

**RECEIVED**  
Aug 20 2021  
Independent Regulatory  
Review Commission



August 19, 2021

Lori Gutierrez, Deputy Director  
Office of Policy  
625 Forster Street, Room 814  
Health and Welfare Building  
Harrisburg, PA 17120

Dear Lori Gutierrez,

I would like to voice my concerns over the proposed changes to require nursing homes to increase the requirements for staff from 2.7 Nursing Hours Per Patient Day (NHPPD) to 4.1 NHPPD on each shift.

As a non-profit long-term care provider, our standards for care have guided us to operate at a level of approximately 3.5 NHPPD. The 4.1 NHPPD on each shift is not only an unreasonable increase, this will not necessarily equate to quality care and is not affordable.

The COVID-19 pandemic has provided us with numerous challenges to our operations of caring for the most vulnerable to COVID-19. There are many circumstances beyond the control of long-term care providers, including substantial challenges with personal protective equipment, availability of testing, and staffing hurdles. The Department of Health doesn't seem to understand the realities of the current labor environment and the ability for all nursing (and Healthcare) providers to hire sufficient staffing. At this time, we've had to limit our admissions to our facilities due to the lack of being able to find adequate staffing. Thus, this is creating a barrier to care and in essence is keeping residents in the more expensive hospital settings.

The proposed legislation also should include expanding the DOH definition of direct care staff to meet the Centers for Medicare and Medicaid Services (CMS) definition. This definition should include therapists, people that assist in feeding our residents, and others that provide care to our residents.

The proposed legislation leaves it uncertain as to when it will be effective. This would certainly change our method of operations. We recommend at least a year's notice to allow us to be able to hire adequate staffing or to allow us time to limit or reduce our bed complement. Sadly, this means taking beds out of our census and creates another barrier to care for the growing elderly population of the State of Pennsylvania which is cited directly from the proposed regulations.

The largest concern to the proposed legislation changes is the ability for Nursing Homes to be able to financially afford to operate at this level. **Nursing facilities have failed to receive an increase in the Medical Assistance budget in 6 of the last 8 years.** At this writing our facility is underfunded in excess of \$88.00 per patient day for Medical Assistance residents. Naturally, this staffing level will lead to increased costs, resulting in higher per day charges, leading to faster spenddown of assets. Thus, increasing the need for the Medical Assistance program. The Department feels this will not have an effect on private citizens, yet this will certainly increase the cost of care.

With this legislation, our fear as a provider, is additional nursing facilities will close or reduce the number of available beds. This will lead to more hospitalizations. Most recently we have seen in our area the closing of Charles Morris nursing facility and the sale of Abramson Center and St. Mary's East facility. Sadly, the outcome will be more decisions of this nature.

Thank you for your consideration in modifying this proposed legislation.

Sincerely,  
*Amy Learn*  
Amy Learn

Director of Dining  
Brevillier Village Foundation

Ball Pavilion • Barnabas Court • Conrad House • 5416 East Lake Rd • Harrisburg, PA 17111-1496  
Phone: (814) 899-8600 • Fax: (814) 898-1910 • Website: www.brevillier.org



Does not discriminate on the basis of handicap status in admission, access or employment.



Housing and Health Care Community

August 19, 2021

Lori Gutierrez, Deputy Director  
Office of Policy  
625 Forster Street, Room 814  
Health and Welfare Building  
Harrisburg, PA 17120

Dear Lori Gutierrez,

I would like to voice my concerns over the proposed changes to require nursing homes to increase the requirements for staff from 2.7 Nursing Hours Per Patient Day (NHPPD) to 4.1 NHPPD on each shift.

As a non-profit long-term care provider, our standards for care have guided us to operate at a level of approximately 3.5 NHPPD. The 4.1 NHPPD on each shift is not only an unreasonable increase, this will not necessarily equate to quality care and is not affordable.

The COVID-19 pandemic has provided us with numerous challenges to our operations of caring for the most vulnerable to COVID-19. There are many circumstances beyond the control of long-term care providers, including substantial challenges with personal protective equipment, availability of testing, and staffing hurdles. The Department of Health doesn't seem to understand the realities of the current labor environment and the ability for all nursing (and Healthcare) providers to hire sufficient staffing. At this time, we've had to limit our admissions to our facilities due to the lack of being able to find adequate staffing. Thus, this is creating a barrier to care and in essence is keeping residents in the more expensive hospital settings.


The proposed legislation also should include expanding the DOH definition of direct care staff to meet the Centers for Medicare and Medicaid Services (CMS) definition. This definition should include therapists, people that assist in feeding our residents, and others that provide care to our residents.

The proposed legislation leaves it uncertain as to when it will be effective. This would certainly change our method of operations. We recommend at least a year's notice to allow us to be able to hire adequate staffing or to allow us time to limit or reduce our bed complement. Sadly, this means taking beds out of our census and creates another barrier to care for the growing elderly population of the State of Pennsylvania which is cited directly from the proposed regulations.

The largest concern to the proposed legislation changes is the ability for Nursing Homes to be able to financially afford to operate at this level. **Nursing facilities have failed to receive an increase in the Medical Assistance budget in 6 of the last 8 years.** At this writing our facility is underfunded in excess of \$88.00 per patient day for Medical Assistance residents. Naturally, this staffing level will lead to increased costs, resulting in higher per day charges, leading to faster spenddown of assets. Thus, increasing the need for the Medical Assistance program. The Department feels this will not have an effect on private citizens, yet this will certainly increase the cost of care.

With this legislation, our fear as a provider, is additional nursing facilities will close or reduce the number of available beds. This will lead to more hospitalizations. Most recently we have seen in our area the closing of Charles Morris nursing facility and the sale of Abramson Center and St. Mary's East facility. Sadly, the outcome will be more decisions of this nature.

Thank you for your consideration in modifying this proposed legislation.

Sincerely,  


Amy Learn  
Director of Dining  
Brevillier Village Foundation

Ball Pavilion • Barnabas Court • Conrad House • 5416 East Lake Rd • Harrisburg, PA 17111-1496  
Phone: (814) 899-8600 • Fax: (814) 898-1910 • Website: www.brevillier.org



Does not discriminate on the basis of handicap status in admission, access or employment. 