Does Hospital at Home provide Age-Friendly Care aligned with the 4M framework?

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Mount Sinai At Home

BACKGROUND

- In 2025, the Centers for Medicare & Medicaid Services (CMS) implemented a new inpatient quality measure to report on age-friendly care, the 4Ms Framework: what matters, medications, mentation, and mobility.
- As the population of older adults grows, this measure underscores the increasing importance of incorporating age-friendly care into hospital practice and may drive greater investment in resources to support its implementation.

METHODS

- Retrospective chart review of random selection of 171 patients admitted to Mount Sinai's HaH.
  - ≥65 years old
  - Admitted directly from the ED
- Variables included in the analysis:
  - What **Matters**: healthcare proxy/surrogate identification, caregiver involvement, MOLST documentation, code status
  - **Medications**: medication reconciliation completion, unintended discrepancies, high-risk discrepancies
  - **Mentation**: mental status examination, presence of dementia, documented delirium
  - **Mobility**: functional assessments, PT/OT involvement, durable medical equipment (DME) usage

4M Domain Results

All reviewed admissions had at least 1 element completed in each of the 4M domains.

What Matters: Alignment with patients' end-of-life goals	
Documented HCP/Surrogate	123/171 (72%)
Code Status	171/171(100%)

Mentation: Prioritizing and monitoring cognitive awareness	
Mental Status Assessment	161/171 (94%)
Dementia Present	36/171 (21%)

Mobility: Prioritizing and monitoring ability to move	
Mobility Assessment	152/171 (89%)
PT/OT Evaluation	52/171 (30%)

Medications: Accuracy and adherence to medications	
Med Recs	139/171 (81%)
Unintended Discrepancies	48/171 (28%)
Mean Number of Medications	7.8

DEMOGRAPHICS

Ethnicity			
Hispanic/ Latino	37%	Non-Hispanic/ Latino	63%
Gender			
Female	51%	Male	49%
Language Preference			
English	73%	Non-English	27%
Medicaid as Primary or Secondary Insurance			
Medicaid	40%	Non-Medicaid	60%

CONCLUSIONS

- These findings suggest that Hospital at Home may provide an effective model for delivering age-friendly care outside the traditional hospital setting.
- Our cohort reflects a diverse, urban supporting the feasibility of HaH to deliver age-friendly care across varied patient populations.
- Future work should identify how these practices can translate to traditional hospital settings.

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