

**Factor 2: Health Priorities.** *Addresses the impact of the Proposed Project on health more broadly (that is, beyond the Patient Panel) requiring that the Applicant demonstrate that the Proposed Project will meaningfully contribute to the Commonwealth's goals for cost containment, improved public health outcomes, and delivery system transformation.*

**F2.a. Cost Containment**

*Using objective data, please describe, for each new or expanded service, how the Proposed Project will meaningfully contribute to the Commonwealth's goals for cost containment.*

The Proposed Merger is aligned with the Commonwealth's goals for cost containment for the following reasons: 1) As high public payer hospitals, the Proposed Merger of UMMMC and MH is unlikely to impact total medical expense (TME) while also improving access to the region's only academic medical center; 2) By integrating operations, any cost savings realized will be used by UMMMC to invest in opportunities to ensure access to care locally for patients; and 3) Greater capacity and coordination across UMMMC's inpatient campuses will improve access to inpatient tertiary and quaternary care and innovative care delivery models.

The Proposed Merger will preserve and improve access to local care in the Marlborough community, in turn allowing patients to access timely, high-quality care within the UMass Memorial system. By safeguarding access to specialty care locally, the Proposed Merger will promote cost containment because patients will not need to seek care outside of their local community or outside of UMass Memorial. UMMMC has a lower relative price than other academic medical centers outside of the region. Further, because both hospitals are high public payers, there is unlikely to be any impact on the TME for these populations because public payer reimbursement rates are the same across facilities, including UMMMC and MH. Moreover, MH's total commercial gross patient service revenue (GPSR) accounted for only 3.5% of UMass Memorial's GPSR in FY2024 and would represent a small fraction (less than 5%) of UMMMC's GPSR. Accordingly, TME will not be materially impacted following the Proposed Merger. Finally, total health care expenditures may be reduced as patients are able to obtain care at MH instead of UMMMC.

The Proposed Merger will maximize the resources currently available at both MH and UMMMC to ensure the long-term viability of hospital services in Marlborough and access to tertiary care at UMMMC for MH patients. The Proposed Merger represents a more effective use of resources to better manage patient care, improve health outcomes, and drive quality improvement initiatives. The Proposed Merger will eliminate costs required to maintain a separate hospital license and corporate entity, as well as separate governing bodies, leadership structures and medical staff infrastructures. Furthermore, the Marlborough campus will be fully integrated into the UMMMC quality, patient safety and regulatory oversight functions, ensuring the Marlborough campus is included in UMMMC's long-term planning around quality, safety and outcomes. As a result, UMMMC will be able to explore additional ways to reduce operational costs and maximize services across campuses through investments in the most needed services at MH.

As a fully integrated campus of UMMMC, patients of the Marlborough campus will experience improved access to the right care in the right place at the right time, reducing the need for patients to seek care outside of the UMass Memorial system or the potential delay in accessing needed care. Moreover, the Proposed Merger will promote enhanced care coordination between UMMMC's Worcester campuses and the Marlborough campus, creating a single integrated medical staff and leading to optimized operating room and inpatient bed utilization at the Marlborough campus, and

improved patient access to innovative care delivery models through UMMMC that have demonstrated cost savings as discussed in Factor 1.b.i.

**F2.b. Public Health Outcomes**

*Describe, as relevant, for each new or expanded service, how the Proposed Project will improve public health outcomes.*

The Proposed Merger will improve public health outcomes by preserving acute care hospital services in the community at the Marlborough campus and by improving care coordination among campuses through the consolidation and unification of medical staffs. The cost of operating MH comes with significant challenges in securing and maintaining access to specialty services. Continuing to operate MH as a standalone, small community hospital will become increasingly difficult and ensuring access to care locally will become unsustainable. Ensuring ongoing access to acute care services in the Marlborough community is best accomplished by merging MH into UMMMC and operating MH as a fully integrated campus of UMMMC on the UMMMC hospital license. First, as a licensed campus of UMMMC, patients at Marlborough campus will have access to specialty teleconsults with UMMMC providers. The availability of specialty consults will enable more patients to receive care in their community, instead of being moved to a different facility farther from home. Moreover, the Proposed Merger will provide UMMMC the ability to better manage and allocate resources so that patients receive the right care in the right setting, including UMass Memorial's community hospitals and tertiary care campuses of its AMC. This is crucial for ensuring access to tertiary care when needed. Additionally, a unified medical staff will improve efficiency and coordination between the locations, resulting in improved access and outcomes for patients. The unified medical staff will also save time and money by centralizing the credentialing process under one set of decision makers, eliminating duplicative processes and staffing. By integrating medical staffs, patients will receive more consistent care, and the campuses will realize cost savings from integrating staffing, reduced resource duplication, and fewer administrative burdens.

**F2.c: Delivery System Transformation**

*Because the integration of social services and community-based expertise is central to goal of delivery system transformation, discuss how the needs of their patient panel have been assessed and linkages to social services organizations have been created and how the social determinants of health have been incorporated into care planning.*

The Proposed Merger will drive delivery system transformation through expanded access to UMMMC's innovative care models, such as Hospital at Home (HaH), Rehab at Home, the virtual patient observation program, and Mobile Integrated Health (MIH). These programs are currently only available to patients of UMMMC and are not available to UMass Memorial's other hospitals. Programs like HaH have brought hospital-level care to the homes of more than 2,000 UMMMC patients, reducing patient hospital readmission rates and admission to skilled nursing facilities. These programs also have demonstrated improved patient outcomes, as well as improved care experiences. Following the merger of MH and UMMMC, the HaH program, as well as Rehab at Home, remote patient monitoring, and MIH, will be available to patients at the Marlborough campus.

With respect to social determinants of health (SDOH), UMass Memorial implemented a multifaceted strategy to incorporate a screening process for ambulatory patients in the care planning process. Patients who are identified as having a health-related social need can access a user-friendly solution called CommunityHelp, described in F1.c. While CommunityHelp can be accessed from within the patient's medical record, patients and community members can also search for resources

themselves. UMass Memorial caregivers are able to place referrals for these social services within Epic. In 2024, UMass Memorial updated the tools and workflows for screening patients for SDOH needs and linking them to resources. One such update was to leverage the vendor, Get Well, to make it easier for patients to complete an SDOH screening through a text messaging platform and provide text message or telephone based navigational supports so patients can more easily find the social service resources that they need in the community. UMass Memorial is committed to continually improving the ways in which SDOH are not only identified, but how they are addressed to meaningfully improve the lives of the patients it serves.