

The Community Hospital Acceleration, Revitalization, and Transformation (CHART) Program



Beth Israel Deaconess – Plymouth Hospital



Total Investment
\$5,799,847

Phase 1 HPC Investment:
\$245,828

Phase 2 HPC Investment:
\$3,700,000

Phase 2 Focus Area: Reducing inpatient readmissions and emergency department (ED) revisits

Phase 2 Target Populations: Patients dually eligible for Medicare and Medicaid; ED patients with a primary behavioral health diagnosis

Phase 1 Capacity Building: Beth Israel Deaconess-Plymouth Hospital (BID-Plymouth) created a team to manage high-risk patients with complex behavioral health and medical needs. The team focused on ongoing management to avoid unnecessary acute care.

Phase 2 Care Model: CHART Phase 2 investments supported two programs at BID-Plymouth. The Complex Patient Program screened and assessed patients for health and social needs, provided home visits, and connected patients to ongoing care. The Integrated Care Initiative supported patients with behavioral health needs in the ED, ensuring continuity of care in the community through co-located behavioral health and primary care.

Key Transformation Achievements:

- Instituted new staffing models or processes to integrate behavioral health and medical care
- Incorporated CHART program components into strategies for value-based care participation
- Embraced the use of community health workers and other emerging or expanded professional roles

1,553

unique patients served between January 2016 and December 2017

27%

reduction in 30-day returns for dually eligible patients

Patient Story

“[I]ntervention at the time of admission provides a strong opportunity for our patients to be open to making positive changes in their lives after they learn about the substance [use] and mental health resources available.”

- Social Worker



A patient with chronic conditions had an inpatient admission and subsequent transfer to a SNF.



The patient's electricity had been shut off and the patient needed assistance maintaining a clean home, making mortgage payments, and affording groceries.



The CHART team helped get the patient's electricity restored and helped the patient apply for a new heating system, SNAP benefits, license renewal, and furniture.



When the patient experienced symptoms again, the patient contacted the CHART case manager and accepted a home visit, potentially avoiding an ED visit.

About CHART

The Massachusetts Health Policy Commission (HPC) launched the Community Hospital Acceleration, Revitalization, and Transformation (CHART) program in 2014, which invested approximately \$70 million in 30 community hospitals. Profile information comes from multiple sources, including contract documents, program updates, and data submissions by awardees to the HPC (see Data Sources and Methods for additional details).