

LONG TERM CARE COMMUNITY COALITION

Advancing Quality, Dignity & Justice

UNITED STATES HOUSE COMMITTEE ON WAYS & MEANS
HEARING ON
“AFTER THE HOSPITAL:
ENSURING ACCESS TO QUALITY POST-ACUTE CARE”
MARCH 11, 2025

WRITTEN TESTIMONY SUBMITTED BY
LONG TERM CARE COMMUNITY COALITION
WWW.NURSINGHOME411.ORG
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I. Introduction

The Long Term Care Community Coalition (LTCCC) is a national non-profit, non-partisan organization dedicated to improving care and quality of life for residents in nursing homes and assisted living. Through rigorous research, we assess long-term care policies and evaluate whether essential standards of care are effectively upheld for residents, who are often elderly and frail.

LTCCC provides policymakers and the public with critical quality and financial data on the nursing home industry, to improve transparency and accountability. Additionally, we educate and empower residents, families, and caregivers by equipping them with knowledge of their rights and the tools needed to navigate the challenges of residential care. Our work is driven by the fundamental belief that every senior deserves safe, dignified, and high-quality care.

LTCCC commends the Health Subcommittee for holding this hearing on the state of post-acute care in the United States. Every year, millions of Americans transition from hospitals to long-term care facilities or Home and Community Based service providers. These transitions are pivotal moments that should prioritize patient well-being, dignity, and access to high-quality care. Unfortunately, post-acute care often falls short, leaving individuals vulnerable to preventable hospital readmissions and adverse events that can be painful and life-threatening. Issues including inadequate staffing, weak regulatory oversight, and predatory operators who prioritize profit over patient needs continue to jeopardize the safety of individuals who rely on these services.

Medicaid is the backbone of our nation's long-term care system. Without sustained investment, workforce shortages will undoubtedly worsen, putting vulnerable individuals at risk. Congress must take action to 1) protect and strengthen Medicaid funding, and 2) support policies that require sufficient staffing in nursing homes and other post-acute care settings.

II. Protect and Strengthen Medicaid Funding

As the Subcommittee examines the current post-acute care landscape, it is crucial to recognize Medicaid's vital role in providing vulnerable populations with access to quality care. Medicaid is the primary payer for long-term care services for most nursing home residents, particularly seniors and other individuals with long-term care needs. Its funding is essential for maintaining care standards and ensuring access to critical services for all residents in these facilities, whether they are there for post-acute or long-term services.¹

The current budget resolution passed by the House includes a proposed \$880 billion reduction in federal spending over the next decade.² According to an analysis by the Congressional Budget

¹ Long Term Care Community Coalition. Nursing Home Medicaid Funding: Separating Fact From Fiction (2021). Available at <https://nursinghome411.org/wp-content/uploads/2021/01/LTCCC-Policy-Brief-Medicaid-Funding-Facts-vs-Fiction.pdf>.

² H. Con. Res. 14, Tit. II, § 2001(b)(4), 119th Cong. (2025). Available at <https://www.congress.gov/bill/119th-congress/house-concurrent-resolution/14/text#:~:text=H.,Con.,fiscal%20years%202026%20through%202034>.

Office (CBO), a significant portion of these cuts would need to come from Medicaid.³ This reduction would have a devastating impact on access to and quality of both post-acute and long-term care, especially for those who rely on Medicaid for nursing home care and other essential services. Vulnerable populations, including low-income seniors, individuals with disabilities, and those in rural areas, would be at risk of losing access to the care they need to maintain their health and well-being.

It is worth noting that approximately 12.5 million Americans are jointly enrolled in Medicare and Medicaid. These individuals, the majority of whom are seniors, rely on Medicaid funding to access essential healthcare services.⁴ Proposed cuts to Medicaid would severely impact their ability to receive critical post-acute care, putting their health and well-being at significant risk and putting further strains on a system that, as we witnessed during the COVID-19 pandemic, faces persistent challenges.

III. Sufficient Nursing Home Staffing (Nursing and Non-nursing Staff)

Staffing levels are the most important indicator of a nursing home's quality and safety. Extensive research over the years has consistently shown that nursing homes with higher nursing staff levels have better quality, higher survey scores, and improved resident outcomes.⁵ Sufficient staffing is essential to ensure that nursing home residents receive appropriate post-acute care and that taxpayer funds – which pay for most nursing home care – are used efficiently.

Any reduction to Medicaid funding would undoubtedly result in a decrease in nurse staffing. The result would exacerbate the challenges that seniors and families across the country face when they turn to a nursing home for rehab or long-term care.

Inadequate staffing levels, particularly among registered nurses (RNs) and certified nursing assistants (CNAs), can severely impact the ability to address resident needs, leading to poor health outcomes and increased risks of complications such as falls, medication errors, and hospital readmissions. RNs serve a critical role in every nursing home. They are typically the only staff in the building capable of providing essential services such as infection control planning and management, resident assessment and care planning, and the identification and treatment of chronic and acute conditions. CNAs provide the majority of direct resident care, including necessary assistance with bathing, dressing, eating, and mobility. They play a critical role in monitoring residents' health, identifying changes in condition, and ensuring their comfort and dignity.

When facilities are understaffed, residents face delays in receiving medical care and assistance with basic needs. Unanswered call bells heighten the risk of adverse outcomes, such as

³ CBO, Letter from Philip L. Swagel, Director, to Rep. Brendan Boyle and Rep. Frank Pallone, Jr., Mandatory Spending under the Jurisdiction of the House Committee on Energy and Commerce (2025). Available at <https://www.cbo.gov/system/files/2025-03/61235-Boyle-Pallone.pdf>.

⁴ Peña, M et al., KFF, *A Profile of Medicare-Medicaid Enrollees (Dual Eligibles)* (2023). Available at <https://www.kff.org/medicare/issue-brief/a-profile-of-medicare-medicicaid-enrollees-dual-eligibles/>.

⁵ Long Term Care Community Coalition. LTCCC Comments to CMS on Minimum Staffing Standards (2023). Available at <https://nursinghome411.org/wp-content/uploads/2023/11/LTCCC-Comments-to-CMS-on-Minimum-Staffing-Proposal-11.06.23.pdf>.

avoidable pain, incontinence, and pressure ulcers. Inadequate nurse staffing also increases the likelihood of severe neglect and abuse. Additionally, low staffing endangers workers, raising the risk of injury and burnout. All of these consequences of low nurse staffing result in costs that ultimately burden American taxpayers.

In addition to nursing staff, crucial non-nursing staff would also face cuts if Medicaid funding was reduced. While much attention is given to nursing staff, non-nurse staff – such as the nursing home administrator, medical director, pharmacist, therapy staff, and recreational staff – are critical for ensuring appropriate clinical care and the overall well-being of residents. For example, the medical director is responsible for coordinating all aspects of residents' healthcare needs; the pharmacist is responsible for managing and monitoring medications to prevent errors or adverse effects; and therapy staff are necessary to maintain physical function, which is essential for recovery after acute health events.⁶ Housekeeping, dietary, and administrative staff also play essential roles in maintaining cleanliness, preparing nutritious meals, and ensuring safe and comfortable living environments. A clean and well-maintained environment is not just a matter of comfort but also a key factor in infection control and overall resident health. Inadequate non-nurse staffing places extra strain on nursing staff, diverting their time and attention away from essential caregiving duties.

Prioritizing appropriate funding allocations for staffing across all these roles is necessary to ensure the quality of both post-acute and long-term care in nursing homes and the efficient use of taxpayer funds.

IV. Conclusion

Medicaid is the financial foundation of the U.S. healthcare system, particularly for vulnerable populations in need of long-term and post-acute care. As the Subcommittee considers the future of post-acute care and the challenges that lie ahead, LTCCC urges it to recognize the essential role of Medicaid in ensuring access to quality post-acute care. Protecting and expanding Medicaid funding is crucial to maintaining care standards and ensuring that older adults and individuals with disabilities can continue to access the care they need to lead healthy and dignified lives.

Additionally, addressing staffing shortages and ensuring adequate staffing levels—both nursing and non-nursing personnel—are key to improving care quality and resident outcomes. LTCCC urges the Health Subcommittee to take action to protect Medicaid and invest in the future of post-acute care to provide a safer, more supportive environment for all older adults and nursing home residents.

We appreciate the opportunity to submit this written testimony. For questions or additional information, please contact Richard Mollot at richard@ltccc.org or 212-385-0355.

⁶ Long Term Care Community Coalition, *All Staff Matter: The Vital Roles of Non-Nursing Staff in Nursing Home Quality and Safety* (2024). Available at <https://nursinghome411.org/wp-content/uploads/2024/06/LTCCC-Brief-Non-Nurse-Staffing.pdf>.