Lowell General Hospital
MIDDLESEX COUNTY

Summary of Award
Lowell General Hospital aims to reduce 30-day readmissions by 20% for patients with a history of high utilization of the hospital and Emergency Department (ED) by leveraging partnerships in the community to improve care coordination, care management, and palliative care services. Through the development of a care transitions program, the Lowell General CHART team provides care transition coaching, care navigation, follow-up engagement services, logistical coordination, medication adherence services, and ongoing clinical follow-up. Patients are followed for 90 days or more with services tailored to individual needs.

$2.02M
TOTAL PROJECT COST

$1M
HPC AWARD

Target Population & Aims

TARGET POPULATION
Patients with a personal history of high utilization of the hospital

2,200 visits for 800 unique patients per year

PRIMARY AIM
Reduce 30-day readmissions by 20%

SECONDARY AIM
Reduce 30-day Emergency Department (ED) revisits by 10%

The program offers “reassurance that there will be follow-up on patients after discharge, which we never really had before.”
- Director, Continuity of Care, Lowell General Hospital

“On a scale of 1 to 10, my social worker is a 20...She keeps tabs on me to make sure I am keeping out of the hospital, and even when I go into the hospital, she finds out and always checks in on me. If I have any paperwork to complete, she helps me. This program helps me a lot.”
- CHART patient

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, 2017.