During the first year of the COVID-19 pandemic, the Centers for Medicare & Medicaid Services (CMS) established the Acute Hospital Care at Home program, providing hospitals the regulatory flexibility to mitigate the impact of COVID-19 surges by treating eligible patients at home. This year, Congress extended the program beyond the end of the COVID-19 public health emergency, keeping it operational through the end of 2024. The Texas Health and Human Services Commission would require legislation to permit hospitals to participate in the program after the public health emergency ends.

House Bill 1890 by Rep. Jacey Jetton (R-Richmond) and Senate Bill 1156 by Sen. José Menéndez would authorize Texas hospitals to participate in the CMS Acute Hospital Care at Home Program on a permanent basis if approved by the Texas Health and Human Services Commission and CMS.

How does hospital-at-home work?

Established in November 2020, the CMS Acute Hospital Care at Home program is an innovative care model that allows Medicare beneficiaries to receive acute-level health care services in their home environments. CMS’ requirements ensure that the program is only used for patients who can safely be cared for in the home setting. Patients are only eligible for the program if they initiate treatment at the emergency department or inpatient wing of a hospital. Facilities must have appropriate screening protocols in place before patients may receive care at home. Registered nurses must evaluate and monitor patients daily, either remotely or in person. In addition, registered nurses or mobile integrated health paramedics must visit the patient twice in person each day.

The program is only available to Medicare beneficiaries, so there is no cost to the state.

What are the benefits of hospital-at-home?

- The ability to receive acute care treatment from the comfort of the patient’s home with loved ones.
- Fewer readmissions and returns to the emergency department.
- Higher patient-reported outcomes and patient satisfaction.
- Significantly lower use of skilled nursing facility-care following discharge.
- Increased flexibility to expand hospital capacity and mitigate the spread of infectious diseases.

HB 1890 and SB 1156 would:

- Permit the Texas Health and Human Services Commission to waive rules on physical space and supervision on a permanent basis so that Texas hospitals can participate in the CMS Acute Hospital Care at Home program without a declared public health emergency.
- Authorize Texas hospitals to apply to the state and federal governments to utilize the program to care for patients in a home setting.
- Require HHSC to adopt hospital-at-home standards “at least as stringent” as those of CMS’ Acute Hospital Care at Home program.