



**HOSPITAL AT HOME SUMMER SCHOOL: EDUCATING YOUR MEMBERS OF CONGRESS DURING
THE AUGUST RECESS
JULY 21, 2022**

HEALTHSPERIEN, LLC PANELISTS

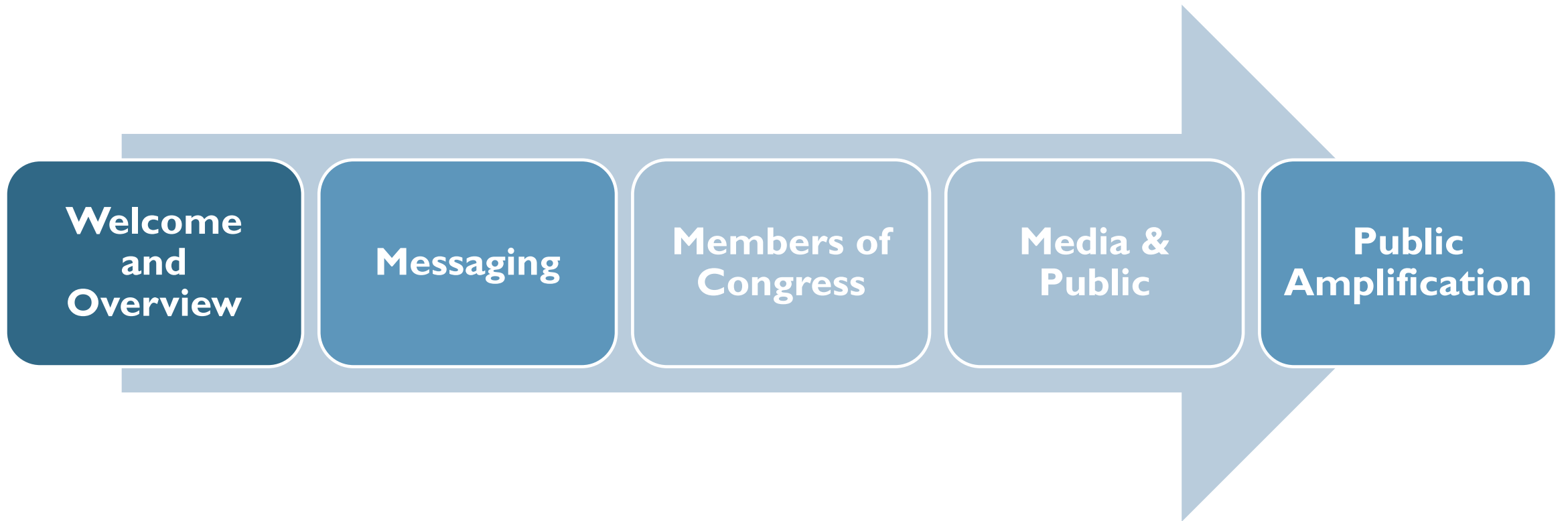


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OUR DISCUSSION





MESSAGING

PUBLIC HEALTH EMERGENCY LACKS PREDICTABILITY

- **Ongoing uncertainty of future PHE extension(s) creates unpredictability for hospitals and health systems who are a part of the program or are interested in joining.**
 - The Acute Hospital Care at Home waiver, and other flexibilities are tied to the PHE and will end.
 - On July 15, the HHS Secretary Xavier Becerra renewed the public health emergency (PHE) for another 90 days, which extends the PHE to October 13.
- **COVID-19 accelerated interest in HaH, and hospitals continue to apply to CMS for the waiver in substantial numbers, suggesting that HaH has a strong value proposition for many health systems.**
 - The AHCAH waiver is helping in the near term and will during future strains in hospital capacity, whether from a once-a-century pandemic, seasonal population swells (for example “snowbirds”) influenza outbreaks, and increasingly common climate-related strains due to heat waves, flood, or other disasters.

CONGRESSIONAL INACTION IMPERILS PATIENT ACCESS

Inaction by Congress effectively takes away access.

HaH services will become less available to patients in need.

Extending the waiver would provide the necessary assurances to hospitals and hospital systems to invest this program for the long-term success of in-home hospital care.

HOSPITAL INPATIENT SERVICES MODERNIZATION ACT

Bipartisan and Bicameral Legislation Which Would Extend Acute Hospital Care at Home Waiver Flexibilities

Led by Senators Tom Carper (D-DE) and Tim Scott (R-SC), both members of the Senate Finance Committee (S. 3792)

8 Senate Co-Sponsors

Led by Representatives Brad Wenstrup (R-OH) and Earl Blumenauer (D-OR), both members of the Ways and Means Committee (H.R. 7053)

20 House Co-Sponsors

Congressional Budget Office (CBO) has not yet scored the legislation

HOSPITAL INPATIENT SERVICES MODERNIZATION ACT

Would ensure that **patients and providers have access to these services** for two years beyond the duration of the PHE.

Would require that within one year of enactment, CMS issue **regulations establishing health and safety requirements** for AHCAH Programs.

By extending the waiver program, Congress will **sustain the existing momentum and investment in the program**, as well as allow for additional experience and data collection that can inform the potential of a longer-term payment model for these services in the Medicare and Medicaid program.

Ongoing development of acute care at home programs will likely **cease without Congressional action**.

Local Experience

- Access created for **x** patients
- Patient demographics
- Increased hospital capacity
- Resource investment to date
- **x** Hospitals in **x** State are participating

IMPACT OF PROGRAM(S) FOR PATIENTS, FAMILIES, AND CAREGIVERS

Efficacy

- Less than 9% of patients in the Kaiser Permanente Advanced Care at Home program needed additional hospital-level care either in their homes or in a hospital within 30 days of being discharged from the program — a number that compares favorably to the average national readmission rate of 13%.
- Patients enrolled in Mount Sinai's hospital-at-home program were more likely to rate their hospital care highly than those treated in the traditional hospital setting (69% vs. 45%).

IMPACT OF PROGRAM(S) FOR PATIENTS, FAMILIES, & CAREGIVERS

Safety

- When compared to data collected by the federal Agency for Healthcare Research and Quality, internal Kaiser Permanente data showed that Kaiser members receiving in-home hospital care fared better than the average U.S. hospital patient.
- In a cohort of 769 patients studied from August 2020 to August 2021, the death rate for in-home patients was zero compared to the national average of 2% for inpatient care.

Patient Satisfaction

- According to internal Kaiser Permanente data (from their Northwest in-home hospital care program), patients using the system's hospital-at-home services said their care teams were more responsive (85% vs. 67%), experienced smoother care transitions (76% vs. 52%), and had overall better experiences (80% vs. 71%) than patients who received traditional inpatient care.

IMPACT OF PROGRAM(S) FOR PATIENTS, FAMILIES, & CAREGIVERS

Cost

- Inaction will cost patients access to hospital inpatient care in their homes.
- Hospitals & hospital systems will forgo their investment in this alternate site of patient care.
- Medicare direct costs may increase by a negligible amount for increased propensity to receive hospital care at home; however, eligible patients could receive traditional inpatient care at the same DRG rate.
- Studies have shown an average lower overall cost to Medicare resulting from decreased readmissions, shorter lengths of stay, and lower SNF referrals.

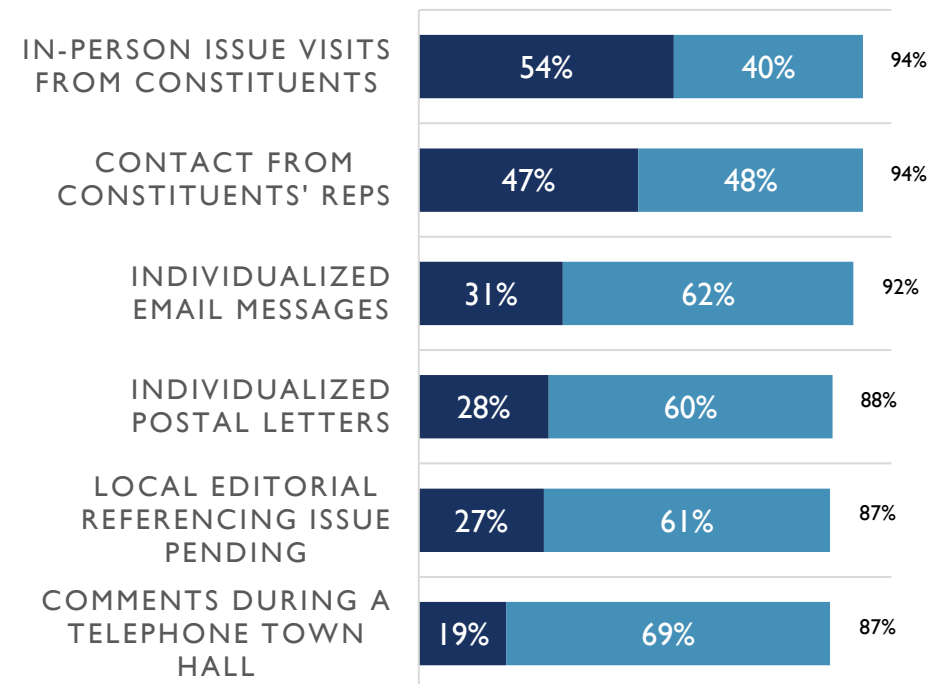


MEMBERS OF CONGRESS

INFLUENCE OF ADVOCACY STRATEGIES

Members value staying in touch with constituents...and find personal communications persuasive...but visitors with first-hand knowledge of policy impacts are most compelling

***Asked of Chiefs of Staff, Comms Directors, Legislative Directors/Assistants**



IN-DISTRICT MEETINGS

Request a meeting with your Senators and Representative and encourage them to support the Hospital Inpatient Services Modernization Act!

Dear [insert name of Senator or Representative's health lead here],

I hope this note finds you well. My name is [insert name here] and I am from [insert organization here and provide background on organization]. We are reaching out in the hopes of scheduling a brief call with you to discuss the Hospital Inpatient Services Modernization Act (S. 3792 OR H.R. 7053 depending on who you are reaching out to), which would extend the Hospital at Home (HaH) program for 2 years beyond the end of the public health emergency. In November 2020, in response to COVID-19 pandemic-related hospital capacity concerns, the Centers for Medicare and Medicaid Services (CMS) implemented the Acute Hospital Care at Home waiver which provides payments to hospitals that provide hospital-level care in patients' home as a substitute for care traditionally provided in acute care hospitals.






We are strong proponents of the HaH program and we believe that hospitals can use this program to improve value while keeping their patients safe and satisfied during the COVID-19 pandemic and beyond. Would you be available for a brief call in August [insert dates or range if appropriate] to discuss our experience and collective efforts to ensure this program is extended?

Thank you in advance and we look forward to meeting with you.

[insert signature]

Link to finding your member of Congress: <https://www.congress.gov/members/find-your-member>

- ✓ Prior to meeting a member of Congress or their staff, evaluate their priorities and any current activities related to your issue.
- ✓ Consider how you might convey the following elements in telling your story, highlighting your personal connection to their office.

1: Geographic connection	2: Issue connection	3: Urgency	4: Additional details	5: Future contact
				
<p>Introduce your geographic connection and convey appreciation for their work.</p> <p><i>“We appreciate Congressman Smith’s efforts on behalf of families in Rochester and I’d like to share my story, because it illustrates why this issue is so critical now.”</i></p>	<p>Summarize the Member’s connection to the issue in one sentence.</p> <p><i>“We know Congressman Smith is a strong supporter of paid family leave, as evidenced in her recent Twitter chat.”</i></p>	<p>Provide a one-sentence overview of why the story is important now (i.e., an upcoming vote or current events).</p> <p><i>“With the vote coming up, we wanted to make sure you had stories that demonstrate just how important her position on the issue is.”</i></p>	<p>Share your story and call-to-action, offering access to more information as appropriate.</p> <p><i>“While I’m here to talk about my experience, there are more at www.strongfamilies.org... We hope our stories and data can assist Congressman Smith in the debate.”</i></p>	<p>Reference any upcoming outreach that will be taking place between your counterparts.</p> <p><i>“Our senior legislative director plans to connect with [name] to share more details about this campaign.”</i></p>



MEDIA & PUBLIC



LETTER TO THE EDITOR – TEMPLATE (250 WORDS OR LESS)

Dear Editor:

Paragraph 1: State the issue, and your position; summarize the issue in a compelling manner.

Paragraph 2: Personal (organizational connection to the issue); why readers should care about the issue and support your position.

Paragraph 3: What is at stake if no action is taken; what will happen if action is taken; direct impact to reader of action/inaction.

Paragraph 4: Reiterate your position; call to action for readers to engage.

Sincerely,

Name, Organization, Email, Phone

LETTER TO THE EDITOR – TEMPLATE

- The future of in-home hospital services post-public health emergency (PHE) is in peril without Congressional action.
- People with complex conditions previously requiring hospital admission are now able to receive high quality, safe, and timely care in the comfort of their own homes.
- Unless Congress acts to pass bipartisan legislation to extend the HaH program prior to the end of the PHE, these services will become less available to patients in need.
- Extending the waiver would provide the necessary assurances to hospitals and health plans to invest this program for the long-term access to in-home hospital care
- The waiver has been a great success, the results of the Hospital-at-Home waiver program are quite extraordinary and should be continued.
- Urge your Members of Congress to support continuing access to hospital care in the home.



PUBLIC AMPLIFICATION



ENGAGING LOCAL STAKEHOLDERS

State Hospital
Associations

State Medical
Societies

County
Medical
Societies

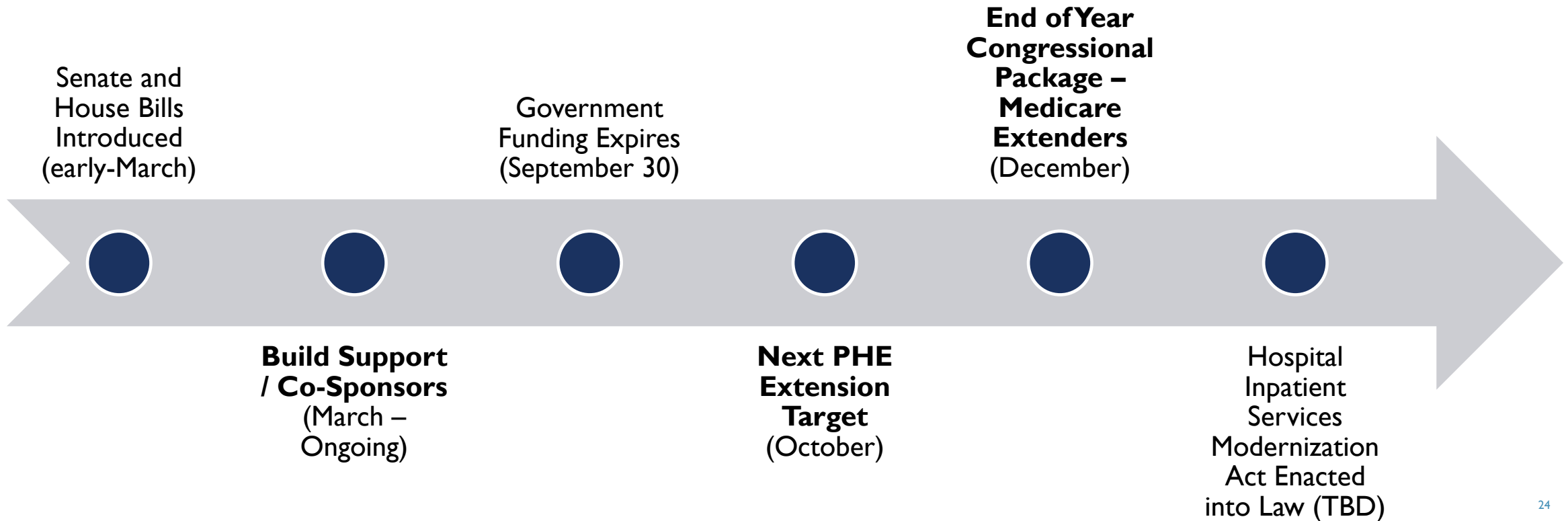
Local
Partners



NEXT STEPS



TIMELINE



HEALTHSPERIEN'S HAH USERS GROUP TEAM CONTACT DETAILS

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