

May 26, 2022

VIA EMAIL

Stephen Davis, Director
Division of Health Care Facility Licensure and Certification
Department of Public Health
67 Forest Street, Marlborough, MA 01752
stephen.davis@state.ma.us

RE: Essential Service Closure
Tufts Medical Center
10 Pediatric Intensive Care Unit Beds
57 Pediatric Medical Surgical Beds
Ref. # 2299-H25

Dear Mr. Davis,

In response to the Department of Public Health's May 13, 2022 Essential Services Finding in the above-referenced matter, Tufts Medical Center submits the below information.

I. In response to the elements of 105 CMR 130.122(F), Tufts Medical Center submits the following responses.

- (1) Utilization. The following table details the pediatric inpatient service utilization for the last three fiscal years¹ ("FY"), including FY22 through February 2022.

PICU	FY19	FY20	FY21	FY22 through February 2022
Number of Cases	676	536	683	368
Patient Days	2,070	1,532	1,998	792
Average Daily Census	6	4	5	5
Pediatric Med/Surg	FY19	FY20	FY21	FY22 through February 2022
Number of Cases	2,103	1,859	2,289	1102

¹ Tufts Medical Center's fiscal years begin October 1.



Patient Days	5,616	5,200	7,363	3262
Average Daily Census	15	14	20	21
As illustrated in the table above, the Average Daily Census ("ADC") in the PICU ranges between 40-60% of available capacity and ADC in the Med/Surg Unit ranges between 45-67% of available capacity. Utilization rates for FY21 and FY22 are impacted by the COVID-19 pandemic, which explains the increase in bed use. Additionally, these data include adult patients in the PICU and Med/Surg Unit during FY20, FY 21, and FY22. During FY21 and FY22, 8% of utilization in the units was for adults, and in FY 20, 11% of utilization was for adults. Also note that a single admission may result in multiple Cases in the event that the patient occupies beds in multiple units during the course of the admission.				

Tufts Medical Center treats on average 35 patients each year in the pediatric oncology chemotherapy service.

- (2) Alternative Delivery Sites. Tufts Medical Center has determined that alternative facilities are available to handle the patient volume that is currently treated in Tufts Medical Center pediatric units. Specifically, Tufts Medical Center determined that Boston Children's Hospital (BCH) will have the requisite capacity, particularly in that BCH is adding 50 new pediatric inpatient beds by July of 2022.
- a) For the most recently completed reporting period (FY21), the ADC at BCH's Boston campus is 358, or 88.6% occupancy of 404 beds.
 - b) BCH is a full service pediatric academic medical center with more than 40 clinical departments and 258 specialized clinical programs. We are aware of no inpatient service offered by Tufts Medical Center that is not offered by BCH.
 - c) BCH provides a complete range of health care services for children of all ages.
 - d) BCH is in the midst of a multi-year expansion and revitalization of its campus. BCH's new Hale Family Building is part of this first phase and is scheduled to open on June 21, 2022. In the first phase, this work will allow BCH to grow from 404 beds currently to operate up to 454 licensed beds by mid-July 2022. Including additional volume resulting from the close of Tufts Medical Center pediatric beds in July 2022, the expected average daily census for the Boston campus in 2023 is 402 beds, or 88.7% occupancy of the 454 beds.
- (3) Travel Time. Using Boston streets, BCH is located 2.7 miles from Tufts Medical Center. According to online mapping tools, travel time from Tufts Medical Center

to BCH varies from 10 minutes up to 35 minutes in very heavy traffic. However, few of Tufts Medical Center pediatric patients originate in its abutting neighborhoods of Chinatown and the South End. Most patients come from communities outside of Boston, and we do not expect a significant difference in travel to a different Boston location.

- (4) Transportation Needs. A relatively small number of Tufts Medical Center pediatric inpatients live in the Chinatown or South End neighborhoods. In 2021, the number was 35 inpatients. That said, Tufts Medical Center will plan to make rideshare opportunities available to patients who need transport from Tufts Medical Center to BCH.
- (5) Continuity of Care. Tufts Medical Center intends to continue to operate outpatient clinics. Most of the pediatric faculty are joining a BCH-affiliated entity as employees, and as such, BCH-affiliated physicians will staff Tufts Medical outpatient clinics. When inpatient care is necessary, patients may be admitted to BCH. The relationship between Tufts Medical Center and BCH will ensure continuity of care between Tufts Medical Center outpatient clinics and BCH inpatient services.
- (6) Patient Access. Tufts Medical Center and BCH are collaborating to ensure that patient access to inpatient care and chemotherapy services is continued following the service closures at Tufts Medical Center.
 - a) Tufts Medicine is working with its affiliated network of primary care providers and community hospitals to establish connections to BCH for the referral of patients requiring inpatient services. BCH is establishing a referral process designed around a dedicated, centralized 24/7/365 telephone line for the Tufts Medicine network to utilize for the referral of patients requiring inpatient services. A series of informational sessions for Tufts Medicine employed and affiliated pediatric providers and community hospital-based providers at the Tufts Medicine affiliated community hospital network are being held to describe the processes for referrals for patients requiring inpatient services at BCH.
 - b) Tufts Medical Center operates 31 inpatient pediatric med/surg beds (inclusive of 5 bone marrow transplant beds) in the Pediatric Unit and 10 pediatric intensive care unit beds in the PICU. Over the last three years, the average daily census in the PICU ranged between 40-60% of available capacity and average daily census in the Pediatric Unit ranged between 45-67% of available capacity. As part of the expansion described above, BCH is adding 50 new pediatric inpatient beds by July 2022. Both BCH and Tufts

Medical Center believe 50 new beds at BCH should provide capacity to accommodate the demand. Using 2021 figures, Tufts Medical Center had a total of 9,361 patient days considering all pediatric beds combined. The new beds at BCH will accommodate 18,250 patient days, or almost twice the capacity currently seen at Tufts Medical Center's pediatric inpatient units.

- c) As noted above, BCH will have incremental bed capacity to cover the volume currently seen at Tufts Medical Center pediatric units. BCH will be able to ensure these new units are adequately staffed, in part, because of the closure of the Tufts Medical Center pediatric beds. Approximately 50 nurses will transition employment from Tufts Medical Center to BCH, along with most of the medical staff supporting the PICU and Pediatric Unit, all of which will support BCH's ability to care for these patients.
- d) As noted above, Tufts Medical Center is confident that BCH will have capacity and staffing to accept the patients currently seen at Tufts Medical Center. However, we also point out that other pediatric inpatient facilities exist within the City of Boston, specifically at Massachusetts General Hospital and Boston Medical Center.

II. In response to the additional topics requested by the Department of Public Health, Tufts Medical Center submits the following responses.

- (1) **Continuity of Care.** The health, well-being and safety of our patients and their families continues to be at the center of decisions and planning related to this closure. Tufts Medicine and Tufts Medical Center intends to continue to operate outpatient clinics. Patients in need of an inpatient stay, a complex surgery, or chemotherapy will be offered these services at BCH, subject to patient/family choice. Otherwise, services delivered at Tufts Medical Center will remain in place. Because most of the pediatric medical staff will be affiliated with BCH, there will be a significant connection between the providers at Tufts Medical Center and BCH. Providers from both institutions are actively engaged in the process of identifying and planning for patients with complex care needs and establishing mechanisms to ensure coordination and continuity of care for patients who will receive care at Tufts Medical Center and BCH. Additionally, BCH and Tufts Medicine will enter into a preferred provider agreement that will facilitate the clinical integration of Tufts Medicine affiliated providers in the community and BCH. This will include a physician referral line administered by BCH and dedicated to facilitating referral requests by Tufts Medicine providers. Additionally, Tufts Medicine has created a Pediatric Leadership Council including both community-based and Tufts Medical Center providers, which council will identify and work to resolve any concerns

identified. Finally, Tufts Medical Center and BCH are implementing a bi-directional electronic medical record portal that will allow providers from each institution to access and review the electronic medical records of shared patients at the other institution. We strongly believe these measures will not only preserve continuity of care, but also enhance care for many patients.

- (2) **Costs and Acceptance of Insurance Plans.** As a component of the collaboration between Tufts Medicine and BCH, the parties have worked to identify any payer products for participation that are not aligned. As a result of the collaboration, BCH has joined the Tufts Medicine Masshealth ACO (administered by Fallon) as a participating provider. As of May 1, 2022, BCH is in-network for Tufts Medicine's ACO. Additionally, our review identified a small number of plans for which in-network participation is not aligned. On average, these plans cover 13 inpatients at Tufts Medical Center each year. For patients such as these, BCH is committed to working with families and with the payer on a case-by-case basis to obtain appropriate approvals. With regard to cost sharing, matters such as network tiering, co-insurance, and deductibles are not within the control of providers such as BCH or Tufts Medicine. Adjustments to these factors require the action of the payer and/or the guarantor's employer.
- (3) **Culture and Linguistic Needs.** Tufts Medical Center will continue to provide services for patients that are culturally sensitive, and responsive to linguistic or other barriers that may challenge access to care. For example, the Pediatric Asian Clinic will remain open and operating at full capacity. Interpreter services and the like will continue to be offered. Similarly, BCH is committed to delivering culturally and linguistically appropriate patient care. BCH has available interpreters in more than 35 languages to assist patients and families through Interpreter Services and has standards for the delivery of cultural competent care and organizational support to ensure the cultural competency of its providers.
- (4) **Transportation.** Tufts Medical Center will make ridesharing services available for Tufts MC patients who need transportation from Tufts Medical Center to BCH and back in order to access inpatient or oncology services. Tufts Medical Center considered shuttle services, but determined a ridesharing service approach is likely more convenient for patients.
- (5) **Capacity of Alternative Care Sites.** As noted above, Tufts Medical Center is closing 41 inpatient beds, essentially concurrent with BCH opening an additional 50 beds, resulting in an annual net increased capacity of nearly 9,000 patient days. Taking

into account the average utilization in the PICU and Pediatric Unit, BCH added capacity is nearly double the volume at Tufts Medical Center. Tufts Medical Center will maintain its pediatric emergency department, though it is ending its pediatric trauma verification. Because it will no longer maintain a pediatric trauma unit, the volume in the Tufts Medical Center emergency department may decrease. However, as stated, the dedicated pediatric emergency department will continue, and Tufts Medical Center and BCH have a transfer agreement for patients that need to be transferred to BCH for inpatient care. When a patient requires inpatient care, the Tufts Medical Center emergency department will call the designated BCH telephone line for Tufts Medicine (described above) to discuss the patient's condition and anticipated inpatient care requirements (e.g., ICU bed, general med/surg bed) and to coordinate the appropriate mode of transport to BCH (e.g, critical care transport, ALS). Because of this arrangement to move patients who need advance care to BCH, and because of the capacity that will be available at BCH, we do not believe ED boarding for medical patients will be an issue. We acknowledge that BCH is experiencing surges in ED behavioral health volume and has capacity constraints in these situations resulting from "psychiatric boarding" pending appropriate placement or treatment of these patients in behavioral health facilities. However, this capacity issue is not tied to the closure of Tufts Medical Center Pediatric Unit or PICU inpatient beds but is a pre-existing challenge faced by BCH and all emergency departments and is likely to continue pending other governmental and provider strategies to expand behavioral health capacity across the continuum. Tufts Medical Center does not operate a pediatric inpatient behavioral health unit.

- (6) **Hospital Trauma Designation.** Tufts Medical Center will end its pediatric trauma verification as a consequence of closing its Pediatric Unit and PICU. Tufts Medical Center will notify Boston MedFlight that pediatric trauma patients should no longer be referred to Tufts Medical Center. Additionally, through notifications with the EMS agencies, we expect ambulances will not deliver pediatric trauma cases to Tufts Medical Center in the ordinary course. In the event that pediatric trauma cases present at the Tufts Medical Center emergency department, Tufts Medical Center will triage, treat and/or prepare for transport of the case to BCH if clinically appropriate. In these instances, Tufts MC will operate like other emergency departments in the Commonwealth that do not maintain pediatric trauma verifications. Please note Tufts Medical Center will maintain its adult trauma verification.

(7) **Teaching Hospital and Residency Program.** Tufts Medical Center remains committed to providing outstanding clinical training to our medical students, residents and fellows. The closure of the Pediatric Unit and PICU at Tufts Medical Center impacts the clinical learning environment at Tufts Medical Center, and will require replacement with comparable training experiences for some physician learners. To that end, Tufts Medical Center and BCH agreed all pediatric residents and fellows will continue to rotate through the pediatric clinical areas that Tufts MC will maintain, including the NICU and ambulatory clinics. Such residents and fellows will complete, through rotations at BCH, any residency or fellowship requirements that they cannot complete at Tufts Medical Center. Tufts Medical Center will maintain a training Program Director for such trainees at BCH, who will participate in all resident evaluation, feedback and remediation. With regard to adult residencies, any residents in Tufts Medical Center's adult residency programs that require pediatric rotations (i.e., anesthesiology, radiology and surgery) may complete required pediatric rotations at BCH.

We thank the Department of Public Health for its thorough review of, and related public comment process for, this essential service closure plan. Tufts Medical Center understands the concern and inconvenience it creates for some patients and their families, however it does not anticipate significant negative impact. In many cases, we believe our new affiliation with Boston Children's Hospital will result in enhanced care and access for children in the Commonwealth.

Sincerely,



Zachary Redmond
Senior Vice President & Deputy General Counsel
Tufts Medicine