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CMS ACCEPTING WAIVER APPLICATIONS TO PERMIT HOSPITAL CARE AT HOME

On Wednesday, November 25, 2020, CMS announced additional flexibilities in the "Hospitals Without Walls" waiver initiative designed to permit even greater flexibility for hospitals to treat eligible patients in the patient's home. It is critical to note that this is an individualized waiver program. Each hospital that wishes to provide care through the Acute Hospital Care At Home program must individually apply for the necessary waivers of the applicable Medicare Conditions of Participation ("CoPs").

As the United States experiences significant surges in COVID-19 patients, and as further increases are expected to overwhelm health care resources in many communities, hospitals continue to seek flexibility with respect to locations in which care can be provided safely, including locations that leverage telehealth and remote monitoring capabilities. One option that a number of health care systems have considered is that of providing care in the homes of qualified patients that would otherwise be admitted to the hospital under the “Hospitals Without Walls” waivers granted by CMS in March 2020. However, the continuing application of certain of the hospital CoPs complicated that approach, as did licensing issues in some states.

The Acute Hospital Care At Home program authorized by CMS is available for more than 60 conditions, including asthma, chronic obstructive pulmonary disease, pneumonia and other conditions that can be safely managed in the patient's home. The hospital responsible for the care must have a full complement of policies and procedures to ensure that the care is provided safely and that the transition of care from the hospital inpatient setting or emergency department to the home is appropriate. The care provided must include at least daily rounding (in-person or, if appropriate, virtually) by a physician or advanced practice provider and a medical team that provides and monitors care on an ongoing basis. Hospitals wishing to participate must apply for a waiver of 42 CFR § 482.23(b) and (b)(1) of the hospital CoPs, which require immediate on-site availability of a Registered Nurse at all times.

CMS will evaluate waiver requests in two categories: those hospitals that have provided acute hospital care at home to fewer than 25 patients must comply with a more detailed waiver process with weekly quality monitoring data submissions, while those hospitals that have already provided acute hospital care at home to 25 or more patients will have a more streamlined waiver process with monthly quality monitoring data submissions. CMS has already approved waivers for hospitals in six systems with extensive experience providing acute hospital care at home: Brigham and Women's Hospital; Huntsman Cancer Institute; Massachusetts General Hospital; Mount Sinai Health System; Presbyterian Healthcare Services; and UnityPoint Health.

In its November 25 announcement, CMS also included regulatory flexibility to allow Ambulatory Surgery Centers ("ASCs") to be temporarily certified as hospitals to provide inpatient care for longer than 24 hours, so long as they are appropriately staffed. The enhanced staffing requirement applies only when a patient requires extended on-site care and allows flexibility in staffing to accommodate community needs. This flexibility automatically applies to any ASC that has enrolled as a hospital under the prior Hospitals Without Walls regulatory waiver authority.

Additional information regarding the Acute Hospital Care At Home initiative and waiver application is available here.

For FAQs regarding the Acute Care Hospital At Home initiative, please see here.

For information on the ASC flexibilities, please see here.

For FAQs regarding the ASC flexibilities, please see here.

For the Press Release generally discussing this topic, please see here.

PRACTICAL TAKEAWAYS

- Hospitals should review the CMS cited resources related to acute care at home to determine if they have the infrastructure in place to pursue the care model.
- Hospitals that want to pursue the care model must apply for an individual waiver through the CMS online application.

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- Hospitals should review state law and work with appropriate state agencies to ensure regulatory compliance for this care model.

If you have questions or would like more information on this topic, please contact:

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