March 11, 2024

The Honorable Mike Johnson Speaker of the House Washington, DC 20510 The Honorable Hakeem Jeffries House Minority Leader Washington, DC 20510

RE: Requesting Extension of the Acute Hospital Care at Home Waiver

Dear Congressmen Johnson and Jeffries,

The undersigned stakeholders, representing Hospital-at-Home (HaH) programs, physicians, physician assistants, pharmacists, nurses, emergency medical technicians, paramedics, patient advocacy organizations, hospitals, health systems, and care model enablers, are writing to **ask for at least a 5-year extension of the** <u>Acute Hospital Care at Home waiver program</u> (AHCaH) before its expiration at the end of 2024. Without an extension, Medicare beneficiaries will lose access to HaH programs that have been demonstrated to provide excellent clinical outcomes and lower the costs of care.

Medicare created the AHCaH waiver at the height of the COVID-19 pandemic as part of a broad strategy to help alleviate hospital capacity issues. Prior to the implementation of the AHCaH waiver, approximately 20 HaH programs existed across the U.S. After the waiver, more than 300 hospitals across 129 health systems in 37 states are operating under the waiver—with no guarantee of payment permanence.^{1,2} That represents approximately 5% of all U.S. hospitals and 15% of academic medical centers. Clinical outcomes of the AHCaH program have been outstanding.^{3,4} At this current trajectory, 1 in 6 hospitals will have HaH by 2030, allowing hospital care to be delivered to more patients in the safety and comfort of their homes nationwide.

Hospital-at-Home has a long history. Over the past 30-plus years, HaH researchers have found through numerous studies that patients and family caregivers prefer HaH, which delivers excellent clinical outcomes, including substantial reductions in adverse events (e.g., mortality), better patient and family experience, lower caregiver stress, better functional outcomes, high provider satisfaction, and lower costs of care.⁵ As a result of these studies, we firmly believe that the AHCaH waiver, which provides appropriate payment for acute hospital-level care delivered at home, is the keystone to the future of home-based care delivery for Medicare patients and beyond.

¹ Levine, David M., Jeffrey Souza, Jeffrey L. Schnipper, Thomas C. Tsai, Bruce Leff, and Bruce E. Landon. "Acute Hospital Care at Home in the United States: The Early National Experience." *Annals of Internal Medicine* (2024). ² "Approved Facilities/Systems for Acute Hospital Care at Home." CMS QualityNet. January 26, 2024.

https://qualitynet.cms.gov/acute-hospital-care-at-home/resources.

³ Adams, Danielle, Ashby J. Wolfe, Jessica Warren, Alexandre Laberge, Adam C. Richards, Kurt Herzer, and Lee A. Fleisher. "Initial findings from an acute hospital care at home waiver initiative." In *JAMA Health Forum*. American Medical Association (2023).

⁴ Clarke Jr DV, Newsam J, Olson DP, Adams D, Wolfe AJ, Fleisher LA. Acute hospital care at home: the CMS waiver experience. NEJM Catalyst Innovations in Care Delivery (2021).

⁵ Federman, Alex D., Tacara Soones, Linda V. DeCherrie, Bruce Leff, and Albert L. Siu. "Association of a bundled hospital-at-home and 30-day post-acute transitional care program with clinical outcomes and patient experiences." *JAMA Internal Medicine* (2018).

To achieve this future, the waiver must be extended to enable hospitals and health systems nationwide to continue building out the logistics, supply chain, and workforce for Hospital-at-Home (HaH) and to encourage multiple payers outside the Medicare program, including Medicaid programs, to enter the HaH market. An extension will also allow home-based services to be developed equitably across populations everywhere and ensure hospital inpatient unit care is available for the patients who need it while enabling patients who can and want to be treated in their home to have the opportunity to do so, creating needed capacity for hospitals without increasing health system costs.

In order to avoid any disruption in access to Medicare beneficiaries, we ask that you extend the Medicare **Acute Hospital Care at Home waiver program for at least five years before the end of 2024**. We thank you for the opportunity to provide input on the Hospital-at-Home program and provide our ideas for the future of the program. For more information on the HaH research and testing, please visit <u>here</u>. Should you have any questions, please reach out.

Respectfully submitted,

Acadian Ambulance Service, Inc. Acadian Health Advocate Health American Academy of Home Care Medicine American Medical Association Appalachian Regional Healthcare, Inc. Atrium Health Avera Health Baptist Health **Bellin Health** Best Buy Health Inc., a Best Buy Company Beth Israel Deaconess - Lahey Health Biofourmis, Inc. **Blessing Health System** ChristianaCare **CommonSpirit Health** DispatchHealth eShift Remote Care Delegation GE HealthCare Geisinger Hackensack Meridian Health Hattiesburg Clinic Health First Brevard County, FL Henry Ford Health Inbound Health Johns Hopkins Health System

Kent Hospital, Warwick, RI; a member of Care New England Health System Maribel Health Marshfield Clinic Mass General Brigham Medically Home Mercy Hospital at Home Michigan Medicine Mount Auburn Cambridge IPA Mount Sinai Health System **Moving Health Home** MultiCare Health System **NYU Langone Health Ochsner Health Origin Healthcare Orlando Health OSF OnCall** Right at Home **Roper Saint Francis Healthcare** Saint Peter's Healthcare System Sanford Health Shields at Home Society of Hospital Medicine St. Bernard's Healthcare SwedishAmerican Medical Group, UW-Health Northern IL Region Tampa General Hospital

Texas Health Resources The American Telemedicine Association The Coalition to Transform Advanced Care The Ohio State University Wexner Medical Center UC Davis Health System UMass Memorial Health UNC Health Pardee Vanderbilt University Medical Center Virginia Commonwealth University Health System; VCU Health Virginia Mason Franciscan Health Virtua Health