Advancing Hospital Care at Home

HOW LEADERS CAN EFFICIENTLY LAUNCH ACUTE CARE AT HOME PROGRAMS

By Frank Winegar and Curt Whalen

Providing hospital care at home, a once futuristic idea on healthcare organizations' 10-year strategic plans, became a reality in early 2020 when the Centers for Medicare & Medicaid Services (CMS) instituted pandemic-related waivers that established reimbursement for home hospital services.

Since then, more than 114 health systems and 253 hospitals have become CMS-approved to provide acute hospital care at home, and the industry has seen deep investment in programs from major health systems, including Mount Sinai Health System, Cleveland Clinic, Brigham and Women's Hospital, and Mayo Clinic.

Huron's research finds that consumer interest in virtual healthcare at home rose from 41% in 2019 to 56% in 2021 — a number that will likely continue to grow as consumers and providers gain a better understanding of high acuity care at home and the positive outcomes associated with these episodes of care.

of **consumers are interested** in more healthcare at home

While the future of CMS waiver permanence is unknown, healthcare organizations have a significant opportunity to transform or establish an acute care strategy that drives improved results for patients, providers, and the healthcare ecosystem.

Understanding the Benefits of High Acuity Care at Home

The broad benefits of hospital care at home programs support multiple strategic priorities for healthcare organizations.

Quality of Care Delivery

Delivering hospital-level care in the home for patients with moderate to high acuity levels can improve quality measures among certain types of patients.

A study from the Journal of the American Medical Association (JAMA) comparing hospital at home with brick-and-mortar patients finds that readmissions were reduced by 26% for at-home patients. Behavioral health outcomes improved as well with reductions in post-discharge anxiety and depression. In another report, hospital at home programs resulted in up to a 58% reduction in acute length of stay when compared with the experience in a traditional hospital setting.

Financial Enhancements

Acute care in the home offers providers a way to increase capacity more efficiently than adding physical hospital beds to brick-and-mortar facilities. As with traditional acute care in the hospital, a higher quality of care outcomes, higher CMS Star Ratings, and improved Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) scores can garner increased reimbursement. Additional financial benefits can be generated through bundled acute and post-acute care models — all provided in the home.

Workforce capacity impacts and costs can be better managed as care-at-home models rely more on a variety of labor from multiple health professionals and leverage advanced practice providers and physician time more efficiently.

As providers and payors realize financial benefits over time, new at-home models of care could begin to impact increases in direct cost and insurance premiums, ultimately transferring value to consumers.

Strategic Growth and Care Innovation

Traditional healthcare organizations have been disrupted and impacted by new tech-driven solutions that are unconstrained by geographic limitations and brick-and-mortar portfolios. Hospital care at home programs offer health systems a way to strategically position their organizations in the high-growth virtual care market while driving immediate benefits from increased patient volumes and stronger network integrity.

Deploying care outside the hospital creates alternate sites of care and helps alleviate throughput issues and allows the organization to scale its bed capacity up or down quickly. This flexibility enables dynamic and immediate responses to emergency surges in patient demand, with minimal additional investment once an acute care-at-home program is established. With the acute care foundation in place, organizations can also look to bolster much-needed post-acute capacity either through the expansion of their service lines or scaling with strategic partners.

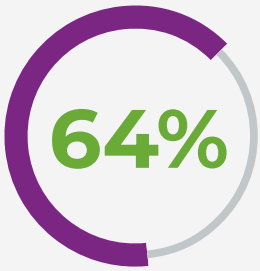
Social Determinants of Health and Wellness

Acute care in the home allows providers to see how patients manage their conditions in a real-life setting and enables providers to adjust treatment plans to find the best fit for the patient's lifestyle. When needed, patients and their family members are connected with resources for food, clothing, housing, and other nonmedical factors that influence medical outcomes and quality of life. These adjustments create a more personalized treatment plan, leading to better outcomes and getting patients to take a more active role in their recovery and overall health.

Patient and Provider Experience

Consumers are increasingly looking for more personalized care, which can be hard to achieve in acute settings where there is typically an increased pressure for bed turnover to maximize the utilization of fixed assets. Acute care provided at home organically drives a more connected and comfortable experience where patients can sleep in their own beds, wear their own clothes, and surround themselves with family and friends. This environmental familiarity can lead to faster recovery times and has a significant effect on overall well-being and the success of treatment, while also reducing patient anxiety and stress.

Huron's survey of nurses, physicians, and staff finds that nearly a third of healthcare professionals have considered leaving their jobs in the last 12 months; 64% report feeling burned out multiple times in the past six months. As health systems ramp up



of healthcare workers report **feeling burned out** in the last 6 months

strategies to boost employee engagement and satisfaction, acute care at home models offer a change of pace and a care environment more conducive to connecting with patients and families.

Launching Hospital Care At Home: 6 Key Focus Areas for Success

Education and communication are central to overcoming hesitancy from internal and external stakeholders. Organizations can ensure a robust and thriving program is established to meet patient expectations by focusing on the following:

1. Establish physician and clinical team alignment: Clinical team alignment is critical to ensuring a robust program is established, endorsed, and promoted throughout the organization and community at large. Clinician support is best achieved through establishing champions that begins their involvement in the design and implementation phases. Executive teams also need to understand how hospital at home connects to and supports multiple strategic objectives of the organization.

2. Level up your logistics: Hospital at home programs require a distinct constellation of services, vendors, and suppliers. Start early recruiting, educating, and negotiating with your vendors and service provider networks. Clear service-level agreements and an understanding of the virtual program will help to streamline the complex logistics and services required to care for acute-level patients in their homes.

3. Drive effective change management and program education: Internally, organizations need structured change management programs designed to educate internal staff and leaders on the "why" behind acute care at home programs and build commitment to new service offerings. Include key stakeholders in program and process development and continue to tie back to the values of the organization and its clinicians and staff. Externally for consumers, marketing communications and patient education will be ongoing with outreach segmented and targeted to key populations.

4. Align economic incentives with payors: Organizations can alleviate hesitancy from payors by starting early with payor conversations about program design and expectations. Keep your strategy top of mind in standing conversations and continue to educate that the full scope of hospital services can be offered successfully in the home and that the program is sustainable through a regular review of performance metrics.

5. Focus on delivering care for high acuity populations: Establish your program with a stable medical/surgical patient population in mind. The inclusion of higher acuity patients and ensuring the timely execution of necessary services into the home will help ensure a scalable platform to accept lower acuity populations in the future.

6. Keep patient acceptance workflows simple: Make the identification of potential patients as simple as possible with integration into existing workflows. Build standardized processes, scripting for staff, and small modifications to the electronic health record (EHR) to flag eligible patients. This approach to patient inclusion should function as seamlessly as a traditional hospital admission to an inpatient unit.

Don’t Go it Alone

Partnerships and alliances are critical to launching and scaling acute care in the home. From building command centers to selecting technology to negotiating with vendors and facilitating clinical partnerships, leading practices exist that can help organizations launch hospital at home programs more efficiently.

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