



PRESBYTERIAN
SENIOR LIVING
 Green Ridge Village



August 26, 2021
 Lori Gutierrez, Deputy Director
 Office of Policy
 625 Forster Street
 Room 814
 Health and Welfare Building
 Harrisburg, PA 17120

Ms. Gutierrez:

I am writing you to share my concerns regarding the proposed regulations to require nursing homes to increase the requirements for staffing from 2.7 Nursing Hours Per Patient Day (NHPPD) to 4.1 NHPPD on each shift.

A particular NHPPD does not equal quality. Each nursing home has unique qualities such as acuity of residents, training, competency and tenure of staff, and characteristics of the building.

A standard NHPPD does not account for the uniqueness of each community – the acuity of residents, training, competency and tenure of staff and the characteristics of our community

For consistency with federal regulation, the state could consider allowing for acuity as determined by the MDS assessments and care plans to drive staffing.

Staffing Crisis:

There seems to be a disconnect with the Department of Health understanding the reality of the current, and perhaps worst, staffing crisis of our time. Our community, like many others in our area have been seeking qualified team members to join our caring team of nurses for the past year and have had much difficulty in our recruiting efforts. Working in a nursing facility is not easy work, it is both a physical and mental “job” that takes the right person to excel in this field. I do not see any way possible to meet this requirement of a 4.1 NHPPD on each shift. Our budgeted NHPPD level already exceeds the 2.7 minimum.

Demands of a 4.1 NHPPD may stifle innovation. The federal government chose not to mandate a minimum staffing hour PPD. One of the reasons given was that they did not want to stifle innovation.

If any increase of NHPPD becomes finalized, a window to ramp up to this requirement will be necessary. The proposed regulations state that the NHPPD will become effective on the date the publication as final. I would recommend a window of at least one year from the publication on the final regulation for compliance.

Please consider other team members be counted in the NHPPD, Nurses and nurse aides are not the only staff that provide care. Therapists, life enrichment staff, social workers etc. provide care to all residents in a nursing home. Not to mention the



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housekeepers, maintenance and dining staff who provide friendship and daily contact with residents as they perform their duties as part of the care team. These team members are not considered in the NHPPD.

Financial concerns:

Nursing Facilities are already significantly underfunded and have not seen a Medical Assistance (MA) rate increase in seven years. While DHS has made some projections of costs, there is no guarantee that these funds will be provided or that increased payments will be made to Nursing Facilities by the Community Health Choices Managed Care Organizations. Additionally, there is no recognition of the need to raise private pay rates hence increasing the numbers of residents that will spend down assets thus increasing our Medical Assistance population.

Private Pay Facilities –private pay rates might need to be raised in order to provide the staffing called for in this proposal.

General Concerns:

Nursing Facilities have been closing beds, selling to out-of-state providers with track records of providing bad care, or closing buildings. Providers that are not able to staff at 4.1 may be less likely to serve residents who are difficult to care for; who is going to care for these seniors who need our care?

Our community has limited admissions because of staffing challenges, even prior to the pandemic we were seeing a decrease in the number of people who wanted to work in a nursing facility.

I understand the regulations will be promulgated in five packages with the NHPPD being the first. By releasing these in 5 portions, may lead to confusion by providers, regulators, and the general public. The full regulatory package should have to go through the full review process, allowing the 30 day comment period for review of the complete package.

Just to note the State of New York does not have a minimum level PPD, West Virginia staffs at 2.25, Ohio and New Jersey 2.5, Maryland 3.0 and Delaware at 3.67.

Thank you for reading my concerns and hopefully we can work together to come to an amicable solution to the NHPPD for Pennsylvania.

Hope Lambert, NHA
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