

# At-Home Care Coalition Eyes Introduction Of ‘SNF At Home’ Bill

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Moving Health Home is working with lawmakers to craft a bipartisan, bicameral bill that would have CMS create a five-year skilled nursing facility (SNF) at home waiver program, marking the next phase of the group’s federal advocacy efforts after Congress passed a five-year extension of CMS’ Acute Hospital Care at Home (AHCAH) program earlier this year.

The hypothetical waiver program would likely increase the number of health care organizations offering SNF at home by letting them get around the 24-hour physical on-site nursing requirement, while also allowing CMS to analyze the fledgling at-home care model’s outcomes. Currently, only a few organizations, like Highmark Health, Marshfield Clinic and UMass Chan Medical School, offer SNF at home to patients.

“It’s not insurmountable to think that we could get something done on SNF at home,” Krista Drobac, executive director of Moving Health Home, told *Inside Health Policy*. “I’m feeling bullish in a bearish environment.”

Though the bill is still being refined between Moving Health Home and lawmakers, Drobac explained that it would instruct CMS to offer SNFs, hospitals and home health waivers that allow them to launch SNF at home programs by relaxing some Medicare conditions of participation.

“We want to waive as little as absolutely possible. So, we don’t want to waive three midnight rules and we don’t want to waive staffing ratios. But we do need to waive the 24-hour physical on-site nursing,” Drobac said.

Organizations with SNF at home waivers would have to meet certain criteria, but Drobac cautioned what the criteria will exactly look like, and whether Congress or CMS will spell them out, is still being ironed out.

Drobac noted organizations that receive SNF at home waivers would have to be able to show CMS they can support seniors with activities of daily living (ADLs) like bathing.

**Drobac said she does not have a cost estimate for the bill, though she hopes the Congressional Budget Office (CBO) will find that the cost of SNF at home to the taxpayers is negligible, like CMS' AHCAH program.**

Drobac emphasized that SNF at home care would serve higher acuity patients compared to home health programs.

Home health patients “are generally more medically stable patients who need intermittent visits, so every two days or every three days, and they need lower complexity of care. And a SNF, on the other hand, is seven days a week, and those are folks who have serious mobility issues, are at risk for falls, may need every day to have therapy,” she explained in a webinar.

Patients ultimately eligible for SNF at home care will be “based on an assessment tool that includes consideration of an individual’s place of care preferences, functionality, medical conditions and questions regarding care and caregiver,” according to a Moving Health Home slideshow.

In addition to expanding access to at-home care, Drobac said SNF at home could help SNFs cope with their diminishing capacity to serve patients.

**The draft bill would also have CMS conduct an analysis of SNF at home programs, similar to the study CMS conducts for the AHCAH program, Drobac said.** There are currently few studies of SNF at home, though initial data appear promising.

One Cleveland Clinic pilot found that a home-based program saved \$3,320 per episode of care compared to a stay at an SNF. The 81 patients in the pilot improved their functional independence, according to a blog post about the study.

A 10-patient randomized controlled trial of a Massachusetts SNF at home program found that at-home care yielded lower costs, greater functional independence and better patient experiences than a stay at an SNF.

UMass Chan Medical School is conducting a 650-patient randomized controlled trial of an SNF at home program with the help of a \$6.5 million grant from the state of Massachusetts. The study will measure 30-day hospital readmission rates, patients’ functional status, patient satisfaction and costs, according to a 2024 press release.

Massachusetts gave Mass General Brigham \$4.6 million for a 300-patient randomized controlled trial of a SNF at home program.

"We're all just anxiously awaiting the results. It sounds like it's been positive," Drobac said. -- *Christian Robles* ([crobles@iwppnews.com](mailto:crobles@iwppnews.com))