

LPC Weekly Recap Friday, October 10 2025

UPCOMING MEMBER NETWORK MEETINGS & EVENTS:

- 10/28/25: Nursing Home Monthly, 2:00 p.m. ET
- 10/30/25: LPC Monthly Meeting, 2:00 p.m. ET

JUST LAUNCHED! LPC Guide to Bankruptcy Protections in Statute. The third installment of the CCRC State Statutory Comparative Guide is now LIVE on the Hub! 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 at dpekruhn@leadingage.org.

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 at dpekruhn@leadingage.org.

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!

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.

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)

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 longterm 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.

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 six 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-Upto-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.