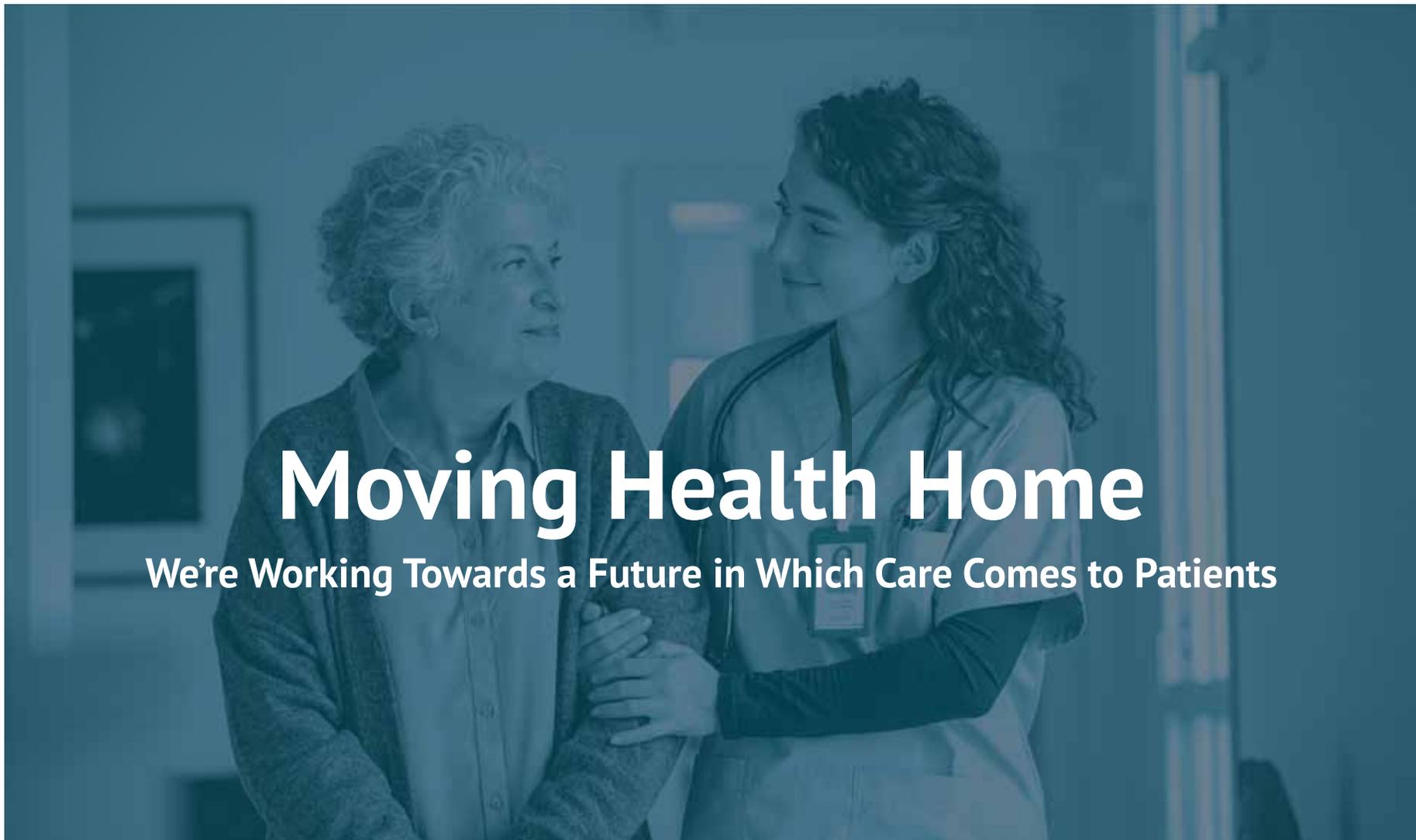




# What's ailing health care?

**POLICY PROGNOSIS 2022**



# Moving Health Home

We're Working Towards a Future in Which Care Comes to Patients

Moving Health Home (MHH) is a coalition made up of stakeholders working to change federal and state policy to enable the home to be a clinical site of care. Today, we have an opportunity to shape the future of health care as policymakers, thought leaders, providers, health plans and patients absorb the lessons and experiences of the COVID-19 pandemic.



 *Moving Health Home*  
An Alliance to Advance Home-based Care Policy

Learn more at  
[movinghealthhome.org](https://movinghealthhome.org)



# Health care at home became a reality during the pandemic, now we need to keep the door open



**By Krista Drobac, Founder of Moving Health Home**

**T**hink about the last time you or a loved one were seriously ill. Moving from the lab to an MRI machine to an IV, while spending nights in the hospital with beeping machines and noisy hallways as your family sat in the waiting room worrying. American institutions deliver world-class health care, but during the pandemic, when many institutions had to focus on fighting COVID, we figured out how to scale care in the comfort of patients' homes, even those with complex needs. Home-based care proved to be high quality, cost-effective and popular among patients and caregivers. Now, we need make it a long-term option.

Home-based care is a spectrum of services. It can mean a house call from a primary care doctor or nurse, a physical therapy session, a home infusion, or a full complement of hospital-level services. The pandemic ignited tech-enabled services like telehealth and remote monitoring, mobility among medical personnel, and a burst of patient demand. It catalyzed creative thinking among hospital executives, practitioners, app developers, patient groups and the government about how to turn the home into a clinical site of care. It also supercharged existing efforts among home health, dialysis, and home infusion providers.

These innovations will endure, and stakeholders in the health care system want them to stay. Our recent study shows that a majority (70 %) of Americans are comfortable receiving care in the home, 73 % are confident in the quality of receiving care in the home, and a bipartisan majority of adults (73 % of Democrats and 61 % of Republicans) say it should be a priority for the federal government to increase access to clinical care in the home.

A bipartisan majority of adults say **it should be a priority** for the federal government to **increase access to clinical care in the home**, with the approval percentage of each party as follows:

**73% Democrats**



**61% Republicans**



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## We need to break down regulatory and statutory barriers restricting patients from choosing care at home.

To make the pandemic the beginning of a movement rather than a blip of change, we need to break down regulatory and statutory barriers restricting patients from choosing care at home. State and federal policymakers will need to implement permanent flexibilities and programs that build on the lessons learned from the temporary waivers of the Public Health Emergency (PHE).

So, what needs to happen?

1. Implement a permanent, value-based Acute Care at Home program that builds on the PHE waivers by allowing entities the ability to treat patients in the home setting, when preferred by the patient and clinically appropriate.
2. Pass the Choose Home Care Act of 2021 to give nursing

home-eligible beneficiaries more options as to how and where to recover post-hospitalization.

3. Ensure that the Centers for Medicare and Medicaid Services is reimbursing home-based providers at parity with facility-based providers to allow equal access to care in the home.
4. Work with stakeholders to ensure home is an option for care in traditional Medicare, which is often antiquated and biased toward facility-based care. Congress could remove barriers in traditional Medicare to improve access to care in the home in areas such as personal care, infusion, labs, dialysis, diagnostics, and primary care – all while also addressing workforce issues.

The pandemic gave us the

opportunity to transform how health care is delivered, and these actions are an essential step to ensuring home-based care is part of our health care future and the doors stay open to home as a clinical site of care.

*Krista Drobac is the founder of Moving Health Home (MHH), a coalition working to change federal and state policy to enable the home to be a clinical site of care. MHH uses research and data to educate policymakers about home-based care that delivers important clinical care in a more holistic way. For more information on MHH advocacy, policy development, research, and coalition building, visit [www.movinghealthhome.org](http://www.movinghealthhome.org).*