

SENIOR CARE POLICY BRIEF

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NEWSFLASH

- A [new analysis finds no evidence that nursing home staffing mandates lead to widespread facility closures](#), countering industry claims that stronger staffing standards would force providers out of business. Researchers reviewing state-level staffing requirements found that closures were primarily linked to factors such as declining occupancy, market conditions, or financial mismanagement – not staffing regulations. The findings suggest that enforceable staffing standards can improve resident care without destabilizing the long-term care sector.
 - ⇒ These findings debunk the industry’s longstanding argument against staffing standards and reinforce what the evidence increasingly shows: adequate staffing is achievable and fundamental to safe, dignified care for nursing home residents.

TROUBLED NURSING HOME CHAIN ANNOUNCES RECORD PROFITS

- The PACS Group — a rapidly expanding nursing home chain that has faced [serious scrutiny over billing and compliance issues](#) — recently announced [record financial results](#), including a 31% year-over-year revenue increase and \$1.34 billion in quarterly revenue. Meanwhile, [federal staffing data](#) show troubling care indicators across PACS facilities: **95% provide less nursing staff than expected to meet resident needs, with registered nurse staffing averaging a whopping 52% below expected levels.** The chain also shows significantly worse regulatory outcomes, with health citations 25% higher than the national average and an average of 48 substantiated complaints per facility (compared with a national average of 29) in the [Provider Database](#).

PACS Group – Corporate-Wide Average Quality Indicators

- ⇒ **Inspection Rating:** 2.9 stars (avg.)
- ⇒ **Staffing Rating:** 2.4 stars (avg.)
- ⇒ **RN Staffing:** 52% below expected (avg.)
- ⇒ **CNA Staffing:** 28% below expected (avg.)
- ⇒ **Total Nursing:** 23% below expected (avg.)
- ⇒ **RN & Total Nursing Turnover:** 48% (avg.)
- ⇒ **Citations:** 13.35 vs. 10 nat’l. avg.
- ⇒ **Substantiated Complaints:** 48 vs. 29 national avg. (3-year.)

- ⇒ The contrast between record profits and widespread understaffing raises serious questions about both the stewardship of taxpayer funds and the company’s ability to provide care that meets basic regulatory standards.

\$110 MILLION VERDICT RAISES QUESTIONS ABOUT INVESTOR-OWNED CARE

- A private equity-backed asset manager has been ordered to pay \$110 million in a [wrongful death judgment](#) related to an assisted living resident’s death, one of the largest verdicts of its kind in the sector. The case centered on allegations that inadequate care and oversight contributed to the resident’s death, drawing renewed attention to the role of corporate ownership structures in senior care operations. The ruling highlights growing legal and public scrutiny of investor-owned long-term care providers.
 - ⇒ Large verdicts tied to care failures underscore concerns that financial management strategies and profit pressures in investor-owned facilities can conflict with resident safety and accountability.