

The Issue

The hospital-at-home (H@H) model — where patients receive acute-level care in their homes, rather than in a hospital — has emerged as an innovative and promising approach to providing high-quality care to patients in the comfort of their homes. In the Consolidated Appropriations Act of 2023 (CAA 2023), Congress included a two-year extension of this waiver, which received no score from the Congressional Budget Office. Congressional action is needed to extend the waivers for this program, which are set to expire Dec. 31, 2024.

AHA Take

The AHA supports the **Hospital Inpatient Services Modernization Act (H.R. 8260/S. 4350)** introduced in the House by Representatives Brad Wenstrup, R-Ohio, and Earl Blumenauer, D-Ore., and in the Senate by Senators Tom Carper, D-Del., and Tim Scott, R-S.C. The bill extends the H@H waiver for five years through the end of 2029.

Hospitals and health systems see H@H programs as a safe and innovative way to care for patients in the comfort of their homes. This kind of care is well suited for medium acuity patients who need hospitallevel care but are considered stable enough to be safely monitored from home. Rather than staying three days or longer in the hospital, these patients can be treated safely by their doctor, a team of medical professionals and the patient's support system at home.

Background

To allow hospitals and health systems the ability to respond to the COVID-19 pandemic effectively and efficiently, the Centers for Medicare & Medicaid Services (CMS) provided a number of waivers and flexibilities that eased several Medicare restrictions and requirements.

To receive approval to participate in the H@H program hospitals must submit an individual waiver request to CMS. The request specifically asks CMS to waive §422.23(b) and (b)(1) of the Medicare Conditions of Participation, which require nursing services to be provided on premises 24 hours a day, seven days a week, as well as the immediate availability of a registered nurse for the care of any patient. Once the waiver request is received, CMS divides the applications into two categories, allowing more-experienced hospitals a quicker approval process so they can rapidly expand their H@H program; less-experienced hospitals have to demonstrate they are capable of meeting the requirements associated with the provision of H@H services.

As of June 2024, 331 hospitals, across 136 systems and 37 states, have been approved to provide H@H services to patients. Other health systems and hospitals have indicated they are interested in standing up H@H programs but are hesitant to do so without congressional action indicating the program will last beyond Dec. 31, 2024.

