

CHOOSE HOME: Legislation to Allow America's Seniors to Come Home Safely After a Hospitalization



Expanding Medicare Health Care Choices for Seniors: Home-Based Extended Care in Post-Acute Care

Home care has long been a safe and effective alternative to care in an institutional setting. Reform of Medicare is overdue to provide viable, extended care services at home for patients who otherwise have only one choice, the Skilled Nursing Facility benefit. The COVID-19 pandemic has vividly shown the limitations and risks of skilled nursing facilities (SNFs). Beyond the pandemic crisis, extended care at home also makes sense. Nearly 33% of patients who go to SNFs have identical frailty scores to those who receive care at home. The main difference in these patients is that they lack access to extended caregiver services and certain other supplemental health care supports. There is a better way to care for seriously ill Medicare beneficiaries after discharge from the hospital.

Transitioning Seniors Home Safely After Hospitalization

To remedy this problem, the National Association for Home Care & Hospice and the Partnership for Quality Home Healthcare propose a cost-effective and patient preferred home-based extended care benefit as a supplement to the existing home health benefit that supports patients to leave the hospital and recover at home with a mix of expanded skilled nursing, therapy, personal care, telehealth services and more. In this way, eligible patients can choose to recover at home in a safe home environment with appropriate and sufficient care tailored to meet their individual needs and reduced Medicare spending.

The ideal solution is an enhanced home-based extended care benefit option for patients leaving the hospital, who would otherwise end up in a skilled nursing facility.

Choose Home - An Enhanced Health Care in the Home Medicare Option
Choose Home is designed to serve those who are clinically appropriate for health care in their own home, but need more services than available under the existing Medicare home health benefit.

Goal: Promote a safe, effective recovery, increased patient and family satisfaction, and reduced exposure to infectious diseases, as well as significant cost savings to the Medicare program compared to skilled nursing facility costs.

Services: Include skilled nursing, therapy service, personal care, continuous remote patient monitoring, meals, home adaptations, and non-emergency transportation.

Eligibility: Controlled carefully by use of an assessment tool that includes consideration of an individual's place of care preferences, functionality, medical conditions, goals regarding care and family caregiver concerns.

Mechanics: Eligible patients would be referred to a Home-Based Extended Care qualified Home Health Agency that offers the Choose Home benefit. Starting from the hospital discharge, Choose Home services are covered for 30 days, and home health services continue beyond the initial 30 days as clinically indicated.

Financing: Providers receive a combination of the home health benefit episodic payment and a 4-level, 30-day fixed episodic payment where providers share financial risk with Medicare.

Choose Home Option

- Patient meets SNF benefit eligibility
- Patient resides at home
- Receive traditional HH benefit services AND for 30-days – an expanded package of services including transportation, meals, home modifications, remote patient monitoring, telehealth services, and personal care services
- No cost sharing
- Payment combines home health amount and fixed add-on for expanded services
- Add-on payments for expanded services are capped at 80% of the SNF 30 day payment amount, **assuring savings under Choose Home of about \$4,623 per patient.**
- Estimating approximately 6.5-11.1% of SNF 1st PAC payments, **this legislation will generate Medicare savings of \$144-247 million per year with \$1.6-2.8 billion in savings over 10 years**, according to Dobson Davanzo, an independent health economics firm.
- Based on their own data, home health providers expect the demand from patients and hospital partners would be higher, such that Choose Home could potentially produce even annual savings to Medicare of closer to \$925 million a year.

To protect seniors' health and promote value-based care, America can CHOOSE HOME.

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EXTENDED PATIENT CARE SERVICES

Medicare Home Health Benefit	Choose Home
<p style="text-align: center;">60-Day Benefit</p>	<p style="text-align: center;">30-Day Benefit (up to 100 days maximum)</p>
<ul style="list-style-type: none"> ▪ Part-time or “intermittent” skilled nursing care ▪ Part-time or intermittent home health aide services (personal hands-on care) <ul style="list-style-type: none"> ▪ Assistance with activities that support skilled therapy services ▪ Personal care of prosthetic or orthotic devices ▪ Physical therapy ▪ Occupational therapy ▪ Speech-language pathology services ▪ Medical social services ▪ Medical supplies 	<ul style="list-style-type: none"> ▪ Part-time or “intermittent” skilled nursing care ▪ Part-time or intermittent home health aide services (personal hands-on care) <ul style="list-style-type: none"> ▪ Assistance with activities that support skilled therapy services ▪ Personal care of prosthetic or orthotic devices ▪ Physical therapy ▪ Occupational therapy ▪ Speech-language pathology services ▪ Medical social services ▪ Medical supplies <p style="text-align: center;">PLUS:</p> <ul style="list-style-type: none"> ▪ Daily skilled nursing care as needed ▪ Daily physical therapy, occupational therapy, and/or speech-language pathology services as needed ▪ Up to 360 hours of personal care as needed ▪ Non-emergency transportation ▪ Clinically appropriate meals ▪ Remote patient monitoring ▪ Home adaptive equipment ▪ Respite care and caregiver supports, education, and training ▪ Medication management and patient supports ▪ Care coordination, discharge planning and transition supports