

HUSCH BLACKWELL

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June 15, 2023

Via E-Mail

Stephen Davis, Division Director
Division of Health Care Facility Licensure and Certification
Massachusetts Department of Public Health
67 Forest Street
Marlborough, MA 01752

Re: Morton Hospital - Response to Essential Services Finding

Dear Mr. Davis:

We write on behalf of Morton Hospital, A Steward Family Hospital Inc. (“Hospital”) in response to the Department of Public Health’s (the “Department”) Essential Services Finding letter, dated June 1, 2023, concerning the closure of Morton Hospital Comprehensive Addiction Program (“MORCAP”). In compliance with the regulatory requirements at 105 CMR 130.122, the Hospital offers the following plan to maintain access to substance use disorder (“SUD”) treatment services currently offered at MORCAP along with the additional information requested in the Department’s letter.

Part 1

- (1) Information on utilization of the services, with emphasis on staffed vs. unstaffed beds, prior to proposed closure.**

The historical utilization of MORCAP’s inpatient services is provided in the table below:

MORCAP Average Daily Census (ADC) by Month*

	2023	2022	2021
January	11.3	11.1	
February	10.4	11.6	
March	10.1	13.2	
April		16.1	
May		15.9	
June		16.1	
July		15.5	

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August		15.7	
September		17.3	
October		13.2	
November		11.6	8.8
December		11.1 ¹	8.7
Annual Average	10.6	14.0	8.8

MORCAP opened in late 2021 and its ADC has not exceeded 18 beds. In December 2022, the Hospital received approval from the Department to formally decrease the number of operating beds to 18 beds in order to operate 14 beds in the unit as medical/surgical beds. Further, in early March 2023, Brockton Hospital experienced a fire and has since been closed, resulting in the need for the Hospital to continue to utilize 14 beds on the unit for medical/surgical demand.

(2) Information on the location and service capacity of alternative delivery sites, including Carney Hospital. Include an explanation of the basis for the Hospital's determination that the alternative delivery sites do or do not have the capacity (necessary space, resources, etc.) to handle the increased patient volume at the identified sites. To support that assertion, please provide the following specific details:

As previously noted, the Hospital plans to continue to maintain 18-Level 4.0 beds at Morton Hospital until the 25-Level 4.0 bed unit at the Carney Hospital Comprehensive Addiction Program (CARCAP) opens. CARCAP will be a 25-bed Level 4.0 medically managed inpatient unit, as well as an intensive outpatient program ("IOP") to ensure a continuum of treatment. Following the opening of CARCAP, the remaining 18 beds at MORCAP will close. This is planned to occur in late 2024. In addition, access to the same services also will continue to be available to patients at St. Elizabeth's Medical Center (SECAP). As the historical ADC for MORCAP has been less than 18 patients, the continued operation of MORCAP will ensure access for patients.

a. Current utilization at these alternative sites.

As noted above, the ADC for MORCAP ranged from 8.8 patients in 2021 to 10.6 patients through March 2023. MORCAP will maintain 18 beds in operation until CARCAP opens with 25 beds. This continued operation and transition will accommodate historical demand at MORCAP. In addition, St. Elizabeth's Medical Center operates 14 Level 4 beds. SECAP's average daily census for 2022 was 7.9 patients and 9.5 patients through Quarter 1 2023.

¹ In December 2022, DPH granted approval of the waiver to reduce the number of Level 4.0 licensed beds to 18 to support the Hospital's acute care demands.

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b. Type of medical diagnoses accepted.

By way of background for comparison to the alternative sites, MORCAP accepts medical diagnoses of alcohol, benzodiazepine, and opioid detoxification. The following table indicates the types of medical diagnoses accepted at the alternative sites.

Alternative Site	Level	Medical Diagnoses Accepted
Steward St. Elizabeth Medical Center of Boston - SECAP ATS	4.0	alcohol, benzodiazepine, opioid detoxification
Carney Hospital (CARCAP) (Late 2024)	4.0	alcohol, benzodiazepine, opioid detoxification

Information obtained from SAMHSA Treatment Locator and provider site information.

c. Adequacy of space and resources at the alternative sites.

Morton Hospital will maintain 18 Level 4.0 SUD beds until the new 25-bed Level 4.0 SUD unit at Carney Hospital opens. As CARCAP is a replacement for MORCAP, it will have adequate space and resources. Notably, CARCAP will have an additional 7 beds compared to MORCAP’s current operating capacity. There are no other providers of Level 4.0 SUD services between MORCAP and SECAP. When CARCAP opens, travel time from Morton Hospital will be shorter than it is to SECAP. As CARCAP will replace MORCAP, there will not be an adverse impact on the available of space and resources at other providers.

(3) Travel times to alternative service delivery sites, for both peak and non-peak travel times, and an explanation as to the source for this information or what these estimates are based on.

The travel times to alternative delivery sites as calculated on Google Maps for peak and non-peak travel is provided in the table below.

Alternative Site	Travel time MORCAP to Alternative Site (Non-Peak Time: 5AM)	Travel time MORCAP to Alternative Site (Peak Time: 5PM)
Steward St. Elizabeth Medical Center of Boston - SECAP ATS	45-60 mins	60-90 mins
Carney Hospital (CARCAP) (Late 2024)	35-45 mins	45-70 mins

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(4) An assessment of transportation needs post discontinuance and a plan for meeting those needs.

Morton Hospital and Carney Hospital will coordinate the closure and opening of units to allow for all patients to complete treatment at MORCAP before closure. This will eliminate any disruption in care for existing patients. Accordingly, current patients of MORCAP will not require transport to CARCAP.

(5) A protocol that details mechanisms to maintain continuity of care for current patients of the discontinued service.

The average length of treatment at MORCAP is 5 days or less. To ensure that all patients complete their treatment at MORCAP, it will remain open after CARCAP becomes licensed until all existing patients are discharged. As currently occurs for all MORCAP patients, discharge planning includes the development of an individualized plan of care based on individual treatment goals that includes planning to further SUD services. MORCAP has cultivated and maintained relationships with numerous community providers across the SUD continuum of care, including outpatient counseling services, Office Based Opioid Treatment (OBOT) and Office Based Addiction Treatment (OBAT) Services, Clinical Stabilization Services (CSS), Transitional Stabilization Services (TSS), Partial Hospitalization Programs, long-term residential programs and the Massachusetts Alliance for Sober House (MASH) sober houses. MORCAP will work with all patients who are actively receiving services at the time of MORCAP's closure to develop an individualized transition plan for the patient to transition to the appropriate next level of care prior to the date of closure.

(6) A protocol that describes how patients in the Hospital's service area will access the equivalent services, i.e. level 4 beds, at alternative delivery sites. The protocol should specifically address the following:

a. The process that will be employed to directly facilitate patient referrals and placement at other facilities or providers.

MORCAP will maintain 18 Level 4.0 SUD beds until CARCAP is licensed and all existing MORCAP patients complete their course of inpatient treatment. As the opening of the 25-bed Level 4.0 SUD unit at Carney Hospital (CARCAP) approaches, MORCAP will work with Carney Hospital to ensure that continued access to services is available. As noted in response to #5 above, MORCAP will provide discharge planning for all existing patients prior to closure of the unit. This includes the development of an individualized care plan based on individual treatment goals for the patient to transition to the appropriate next level of care upon discharge.

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b. The impact that this may have on the current occupancy rates at alternative delivery sites.

The Hospital does not anticipate that closing MORCAP will impact occupancy rates CARCAP or St. Elizabeth's Medical Center, the closest Level 4.0 unit to MORCAP. Until the opening of the 25-bed Level 4.0 service at Carney Hospital, MORCAP will continue to operate as an 18-bed Level 4.0 unit. As such, demand for services at St. Elizabeth's Medical Center will not measurably change from historical occupancy. CARCAP will operate with 7 additional beds when compared to MORCAP's current 18 bed operation. Given the continued operation of MORCAP until replacement services are available through CARCAP, the closure of MORCAP will not have a negative impact on alternative delivery sites.

c. The ability of the alternative delivery sites to meet the needs of these patients.

CARCAP is being developed as a replacement for the MORCAP unit within the Steward hospital system. CARCAP will offer the same services as provided at MORCAP. In addition, CARCAP will have 25 Level 4 beds, an increase of 7 beds from MORCAP's current operating capacity. Based on the historical census of MORCAP, the planned 25 beds at CARCAP is sufficient to meet historical demand.

d. Other alternatives, in compliance with applicable requirements of BSAS approval under 105 CMR 164, if medical needs cannot be accommodated at the proposed alternative sites

There are 123 licensed Level 4.0 SUD beds across the Commonwealth, in addition to the proposed CARCAP beds and existing SECAP beds.

(7) Information on ongoing provision of services at MORCAP until such time as additional capacity is operational at Carney Hospital.

The Hospital will maintain the 18 Level 4.0 SUD beds that are currently open until the CARCAP service opens at Carney Hospital. Additionally, when the CARCAP service opens, the Hospital will not completely close the MORCAP service until the existing inpatients complete their medically necessary stay.

(8) Information on Steward Health Care System, LLC's ("Steward") anticipated timing for determination of need to add 25 Level 4 substance use disorder beds at Carney Hospital, as referenced in outside counsel's April 20, 2023 letter submitted to the Department on behalf of Steward.

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Carney Hospital has notified the Department of its intent to file a notice of Determination of Need (“DoN”) for a substantial change in service to license 25 Level 4.0 SUD beds and an intensive outpatient program. Steward anticipates that the DoN filing will be submitted in the Fall of 2023.

Part 2

In addition to the regulatory elements listed above, and in light of the Department’s review of testimony on the proposed closure, your plan must also address the following:

- (9) Transportation: Based on testimony submitted to the Department and presented at the hearing on May 18, 2023, concern was expressed regarding the ability of patients who lack resources to reach alternative providers. The plan which you are required to submit must address how the Hospital will assist families and patients who need access to transportation once MORCAP is closed.**

The Hospital is committed to maintaining 18 Level 4.0 SUD beds until the CARCAP service at Carney Hospital opens and all patients are discharged from MORCAP. It is important to recognize that MORCAP’s service area is broader than Morton Hospital’s service area² and includes Boston and more specifically, Dorchester, where CARCAP will be located. The towns in Morton Hospital’s service area represent 32.5% of MORCAP discharges, while the remaining 67.5% of discharges are from outside of Morton Hospital’s service area. Moreover, patients of MORCAP arrive at the facility through their own transportation. Patients are not required to be directly admitted from the emergency department and other hospitals do not transfer or transport patients to MORCAP. Rather, patients are discharged from the emergency department when medically stable and provided with resources for accessing inpatient treatment. An individual then contacts MORCAP or another facility to be screened for admission and arrives at the facility independently. Should a potential patient or family from Taunton require transportation to CARCAP, there is public transit to Boston less than one mile from the Hospital.

- (10) Equity & Inclusion: Based on testimony presented at the hearing on May 18, 2023, concern was expressed regarding the closure of MORCAP having a disproportionate effect on marginalized communities. The plan which you are required to submit must address this issue and include details on what will be done to ensure transition plans are in place for marginalized patients including MassHealth patients. Additionally, the plan which you are required to submit must address the Hospital’s plans to meet the cultural and linguistic needs of patients from the Taunton area community when referring these patients to alternate facilities.**

² Morton Hospital’s service area as defined by CHIA includes Taunton, Raynham, Middleboro, Lakeville, E. Taunton, Fall River, Bridgewater, Berkley, N. Dighton. <https://www.chiamass.gov/massachusetts-acute-hospital-profiles/>

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The Hospital is committed to continue providing services locally until the CARCAP services are open. The Hospital does not plan to transfer patients from MORCAP to CARCAP as the average length of stay is 5 days or less and all patients will be discharged prior to the unit's closure. As occurs today, discharge planning to the next appropriate level of care following a patient's course of treatment at MORCAP. Such discharge planning includes setting patients up with medication assisted treatment, community resources to further their recovery, placement to long term programming if desired, as well as working to find a continuance of treatment via intensive outpatient programming to ensure that the individualized plan of care post-discharge takes into account the needs of marginalized patients including MassHealth patients. In addition, CARCAP will provide the same services as MORCAP to ensure that the cultural and linguistic needs of patients seeking voluntary admission to CARCAP from the Taunton area community are met. This includes access to interpreter services.

(11) ED Boarding: Based on testimony presented at the hearing on May 18, 2023, concern was expressed regarding the effect the closure of MORCAP will have on ED boarding at area hospitals. The plan which you are required to submit must include information on steps taken to ensure patients in need of substance use disorder treatment beds will have access to an alternative care site once MORCAP has closed.

The Hospital does not anticipate any impact on emergency department boarding at area hospitals. MORCAP does not accept patients on a voluntary basis from Morton Hospital's emergency department or any other emergency departments. MORCAP does accept transfers from other hospital emergency departments. These patients are not transported to MORCAP by the referring hospital's emergency department but arrive via their own transportation or public transportation. Morton Hospital also does not directly admit patients from its own ED to MORCAP. For patients in need for medical detoxification, the role of the emergency department is to medically stabilize the patient for discharge. Upon discharge from the emergency department, the treating hospital typically provides patients with information on how to seek voluntary admission for inpatient detoxification. This process will not change as a result of the closure of MORCAP. Accordingly, this patient population does not board in the Morton Hospital or other hospital emergency departments awaiting admission to a Level 4.0 SUD bed for inpatient detoxification.

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- (12) Community Engagement: Based on testimony presented at the May 18, 2023, hearing, concern was expressed that Morton Hospital failed to appropriately communicate with the local community to assess the impact of eliminating these services on patients in need, and possible alternatives to the elimination of substance use disorder treatment beds at MORCAP. The plan which you are required to submit must address how the Hospital will continue to provide information on an ongoing basis to the community to ensure they are aware of the impact of the discontinuance of these services, and how the Hospital will obtain community input on the development and implementation of its plan to ensure access in the future.**

The Hospital shared its plans for the closure of MORCAP with various interested parties since the decision to close the service was made. The Hospital has reached out to, including state and local officials, the Hospital staff, labor unions, the Hospital's Patient and Family Advisory Committee ("PFAC"), and the Hospital's Board. MORCAP participates in community organized and sponsored recovery coalitions that support community efforts to address addictions, and the following groups:

Community Counseling of Bristol County, 1 Washington Street, Taunton, MA 02780
Learn to Cope, 4 Court Street, Suite 110, Taunton, MA 02780
Manet Community Health Center, 1 Washington Street, Taunton, MA 02780
Plymouth County Outreach, 153 Central Street, East Bridgewater, MA 02333
SSTAR, 386 Stanley Street, Fall River 02720
Taunton Open Doors to Recovery, 61 Winthrop Street, Taunton, MA 02780
Taunton Opiate & Substance Use Task Force, 30 Olney Street, Taunton, MA 02780
Taunton Community Crisis Intervention Team, 1 Washington Street, Taunton, MA 02780

The Hospital will continue to provide updates on its closure plan to the groups referenced above, as well as elected officials, in monthly community forums.

- (13) Staffing: Based on testimony presented at the hearing on May 18, 2023, concern was expressed regarding continued staffing problems at MORCAP and the Hospital's practice of floating staff to other areas while capping the census of MORCAP. The plan which you are required to submit must detail the efforts taken to adequately staff MORCAP for 32 substance use disorder treatment beds.**

Based on the data provided above in response to Question 1, MORCAP's average daily census has not exceeded 18 patients. Staffing shortages have impacted the operation of MORCAP. MORCAP has consistently had 1.6 FTE vacancy for night nursing. Due to inadequate night staffing, there are times when the unit could not accept additional patients because there would be insufficient coverage overnight. In addition, there have been times where volume is so low that nurses are

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floated to other areas of the hospital, particularly the medical-surgical units which have operated at or above capacity during the same time period. While MORCAP has experienced the staffing shortages that are affecting all Massachusetts hospitals, the required nursing staff for the 18 Level 4.0 beds will be available while MORCAP remains open, to the extent the census and the nursing staff support such staffing.

We thank you for your attention to this matter. Please do not hesitate to contact Crystal Bloom, Esq. or me if you have any questions or require additional information.

Sincerely,



Andrew S. Levine

cc: E. Kelley, DPH
J. Bernice, DPH
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