Anna Jaques Hospital

ESSEX COUNTY



\$1.4M

TOTAL PROJECT COST

\$1.2M

Target Population & Aims

TARGET POPULATION 1

Patients with high utilization, as identified by one or more of the following:

- ≥4 inpatient admissions in the last 12 months
- ≥6 ED visits in the last 12 months

TARGET POPULATION 2

Patients at risk of high utilization

876

discharges per year

2,340

ED visits per year

PRIMARY AIM

Reduce 30-day readmissions by

20%

SECONDARY AIM

Reduce 30-day ED revisits by

25%

Summary of Award

Anna Jaques Hospital aims to reduce 30-day readmissions by 20% for patients with high utilization of the hospital or Emergency Department (ED). An ED case manager identifies patients in the target population that would be better served in alternative care settings, including home services or skilled nursing facilities. In the inpatient setting, a clinical pharmacist provides medication education and performs medication optimization, a key component of the discharge process. Additionally, multidisciplinary rounding ensures that appropriate plans and services are in place prior to discharge. Elder Services of the Merrimack Valley provides transitional coaching and follows patients in the community for up to 180 days.

CHART Pharmacist

- Available to any CHART eligible patient for in-person medication reconciliation
- Identifies barriers to medication adherence that may contribute to repeat hospital visits

"The CHART Program allows us to manage high-risk patients with a coordinated team approach and makes help available at home for patients free of charge"

- ED Case Manager



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.



