Milford Regional Medical Center

WORCESTER COUNTY

$2.24M
TOTAL PROJECT COST

$1.3M
HPC AWARD

Target Population & Aims

TARGET POPULATION
Patients with ≥3 hospitalizations in the past 12 months

1,248
discharges per year for 352 unique patients

PRIMARY AIM
Reduce 30-day readmissions by
25%

SECONDARY AIM
Reduce 30-day ED revisits by
10%

Summary of Award

Milford Regional Medical Center (MRMC) aims to reduce 30-day readmissions by 25% for patients with a personal history of frequent hospitalization by deploying a High Risk Mobile Team (HRMT) comprised of a pharmacist, social worker, registered nurse, and a hospital-based palliative care physician assistant (PA). The HRMT supports Emergency Department (ED) assessments, facilitates alternatives to inpatient admissions, develops individualized care plans, and when appropriate, refers patients for a palliative care consultation. MRMC developed an automated trigger in its electronic health record to notify the PA of a need for a palliative care consultation. Once completed, the PA contacts the patient's attending and/or primary care provider to alert them to the consult. The HRMT continues to engage with the patient through phone calls and home visits (including visits to skilled nursing facilities) to ensure connection to social supports, adherence to treatment plans, and stability within the community.

High Risk Mobile Team

The HRMT is a collaborative team that works to ensure that patients receive the most appropriate and effective medical interventions through hospital and community services.

An elderly patient with frequent recurrent utilization of the hospital met with the HRMT during an admission. The team discovered that the patient had not visited her PCP in several years. The HRMT scheduled an appointment for the same day, preventing a readmission. Since this encounter the patient's hospital utilization has decreased dramatically.

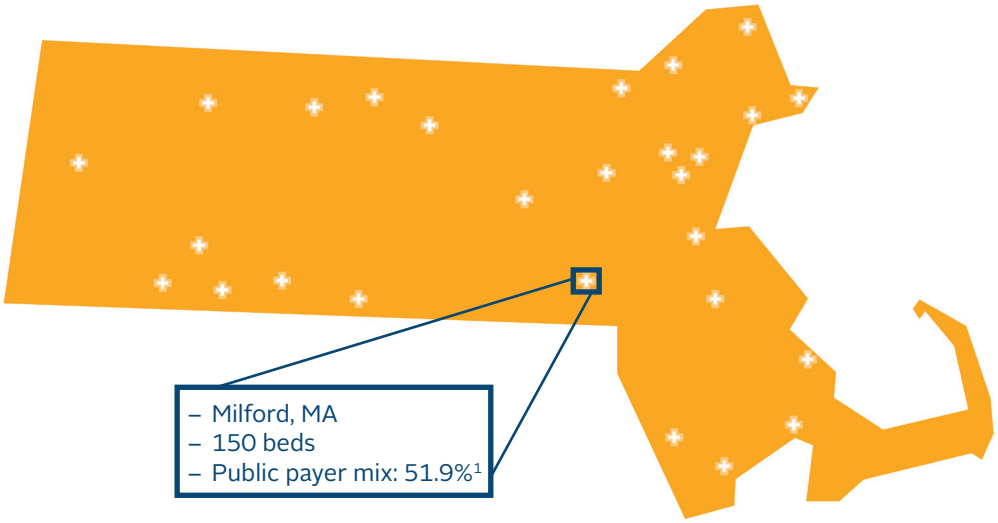

CHART & HPC Background

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.

MASSACHUSETTS
HEALTH POLICY COMMISSION
CHART INVESTMENTS