

Nursing Home Weekly Recap

October 10, 2025

Nursing Home Network Call: Tuesday, October 28, 2 p.m. ET. Join our monthly Nursing Home Network call on Tuesday, October 28 at 2 p.m. ET. We will review the latest nursing home updates, followed by time for feedback and discussion among members. The Nursing Home Network meets on the last Tuesday of each month and is open to all LeadingAge provider members. Register for the Network here using your LeadingAge login.

National Policy Pulse Call. Join over 1,000 of your LeadingAge peers for our National Policy Pulse calls where we keep members equipped to navigate the ever-evolving landscape of aging services national policy. The calls are Mondays at 3:30 p.m. ET. If you're interested in signing up for these members-only calls, please sign up using the link on our National Policy Pulse webpage.

Keep up with all LeadingAge articles about the shutdown in LeadingAge's fiscal year 2026 serial post.

Leading Coalition of National Aging Groups Urges Congress to Extend ACA Premium Tax Credits. On October 2, the Leadership Council of Aging Organizations (LCAO), which consists of 68 leading national nonprofit organizations, urged Congressional leaders to permanently extend the expiring enhanced premium tax credits (EPTCs). The looming loss of the EPTCs for individuals enrolled in healthcare coverage plans via the Affordable Care Act (ACA) Health Insurance Marketplace could trigger stark rises in premiums, with some estimations as high as 58.9%. This is particularly relevant to over 10 million individuals between the ages of 45-64. LeadingAge is on the LCAO steering committee. Read the letter here.

Support for Improving Access to Medicare Coverage Act: LeadingAge is among 40 organizations supporting legislation (HR 3954) that would enable the inclusion of both hospital inpatient and observations stays toward meeting the 3-day stay statutory requirement for individuals enrolled in traditional Medicare who need care in a skilled nursing facility. As stated in the June 27, 2025, LeadingAge article this bill "....is key to addressing the three-day stay requirement that was waived during the COVID- 19 Public Health Emergency." On October 8, LeadingAge and other organizations reiterated support in a statement that includes rationale and data in support of HR 3954, which can be found here: LeadingAge Supports Improving Access to Medicare Coverage Act (HR 3954)

Staffing Standard Litigation Update: Victory Sealed in State-Led Lawsuit. In recent days the U.S. Court of Appeals for the Eighth Circuit filed a judgment that brings to an end litigation concerning the CMS minimum staffing requirements. As we reported earlier, the U.S. Department of Health on September 18 filed motions to voluntarily dismiss the government's appeals of two federal court decisions that vacated the staffing requirements – namely, the favorable decisions earned by LeadingAge state partners and state Attorneys General in the U.S. District Court for the Northern District of Iowa, and by LeadingAge and other plaintiffs in the U.S. District Court for the Northern District of Texas. On September 19, the Court of Appeals for the Fifth Circuit granted the government's motion to withdraw in the Texas case. All that remained was for the Eighth Circuit to do the same with respect to the Iowa case, and that Court officially entered judgment on October 3 granting the government's motion and

dismissing the appeal. LeadingAge joins our State partners and members in celebrating the successful outcomes in both cases!

Update on Medicare Claims Processing During Shutdown. Per a Medicare Learning Network (MLN) newsletter sent on October 1, 2025, the Centers for Medicare and Medicaid Service (CMS) clarified the impact of the legislative shutdown on Medicare payment processing. In the newsletter, Medicare Administrative Contractors (MAC) were directed to put a temporary hold on claims. This pause may prevent both the MACs and providers from incurring additional burden and cost associated with a need to reprocess claims denied due to the expiration of the telehealth and hospital at home waivers and similar items in the event that those services are ultimately extended by Congress as part of a continuing budget resolution or other action. The hold is only expected to last 10 business days, or until October 14, 2025. There is a statutory minimum payment floor of 14 days - meaning MACs hold electronic claims for 14 days before releasing payment regardless of the situation.

CDC Adopts ACIP Recommendations. The Centers for Disease Control & Prevention (CDC) officially adopted on October 6 the recommendations of the Advisory Committee for Immunization Practices (ACIP) to update the adult and child vaccine schedules for 2025/2026. Regarding COVID-19 vaccination, this means that individuals age 6 months and older are recommended to undertake shared decision-making with a clinician when consider whether to receive a COVID-19 vaccination. It is also recommended that these informed consent conversations include a discussion about the risks, benefits, and uncertainties of COVID vaccination, and for individuals ages 6 months to 64 years, there is an emphasis during these conversations that the benefits of COVID vaccination are greatest for those who are at risk for severe illness. The Stay-Up-to-Date page on the CDC website is expected to be updated on October 7. It is unclear if CDC will release a Quarter 4 definition for Up to Date for NHSN reporting or if this definition will be released closer to calendar year 2026 quarter 1 reporting, as surveillance definitions can only be updated on the reporting quarter but no definition was released for Quarter 4. LeadingAge will continue to monitor this situation and provide updates to providers.

Remote NCLEX Testing Likely to Launch in 2026: The National Council of State Boards of Nursing (NCSBN) announced plans to introduce remote NCLEX testing potentially as early as 2026. Although no official launch date has been confirmed, the announcement is welcome news for nursing licensure accessibility. Remote NCLEX testing would allow eligible candidates to the take the exam from home or another approved location, eliminating the need to travel to an official test center. The exam would maintain the same content, length, scoring and standards as the in-person version, and remote testing would be optional – candidates could still choose to test at a center. Importantly, remote testing would be available to both U.S.-based and international nursing candidates. Regarding security, NCSBN says it will use advanced technology and robust measures for remote proctoring in order to ensure exam integrity. For test takers, the potential benefits would be myriad. Remote testing would offer candidates the flexibility to choose a time and location that suits them and the comfort of a familiar environment that could reduce stress and improve performance. Moreover, this development would reduce barriers to access, which may be particularly beneficial to international test takers who, in some cases, acquire substantial travel and visa costs to get to a testing center abroad. By lowering those logistical barriers and potentially speeding up licensure, this change could impact international nurse recruitment pipelines. LeadingAge will share updates as more details and a specific timeline become available.

Senate Confirmation of Third EEOC Commissioner Restores Quorum. On October 7, the U.S. Senate confirmed Brittany Panuccio by a 51–47 vote to serve as a commissioner of the U.S. Equal Employment Opportunity Commission (EEOC). Her term expires July 1, 2029. The EEOC is responsible for enforcing federal laws that make it illegal to discriminate against a job applicant or employee. A body of five commissioners sets and implements policy, but, prior to Ms. Panuccio's confirmation, only two commissioners were in place. With her confirmation, the EEOC will regain the quorum of three commissioners required to advance President Trump's civil rights priorities through formal actions such as rescinding or adopting regulations and issuing or revising formal EEOC guidance. LeadingAge will follow future developments affecting the workplace as they unfold.

EPI Underscores Immigration is Essential to Addressing Workforce Gaps. In two recent reports, the Economic Policy Institute (EPI) added to the widespread consensus among labor economists that U.S. workforce shortages cannot be solved without immigration. First, the U.S.-born labor force is projected to shrink annually over the next decade due to the population aging. As a result, immigration is forecast to account for nearly all labor force growth over that time. Moreover, EPI reports that labor force participation rates among U.S.-born individuals are currently near historic highs. Therefore, even the most ambitious policies to boost labor force participation among the U.S.-born—including prime-age workers—would not reverse these demographic trends meaningfully. Structural reforms that target known barriers to participation —like reducing incarceration, improving health, expanding childcare, and investing in education—can help, but their impact would be modest and delayed by years. In contrast, immigration directly offsets demographic decline. EPI also points out the larger economic and social implications of these conclusions about the labor force. Without immigration, the ratio of workers to retirees will worsen, straining programs like Social Security and Medicare. GDP growth would also slow and sectors like long-term care would struggle to meet demand. LeadingAge supports both domestic workforce policy that reduces barriers to labor force participation and immigration reform that expands pathways for essential workers to come to the U.S. to fill critical roles in sectors like aging services.

LeadingAge LTSS Center Report Shows Relationship Between Net Worth and Mortality. In a report released by the LeadingAge LTSS Center @ UMass Boston and the National Council on Aging, authors show significant differences in anticipated age of mortality based on an individual's net worth. *The 80%*, authored by Jane Tavares, Marc Cohen, Maryssa Pallis, Kerry Glova, and Reena Sethi, through analysis of data from the Health and Retirement Study, found that 80% of Americans over age 60 have tenuous financial stability and would be unlikely to weather a significant financial shock. These shocks include divorce, paying for long term services and supports, or a serious health setback. The data also show that 60% of older adults would not be able to afford paying to age in place if their needs extended beyond two years, particularly with increasing costs for basic living expenses such as housing, food, transportation and healthcare. Summing up the reports major points, "Our updated 2022 report shows that economic inequality has a health cost: the mortality rate is nearly double, and the age of mortality is 9 years lower on average for the bottom 20% as compared to the top 10%." Read the full report here.

JUST LAUNCHED! LPC Guide to Bankruptcy Protections in Statute. The third installment of the CCRC State Statutory Comparative Guide is <u>now LIVE on the Hub!</u> This comprehensive review and analysis of states' statutes that govern LPCs/ CCRCs dives deeply into state laws that concern bankruptcy protections. This great resource is available FREE to all LeadingAge members and business partners. For any questions or more dialogue, reach out to Dee.

Webinar Series: Lessons Learned from LPC Bankruptcies. Join LeadingAge, Ziegler, and other expert partners, members, and firms in a deeply engaging and probative review of the few, but notable LPC bankruptcies that have roiled field in recent years. In three informative and thoughtful sessions, three expert panels facilitated by Dee Pekruhn will categorically discuss three LPC bankruptcy scenarios: bankruptcies that have resolved successfully, those LPCs have repeatedly filed for bankruptcy and the devastating impact of this, and those bankruptcies that have resolved but could have seen a better outcome. You can read about the series, and sign up for it on the Learning Hub. For questions or more information, contact Dee.