GREATER NEW YORK HOSPITAL ASSOCIATION

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Dear members of the New York Congressional Delegation:

GNYHA, which represents more than 60 not-for-profit and public nursing facilities in the New York metropolitan area and beyond, writes to highlight major concerns regarding the Centers for Medicare & Medicaid Services (CMS) proposed rule (CMS-3442-P) that includes the establishment of minimum nurse staffing requirements and standards for nursing homes. GNYHA requests that the New York delegation urge CMS to delay any implementation of the proposed rule until the Federal government can further analyze the impact of existing State minimum staffing requirements and more accurately measure the connection between staffing and nursing home quality.

This proposal would impose additional requirements on New York nursing facilities that are already subject to a recently enacted New York State law imposing minimum staffing requirements. While New York appropriated \$187 million in one-time funding for nursing facilities to help comply with the new staffing requirements, the funding has not been fully allocated and New York nursing facilities have experienced challenges when implementing the new staffing requirements, including struggling to recruit and retain qualified staff to comply and pay the additional staff's rising wages and salaries.

The Federal proposal is an unfunded mandate on a financially distressed community of providers, and currently, at least three-quarters of GNYHA members would be noncompliant with the Federal proposal. New York's nursing facilities already struggle to financially survive experiencing a Medicaid payment shortfall that has persisted for over a decade, with Medicaid only covering about 70% of the cost, causing a significant number of not-for-profit closings. For some members, the cost to hire additional staff to meet the Federal proposal would exceed \$1.75 million if they could find those staff.

In addition to our longstanding opposition to one-size-fits-all staffing mandates, the Federal proposal also pushes a national nurse staffing standard as the country is in the midst of a national nursing shortage. New York's experience with its own staffing standards illustrates the numerous challenges and unintended consequences of a staffing requirement. The Federal proposal also severely limits the realities of how a broad range of interdisciplinary staff work together to provide quality care. The proposal not only excludes the contribution of licensed practical nurses, but also does not recognize the impact of direct care staff such as physicians, their extenders, and therapists, who are essential to providing high-quality care.



GNYHA

Adding a Federal staffing requirement along with potential penalties would further exacerbate not-for-profit nursing facilities' financial challenges, greatly distressing these already underfunded providers, and drive more high-performing not-for-profit facilities to close their doors.

Sincerely,

Jonathan Cooper

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Senior Advisor, Continuing Care