

Baystate Franklin Medical Center

FRANKLIN COUNTY



\$2.08M

TOTAL PROJECT COST

\$1.6M

HPC AWARD

Target Population & Aims

TARGET POPULATION

Patients with a personal history of high utilization, identified by one or more of the following:

- ≥ 4 hospital discharges in the last 12 months
- ≥ 5 behavioral health ED visits (primary or secondary diagnoses) in the last 12 months

466

Discharges per year for 97 unique patients

1,213

ED visits per year for 95 unique patients

PRIMARY AIM 1

Reduce 30-day ED revisits by

25%

PRIMARY AIM 2

Reduce 30-day readmissions by

25%

Summary of Award

Baystate Franklin Medical Center aims to reduce reutilization of the Emergency Department (ED) and hospital by enhancing patient assessment and services in the ED and in inpatient settings. Patients are identified either prior to presentation to the ED in a newly created high utilization registry, upon presentation in the ED, or while admitted to the hospital. Staff engage with target population patients across care settings – within the ED, on inpatient floors, and in the outpatient and/or home settings. In the ED, patients are screened for behavioral health issues, including substance use disorder, and provided with a brief intervention and referral to treatment (SBIRT). In the hospital, the Complex Care Team (CCT) participates in multidisciplinary rounds, develops individual care plans, and engages with hospital staff to assess patients' clinical and social needs. For up to 30 days post-discharge, the CCT provides follow-up services as needed, including rapid access to partial hospitalization, behavioral health services, and primary care.

Community Health Workers

- 3.5 full time equivalent Community Health Workers (CHW)
- Integrated with Baystate Franklin's Complex Care Team, CHWs provide community-based care to ensure post-discharge care engagement

"I get to be an advocate."

- CHART CHW

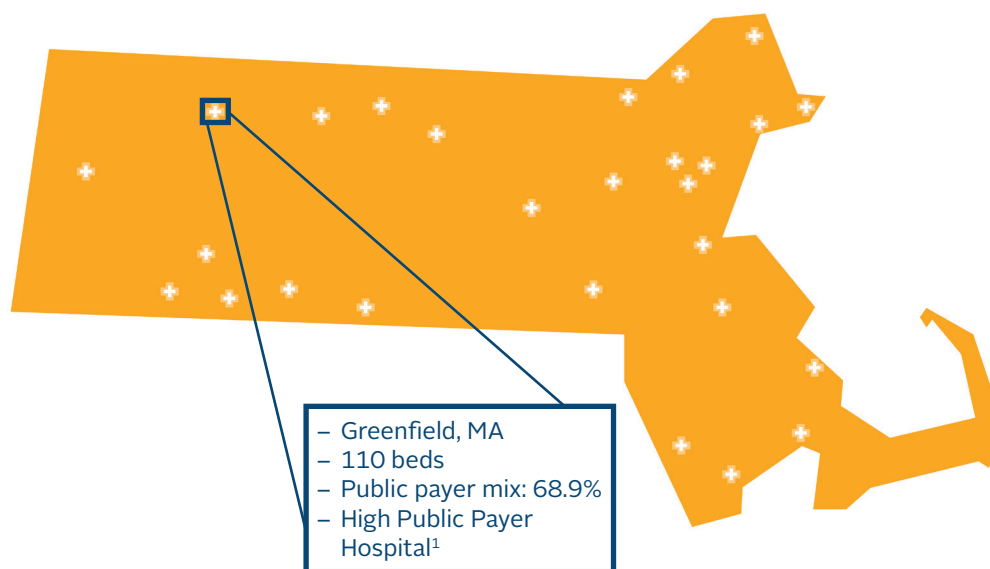


CHART & HPC Background

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.