



Nursing Homes Federal Overview

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May 2026



Topics

Administration Priorities and CMS Focus

Using the LeadingAge Report Portal

Legislation on the Radar

Taking Action

Administration Priorities and CMS Focus



MAHA and Food Guidelines

New Food Guidelines released January 2026

- Limit ultra-processed foods
- Eliminate refined grains – sub 100% whole grains
- Ensure meals contain less than 10 grams added sugar

Recommendations:

- Swap deli meats for fresh lean protein
- Avoid sugar-sweetened beverages and juice

Hospital memo March 30

- RoPs: “based on established national guidelines”

Fraud, Waste, Abuse

Fraud: home health and hospice

Implemented 6-month moratoria on new enrollments

- Joins existing 6-month moratorium on DMEPOS

Fraud, Waste, Abuse

Waste: Medicaid

HR 1: restrictions to Medicaid expansion states

- Work requirements
- Increased frequency of eligibility requirements

***Wyoming is not an expansion state

All states / all providers:

- Shortened retroactive coverage from 90 days to 60 days (01/01/2027)

Fraud, Waste, Abuse

Abuse: nursing homes

Public data and linking of “affiliated entities”

- Using data to evaluate new enrollments and changes of ownership?

855A SNF Attachment

- Identify “tunneling”
- Off-cycle revalidations indefinitely suspended, but what about next revalidation?

Case-Mix Creep

Case-Mix Creep

RFI in FY 2027 SNF PPS proposed rule (comments due June 1)

Recalibrated PDPM in FY 2023 and 2024 – still not budget neutral

Three reasons for case-mix change:

- Real population and health utilization changes
- Real time trends
- **Nominal change**

Is nominal change upcoding or change in behavior?

Case-Mix Creep

Component	Average Actual CMI	Average Target CMI	Case-Mix Creep Adjustment Factor
Physical Therapy	1.440	1.487	1.033 (+3.3%)
Occupational Therapy	1.439	1.498	1.041 (+4.1%)
Speech-Language Pathology	1.714	1.441	0.841 (-15.9%)
Non-Therapy Ancillary	1.227	1.204	0.981 (-1.9%)
Nursing	1.661	1.485	0.894 (-10.6%)
Case-mix Total			0.957 (-4.3%)

Staffing

Court orders to vacate mandates: April and June 2025

- CMS appeals

H.R. 1 moratorium on administering, implementing, enforcing

Repeal Interim Final Rule: December 2025

Senate and House bills: February and March 2026

Staffing

Payroll-Based Journal

- Memo July 2025: no remote hours

Health Affairs April 2026: Turnover measure misses nearly half

- 45% of new hires work less than 120 days – excluded from measure
- 70% of nursing homes shifted star rating with revised measure
- No association with quality measures

Staffing

Nurse incentive program resumes

Now, RNs and LPNs

Currently selecting Financial Incentive Administrators – placement comes next

Outstanding question: What is a “qualifying” nursing home?

Antipsychotics

National Partnership to Improve Dementia Care – 2012

- 2023: Schizophrenia audits
- 2025: unnecessary psychotropic medications moved to F605

OIG Reports – March 2026

- Antipsychotic prescribing
- Schizophrenia diagnoses

MAHA de-prescribing – May 2026

Antipsychotics

Project PAUSE Coalition

- Meetings with CMS
- Meetings with members of Congress – HHS, FDA appropriations

On MUC List to expand but then removed

Feedback to CMS: you're chasing the wrong problem

Medical Marijuana

Rescheduled to Schedule III

CMS: “nothing has changed on our end”

What does that mean, exactly? How is it handled here?

Care Compare and Five Star Quality Rating System

Health Inspections domain:

- Removed complaint totals
- Dropped third cycle

Quality Measures domain:

- Adding claims data (long-stay antipsychotics, falls)
- Shortening submission deadlines – proposed FY 2027 SNF PPS

Care Compare and Five Star Quality Rating System

MDS audits – began January 2026

Early focus: skin integrity, functional outcomes

Documentation: nursing notes, therapy notes, CNA documentation, nurse assessments, MDS interviews

Care Compare and Five Star Quality Rating System

MedPAC discussion: Five Star weighting system

- Equal weights for all three domains
- Staffing domain at 60%; health inspections and quality measures at 20% each

Feedback to MedPAC: slow your roll

Feedback to CMS: cut out the mandatory penalties

Falls

Technical Expert Panel: May 2025

OIG September 2025: falls significantly underreported

- 43% of hospital claims showing fall with major injury not coded on discharge MDS
- Recommendation: incorporate claims data

January 2026:

- Claims data
- Expanded definitions of “fall” and “major injury”
- Added to SFF selection criteria

Advance Care Planning

Showed up on 2025 MUC List

- How will it be assessed?
- What “quality” are you assessing?

Removed before Post-Acute Care voting

- Approved for hospitals

RFI in FY 2027 SNF PPS proposed rule: “future measure concept”

COVID

CDC recommendations still around

HICPAC disbanded last year

- CDC released research
- States putting out their own guidance

Include in “Respiratory Illness Program”

FY 2027 SNF PPS rule: proposing removal of 2 vaccination status measures

LeadingAge Report Portal



LeadingAge Report Portal

Uses the same data used by CMS

Updated monthly

Can be used to focus your resources

Requires LeadingAge login, links to your community



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Report Portal

LeadingAge equips members with the tools and resources that help strengthen their organizations and improve care for older adults. Our national team, in collaboration with state partner LeadingAge New York, enables members to easily access quarterly and monthly reports containing data that can help to identify areas for improvement.



- benchmark to inform quality improvement activities
- identify strengths and weaknesses for staff training
- inform board presentations and outreach to referral sources
- bolster payer/provider negotiations
- improve your organization's star rating
- analyze your measurement in comparison to other organizations

Not a LeadingAge member? [Contact us today](#) to join and access your reports.

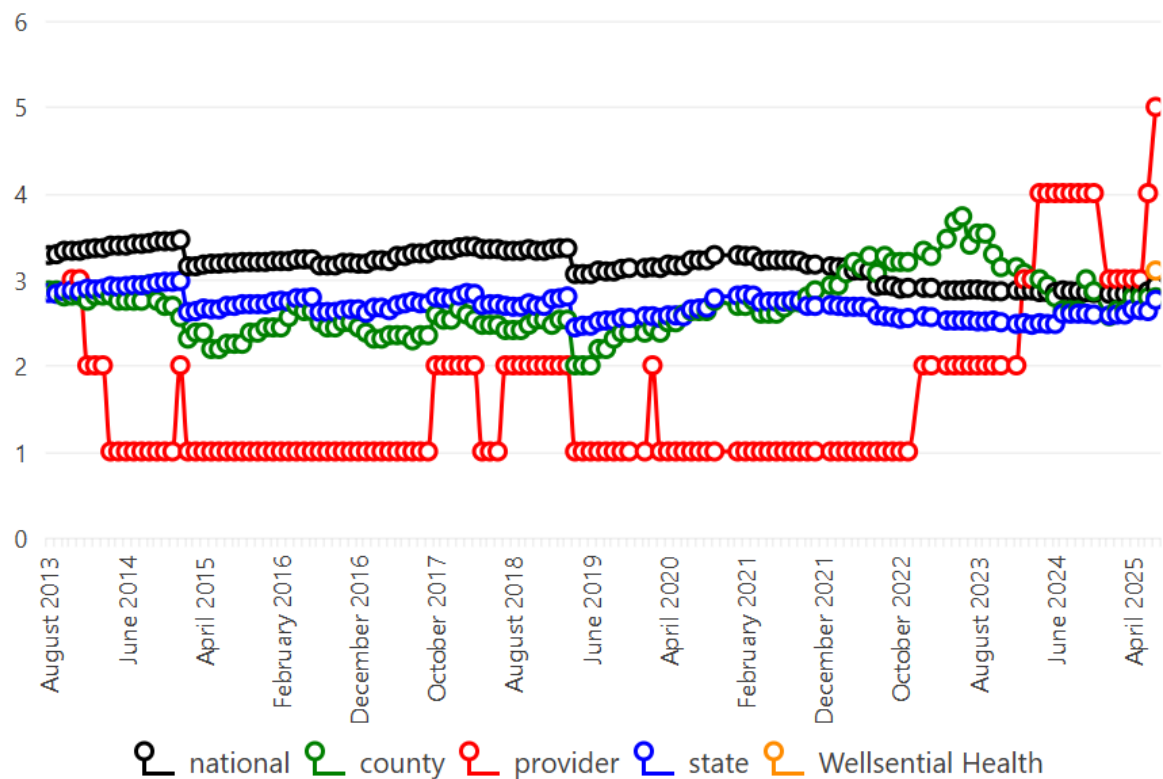
[ACCESS YOUR REPORTS](#)

LeadingAge Nursing Home Trend Report

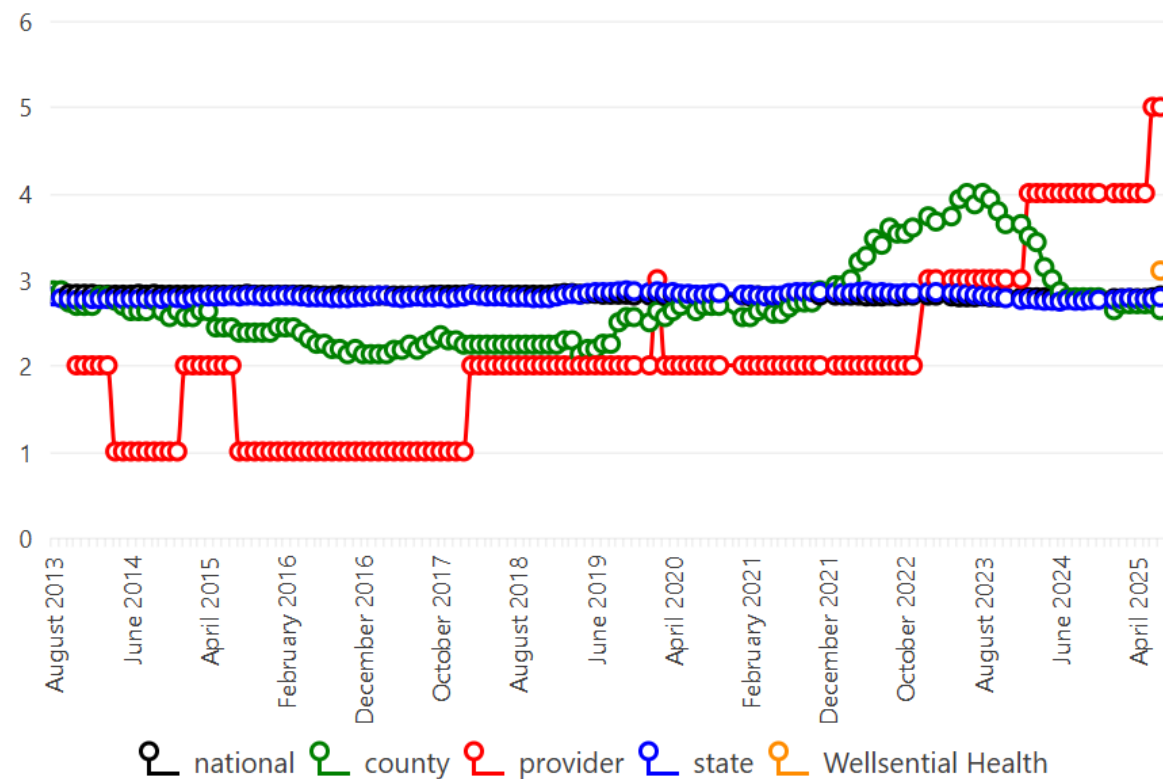
SNF Information

This section provides details for the selected organization including trends for certified beds and total census.

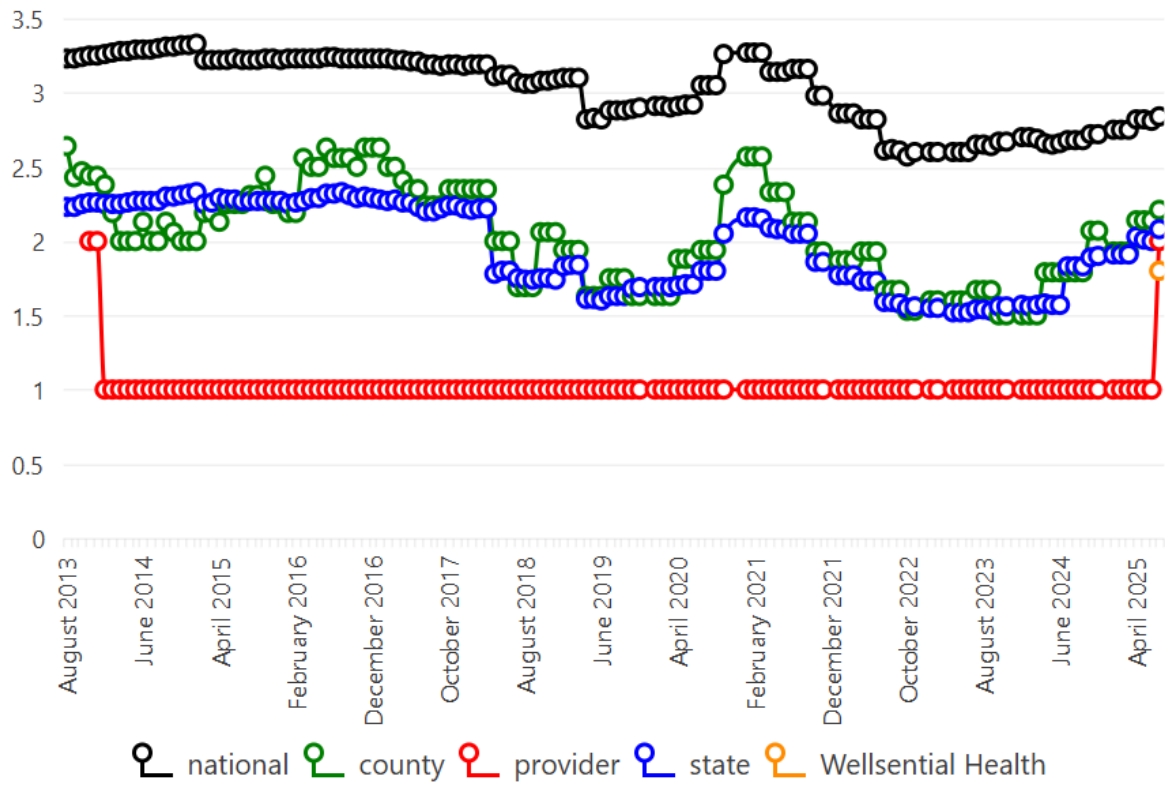
5 Star Ratings - Overall



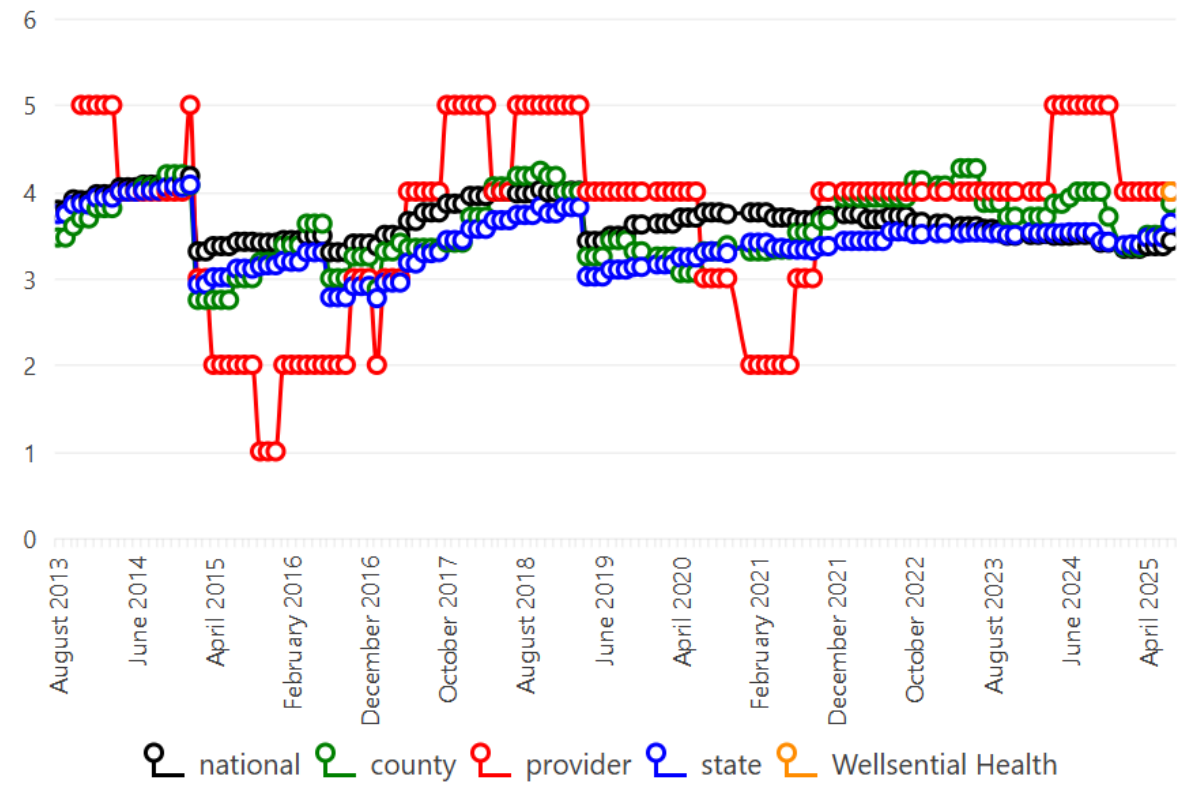
5 Star Ratings - Survey



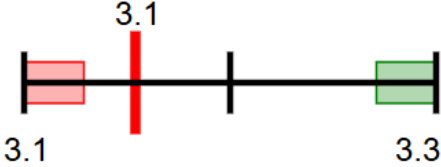
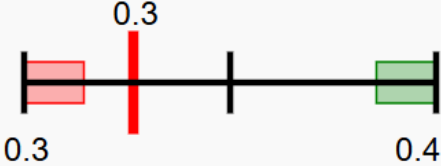
5 Star Ratings - Staffing



5 Star Ratings - Quality



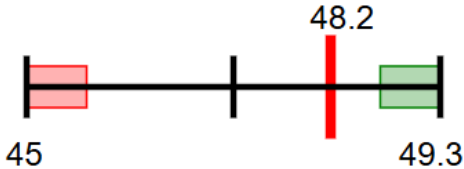
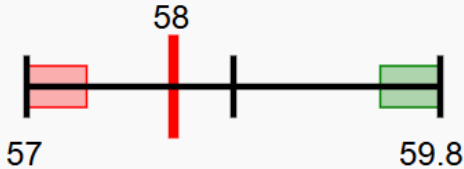
View Staffing 5 Star Trend

Staffing Measure	Rate	Points	Cutpoint View	Interpretation	Bottom Cut Point	Top Cut Point
Adjusted Weekend Total Nurse Hours Per Day View Trend	2.779	15		Increasing the rate for this measure by 2.9% or by approximately 0.082 could result in gaining 5 points.	2.637	2.861
Adjusted Total Nurse Hours Per Day View Trend	3.116	30		Decreasing the rate for this measure by 2.1% or by approximately 0.065 could result in losing 10 points.	3.051	3.292
Adjusted RN Hours Per Day View Trend	0.299	20		Decreasing the rate for this measure by 8.1% or by approximately 0.024 could result in losing 10 points.	0.275	0.367

 View Quality Measure 5 Star Trend

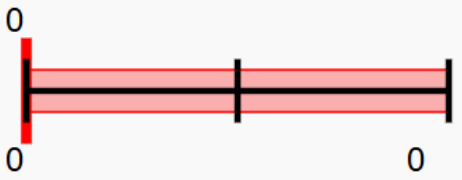
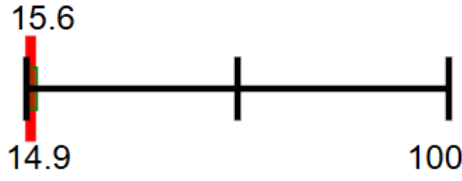
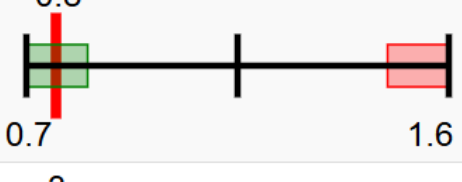
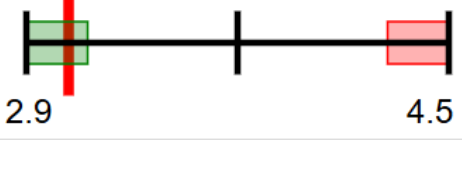
Disclaimer:

- Due to missing long-stay QM data for this provider, possibly due to a low number of residents or stays, CMS uses any available data combined with the state average to impute the rates for the missing long-stay QMs. Since imputed rates are not released by CMS, the total QM points cannot be calculated in this report.

Quality Measure	Rate	Points	Cutpoint View	Interpretation	Bottom Cut Point	Top Cut Point
Higher Rate is Better						
D/C Function Score  View Trend	48.15	60		Increasing this QM rate by 2.4% or by approximately 1.15 points could result in gaining 15 points.	44.98	49.3
Successful community discharge (short-stay)  View Trend	57.96	120		Decreasing this QM rate by 1.7% or by approximately 0.99 points could result in losing 15 points.	56.97	59.75

Number of outpatient emergency department (ED) visits per 1,000 resident days (long-stay) View Trend	State Average Due to Missing Data 2.043	30		The facility rate is missing for this QM, possibly due to a low number of residents or stays. The state average is possibly used with a non-published rate to impute a rate used for your rating. Here is the interpretation based on the state average: Decreasing this QM rate by 6.7% or by approximately 0.138 points could result in gaining 15 points.	1.906	2.471
Number of hospitalizations per 1,000 resident days (long-stay) View Trend	State Average Due to Missing Data 2.034	30		The facility rate is missing for this QM, possibly due to a low number of residents or stays. The state average is possibly used with a non-published rate to impute a rate used for your rating. Here is the interpretation based on the state average: Decreasing this QM rate by 5.2% or by approximately 0.105 points could result in gaining 15 points.	1.928	2.269

Lower Rate is Better

New or Worsening Pressure Ulcers (short-stay) View Trend	0	100		Potential To Lose Points Although full points are currently being attained for this QM, having a single person flag for this QM would result in losing 20 points.	0	0
ED Visits (short-stay) View Trend	15.619	15		Potential To Gain Points Decreasing this QM rate by 4.6% or by approximately 0.719 points could result in gaining 15 points.	14.9	100
Urinary Tract Infection (long-stay) View Trend	0.773	80		Potential To Gain Points Decreasing this QM rate by 8.2% or by approximately 0.063 points could result in gaining 20 points.	0.71	1.6
Pressure Ulcers (long-stay) View Trend	3.044	80		Potential To Gain Points Decreasing this QM rate by 5.1% or by approximately 0.154 points could result in gaining 20 points.	2.89	4.45

Overall 5 Star Rating: ★ ★ ★ ★ ★

Previous Month: ★ ★ ★ ★

3 Months Prior: ★ ★ ★

 Help

Follow the steps below to see how your current rating is calculated and 2 scenarios could possibly change your overall 5 star rating.

Step	Instruction	Current	Likely to Gain	Likely to Lose
1	Start with the health inspection rating.	5	5	5
2	Add one star to the Step 1 result if the staffing rating is five stars; subtract one star if the staffing rating is one star. The overall rating cannot be more than five stars or less than one star.	+ 0	+ 0	- 0
3	Add one star to the Step 2 result if quality measure rating is five stars; subtract one star if quality measure rating is one star. The overall rating cannot be more than five stars or less than one star.	+ 0	+ 0	+ 0
Note	If the health inspection rating is one star, then the overall quality rating cannot be upgraded by more than one star based on the staffing and quality measure ratings.	- 0	- 0	- 0
Final Overall Star Rating		5	5	5

Use  Quality Metrics (login required using your MyLeadingAge username and password) and the  Nursing Home Trend Report to compare your 5 Star Ratings to your peers.

Legislation on the Radar



Senate Finance Committee LTC Initiative

Dear Colleague Letter released May 20

Three focal points: expanding HCBS, improving nursing home quality, strengthening workforce

Multi-year collaborative initiative – stakeholder office hours

“Turning the page” “bold” – open field

Key Bills

Ensuring Seniors' Access to Quality Care Act (H.R. 7096 / S. 4467)

Improving Access to Medicare Coverage Act (H.R. 3954)

Nurses Belong in Nursing Homes Act (S. 3886)

Safe Staffing Saves Lives Act (H.R. 8100)

Enhancing Skilled Nursing Facilities Act (H.R. 7106)

CNA Workforce Improvement Act (H.R. 3471)

Ensuring Seniors' Access to Quality Care Act

H.R. 7096 introduced January 2026

Bipartisan support with 6 co-sponsors

- currently no Wyoming co-sponsors

CNA lock-out bill:

- Maintains existing reasons for lock-out: nurse staffing waiver, extended survey, mandatory imposition of federal remedies
- Adjusts CMP amount and specifies only for quality of care tags (current federal waiver)
- Maintains state waiver: availability, safe environment exists

Ensuring Seniors' Access to Quality Care Act

S. 4467 introduced April 2026

Bipartisan support with 4 co-sponsors

- Sen. John Barrasso original co-sponsor

CNA lock-out bill:

- Eliminates lock-out for nurse staffing waiver
- Adjusts CMP and locks out only for substandard quality of care
- Resume training if SQC did not result in harm (s/s F)
- Eliminates waivers

Improving Access to Medicare Coverage Act

H.R. 3954 introduced June 2025

Bipartisan support with 34 co-sponsors

- currently no Wyoming co-sponsors

Observations stays bill:

- Would require that all time spent in hospital counts toward 3-day qualifying stay, regardless of inpatient or outpatient/observation status

Senate bill coming soon?

Nurses Belong in Nursing Homes Act

S. 3886 introduced February 2026

No Republican co-sponsors; 6 co-sponsors

- currently no Wyoming co-sponsors

Staffing standards bill:

- 24/7 RN and 3.48 HPRD total nurse staffing
- Requires regular staffing studies
- Gives CMS flexibility to expand, increase, or delineate standards
- Includes funding through CMP dollars
- Codifies reporting of Medicaid dollars spent on direct care compensation

Safe Staffing Saves Lives Act

H.R. 8100 introduced March 2026

No Republican co-sponsors; only one co-sponsor

- Currently no Wyoming co-sponsors

Staffing standards bill:

- 24/7 RN and 4.1 HPRD total nurse staffing
- 0.75 HPRD RNs, 0.55 HPRD LPNs, 2.8 HPRD CNAs
- Penalties including increased surveys and exclusion from SNF VBP
- Includes a waiver

Enhancing Skilled Nursing Facilities Act

H.R. 7106 introduced January 2026

Bipartisan bill with one co-sponsor

- currently no Wyoming co-sponsors

Would allow non-physician practitioners to practice at top of scope

- Think: physician delegation of tasks

CNA Workforce Improvement Act

H.R. 3471 introduced May 2025

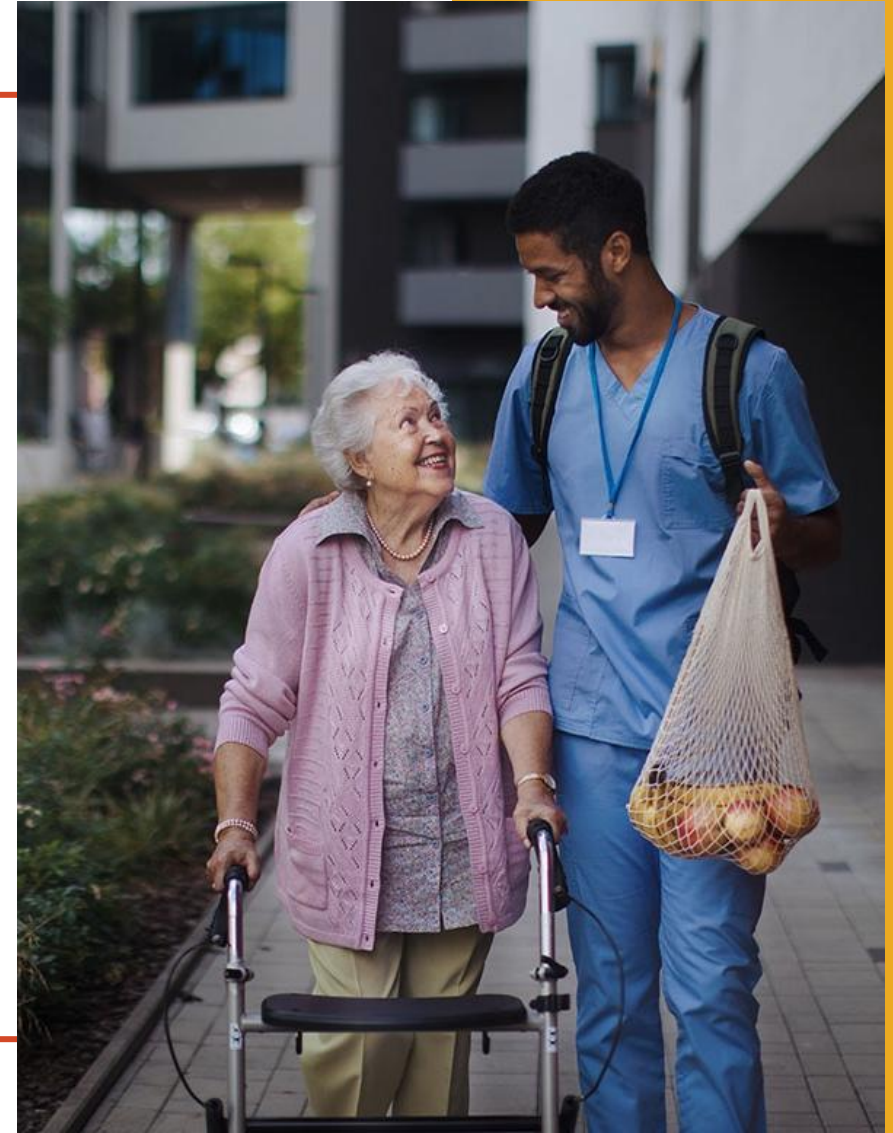
No Democrat co-sponsors

- currently no Wyoming co-sponsors

Would revise qualifications for NATCEP instructor

- Minimum 2 years' nursing experience but no requirement for long-term care experience

Taking Action



What We're Doing

Meeting with CMS

Responding to rules and Requests for Information

Providing feedback on sub-regulatory policies

Meeting with members of Congress

Attending hearings, providing written testimony

Participating in coalitions

What You Can Do

Respond to rules, Action Alerts

Lobby Day and Fly-Ins

Congress in Your Neighborhood

Advocacy

Awards & Honors

Events & Conferences

Leadership Programs

Shared Learning Series

Member Networking

Leaders of Color Network

Public Campaigns & Messaging

MAY 6, 2026

National Advocacy: CMS' Oz Modernizing Prior Authorization: Are PAC Providers Included?

CMS Administrator outlines efforts to reduce prior authorization-created administrative burden. LeadingAge pushes for PAC providers' inclusion.



What's New: Latest CMS Oasis Q&As



Workforce: Exploring Multiple Futures With AI



For Members: Tips for Proposed FY27 SNE Comments

Advocating for Older Adults & Aging Services

Through our relationships with lawmakers and the press, LeadingAge fights to remove barriers to care and improve funding for the sector. We help policymakers decipher complex issues in aging—on Capitol Hill and at the state and local level—to build a stronger future for aging services providers and the people you serve.



LeadingAge national policy staff influence federal policy issues as part of our daily work, and we create opportunities for our members and other advocates to amplify their voices.

TAKE ACTION RESOURCES

ACTION ALERTS

Our Advocacy Efforts

LeadingAge maintains relationships across Washington, DC, to ensure that policymakers understand how to best craft and support legislation and regulation to support aging services, older adults, and families across the country. Learn more about important policy topics by [joining our weekly Policy Pulse calls](#).

Action Alerts

Your Voice Matters. LeadingAge maintains relationships across Washington, DC, to ensure that policymakers understand how to best craft and support legislation and regulation to support aging services, older adults, and families across the country—and we need you to tell your story. Together, we can motivate and influence policymakers and the future of aging services. Take action today!



Take Action: Urge Congress to Fully Fund Housing Programs

Congress is beginning to consider funding levels for Department of Housing and Urban Development (HUD) programs for fiscal year 2027 (FY27). Now is the time to urge representatives and senators to support full and robust FY27 funding for federal housing programs! Take this...



Take Action: Support Immigration Workforce Solutions

Ask your representatives and senators to support and enact immigration-focused policy solutions that strengthen the aging services workforce and ensure access to quality care and services for older adults. The aging population in the United States is growing rapidly, while...



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Take this opportunity to fight for strong investment in programs that are critical to addressing low-income older adults' affordable housing needs—a particularly urgent ask as adults age 55 or older are the fastest growing homeless demographic in America. HUD's affordable senior housing programs are effective, and they need to be protected and expanded.

Ask your representatives and senators to:

- **Expand and modernize HUD's flagship senior housing program, Section 202 Supportive Housing for the Elderly**, including by providing \$600 million in capital advances as primary financing for approximately 2,000 new homes and adjusting operating subsidy to the Section 8 program.
- **Fully renew existing Section 8 Project-Based Rental Assistance (PBRA) contracts and Project Rental Assistance Contracts (PRACs)**, including funding that reflects annual operating cost increases for insurance, labor, utilities, service coordination, and internet connectivity.
- **Address housing instability among older adults** by providing \$50 million for about 5,000 new Older Adult Special Purpose Vouchers, at least 50% of which could be project-based for use in a variety of settings serving older adults, including market-rate and low-income housing tax credit (LIHTC)-financed communities, as well as assisted living communities.
- **Support independent aging in affordable senior housing by renewing and expanding service coordination programs in HUD-assisted**

Compose Your Message

- US Senators
- US Representative

Subject

Support Robust Funding for Affordable Senior Housing

Message Body

Please add your own story about this issue to personalize your message

I urge you to support full and robust funding for affordable housing programs for older adults with very low incomes. For fiscal year 2027 funding for Department of Housing and Urban Development

Enter Your Info

Your Information

Prefix *

First Name *

Last Name *

Email *

☐ Yes, sign me up to receive text alerts

By providing your mobile number, you agree to receive periodic call to action text messages from LeadingAge.

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By providing your mobile number, you agree to receive periodic call to action text messages from LeadingAge. Message and data rates may apply. Reply HELP for help. Reply STOP to unsubscribe. Message frequency varies. [Privacy Policy](#)

Home Information

Street Address *

ZIP Code *

Enter Zip for **City** and **State**

Organization

Company

Other Information

Provider type

-- Please select --



☒ Yes, sign me up to receive email updates and action alerts from LeadingAge

☒ Remember me

Send Message

Build Your Action Alert: FY 27 SNF PPS

Choose a provision:

- Payment update
- Case-Mix Creep Adjustment
- SNF QRP: removal of COVID vaccination measures
- SNF QRP: adjustment of data submission deadlines
- SNF QRP: all-payer data collection

Answer the Questions

Who are you?

How does this policy impact you?

Why does it matter?

What do you need or what alternative do you suggest?

Advocating for Older Adults & Aging Services

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TAKE ACTION RESOURCES

ACTION ALERTS

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Take Action with LeadingAge

Your voice matters—on Capitol Hill and at home. In-person advocacy meetings ensure elected officials hear LeadingAge's nonprofit and mission-driven members' on-the-ground experiences, including the quality care and services you provide and the challenges you face. We've developed numerous resources and tools to help in advocacy efforts. Together, we can motivate and influence the crafting of legislation and impact the future of aging services.



Congress in Your Neighborhood

House and Senate members are often in their states and districts, which are perfect opportunities to invite your members of Congress to visit your communities and organizations. Check out this step-by-step guide to plan a visit.

- [Congress in Your Neighborhood](#)

Know Your Why, Match Your What

Know Your Why:

Putting a face on a “problem”

Showing the impact of a policy

Familiarizing with aging services

Match Your What:

Tour the community

Host a Town Hall

Invite to an activity or event

In-District Periods

House:

May 25 – May 29

June 15 – June 19

July 6 – July 10

July 27 – July 31

August 3 – August 28

Senate:

May 25 – May 29

June 29 – July 10

August 10 – September 11

District Schedulers - Representative

Representative Harriet Hageman

Casper Office: (307) 261 – 6595

Cheyenne Office: (307) 772 – 2595

District Schedulers - Senators

Senator John Barrasso

Casper: 307-261-6413

Cheyenne: 307-772-2451

Riverton: 307-856-6642

Rock Springs: 307-362-5012

Sheridan: 307-672-6456

District Schedulers - Senators

Senator Cynthia Lummis

Casper: 307-261-6572

Cheyenne: 307-772-2477

Cody: 307-527-9444

Jackson: 307-886-6050

Star Valley: 307-248-1736

Sundance: 307-283-3461

Resources

[Tips for Commenting on FY 2027 SNF PPS Proposed Rule](#)

[LeadingAge Report Portal](#)

[Take Action Resources](#): Nursing Homes

[Action Alerts](#)

[Congress in Your Neighborhood](#)

Let's Keep in Touch!



- Email me anytime: jeyigor@leadingage.org
- Join the Nursing Home Network:
Meeting over Zoom on the last Tuesday of every month.
<https://leadingage.org/join-the-nursing-home-member-network/>
- Dial in for the National Policy Pulse:
Every Monday at 3:30pm ET.
<https://leadingage.org/leadingage-national-policy-pulse/>