

IN THE NEWS

News for LTC Professionals
in 100 Words-or-Less

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THEY SAID IT

"For years, our sector has been left out of broader health reform conversations and this validates our role in the healthcare continuum" Joe Stier, CEO Signature HealthCARE on the Big Beautiful Bill signed into law last week

"We've always just taken for granted that routine child immunizations and other vaccines would be readily available and that they would be supported by the public health system" CIDRAP director Michael Osterholm on forming advisory vaccine committee following HHS Sec. Kennedy's firing of federal advisory committee

"We are facing the collision of two policies here that could further erode staffing in nursing homes and present health outcome challenges" Eric Roberts, associate professor of internal medicine at the University of Pennsylvania commenting on proposed Medicaid cuts and the Trump immigration policy

SCOTUS Gives OK to Federal Workforce Reduction

The Supreme Court has cleared the way for President Donald Trump's plans to downsize the federal workforce, including HHS, despite warnings that critical government services will be lost and hundreds of thousands of federal employees will be out of their jobs.

The justices overrode lower court orders that temporarily froze the cuts, which have been led by the Department of Government Efficiency.

The court said in an unsigned order that no specific cuts were in front of the justices, only an executive order issued by Trump and an administration directive for agencies to undertake job reductions.

PBS, 07/08/2025

Genesis Healthcare Files Bankruptcy – Owes Billions

Genesis HealthCare, one of the nation's largest skilled nursing chains, filed for Chapter 11 bankruptcy on Wednesday, saying it needed to address its "legacy debt structure."

The move includes a proposed transaction that would result in a current affiliate acquiring the company's operations.

Genesis operates 218 facilities across 19 states, according to federal regulators, though paperwork submitted in the US Bankruptcy Court for the Northern District of Texas Dallas Division lists 298 affiliates including holding companies, ancillary businesses and insurance vehicles.

The company told the court it owes between \$1 billion and \$10 billion in debts.

McKnight's, 07/10/2025

They Gotta Be in the Door To Be Reportable PBJ

Updates to Payroll Based Journal reporting methods issued last week by the Centers for Medicare & Medicaid Services make it more important than ever that nursing homes not accidentally report hours worked by staff or consultants while off-site.

New language added to the Long-Term Care Facility Policy Manual explicitly states that for nursing staff, "all nursing hours must be worked onsite to be reported in PBJ."

CMS said "Off-site hours are not reportable, even for nursing positions with administrative duties. All nursing staff must be available to provide direct care to residents."

CMS, 0/03/2025

Changes to Five-Star A Dealmaker's Delight

Both nursing home buyers and sellers may be rewarded by recently announced changes to the Care Compare nursing home ratings website.

The updates should result in more accurate and faster dealmaking.

CMS recently said it would remove third-cycle health inspections from providers' ratings, making them more timely and more reflective of the current staff's work.

The agency also announced that it would post survey deficiencies immediately rather than waiting 90 days under the current policy.

McKnight's, 06/25/2025

RFK Jr.'s Vaccine Policy Sparks a Lawsuit

In late May, Health Secretary Robert F. Kennedy Jr. removed COVID-19 vaccines from the recommendation list for healthy children and pregnant women.

A handful of leading medical organizations are suing Kennedy over recent changes to federal COVID-19 vaccine recommendations — part of what they characterize as a larger effort to undermine trust in vaccines among the American public.

The lawsuit centers on Kennedy's decision to remove pregnant women and healthy children from the COVID-19 vaccine schedule

The groups behind the complaint are the American Academy of Pediatrics, the American College of Physicians and the American Public Health Association.

NPR, 07/08/2025

Signature CEO Bullish On the 'Big Beautiful Bill'

Although most providers are apprehensive, a minority point to the OBBB with optimism, saying aspects of it should give providers reasons for cheer.

Joe Steir, CEO of Signature HealthCARE, for example, said provisions addressing Medicaid provider taxes and continuity of care are a significant win for providers.

LTC providers have criticized the budget bill and its \$1 trillion Medicaid Cuts over a decade.

But Steir chooses to look for positives, despite some admittedly sizable negatives. He said he is most concerned about the budget's effects on the company's rural locations and noted that internal assessments are ongoing.

McKnight's, 07/08/2025

IN THE TRENCHES – COVID-19 & Other Outbreaks in the U.S. and the World

THE WORLD: Given the number of times this has happened already, it should come as little surprise that we're now faced with yet another new subvariant of SARS-CoV-2, the virus responsible for COVID. This new subvariant is known as XFG (nicknamed "Stratus") and the World Health Organization (WHO) designated it a "variant under monitoring" in late June. XFG is a subvariant of Omicron, of which there are now more than 1,000 (*The Conversation*).

AMERICA: Increasing Community Access to Testing, Treatment and Response (ICATT), a federal program, continues to provide free COVID-19 testing to individuals without health insurance. As of May 27, according to the CDC, more than 19,000 locations across the country offer free testing. To find a location near you that offers free testing, visit testinglocator.cdc.gov/Search (*USA Today*).

THE WORLD: The Gates Foundation said it will commit \$1.6 billion over the next 5 years to support Gavi, the Vaccine Alliance. The announcement came a day ahead of a summit in Belgium that aimed to raise at least \$9 billion in funding for Gavi, which helps provide and distribute vaccines to low- and middle-income countries. Since its launch in 2000, Gavi has vaccinated more than 1.1 billion children across 78 countries, preventing nearly 19 million deaths from diseases like measles and pneumonia (*CIDRAP*).

AMERICA: The CDC has ended its emergency response for bird flu as the outbreak that sickened dozens of people, spread to cattle and drove up egg prices has abated. The emergency designation ended this past week, according to a person familiar with the matter who wasn't authorized to speak publicly about it (*Bloomberg*).

ETHIOPIA: Measles is endemic in Ethiopia, with cases reported every year. Between August 2021 and May 2023, 16 814 laboratory-confirmed measles cases and 182 deaths – with a Case Fatality Ratio (CFR) of 1.1% - have been reported nationally. From 2021, the annual number of confirmed measles cases has

increased significantly, from 1953 in 2021 to 9291(>375%) in 2022 and 6933 in 2023 as of 1 May. Thus, there was, an almost five-fold increase in confirmed measles cases between 2021 and 2022 (*WHO*).

THE WORLD: Invivyd recently announced its phase 3 CANOPY trial evaluating monoclonal antibody, *pemivibart* (*Pemgarda*) against COVID-19. *Pemivibart* showed a 84% relative risk reduction of symptomatic COVID-19 vs. placebo during the 6-month on-drug period, and 74% relative risk reduction sustained through a 6-month off-drug follow-up, highlighting durable protection even at low residual drug levels (*Clinical Infectious Diseases*).

AMERICA: A major new study examining the 2023-2024 COVID-19 vaccines shows moderate protection that works best in the first few months but weakens considerably over time. The research followed nearly 460,000 hospital and emergency room visits across six U.S. health systems. Although the results varied over time, the vaccines demonstrated 24% effectiveness against COVID-19-related emergency department visits, 29% against hospitalizations and 48% against critical illness (*JAMA Network Open*).

UTAH: Republican lawmakers – including the speaker of the Utah House – stood with about 60 demonstrators at the federal courthouse in Salt Lake City Monday, just before a trial was to begin for plastic surgeon Dr. Michael Kirk Moore Jr. charged with running a COVID-19 fraud scheme. The demonstrators were there in support of Moore who is accused of destroying \$28,000 in COVID-19 vaccines (*The Salt Lake Tribune*).

THE WORLD: Researchers conducted a retrospective study to compare mortality and hospitalization risks from COVID-19 during the Omicron era between individuals with comorbidities and those without. Investigators concluded that individuals with comorbidities including cerebrovascular disease, chronic obstructive pulmonary disease, diabetes, respiratory diseases, heart disease, and heart failure experienced higher risks of

severe COVID-19 outcomes (*BMC Infectious Disease*).

AMERICA: From 2021 to 2023, the number of teens in the U.S. getting metabolic and bariatric surgery increased nearly 15%. Even after GLP-1 medications were FDA-approved as an obesity treatment for teens in December 2022, the number of surgeries increased among teens in 2023. That same year, surgeries decreased among adults. The increase in surgeries was driven largely by Black and Hispanic adolescents (*Journal of Pediatrics*).

AMERICA: The United States has reached its highest annual measles case tally in 33 years, hitting at least 1,277 confirmed cases across 38 states and the District of Columbia. The milestone marks a public health reversal in defeating a highly contagious, vaccine-preventable disease as the anti-vaccine movement gains strength (*The Washington Post*).

MASSACHUSETTS: Unlike other kids in Massachusetts, students living in one Boston suburb won't be able to go back to school next month unless they've had their chickenpox and measles shots, as well as other routine childhood vaccinations. "Any student not fully vaccinated without exemption will be excluded from school," Newton Public Schools Superintendent Anna Nolin wrote in a memo last month. The directive followed a chickenpox outbreak among students, as well as rising threats of measles (*NBC News*).

SIERRA LEONE: After emerging as an mpox hot spot giving the virus a worrisome foothold in West Africa, cases have declined in Sierra Leone over the past 6 weeks. A top official from Africa CDC said the news is part of an overall encouraging trend in Africa's outbreaks (*Africa CDC news release*).

COVID-19, 07/13/2025

World Total Cases
778,252,838

World Total Deaths
7,097,851

U.S. Total Deaths
1,225,017

World Health Organization

OBBB M'caid Cuts Could Cause Massive SNF Closures

The spending plan would lead to almost \$1 trillion in Medicaid cuts over a decade, including provider tax reductions starting in 2028.

The Congressional Budget Office found that would lead states to freeze and likely reduce reimbursement to providers of all types — even though nursing homes and intermediate care facilities would be excluded from new, lower caps on the assessments.

And a new analysis named 579 nursing homes that will be at “elevated risk” of closure when the proposed Medicaid cuts become law.

McKnight's, 06/30/2025

VA Layoffs Not as Large As Previously Announced

The Department of Veterans Affairs said it will no longer conduct a large reduction in workforce, unlike several other federal agencies that were forced to make mass layoffs because of the administration's U.S. DOGE Service.

The VA said it is on pace to reduce its total staff by nearly 30,000 employees by the end of this fiscal year, not the 83,000 initially pushed by the Trump administration.

The announcement marks a significant reversal for the Trump administration. In March VA Secretary Douglas A. Collins said in remarks shared to social media that the cuts were tough but necessary.

The Washington Post, 07/08/2025

Moderate Raises for CCRC Execs This Year

Leaders at CCRCs took home more moderate raises this year, with an average of 3.63% for top-level executives and a 3.47% for those in lesser management roles.

The average salary for an executive director or campus CEO now comes in at \$222,341, with an average of \$164,738 going to associate directors or chief operating officers.

Nursing home administrators in CCRC or life plan communities averaged a salary of \$143,734.

The top positions also typically earned substantial retention bonuses, with an average of 17% of salary paid out to CEOs, an extra 13.2% going to administrators, and 11.3% for COOs.

The Hospital & Healthcare Compensation Service's 2025-2026 CCRC Salary & Benefits Report

DONs, Nurses, CNAs Wages Up but Down in CCRCs

Pay for Directors of Nursing at continuing care retirement communities jumped 4.07% in 2025, even as salaries and hourly wages moderated overall across most campuses.

DONs in CCRCs had seen pay increases averaging 3.53% last year.

DON's averaged a \$124,960 salary this year, about \$4500 more than last year.

For 2025, RN salaries increased by 3.59% (down from 5.28% in 2024); while licensed practical nurses received an average of 3.43% more (down from 5.04%).

CNAs received an average hourly increase of 3.96% this year (down from a 5.03% increase in 2024).

The Hospital & Healthcare Compensation Service's 2025-2026 CCRC Salary & Benefits Report

Court Blocks \$12.1M Owed to Management Firm

A management company - Sovereign Healthcare - that won a \$12.1 million judgment against a nursing home chain it once served - Mariner Healthcare Management - has waited too long to try again to collect.

Sovereign sued Mariner in 2005, alleging Mariner verbally agreed to prematurely end a five-year contract for administrative services.

But Mariner then refused to terminate the deal three years ahead of schedule.

in the latest twist, the Georgia Court of Appeals ruled against Mariner, saying the provider had waited long enough that the state's four-year statute of limitations on fraud allegations had kicked in.

McKnight's, 06/25/2025

ONE COLUMN

DOJ 'Takedown' Nets Two LTC Chains & 324 Bad Guys

Two nursing home chains have agreed to settle previously unannounced cases as part of a Justice Department sweep that led to criminal charges against 324 healthcare-involved defendants nationwide.

Federal officials announced the 2025 National Health Care Fraud Takedown largely highlighting cases involving individuals charged in schemes representing more than \$14.6 billion in intended losses.

In one case DOJ officials said Centers Health Care agreed to pay more than \$6 million to resolve allegations that 44 skilled nursing facilities in New York, Rhode Island, Kansas and Missouri submitted Medicare cost reports that “contained false statements or omitted material information regarding their transactions with related organizations.”

In a second notable case, the Feds reached a \$4.5 million resolution of a False Claims Act case involving Villa Financial Services LLC, Villa Olympia Investment LLC, and six southeast Michigan Villa nursing homes.

The payment will put an end to an investigation into a whistleblower's claims that Villa and the six involved facilities were “systematically failing to provide services to nursing home residents.

The Department of Justice claimed that the government had seized more than \$245 million in cash, luxury vehicles, cryptocurrency and other assets as part of the coordinated enforcement efforts against the hundreds of defendants.

Many of the healthcare fraud cases involved individuals or networks with international ties.

In addition to charges against nursing homes, the fraud initiative's case descriptions include pending cases against several individuals who worked in nursing homes.

in connection with approximately \$1.1 billion in fraudulent insurance claims related to the use of amniotic wound allografts.

DOJ news Release, 06/30/2025

MedPAC Says I-SNPs Drives Care Improvements

A program that seems to be driving improvements is the Institutional-Special Needs Plan offered through Medicare Advantage, which now covers 12% of nursing home patients on Medicare.

The plans typically increase the use of physicians and nurse practitioners in nursing homes to deliver more preventative care, monitor more fully for changes and reduce the number of members who need acute care.

"Available evidence suggests that I-SNPs reduce in-patient care use and emergency department visits," said MedPac Executive Director Paul Masi, and that they perform better on some quality measures."

McKnight's, 06/12/2025

Half of Kansas Surveyor Positions Vacant

In recent years, the Kansas Department of Aging and Disability Services has received between 7,000 and 9,000 annual complaints of abuse, neglect and exploitation at federally and state-licensed adult care homes.

A team of about 61 surveyors is supposed to investigate those claims — but only 29 of the positions are currently filled.

Between 2003 and 2023, surveyor vacancy rates in Kansas swelled from 4% to 51%, according to a report from the U.S. Senate Special Committee on Aging — placing the state's regulatory team among the most understaffed in the country.

Kansas News Service, 06/25/2025

Democrats Introduce A Medicare 'Part E' Bill

Democrats in the House and Senate have introduced new legislation that would establish a "Part E" for Medicare, which would allow people to opt into the program.

Under the so-called Choose Medicare Act, a potential Medicare Part E would have the program compete with private insurance.

A companion bill was introduced in the Senate.

Medicare Part E as outlined in the bill would sustain itself through premiums, with enrollees able to sign up through any state or federal insurance marketplace. Any existing subsidies available for the Affordable Care Act (ACA) plans would be applicable to Part E coverage.

Fierce Healthcare, 06/16/2025

Med. Dirs. Optimistic Re: Feds Checking on Them

The Office of Inspector General has announced it will take a magnifying glass to how nursing homes employ and pay medical directors, as well as keep track of the work performed.

The added scrutiny — and attempts to ensure greater transparency — is something post-acute care physicians say they welcome, as long as the presentation of findings is done appropriately.

The announced Health and Human Services OIG effort is an outgrowth of previous studies that revealed as many as 36% of US nursing homes didn't report having any medical director hours.

McKnight's, 06/17/2025

Healthcare Cuts May Cripple California LTC

The California Association of Health Facilities which represents 900 skilled nursing facilities and 400 intermediate care facilities for the developmentally disabled, has issued a strong warning.

The proposed budget elimination of the Workforce and Quality Incentive Program (WQIP), a critical funding stream, could result in staffing shortages, reduced admissions, and even facility closures statewide.

Most skilled nursing services in California are funded exclusively through Medi-Cal and Medicare, with little support from commercial health insurance.

If the proposed cuts go through, Medi-Cal beneficiaries in rural areas could be forced to seek care far from home, separating them from family and friends

Newsbreak, 05/15/2025

Briefly in the News

The big bill is now the big law, and the healthcare industry is scrambling to work out how to cope with more than \$1 trillion in cuts and a tangle of new red tape. In the immediate aftermath of President Donald Trump enacting his "One Big Beautiful Bill" providers and healthcare system experts said there are three main areas of focus for the health sector: learning the new law, planning to deal with its worst impacts and doing everything possible to get Congress to mitigate the damage (*Modern Healthcare*).

Humana, the second-biggest Medicare insurer, has told congressional staffers that it will support moves that would curtail billing practices worth billions in extra payments to the industry. The stance by a leader in the Medicare Advantage business—in which insurers offer privately run Medicare plans—represents an important development in a growing debate over how the companies are paid in the \$460 billion program (*The Wall Street Journal*).

Low-income patients are less likely to see their insurance claim denials reversed, researchers from the University of Massachusetts Amherst and the University of Toronto found. The new report analyzed Affordable Care Act marketplace and employer-sponsored insurance claims to find disparities between income, race, education and other demographical features. (*Health Affairs*).

New research on Medicare Advantage claims raises concerns that lost revenue from denials could affect providers' administrative costs and may discourage them from treating patients from groups that face higher denial rates. The study by Harvard University researchers found that of 270 million Medicare Advantage claims from 2019 of the 17% of initial claims that were denied, 57% of those were later overturned (*Modern Healthcare*).

In a new, nationally representative health survey only about half (49%) of U.S. adults know that women should start getting mammograms at age 40 while 21% said age 30, and 11% weren't sure. The rest chose either age 30 or 50 (*Annenberg Public Policy Center*).