



Centers for Medicare & Medicaid Services Staffing Study to Inform Minimum Staffing Requirements for Nursing Homes

In February 2022, the Biden Administration announced a plan for an extensive nursing home initiative to be implemented by The Centers for Medicare and Medicaid Services (CMS), including implementing a minimum staffing requirement. No funding is provided for additional staff required by nursing homes. Subsequently, in August 2022, CMS launched a new staffing study to inform their development of the minimum staffing standard, which is expected to be issued in Spring 2023. ***Our summary of the study process and design is below.***

As part of our efforts to ensure that changes to the skilled nursing facility regulatory landscape truly benefit older adults, Lutheran Services in America met with CMS Administrator Chiquita Brooks-LaSure outlining our strong concerns that this initiative will mean fewer older adults will be able to access the care that they need and closure of nursing homes. We also submitted [detailed comments](#) to the agency raising the same concerns and will continue our efforts to ensure the voice of our national network is heard throughout this process by submitting further comments once the minimum staffing standard is issued.

We invite you and your networks to [join us in providing feedback](#) to Administrator Brooks-LaSure and Members of Congress on this issue.

STUDY SUMMARY

The study seeks to help identify a minimum staffing level, which would include RN, LPNs/LVNs, and CNAs, that will establish a threshold below which “residents would be at substantially increased risk of not receiving the safe and quality care they deserve.” Because the study is on an accelerated timeline, it seeks to build on, not replace, previous studies.

The staffing study is comprised of four main parts:

- **Literature review** to summarize the evidence of the relationship between minimum staffing in nursing homes and the safety and quality of care, as well as clarify the relative strengths and weaknesses of the available literature.
- **Site visits to nursing homes** and related analyses
 - Researchers are conducting site visits to 75 nursing homes throughout the country, 50 initial visits and 25 visits to validate the initial findings.
 - Nursing homes were selected in 15 states (CA, CO, FL, IL, MA, MD, MO, NC, NY, OH, PA, TX, VA, WA, and WY), using a process to ensure national representation and a cross-section of size, ownership type, geographic location, Medicaid population, and Five-Star Quality Rating System staffing and overall ratings.
 - Onsite interviews (with leadership, direct care staff and residents and their family members) and surveys will be conducted to better understand the

relationship between staffing levels, staffing mix and resident outcomes and experiences.

- Additionally, observational data will be collected about time spent on care provision, including differentiating it from time spent on administrative duties. These data will enable the development of a simulation model to examine the impact of different staffing levels and patient acuity levels on the quality and timeliness of care.
- Research questions will address not only what level of staffing will be recommended, but also the impact on quality of care, any barriers to implementation, and any potential unintended consequences of imposing minimum staffing requirements.
- **Quantitative analyses** of staffing levels, examining trends in nursing home staffing from 2018-2021 and identifying specific factors that are related to staffing levels. This work will use secondary data, including Medicare Payroll-based Journal (PBJ) data, Minimum Data Set (MDS), and Medicare claims.
- **Cost analyses** to estimate the cost to nursing homes that would be associated with meeting the new staffing requirement, such as increases in staffing levels or changes to the mix of staff.