Substituting Acute Care at Home for Traditional Hospital Inpatient Services

Contact Us!
To learn more about the Mount Sinai MACT program and how it could benefit your plan members, please contact your Mount Sinai Health System Managed Care Contractor.
How MACT Works

When eligible patients meet medical necessity for a hospital admission, they are screened to determine eligibility for the MACT program as an alternative. This screening ensures that a safe home environment that meets basic living needs is in place and there is low risk of transfer of back to the hospital for ICU care. All patients meeting the relevant criteria are offered the option of receiving acute care services at home through the MACT program, and those who decline are admitted to the hospital.

**Enrollment Overview**
- Patient eligibility established - Patient agrees to enroll in the MACT program
- Patient is transferred to the home and the patient or the patient’s family is set up for treatment

**Health Care Delivery**
- Patient typically spends 3-5 days in the MACT program
- Patient is visited daily by a physician or nurse practitioner and typically twice daily by a nurse
- Additional visits from a social worker, physical therapist, and home aide are provided as needed, with frequency/basis of services determined by Mount Sinai

**Additional ancillary services provided**
- IV medication/fluids
- Oxygen
- Blood tests
- Respiratory treatments
- Wheelchairs
- Professional fees from Emergency Department physicians, and physician consultants in the Emergency Department
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- Charges for some medications (mostly controlled substances) that cannot be transported from the hospital and must be filled at patient’s local pharmacy

**Discharge**
- Discharge is assessed using the same criteria as the physician uses in the hospital
- Patients are given necessary prescriptions and educated on health management
- Physicians communicate with subsequent care providers to ensure a smooth transition

**Post-Acute Care (Optional)**
- Social worker visits to transitional care coordination for the patient
- MACT services are available to the patient for 30 days following discharge from the program
- These services include monitoring of progress by a care coordinator, the coordination of appropriate post-acute care services that may include nursing, physical or occupational therapy, and other services which are billed separately
- Patient is transferred to the home and the patient’s home is set up for treatment
- Discharge is assessed using the same criteria as the physician uses in the hospital
- Patients are given necessary prescriptions and educated on health management
- Physicians communicate with subsequent care providers to ensure a smooth transition
- Post-acute care is provided as per patient’s needs

**How are patients monitored from their homes?**
- Patients and their caregivers have 24-hour phone access to a Mount Sinai clinical staff member, as well as access to community paramedics who can provide 24/7 home visits with video communication with MACT physicians.
- This MACT program negotiated rates are open to various payment methodologies for ease of administration for all concerned.

**How Partner With Mount Sinai?**

**Why Partner With Mount Sinai?**

**Experience and Capabilities**
- Mount Sinai has expertise with providing hospital at home services under a $966 million Health Care Innovation Award from CMS and has served hundreds of patients to date, including Medicare Advantage, Managed Medicaid and Commercial patients with private payers.
- Extensive Visiting Doctors program since 1995, with more than 4,000 visits to over 1,500 patients annually.
- Chelsea Village House Call program since 1973 — providing in-home medical and support services to allow elderly patients to remain in their homes and communities with the maximum possible level of independence, health, and quality of life.
- Extensive health system capabilities and clinical partnerships through Mount Sinai hospitals and partners.

**Program Results**

**Demonstrated MACT program results, delivering improvements in these key measures:**
- **Improved Outcomes:** A critical benefit of the MACT program is improving patient outcomes across key metrics — particularly 30-day emergency room revisit and 30-day hospital readmission rates.
- **Increased Patient Satisfaction:** Enrollment in this program leads to improved patient satisfaction — patients simply prefer to be treated in the comfort of their homes.
- **Lower Cost of Care:** Another significant benefit of the MACT program is lowering the cost of patient care — both directly and indirectly in terms of cost of stay and length of stay.

**Enrollment**
- Compared to the control group, patients enrolled in the MACT program have a significantly shorter length of stay.

**30-Day Hospital Readmission**
- Compared to the control group, MACT patients have a significantly lower readmission rate.

**Patients enrolled in the program show a significantly higher HCAHPS rating, both the traditional hospital stay at Mount Sinai and the national average score for a hospitalization.**

**Compared to the control group, MACT patients have a significantly lower readmission rate.**

**Number of Days**

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<th>Number of Days</th>
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<th>MACT Cohort</th>
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**Control Group**
- Compared to MACT, patients in the control group had a 10% higher hospital readmission rate.

**MACT Cohort**
- Compared to MACT, patients in the control group had a 15% lower hospital readmission rate.

**Patient Satisfaction HCAHPS Mean Score**

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**Control Group**
- Compared to MACT, patients in the control group had a 20% higher hospital readmission rate.

**MACT Cohort**
- Compared to MACT, patients in the control group had a 20% lower hospital readmission rate.