

The Issue

The current waiver that allows providers to establish and implement expanded acute hospital care at home (H@H) programs is scheduled to expire upon termination of the public health emergency (PHE). Early evidence suggests hospital care at home is safe, effective and useful to many patients. Unless Congress takes action participating hospitals and health systems will no longer be able to provide H@H care to patients under this waiver.

AHA Take

The AHA urges Congress and the Biden Administration to extend the H@H program as currently authorized under the waiver to allow providers to continue to take steps to transform care delivery in a way that improves patient experience and outcomes while ensuring high patient safety. The Hospital Inpatient Services Modernization Act (S. 3792, H.R. 7053), bipartisan legislation introduced by Senators Carper (D-DE) and Scott (R-SC) and Congressmen Blumenauer (D-OR) and Wenstrup (R-OH), would provide a two-year extension of the current H@H waiver. This would allow hospitals and health systems to continue implementing H@H programs while also collecting important quality, patient experience and reimbursement data that can help shape a permanent version of the program.

Background

To allow hospitals and health systems to effectively and efficiently respond to the COVID-19 pandemic, the Centers for Medicare & Medicaid Services (CMS) provided a number of waivers and flexibilities that eased several Medicare restrictions and requirements. In an attempt to maximize inpatient bed capacity while also limiting potential COVID-19 exposure for practitioners and non-COVID-19 patients, CMS permitted providers to stand up expanded H@H programs, allowing qualified patients the opportunity to receive care in their homes while reimbursing hospitals as if those patients were receiving care in the hospital setting.

Specifically, H@H programs were vehicles for effective care, high patient satisfaction, and, for some patients, shorter recovery times.

To receive approval to participate in the H@H program as authorized under the PHE waivers, hospitals must submit an individual waiver request to CMS. The request specifically asks CMS to waive certain Medicare Conditions of Participation which require nursing services to be provided on premises 24 hours a day, 7 days a week, as well as the immediate availability of a registered nurse for the care of any patient.

As of September 2022, 114 health systems and a total of 253 hospitals have been approved to provide H@H services to patients. Several other health systems and hospitals have indicated they are interested in standing up H@H programs but are hesitant to do so without some guarantee the program will last beyond the COVID-19 PHE.