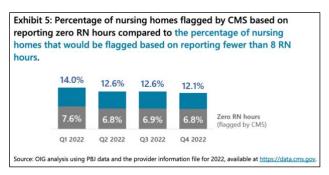
SENIOR CARE POLICY BRIEF

LONG TERM CARE COMMUNITY COALITION Advancing Quality, Dignity & Justice

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NEWSFLASH

A new report from the U.S. Department of Health and Human Services Office of Inspector General (OIG) found that the Centers for Medicare & Medicaid Services (CMS) is not doing enough to help states identify and address unsafe staffing in nursing homes. Although CMS shares staffing data with state survey agencies, it only alerts them when a facility reports zero registered nurse (RN) hours in a day –



ignoring facilities that fall below the federal requirement of having an RN on-site for at least 8 hours each day.

- ⇒ Additionally, OIG found that staffing ratings shared with states lack important context, such as whether the shortfall involves RNs, nurse aides, or both.
- ⇒ OIG urged CMS to better flag staffing issues and provide more meaningful data to support oversight, but CMS declined to fully adopt these recommendations.
- ⇒ Why this matters: Adequate RN coverage is directly tied to better care preventing falls, infections, and other serious incidents. Yet, chronic understaffing remains widespread and is rarely cited by state agencies. The OIG's findings speak to the critical need to strengthen oversight by improving the identification of inadequate staffing and the harm it causes to residents.
- ⇒ **Note**: LTCCC's latest data report (Q4 2024) found that the average nursing home is operating over 40% below expected RN staffing. Check your nursing home here.

FOLLOW THE MONEY

- The Michigan Elder Justice Initiative and the National Consumer Voice for Quality Long-Term Care
 <u>published a new report</u> revealing how some for-profit nursing home chains in Michigan are funneling
 millions of dollars into companies they own—while residents suffer from poor care, inadequate staffing,
 and unsafe conditions.
 - ⇒ From 2021 to 2023, four major chains paid over \$544 million to "related party" companies they control. These financial maneuvers make the facilities appear less profitable and may hide real earnings, all while allowing operators to claim they can't afford to hire more staff or improve care. In fact, the average staffing level in these chains was far below the state average, and well below levels recommended by experts. (See the chart on the right.)

