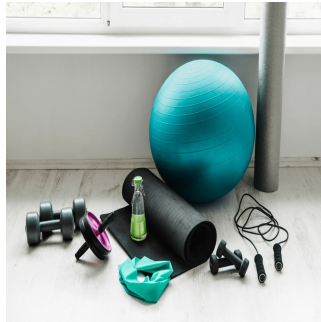


---

## The Future of At-Home Cardiac Rehabilitation



---

At-home cardiac rehabilitation (CR) has emerged as an effective alternative to traditional centre-based programmes, offering comparable or superior results in physical function, mood improvement and quality of life for patients with chronic heart disease. Despite the proven benefits highlighted by ECRI's recent Clinical Evidence Assessment, the future of such programmes is uncertain. This is due to the potential expiration of reimbursement provisions enacted during the COVID-19 pandemic. Without permanent policy changes, patients may face barriers to accessing these life-changing programmes.

### The Rise and Benefits of At-Home Cardiac Rehabilitation

The concept of at-home and hybrid CR has gained traction, supported by findings from ECRI's comprehensive review of research conducted between January 2021 and August 2024. This analysis included multiple randomised controlled trials synthesised across 13 systematic reviews. The results showed that at-home and hybrid CR can surpass traditional centre-based programmes in improving patients' exercise adherence, physical activity, mood and quality of life.

Key components of at-home CR involve using assistive technologies such as remote monitors, activity trackers, digital logs and telemedicine consultations. These tools keep patients engaged and allow healthcare providers to monitor progress effectively. Unlike traditional CR, which requires multiple weekly visits to a rehabilitation centre, at-home programmes reduce logistical challenges such as travel, time constraints and mobility issues. This flexibility is crucial as fewer than 30% of eligible patients in the United States complete centre-based CR due to these challenges.

### Challenges and the Need for Legislative Action

Despite its effectiveness, the future of at-home CR is threatened by the impending expiration of provisional reimbursement policies. These measures, initiated during the pandemic, allowed for limited reimbursement through Medicare for CR services that incorporated telemedicine and remote monitoring. However, these policies are set to expire at the end of 2024 unless legislative efforts to secure permanent coverage succeed.

The potential lapse in reimbursement could have significant consequences for patients who rely on at-home CR due to its convenience and accessibility. ECRI's findings emphasised that these programmes are still in an early stage of development, primarily constrained by concerns over long-term safety, effectiveness and reimbursement. If these policy issues are not addressed, the progress made in expanding CR accessibility may be at risk, limiting options for patients who cannot attend in-person sessions.

### Evidence of Efficacy and Future Considerations

ECRI's review showed varied results across key CR outcomes. For example, studies on exercise capacity, measured by six-minute walking distance, found at-home or hybrid CR to be as effective as traditional programmes, if not better. Similarly, adherence rates and improvements in mood and quality of life were favourable in at-home settings. While blood pressure and body composition showed mixed results and mortality and hospitalisation rates were comparable, the overall evidence supports the viability of at-home CR as a sound alternative.

Assistive technologies like telehealth consultations and wearable devices have been pivotal in bridging the gap between home-based and centre-based CR. However, integrating these technologies requires further research to assess their long-term impact on adherence and patient outcomes. Additionally, findings may not generalise across all patient demographics, necessitating targeted studies to better understand the diverse needs within patient populations.

At-home and hybrid CR programs have proven effective, offering comparable benefits to traditional centre-based programmes while overcoming significant access barriers. Yet, the future availability of these programmes hangs in the balance, dependent on the continuation of reimbursement policies. Legislative action to secure permanent coverage is essential to sustain and expand this crucial aspect of cardiac care. Addressing these policy challenges can ensure that at-home CR remains a viable and accessible option for the many patients who need it.

Source: [ECRI](#)  
Image Credit: [iStock](#)

Published on : Mon, 4 Nov 2024