

Contacting CMS on Minimum Staffing Requirements

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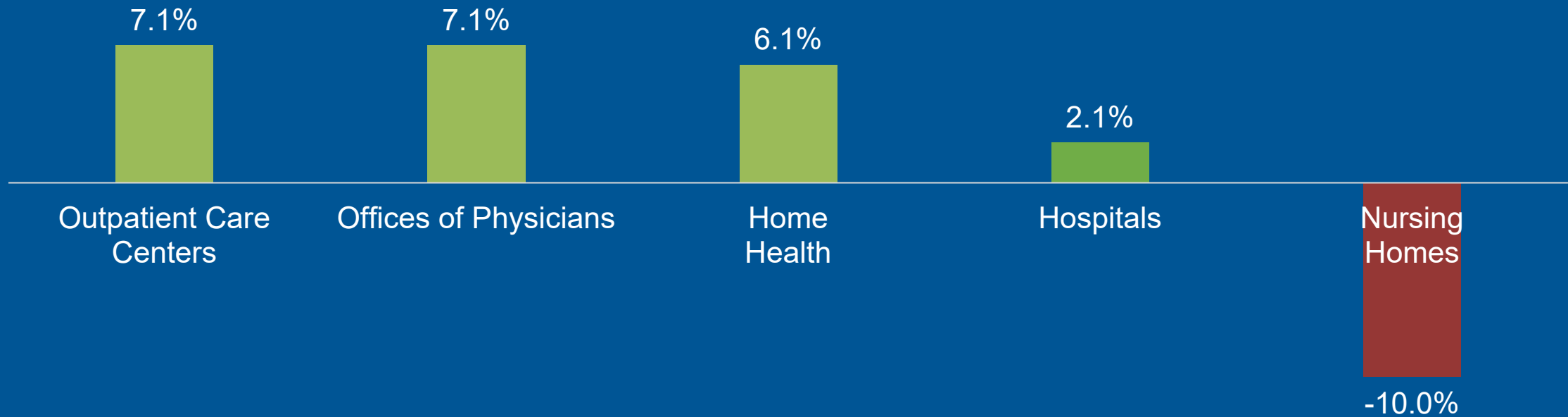


Implementing Minimum Staffing Rule Impossible For 2 Reasons

- Workers are not there
- There is no funding

NURSING HOMES: WORST IMPACTED THAN ANY OTHER HEALTH CARE SECTOR

Percent Change in Health Care Sector Employment since Feb 2020



Source: Bureau of Labor Statistics (BLS) February 2020 – August 2023



There is No Funding

- No funding for increased staff
- CMS estimates 10-year cost is \$40.6B
 - Average cost of \$4.1B annually
 - That's an average of \$300,000 per building



Minimum Staffing Requirement for Skilled Nursing Facilities

- We need 10,000 comments to CMS
- We need to influence the rule
- Comments needed by Nov. 6



Overview

- Specific thresholds for RN and Nurse Aides would be created
- 24/7 RN



Number of Hours Required

- RN: 0.55 HPRD
- Nurse Aide (NA): 2.45 HPRD
- No specific LPN requirement
- 24/7 RN
- If acuity needs of residents require more, higher RN and NA staffing level will also be required



Where We Are Today

- 49% do **not** meet 0.55 RN HPRD
- 72% do **not** meet 2.45 NA HPRD
- 19% meet both RN & NA HPRD
- Estimate <20% facilities have 24/7 RN hours
 - PBJ has per day, not shift-level data

Your Top-Line – Minimum Staffing Edition (2023-Q3)

- Provides Facility-level data on if proposed minimum staffing requirements are met with the latest PBJ data
 - Calculates how many additional hours and FTEs would be needed to meet requirements
- Released on Sept 8, 2023
- Free for Members and Accessible through [LTC Trend Tracker](#)



IMPROVING LIVES by DELIVERING SOLUTIONS for QUALITY CARE



Join Our Webinar on Monday, Sept 11 at 2pm ET
On How to Contact CMS About Changing These Proposed Staffing Requirements

Your Top-Line: Proposed Minimum Staffing Special Edition

Center Name
123 Road, City, ST 98765

September 8, 2023

Proposed Staffing Requirements and Your Center's Current Performance

According to the latest PBJ Data from 2023-Q1, your center meets zero of the proposed staffing re-quirements. An additional 1,826 Nurse Aide Hours (3.7 FTEs) and 1,757 RN hours (3.6 FTEs) would be needed to meet all the requirements. [A more detailed summary of the rule is on our website](#)

Requirements	After Final Rule, Compliance Deadline		Your Center's Latest Data		
	Urban* SNFs	Rural SNFs	Your Center's Latest PBJ Data (2023q1)	Meet Threshold?	Hours (FTEs) Needed to Meet Requirement
Facility Assessment Expansion	60 days	60 days			
24/7 RN on Site	2 Years	3 Years	49 Days with <24 RN Hours	No	378 (0.8)
2.45 Nurse Aide Hours per Resident Day (HPRD)	3 Years	5 Years	2.177	No	1,826 (3.7)
0.55 Registered Nurse (RN) HPRD	3 Years	5 Years	0.288	No	1,757 (3.6)

* Based on the US Census definition, your center is considered urban and located within the (blank) Urban Area.



How Do I Register?

www.ahcancal.org/Data-and-Research/LTC-Trend-Tracker

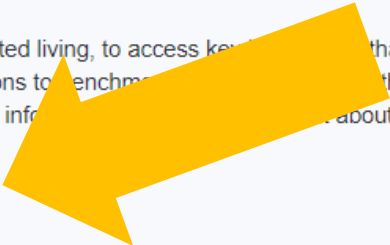
AHCA/NCAL / Data & Research / LTC Trend Tracker

LTC Trend TrackerSM

LTC Trend TrackerSM is a web-based tool that enables long term and post-acute care providers, including assisted living, to access key data that can help their organization succeed. This exclusive benefit for AHCA/NCAL members, allows skilled nursing and assisted living organizations to benchmark themselves against those of their peers and examine ongoing quality improvement efforts. LTC Trend Tracker is AHCA/NCAL members' one-stop-shop to gain timely information about their own performance as well as that of the entire profession.

LOGIN

REGISTER



BEHOLD THE POWER OF INFORMATION

With just a few clicks of a button, LTC Trend Tracker gives you access to government data collected by the Centers for Medicare and Medicaid Services (CMS) on skilled nursing centers – providing you with one central hub for all your reporting needs. For assisted living members, LTC Trend Tracker allows you to upload and track key quality metrics. Use the Dashboard to quickly see how you are trending on key metrics compared to your peers. Quickly download reports to share and engage staff members as well as area providers to build partnerships.

ENHANCE YOUR COMMITMENT TO QUALITY

Improving quality care is a journey, and LTC Trend Tracker is the tool you need to ensure your organization stays on track. Monitor your progress on quality measures, Five-Star, AHCA/NCAL Quality Initiative goals, hospital readmission rates and more. Identify areas your organization should address in order to improve and set your own performance targets. Demonstrate your dedication to quality to your patients and residents with verifiable results.



How Do I Log Into LTC Trend Tracker?

www.ltctrendtracker.com

Navigation bar with logos and links:

- AHCA. AMERICAN HEALTH CARE ASSOCIATION
- NCAL. NATIONAL CENTER FOR ASSISTED LIVING
- LTctrendtracker YOUR QUALITY & PERFORMANCE SOLUTION
- Login Help

➔ Login with Username and Password

User:

Password:

[Acceptance Agreement](#)

[Forgot Password?](#)

LOGIN



What Workers Count

- 0.55 HPRD can only be met by RNs
 - DON can be counted
 - Unclear if RNs with administrative duties can be counted (though appear to be included in CMS calculations)
- 2.45 HPRD can only be met by Nurse Aides
 - CMS invites comments on allowing substitution with LPN in extraordinary cases and extreme circumstances
- CMS notes NASEM recommendation to exclude DON from counting in 24/7 and invites comments
- Cannot substitute RN or NA with PT, OT, Psychologist, Social Worker



Hardship Exemption for HPRD Requirement

- Extensive criteria
- Process is cumbersome & not user-friendly
- Most in need unlikely to qualify



Phase-In After Rule is Finalized

- HPRD:
 - Urban facilities - 3 years
 - Rural facilities – 5 years
- 24/7 RN:
 - Urban facilities - 2 years
 - Rural facilities – 3 years
- Facility assessment: 60 days



U.S. Census Definition Used for Urban/Rural

- 21% of SNFs are rural: All population, housing, and territory not included within an urban area
- Facility's designation is available in TrendTracker Topline report
- CMS seeking comment on whether a different definition should be used



Penalties

- DPNA, DPOC, directed in-service or other enforcement actions
- CMPs
- Temporary management
- State monitoring
- Transfer of residents
- Provider agreement termination



Contact CMS

- Contact CMS to weigh in on their proposal for SNF minimum staffing requirements
- Make your comments personalized to drive home message
 - Use your own circumstances & examples
- Focus on your patients and residents



Comments: Need to Make 4 Points

1. Explain who you are
2. Your commitment to quality
3. Workforce not available
4. Asks of CMS



Explain Who You Are - Personalized

- What you do & how long you have been in this line of work
- Why you work in long term care
- Describe your building
 - Location
 - Number of units
 - Profile of your residents' needs



Tell Them About Your Commitment to Quality

- Mention any AHCA Quality Award or other award you have received
- Explain what your residents mean to you and your team



Workers Are Not Out There

- Explain how difficult it is to get workers
 - Personal story or example of not being able to find workers
- Your recruitment challenges
 - How many positions you have open
 - Inability to fill shifts
 - Difficulty hiring new recruits
- Discuss your use of agency staff and related costs
- Tell them that a staffing mandate will not create workers



Asks: Encourage CMS To Do The Following

- Don't do this at all
- If you are going to do this, don't do it until the workforce returns
- Fund it
- Phase in over 5 years for urban and rural
- Count LPNs in the RN category
- Count other workers (activities directors, social workers, etc. in the nurse aide category)



Submit Comments by Nov. 6

- Send through [AHCA/NCAL Website](#)
 - www.ahcancal.org

Questions?

Submit through chat

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