
Health Care & Wellness Committee

HB 2295

Brief Description: Concerning hospital at-home services.

Sponsors: Representatives Bateman, Hutchins, Riccelli, Bronoske, Reed, Orwall, Davis, Tharinger, Simmons, Callan and Macri.

Brief Summary of Bill

- Requires the Department of Health to adopt rules to add hospital at-home services to the services that a licensed acute care hospital may provide and establish standards for the operation of a hospital at-home program.

Hearing Date: 1/24/24

Staff: Kim Weidenaar (786-7120).

Background:

Federal Hospital at Home Programs.

In March 2020 the federal Center for Medicare and Medicaid Services (CMS) announced the Hospitals Without Walls initiative, which provided broad regulatory flexibility that allowed hospitals to provide services in locations beyond their existing walls. In November 2020 the CMS established the Acute Hospital Care at Home Initiative (AHCAH) which allowed certain Medicare-certified hospitals to treat eligible patients with inpatient-level care at their home and waived a number of Medicare conditions of participation.

The CMS required participating hospitals to have appropriate screening protocols before care at home begins, which include assessing both medical and nonmedical factors. The AHCAH also requires a physician or advanced practice provider to evaluate the patient daily in-person or

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remotely, at least two in-person visits daily by a nurse or mobile integrated health paramedic, and at all times there must be a system that allows immediate, on-demand audio connection with an acute hospital at-home team member, in addition to other requirements. Acute Hospital Care at Home Initiative patients may only be admitted from emergency departments and inpatient hospital beds.

The Consolidated Appropriations Act of 2023 extended the waivers for the AHCAH until December 31, 2024.

Certificate of Need.

The Certificate of Need (CON) Program is operated by the Department of Health (DOH) and is a regulatory process that requires certain health care facilities and providers to get state approval before building certain types of facilities or offering new or expanded services. A CON is required before a health care facility can be constructed, sold, purchased, or leased, or before a health care provider can offer certain new or expanded services, such as a hospital seeking to increase their licensed beds. When the DOH receives a CON application, the DOH reviews the potential impact of the proposed construction or expansion on a community's need for the service.

Summary of Bill:

Hospital at-home services are defined as acute care services provided by a licensed acute care hospital to a patient outside of the hospital's licensed facility and within a home or any location determined by the patient receiving the service. The DOH must adopt rules by December 31, 2025, to add hospital at-home services to the services that a licensed acute care hospital may provide. The rules must establish standards for the operation of a hospital at-home program, which must be substantially similar to the provisions of the federal AHCAH, including environment of care requirements; admission, transfer, discharge, and referral processes; inclusion and exclusion criteria; geographic criteria; and data reporting requirements. The standards may not include requirements that would preclude a hospital from complying with the requirements of the federal program.

Once rules are established, hospitals may apply to the DOH for approval to add hospital at-home services as a hospital service line. Hospitals that secured a federal AHCAH waiver prior to rule adoption may provide hospital at-home services while applying for approval. The DOH must approve a hospital to provide hospital at-home services if the application is consistent with the standards provided in rule.

Licensed hospitals are authorized to provide hospital at-home services if the hospital has secured a federal AHCAH waiver prior to when the DOH adopted rules regarding hospital at-home services. Hospitals with a federal waiver that intend to operate hospital at-home services must notify the DOH within 30 days of the bill's effective date.

The DOH may set a one-time application fee by rule, which may not exceed the actual cost of

staff time to review the application. The administration of the program must be covered by existing licensing fees.

Hospital at-home services do not count as an increase in the number of the hospital's licensed beds and are not subject to the CON requirements or review. Hospital at-home services provided by a licensed acute care hospital are not subject to regulations under home health care, hospice care, or in-home services agencies.

Appropriation: None.

Fiscal Note: Requested on January 15, 2024.

Effective Date: The bill contains an emergency clause and takes effect immediately.