

Addison Gilbert, Beverly, Winchester, and Lowell General Hospitals

ESSEX AND MIDDLESEX COUNTIES

\$6.3M

TOTAL PROJECT COST

\$4.8M

HPC AWARD

Target Population & Aims

TARGET POPULATION

Patients with a personal history of moderate or high utilization of the ED

6,746

ED visits per year for 706 unique patients with moderate utilization

4,420

ED visits per year for 248 unique patients with high utilization

PRIMARY AIM

Reduce 30-day ED revisits by

20%

SECONDARY AIM

Reduce total acute care utilization by

15%

Summary of Award

Addison Gilbert Hospital, Beverly Hospital, Winchester Hospital (the Lahey Health community hospitals) and Lowell General Hospital aim to reduce 30-day Emergency Department (ED) revisits for patients with a personal history of recurrent ED utilization. The target population is segmented into patients with moderate utilization (8-13 visits) and patients with high utilization (14+ visits) based on each patient's 12 month history. This joint program will identify and initiate treatment in the ED, providing either multidisciplinary care coordination or new behavioral health services, as patient needs dictate, staffed in part by Lahey Health Behavioral Services. Telepsychiatry services are also provided as appropriate.

Community Health Workers

Shortly after launching its program, the Lahey Lowell Joint Award CHART team encountered a middle-aged homeless male who had over 30 ED visits over the span of two years. He frequented the ED due to intoxication, often with suicidal ideation. He has a documented traumatic brain injury and a diagnosis of substance induced mood disorder, but continued to refuse medications or care from a psychiatrist. He enrolled in the CHART program upon a qualifying ED visit. The CHART team's CHWs have since made thirteen subsequent contacts with this patient in various settings, providing education on insurance benefits, linkage to primary care, access to temporary housing, and a connection to a community support system. He now has a volunteer position at a local organization and regularly attends AA meetings.



CHART & HPC Background

The Community Hospital Acceleration, Revitalization, and Transformation Investment Program (CHART) makes phased investments for certain Massachusetts community hospitals to enhance their delivery of efficient, effective care. The goal of the program is to promote care coordination, integration, and delivery transformations; advance electronic health records adoption and information exchange among providers; increase alternative payment methods and accountable care organizations; and enhance patient safety,

access to behavioral health services, and coordination between hospitals and community-based providers and organizations.

Established through the Commonwealth's landmark cost containment law, Chapter 224 of the Acts of 2012, the HPC is an independent state agency that monitors reform in the health care delivery and payment systems and develops policies to reduce overall cost growth while improving the quality of patient care. To learn more, please visit www.mass.gov/hpc or follow us on Twitter @Mass_HPC.

1. Source: Center for Health Information and Analysis, 2015.