

Addison Gilbert and Beverly Hospitals¹

ESSEX COUNTY



\$4.5M

TOTAL PROJECT COST

\$3.77M

HPC AWARD

Target Population & Aims

TARGET POPULATION

Patients identified by:

- High utilization (≥ 4 hospitalizations per year); or
- Social complexity; or
- A personal history of 30-day readmissions

4,000

Discharges per year inclusive of

1,500

discharges per year for 300 unique patients with high utilization

PRIMARY AIM

Reduce 30-day returns by

20%

SECONDARY AIM

Reduce 30-day ED returns by

10%

Summary of Award

Addison Gilbert and Beverly Hospitals aim to reduce 30-day returns by 20% for patients with high utilization of the hospital, social complexity, or a history of 30-day readmissions. Building on its Phase 1 programs, Addison Gilbert and Beverly Hospitals are deploying a High Risk Intervention Team (HRIT) in the hospital and Emergency Department (ED) to identify eligible patients to develop care plans and to provide integrated services, including care coordination. These interventions are customized to the patient and the team includes a care manager, social worker, and pharmacist. The HRIT engages target population patients to ensure appropriate follow-up, and to ensure these high risk of readmission patients receive the appropriate care after discharge. The HRIT also collaborates with local VNA and SNF services to improve continuity of care across the care continuum, from the hospital to the community. The HRIT will follow target population patients for 30 days post-discharge to provide them with these enhanced services.

High Risk Intervention Team

- Builds relationships with patients and families based on trust
- Connects patients with primary care
- Arranges insurance coverage
- Coordinates care and advocates for patients across care settings, within and outside of the hospital

“No one has ever helped guide us before. We’ve been alone...with little hope of getting out. But now I have hope.”

- CHART family member

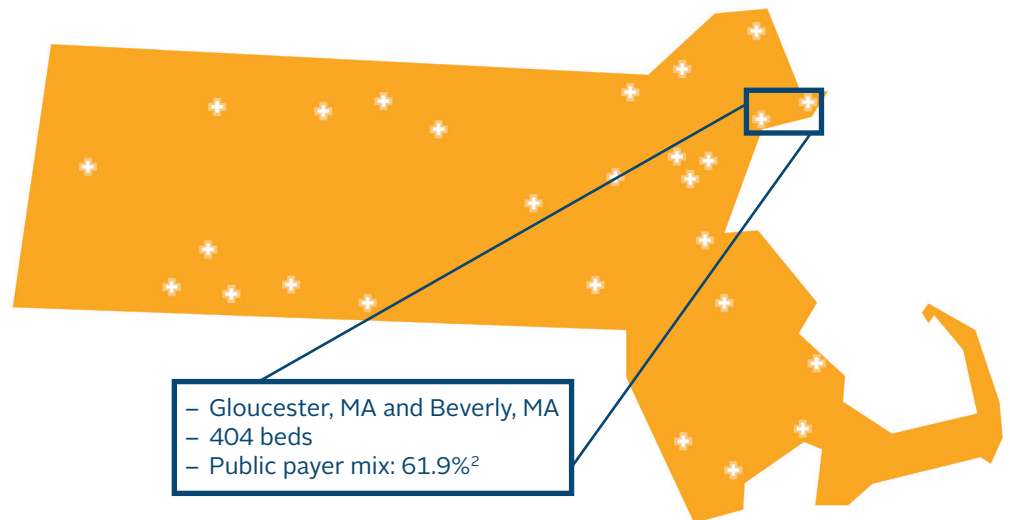


CHART & HPC Background

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. Addison Gilbert and Beverly Hospitals (“Northeast Hospital”) received two separate awards in CHART Phase 2. They are coordinating efforts in a unified approach to program implementation.
2. Source: Center for Health Information and Analysis, 2017.