

HealthAlliance Hospital

WORCESTER COUNTY



\$10M

TOTAL PROJECT COST

\$3.8M

HPC AWARD

Target Population & Aims

TARGET POPULATION

Adult primary and/or secondary ED behavioral health patients who are identified as high risk of an ED revisit

7,000

ED visits per year

PRIMARY AIM

Reduce 30-day ED revisits by

15%

SECONDARY AIM

Reduce ED length of stay by

31%

Summary of Award

HealthAlliance Hospital aims to reduce 30-day Emergency Department (ED) revisits by 15% by reengineering ED workflows and deploying a comprehensive set of services to patients presenting to the ED with any behavioral health diagnoses. Patients are identified in the ED, brought to a behavioral health-specific area near the ED, and triaged by a team of specialists. A behavioral health evaluation and brief screening are performed, where patients are educated about the Health Integrated Collaborative Case Coordination (Hic3) Team. Upon engaging in the program, the Hic3 Team initiates services immediately following discharge from the ED or hospital. Once discharged, patients are transitioned to a Community-Based Services model with service intensity stratified by patient need and care pathways are defined accordingly. Community-Based Services include scheduling follow-up appointments, discharge planning, primary care and behavioral health referrals, and long-term care follow-up.

“A patient recently presented to the CHART offices to ask for our assistance. This is a patient we had never spoken with – he had been discharged prior to screening and our attempts at outreach went unanswered...We opted him out and hoped that we could engage him the next time he presented to the ED. But, we didn’t have to wait. He heard our messages on his voicemail and decided that he truly did need help. He is now enrolled in the program and we look forward to connecting him with the providers and services he needs.”

- Behavioral Health Navigator

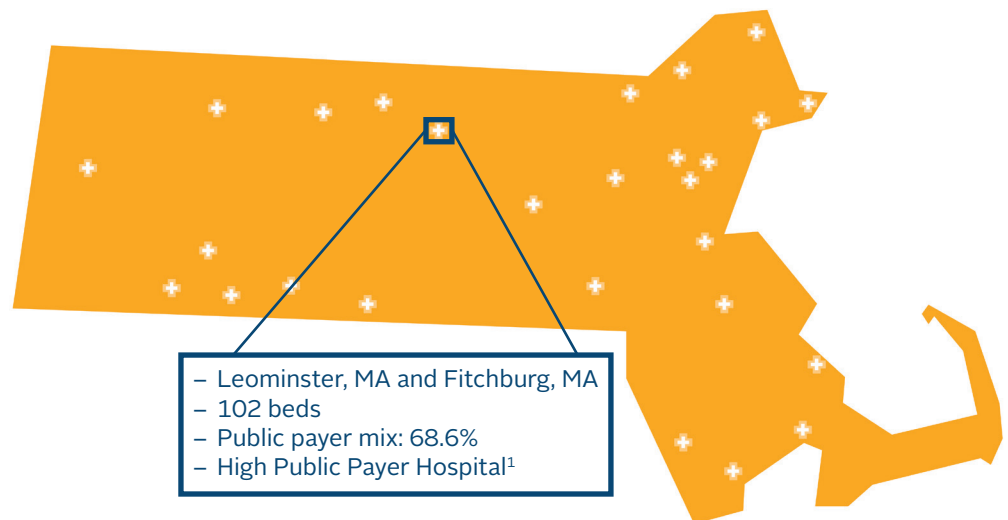


CHART & HPC Background

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.