# Unsustainable to scalable:

A large AMC optimizes its hospital at home care team model to drive growth

## The vision

A large academic medical center (AMC) needed a new financially viable care team model as it embarked on scaling its hospital at home program. It aimed to grow 20-fold from a proofof-concept offering, expanding access to patients from multiple hospitals in the system. The AMC was previously operating with team models that were resulting in provider dissatisfaction and were financially unsustainable to scale.

## Co-creating the solution

The AMC's new care team model needed to enable high-quality care delivery, optimize clinician collaboration, support scalable operations, and improve daily work experience.

The AMC partnered with Chartis to identify pain points and define vision for a future-state care team model—including expectations for physician and advanced practice provider (APP) collaboration, care delivery modalities (virtual and in-person), and team member roles and responsibilities. With an eye to increasing hospital at home admissions, a newly defined navigator role to identify and prepare eligible patients for hospital at home was developed. A refined, multiyear workforce demand tool was implemented to inform role prioritization, recruitment planning, and financial forecasting.

To activate the new care team model, a bespoke physician compensation framework was created, with consideration of the current compensation model, industry benchmarks, innovative care model requirements, and provider recruitment and retention. An organizational management structure overlayed the new care team model to operate the client's care at home portfolio.

## Key challenges of building a scalable hospital at home workforce model:

- Disparate processes are challenging to scale, activate at new sites, and expand geographically
- Legacy compensation arrangements are incompatible with the new care delivery model
- Existing workforce models are not financially viable at scale
- The tight labor market leaves a limited resource pool
- Workforce burnout and turnover rates are high

#### Transformation in action

### Analyze and validate

Document current-state workforce and care model gaps and pain points

## **Design and socialize**

Develop ideal organizational and care team structures to enable scale

#### **Create and detail**

Establish job descriptions, compensation frameworks, and operational processes

### Model and formalize

Develop a dynamic workforce model to inform recruitment and financial planning

## Activate and operationalize

Implement new organizational management structure and care team model to support day-to-day operations



## **Believe in better**

By building a unified management and care team model with reimagined approaches to staffing and compensation, the AMC can create inpatient capacity in a financially viable manner. New clinical roles to drive growth were created, including dedicated admitters, daily rounders, nurse navigators, and case managers. In addition to a bespoke compensation and incentive framework, a streamlined cross-credentialing process for home hospitalists allowed the AMC to retain and attract physicians to deliver acute care at home. The new integrated care team of APPs, nurses, paramedics, therapists, social workers, home health aides, and physicians is positioned to enable sustainable growth while delivering safe, high-quality care.

"Chartis brought critical subject matter expertise and extensive experience in inpatient care model design, provider role optimization, and physician compensation frameworks to our partnership, setting the foundation for achieving the AMC's ambitious growth goals."

-Chief Clinical Officer

## **Building to better**

#### A scalable hospital at home program requires:

**Physician and APP collaboration** to optimize patient-to-provider ratios, maximize reimbursement, and minimize cost. **Creative, flexible interdisciplinary care teams** to streamline admissions and care delivery while working at top of license.

## Meaningful outcomes

The new integrated care team model optimized the physician-APP collaboration structure to enable scale in a financially sustainable manner.

33%

reduction in physician full-time equivalent (FTE) requirements

100%

increase in hospital at home average daily census in under 12 months

1K+

patients admitted to hospital at home in 9 months

> **Robust management structure and tools** to support strategic growth.

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