

# Tech-enabled HaH— What’s Working, What the Future Holds

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**Webinar**  
March 17, 2026



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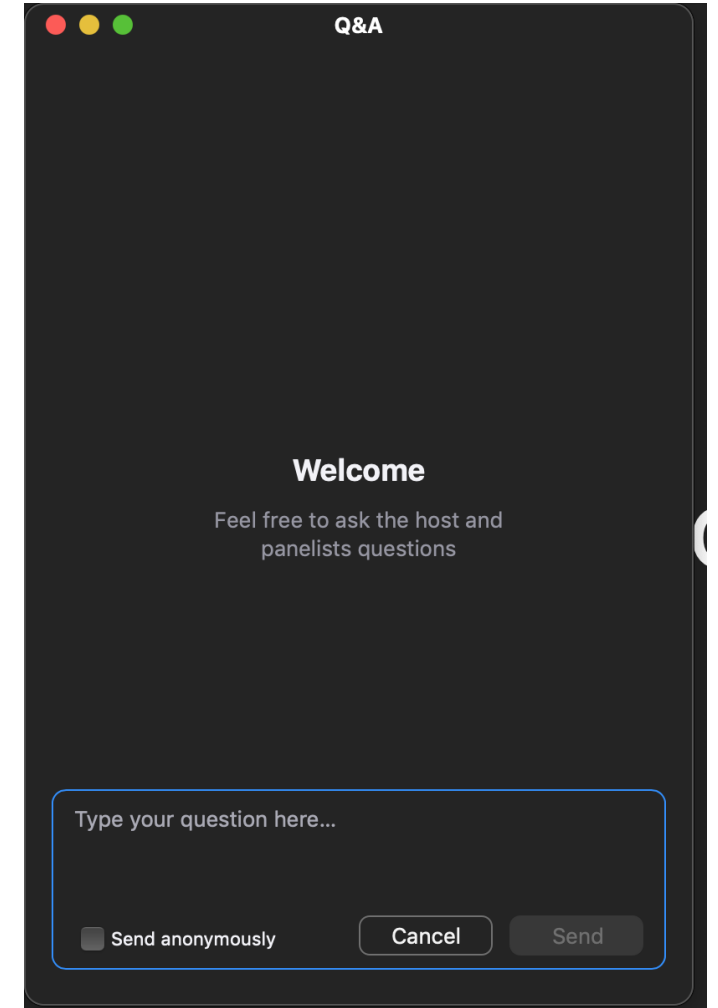
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# ZOOM Webinar Housekeeping

- Please submit your questions via the Q&A option.
- Due to the large audience for today's webinar, everyone has been placed on mute.
- If you have any technical issues, please contact Jane Donahue (jdonahue@aboutscp.com).



# Hospital AT Home USERS GROUP™

**Website:** [hahusersgroup.org](http://hahusersgroup.org)

**LinkedIn:** @Hospital at Home Users Group

**TA Center:** [hahusersgroup.org/technical-assistance-center](http://hahusersgroup.org/technical-assistance-center)

# The HaH Users Group Webinar Series

Family First: Prioritizing Caregivers in Hospital at Home

Age-Friendly Beyond the Hospital: Innovation in Hospital at Home

The State of State Policy: Opportunities and Challenges for Hospital at Home

When Digital Goes Down: Ensuring Care Continuity in a Catastrophic Tech Crash

CMS on Hospital at Home: The AHCAH Waiver Study and the Future of the Field

Just in Case: What to Do If Congress Doesn't Extend the AHCAH Waiver in 2024

Putting the Puzzle Pieces Together: Best Practices in Hospital at Home Logistics

Essentials of Hospital at Home Pharmacy

At Home, In Motion: Innovations in Hospital at Home Physical and Occupational Therapy

Engage, Educate, Empower: Strategies to Teach and Train Hospital at Home Providers

Adapting Hospital at Home to Alternate Settings

Hospital at Home Policy Ahead: The Waiver, its Extension and Beyond

Another Way: Opportunities and Challenges of Ambulatory Models of Hospital at Home

Hospital at Home Nursing: A view from the field

Finding Patients Faster: Early Transfer Recruitment Strategies for HaH

See the full list of webinars on the [Events](#) page at [HaHUsersGroup.org](https://HaHUsersGroup.org)

# The National HaH Quality Registry

- The National HaH Quality Registry (NHaHQR) is a de-identified, patient-level dataset that seeks to capture information on all patients enrolled in HaH programs nationwide.
- It's **free** to participate and health systems names **will not be shared**.
- Participants will get **annual benchmarking reports** to assess program performance, identify areas for improvement, and demonstrate value.
- 53 hospitals representing 45k+ patients currently participating.
- **Help us collect critical data to move HaH policy and regulatory conversations forward – join today!**

[NHaHQR Interest Form](#)





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## **Jared Conley, MD, PhD, MPH**

Associate Director, Healthcare Transformation Lab  
Emergency Physician, Massachusetts General Hospital  
Assistant Professor, Harvard Medical School

# Today's Webinar

## Tech-enabled HaH— What's Working, What the Future Holds

# Today's Speakers



**Mandy McGowan, RN**

Director,  
Home-Based Care Services,  
UW Health



**Michael Maniaci, MD**

Associate Vice President,  
Virtual Health & Home-Based Care  
Clinical Operations  
Advocate Health



**Shiv Sutaria, MD**

Assistant Chief Medical  
Information Officer,  
MGB Healthcare at Home

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

# Panelist Disclosures

- **Mandy McGowan, RN**
  - None
- **Michael Maniaci, MD**
  - None
- **Shiv Sutaria, MD**
  - None



## Round Robin Q&A



*Audience Q&A*

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# Check Out Our TA Center

A comprehensive library of helpful resources on a range of essential HaH topics, updated regularly.

## Webinars

### WHEN DIGITAL GOES DOWN: ENSURING CARE CONTINUITY IN A CATASTROPHIC TECH CRASH

Recorded September 10th, 2024 The Hospital at Home Users Group, in partnership with the American Academy of Home Care Medicine, is pleased to present our latest webinar for hospital and system...

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### THE STATE OF STATE POLICY: OPPORTUNITIES AND CHALLENGES FOR HOSPITAL AT HOME

Recorded June 24th, 2024 The Hospital at Home Users Group, in partnership with the American Academy of Home Care Medicine, is pleased to present our latest webinar for hospital and system...

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### AGE-FRIENDLY BEYOND THE HOSPITAL: INNOVATION IN HOSPITAL AT HOME

Recorded April 11th, 2024 The Hospital at Home Users Group, in partnership with the American Academy of Home Care Medicine, is pleased to present our latest webinar for hospital and system...

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## Information/ Research

### OFFERING OBSERVATION AT HOME SERVICES: PAYMENT PATHWAYS AND FEASIBILITY

Last updated: March 2024

In January 2024, members of the HaH Users Group assembled to discuss Observation at Home. Dr. Anthony Wehbe of SENA Health described how they are implementing Observation at Home for their health system partner, Inspira Health.

As of this writing, there is no waiver or Medicare payment for Observation care at Home. A few hospital systems and implementation partners have negotiated with commercial payors for an Obs at Home rate. Others, including SENA Health, have navigated a path to operationalize Obs at Home without a direct Obs at Home payment. Typically, it involves treating the patient in the brick-and-mortar through workup and Observation status determination, and billing for an Observation stay. While undergoing Observation care, the patient is discharged from the facility and moved home, where the necessary equipment and supplies are delivered, medications are provided, and ongoing in-person (and, if available, virtual) care continue, as with any HaH episode. Certain elements of the care, such as provider visits (in-person or virtual), are billable to insurance. Costs for care that cannot be billed and that are not covered by the Observation rate would be covered by the hospital or health system, which benefits from additional bed capacity, less burdened brick-and-mortar staff, and satisfied patients. If the patient ultimately requires inpatient admission after their Observation stay, that can potentially occur in the home if the patient is otherwise eligible for HaH care; note that the CMS waiver requires an in-person admission H&P be completed for all HaH waiver episodes.

Offering Observation care at Home at your institution may make sense if:

- You already have the infrastructure (staffing, operations, in-home service providers, etc.) in place to provide acute care in the home – e.g. an existing Hospital at Home or ED in the home service.
- Your institution's observation unit is consistently at or over capacity, with negative downstream effects on other units and the patient and staff experience.
- You have outlined a workflow to admit patients who may need ongoing inpatient care after an Observation episode, including steps to ensure that there is an in-person H&P before a HaH episode, or transfer back to the facility if necessary.

## Tools

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### INFORMATION FOR FAMILY CAREGIVERS



#### WHY IS MY FAMILY MEMBER BEING HOSPITALIZED AT HOME?

Hospital-level care in the home is not a new idea, but it has become more popular as 1) research has shown that hospital care in the home is as good or even better than hospital care in the traditional inpatient setting and 2) the COVID-19 pandemic created a greater need for care outside of hospital settings. Hospital at Home programs have demonstrated excellent outcomes for patients as well as high levels of satisfaction for both patients and caregivers. Your loved one was determined to

<https://www.hahusersgroup.org/technical-assistance-center/>

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