Explain in Part VI the methodology used by the organization to estimate this amount			
3	Enter the estimated amount of the organization's bad debt expense attributable to patients eligible under the organization's financial assistance policy. Explain in Part VI the methodology used by the organization to estimate this amount and the rationale,			
4	if any, for including this portion of bad debt as community benefit			
Sec	tion B. Medicare			
5	Enter total revenue received from Medicare (including DSH and IME)			
6	Enter Medicare allowable costs of care relating to payments on line 5 6 225,406,524.	į.		
7	Subtract line 6 from line 5. This is the surplus (or shortfall)			
8	Describe in Part VI the extent to which any shortfall reported on line 7 should be treated as community benefit. Also describe in Part VI the costing methodology or source used to determine the amount reported on line 6. Check the box that describes the method used: Cost accounting system X Cost to charge ratio Other			
	tion C. Collection Practices			
9a	Did the organization have a written debt collection policy during the tax year?	9a	X	
b	if "Yes," did the organization's collection policy that applied to the largest number of its patients during the tax year contain provisions on the collection practices to be followed for patients who are known to qualify for financial assistance? Describe in Part VI	9b	Х	



Lown Institute

- Starts with Form 990 Schedule H, Part I
- 2. Eliminates
 - A. Medicaid shortfall
 - B. Health Professionals Education (HPE)
 - C. Research
 - D. Does not recognize AHA additional categories either
- 3. Fair Share Spending Calculation 5.9% of a hospital's expenses
- 4. PA municipality expert witness



Community Benefit Standards

Hospital Example	IRS	%	АНА	%	Lown	%
Financial assistance	13,743,896	1.39	13,743,896	1.39	13,743,896	1.39
Medicaid Shortfall	57,856,292	5.86	57,856,292	5.86	-	0.00
Community Health Improv Svs	2,509,190	0.25	2,509,190	0.25	2,509,190	0.25
Health Professions Education	25,680,253	2.60	25,680,253	2.60	-	0.00
Subsidized Health Services	6,973,048	0.71	6,973,048	0.71	6,973,048	0.71
Research	4,249	0.00	4,249	0.00	-	0.00
Cash and in-kind contributions	13,946	0.00	13,946	0.00	13,946	0.00
Total	106,780,874	10.81	106,780,874	10.81	23,240,080	2.35
Portion of bad debt	-	0.00	2,945,111	0.29	-	0.00
Medicare shortfall	-	0.00	40,985,434	4.15	-	0.00
Total	106,780,874	10.81	150,711,419	15.25	23,240,080	2.35
Total Expenses					986,829,689	
5.90%					58,222,952	
Lown Fair Share Deficit					(34,982,872)	

Commonwealth of PA Considerations

- 1. Generally, PA REV-72 do not expire; however, charitable, educational, or religious institutions may need to be renewed every five years.
- 2. Commonwealth of PA municipality tax-exemption challenges!
- 3. Strategies when exemption is challenged:
 - A. Compliance with HUP
 - B. IRS Form 990 Schedule H and community benefit
 - C. IRS Form 990 Schedule O community benefit statement narrative
 - D. American Hospital association total benefits to the community
 - E. Compensation and benefits are reasonable and FMV; process and procedures
 - F. Lown test is not the current standard for exemption; their methodology is arbitrary; unreasonable and discretionary
 - G. Did the hospital lose money during the year(s) in question per 990(s)?



Schedule H - Community Benefit Benchmarking **AHA Report 2020 Forms 990**

Hospital Category	All Filed 2020 Schedule Hs ^[1]
Financial Assistance, Unreimbursed Medicaid, Unreimbursed Costs From Means-Tested Government Programs	6.90%
Health Professions Education	1.70%
Medical Research	0.50%
Cash and In-Kind Contributions to Community Groups	0.30%
Other [2]	1.80%
Total Financial Assistance and Other Community Benefits	11.30%

[1] National Benchmark Comparative

[2] Includes Subsidized Health Services



Table 3. Financial assistance, means-tested programs and certain other benefits (Percent of total expense)

Hospital Category	Financial Assistance, Unreimbursed Medicaid, Unreimbursed Costs From Means-Tested Government Programs	Health Professions Education	Medical Research	Cash And In-Kind Contributions To Community Groups	Other *	Total Financial Assistance And Other Community Benefits
All Filed Schedule Hs (2,790 hospitals)	6.9%	1.7%	0.5%	0.3%	1.8%	11.3%
DEMOGRAPHIC C (1,849 individual h						
Size						
Small	6.1%	0.2%	0.1%	0.1%	2.5%	9.0%
Medium	6.5%	0.5%	0.0%	0.2%	2.1%	9.2%
Large	7.1%	2.3%	0.7%	0.2%	2.0%	12.3%
Location						
Rural	5.0%	0.1%	0.0%	0.1%	2.9%	8.1%
Urban/Suburban	6.9%	1.9%	0.5%	0.2%	2.0%	11.6%
Type**						
General Medical	6.8%	1.8%	0.3%	0.2%	2.1%	11.1%
Children's	9.9%	2.1%	2.1%	0.5%	2.5%	17.1%
Teaching Hospital	6.9%	2.1%	0.6%	0.2%	2.1%	12.0%
Critical Access Hospital Status	5.2%	0.2%	0.0%	0.1%	3.2%	8.7%
System-Affiliation						
Affiliated	6.6%	1.9%	0.2%	0.2%	1.9%	10.9%

Note: Total percent may not sum due to rounding.

^{**} A single hospital can be in more than one TYPE category



^{*} Net shortfall (gross shortfall less surplus)

Schedule H – Total Benefits to the Community AHA Report 2020 Forms 990

Hospital Category	All Filed 2020 Schedule Hs
Financial Assistance And Certain Other Community Benefits	11.3%
Community Building Activity	0.1%
Medicare Shortfall	3.9%
Bad Debt Expense Attributable to Financial Assistance	0.3%
Total Benefits To The Community	15.5%



Table 2. Hospitals' total benefit to the community (Percent of expense)

Hospital Category	Financial Assistance And Certain Other Community Benefits	Community Building Activity	Medicare Shortfall*	Bad Debt Expense Attributable To Financial Assistance	Total Benefits To The Community
All Filed Schedule Hs (2,790 hospitals)	11.3%	0.1%	3.9%	0.3%	15.5%
DEMOGRAPHIC C (1,849 individual h					
Size					
Small	9.0%	0.1%	1.7%	0.8%	11.7%
Medium	9.2%	0.1%	3.7%	0.5%	13.5%
Large	12.3%	0.1%	3.6%	0.3%	16.2%
Location					
Rural	8.1%	0.1%	1.4%	0.6%	10.2%
Urban/Suburban	11.6%	0.1%	3.5%	0.3%	15.5%
Type**					
General Medical	11.1%	0.1%	3.7%	0.4%	15.2%
Children's	17.1%	0.1%	0.2%	0.1%	17.6%
Teaching Hospital	12.0%	0.1%	3.4%	0.3%	15.7%
Critical Access Hospital Status	8.7%	0.1%	0.7%	0.5%	10.0%
System-Affiliation					·
Affiliated	10.9%	0.0%	3.5%	0.3%	14.8%

Note: Total percent may not sum due to rounding.

^{**} A single hospital can be in more than one TYPE category



^{*} Net shortfall (gross shortfall less surplus)

Increased Focus on Value of Community Benefit & Tax-Exemption

RESEARCH ARTICLE



Comparing the value of community benefit and Tax-Exemption in non-profit hospitals

Hossein Zare PhD, MS¹ | Matthew D. Eisenberg PhD² | Gerard Anderson PhD²

HOSPITALS

Nonprofit hospitals spend less on charity care than forprofits, study finds

By **Robert King** • Apr 7, 2021 07:05am



RESEARCH ARTICLE HOSPITALS

HEALTH AFFAIRS > VOL. 40, NO. 4: ACCESS, ACA, SPENDING, & MORE

Analysis Suggests Government And Nonprofit Hospitals' Charity Care Is Not Aligned With Their Favorable Tax Treatment

Ge Bai, Hossein Zare, Matthew D. Eisenberg, Daniel Polsky, and Gerard F. Anderson



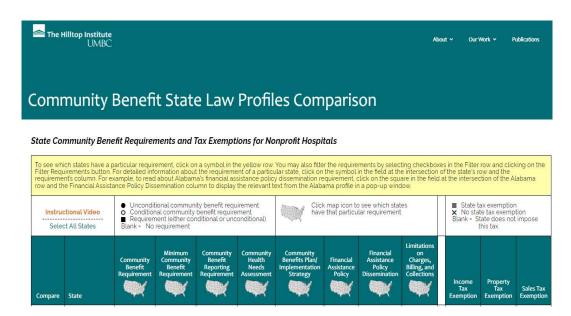
Research Letter | Health Policy

Evaluation of Unreimbursed Medicaid Costs Among Nonprofit and For-Profit US Hospitals

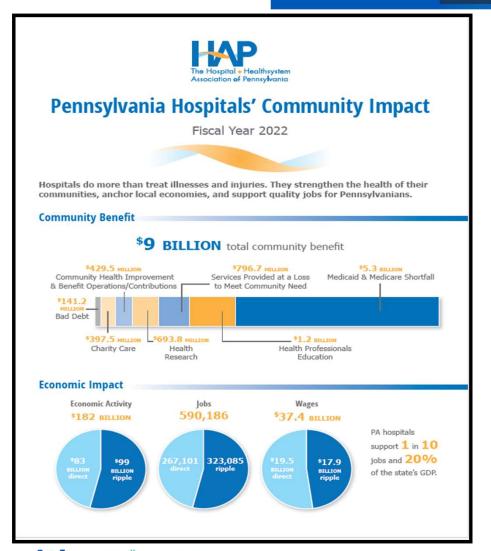
Ge Bai, PhD, CPA; Hossein Zare, PhD, MS; David A. Hyman, MD, JD

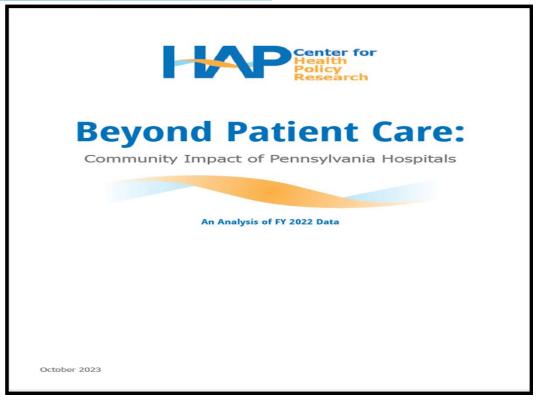
States Are Getting Involved In Community Benefit

- 1. States implementing mandatory community benefit reporting.
- 2. Mandatory minimum community benefit spending.
- 3. Required reports to be posted on organization's website.



Click <u>here</u> to see Community Benefit Requirements by State.





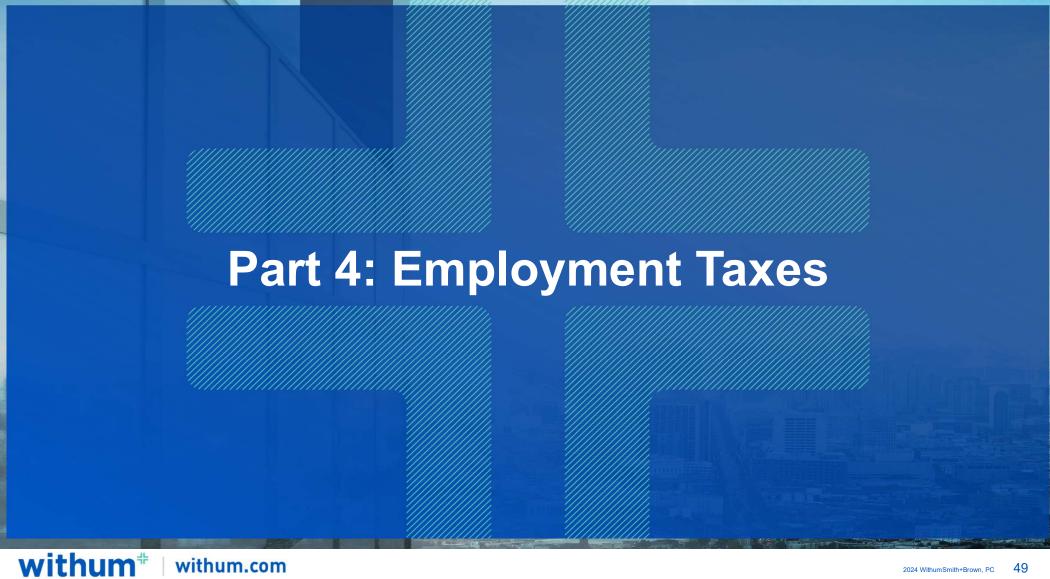
Pa. Hospitals Generate Billions in Community, Economic Benefits -**HAP**

withum# | withum.com

Polling Question #3

- What does not constitute Community Benefit under the IRS standard (Catholic Health Association model)?
 - a) Financial assistance at cost
 - b) Medicaid shortfall
 - c) Medicare shortfall
 - d) Research





Polling Question #4

- Has your organization undergone an IRS audit examination in the last 5 years?
 - a) Yes
 - b) No thankfully!
 - c) Not sure
 - d) N/A

IRS – Employment Taxes

- The IRS loves audit examinations in this area!
- Taxability of fringe benefits
- Audits of the Form 1099-NEC; Worker reclassification from 1099 to W-2
- Section 530 relief
- A Form W-2 and 1099 to the same individual
- Matching of employees Social Security #'s to 1099's
- Audits of the accounts payable paid file
- Medical directorships/chairmanships/stipends; on-call payments



Section 530 Relief

- Reporting Consistency
- Substantive Consistency
- Reasonable Basis



Form 1099-MISC

PAYER'S name, street address, city or foreign postal code, and telephone		e, country, ZIP	1 Rents	OMB No. 1545-0115	
			\$		Miscellaneous
			2 Royalties	(Rev. January 2024)	Information
			•	For calendar year	
			3 Other income	4 Federal income tax withheld	Copy A
			S	\$	For
PAYER'S TIN	RECIPIENT'S TIN		5 Fishing boat proceeds	6 Medical and health care payments	Internal Revenue Service Center
			s	\$	File with Form 1096
RECIPIENT'S name			7 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale	8 Substitute payments in lieu of dividends or interest	For Privacy Act and Paperwork Reduction Act
Street address (including apt. no.)			9 Crop insurance proceeds	10 Gross proceeds paid to an attorney	current Genera
			\$	\$	Instructions for Certain
City or town, state or province, count	ry, and ZIP or foreign po	stal code	11 Fish purchased for resale	12 Section 409A deferrals	Information
			\$	\$	Returns
		13 FATCA filing requirement	14 Excess golden parachute payments	15 Nonqualified deferred compensation	
			\$	\$	
Account number (see instructions)		2nd TIN not.	16 State tax withheld \$	17 State/Payer's state no.	18 State income \$
			\$		\$



Form 1099-NEC

or foreign postal code, and telephone no.				Form 1099-NEC (Rev. January 2024)	Nonemployed Compensation
				For calendar year	Compensation
PAYER'S TIN	RECIPIENT'S TIN		1 Nonemployee compen	nsation	Copy
			\$		For Internal Revenu Service Cente
RECIPIENT'S name			Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale		File with Form 1096
			3		For Privacy Act an Paperwork Reduction A
Street address (including apt. no.)					Notice, see the currer
			4 Federal income tax w	vithheld	Certain Informatio
City or town, state or province, coun	try, and ZIP or foreign post	tal code	5 State tax withheld		Returns
Account number (see instructions)		2nd TIN not.		6 State/Payer's state no.	7 State income
Account number (see instructions)			\$		\$



Form 1099 – Payments/Box

1099-MISC

For payments of \$600 or more to vendors for:

- Box 1: Rent
- Box 2: Royalties (>\$10)
- Box 3: Prizes & awards
- Box 6: Medical and healthcare payments
- Box 10: Gross proceeds to attorney

1099-NEC

For payments of \$600 or more to vendors for:

- Box 1: Services by someone who is not your employee
- Box 1: Payments to an attorney for services

Form 1099 – General Rules

- Generally, no Form 1099 for:
 - Corporations, except for attorneys/law firms and medical/healthcare payments
 - Payments for merchandise
 - Payments to tax-exempt organizations
- Box 6: Medical and healthcare payments
 - > \$600 to each physician or other supplier or provider of medical or health care services



Form 1099 - General Rules

- Payments to attorneys
 - Services: Form 1099-NEC Box 1
 - Gross proceeds/settlements: Form 1099-MISC Box 10
- Payments to a Limited Liability Company Structured as:
 - Single member LLC
 - C-Corp
 - S-Corp
 - Partnership



Form W-9

Departm	arch 2024) Identification	Number and Certification We for instructions and the latest information. Give form to the requester. Do not send to the IRS.				
	you begin. For guidance related to the purpose of Form					
	 Name of entity/individual. An entry is required. (For a sole propentity's name on line 2.) 	rietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded				
	 Business name/disregarded entity name, if different from about 	£.				
on page		certain entities, not individuals; see instructions on page 3):				
Specific Instructions	U.C. Enter the tax classification (C – C corporation, S = S corporation, P = Partnership)					
Specific	3b If on line 3a you checked "Partnership" or "Trust/estate," or ch and you are providing this form to a partnership, trust, or ee this box if you have any foreign partners, owners, or beneficia	tate in which you have an ownership interest, check (Appear to account a factor of the United States)				
See	5 Address (number, street, and apt. or suite no.). See instruction	s. Requester's name and address (optional)				
	6 City, state, and ZIP code					
	7 List account number(s) here (optional)					
Part	Taxpayer Identification Number (TIN) our TIN in the appropriate box. The TIN provided must me					
residen entities, TIN, late		others for Part I, later. For other other a number, see How to get a or [Employer identification number]				
Numbe	f the account is in more than one name, see the instruction or To Give the Requester for guidelines on whose number	s for line 1. See also What Name and one other.				
Part Under r	Certification penalties of perjury, I certify that:					
2. I am Servi no lo 3. I am 4. The I Certific because acquisit	not subject to backup withholding because (a) I am exem ice (IRS) that I am subject to backup withholding as a rest enger subject to backup withholding; and a U.S. citizen or other U.S. person (defined below); and FATCA code(s) entered on this form (if any) indicating that lation instructions. You must cross out item 2 above if you e you have failed to report all interest and dividends on your tion or abandonment of secured property, cancellation of de	sation number (or I am waiting for a number to be issued to me); and of form backup withholding, or (b) I have not been notified by the Internal Revenue It of a failure to report all interest or dividends, or (c) the IRS has notified me that I am I am exempt from FATCA reporting is correct. I am exempt from FATCA reporting is correct. I are exempt from FATCA reporting is correct.				
Sign Here	Signature of U.S. person	Date				
	eral Instructions	New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect wise foreign partners, owners, or beneficiaries when it provides the Form W-9				
Section noted. Future related after the What	n references are to the Internal Revenue Code unless othe developments. For the latest information about develop to Form W-9 and its instructions, such as legislation enace ey were published, go to www.irs.gow/FormW9.	to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign entire that the partnership instructions for Schedules K-2 and K-3 (Form 1095).				
Section noted. Future related after the What Line 3a	developments. For the latest information about developr to Form W-9 and its instructions, such as legislation enacely were published, go to www.irs.gov/FormW9.	to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting or equirements. For example, a partnership that has any indirect foreign example, as the satisfy any applicable reporting of the Partnership in structures for Schedules K-2 and K-3 E-76m 1093).				

withum[#] | withum.com

Backup Withholding

- Generally 24% withholding when:
 - Failure to furnish TIN in the manner required;
 - Notice from IRS that payee's TIN is incorrect;
 - Notice from IRS that payee is subject due to notified payee underreporting; or
 - Failure to certify that payee is not subject.
- Report on Form 945
- Form W-9 can eliminate backup withholding requirement
- Publication 1284; Backup Withholding for Missing & Incorrect Name/TIN(s)



Backup Withholding

- IRS Audits.
- Audit back up to 3 years.
- Subject to 24% tax on all payments made to these contractors.
- Form 4669, Statement of Payments Received.
- Contractor lists and certified each payment received was reported on the contractor's income tax return.



Withum Accounts Payable Best Practices

- Beware Form 1099-NEC audits!!!
- Planning between Form 1099-MISC, Box 6 vs 1099-NEC, Box 1
- Obtain Form W-9 from all accounts payable payees
- IRS TIN matching program
- Annual review of non-1099 required vendors
- Annual review of both payroll and accounts payable to determine if any individuals were issued both a Form W-2 and Form 1099-MISC
- Maintain/update internal Form 1099-MISC/NEC policy, including IRS rules & regulations





Join us! Withum's Virtual Healthcare Symposium 3 CPE / 3 CLE Credits

Register Here



Thank you! Questions?



Scott J. Mariani, JD
Partner, Practice Leader
Healthcare Services
smariani@withum.com
(973) 532 8835



John A. Smith
Tax Senior Manager
Healthcare Services
jsmith@withum.com
(973) 532 8875