



From: [Natalie D. Ferrebee](#)
To: [DH, LTCRegs](#)
Cc: advocacy@phca.org
Subject: [External] Re: Rulemaking 10-221 (Long-Term Care Facilities, Proposed Rulemaking 1)
Date: Wednesday, August 18, 2021 4:15:55 PM

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August 16, 2021

Department of Health
625 Forster Street
Harrisburg, PA 17120
Attn: Lori Gutierrez, Deputy Director
Office of Policy

Re: Rulemaking 10-221 (Long-Term Care Facilities, Proposed Rulemaking 1)

To Whom it May Concern,

Please accept this letter of comment on the recently proposed rule, "Department of Health, Title 28. Health and Safety, Part IV. Health Facilities, Subpart C. Long Term Care Facilities, 28 Pa. Code §§201.1-201.3: 211.12(i), Long Term Care Nursing Facilities".

This letter is being sent on behalf of the residents we serve and the direct care staff who work at Sava SeniorCare, the parent organization of Broomall Nursing and Rehabilitation Center, North Hills Health and Rehabilitation Center and West Hills Health and Rehabilitation Center. As the Director of Payor Relations, I oversee 3 nursing homes operating across the Commonwealth and 57 nursing homes in the eastern United States where we operate. Collectively, these PA SNF facilities are licensed for 500+ beds, employ hundreds of employees and serve 470 residents at any given time. Our organization is committed to providing high quality care and prioritizing the needs of the residents we serve each and every day.

After reviewing your proposed regulation, we have concerns regarding the mandatory increase of the minimum number of hours of general nursing care from 2.7 to 4.1 hours for each resident, which excludes other direct care provided by essential caregivers.

We have experienced staffing challenges in all 3 of our Pennsylvania skilled nursing facilities due to the state and national RN, LPN and CNA shortage. Even prior to the pandemic, our industry has seen staffing challenges worsen for years with a decreased work force. As an organization, we have employed several initiatives to address our continued staffing challenges to recruit and retain qualified, licensed caregivers, but consistently struggle to find enough candidates to fill the vacancies left by the worsening state and national shortage of licensed nurses, RNs. This shortage was being experienced well before these and other licensed healthcare professionals, including therapists, decided to leave the industry after the past 18 months of working under the pressure, stress and

duress of providing care in a skilled nursing facility during a global pandemic, in the hardest hit industry and the hardest hit population in terms of mortality.. .

Although we have implemented employee referral bonus programs, sign on bonuses, retention bonuses, increased shift differential, increased wages, a recent improvement to our health plan to provide better access to providers nationally and an increase in hourly wages across the company for our employees, we have not been able to fill and retain licensed clinical staff, including in key leadership positions. We continue to operate with inadequate reimbursement rates by Medicaid and Managed Care Organizations that create funding challenges, reliance on agency and other agency staffing issues which has cost our company alone in excess of \$4 million in July, competition with other workforce markets like hospitals, clinics, etc where schedules tend to be more attractive.

We have staff in all of our centers who participate in the direct care of our patients and residents daily, such as our physical, occupational and speech therapists, therapy assistants, salaried clinical staff like wound care nurses, unit supervisors, activities directors/coordinators and assistants, but they do not count in the overall staffing numbers. Even if one of these staff members were to provide direct care to patients/residents, because they are salaried, we are unable to count them in the direct care staffing ratio.

At a time of unprecedented stress upon the nursing home industry, Pennsylvania's nursing home Medicaid reimbursement hovering around \$8.00 per hour per resident for custodial care, Pennsylvania lawmakers unrealistically believe providers will be able to increase wages and staffing levels when the workforce numbers are moving in the opposite direction. Pennsylvania lawmakers made policy changes without including the actual providers who provide the care who will be affected by the policy, especially following the most challenging time in the history of our industry.

Thank you for your time in reviewing and considering our comments. We are hopeful that the Department of Health will address our concerns and work with providers and staff to ensure continued access to long-term care services in Pennsylvania. We are hopeful that the Department of Health will amend the provisions contained in §211.12(i) in a manner that will address the concerns raised in our comments.

Sincerely,
Natalie Ferrebee