

November 13, 2025



Dr. Dora Hughes
Director, Center for Clinical Standards & Quality
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244

Dear Dr. Hughes:

Transitioning out of this historic government shutdown, we acknowledge how challenging this time has been for you and hope that restoration of appropriations brings a return to stability for CCSQ. As you resume normal operations, we would like to bring to your attention a few areas of concern. With government operations limited due to the lapse in appropriations for Fiscal Year (FY) 2026, our members' efforts to meet regulatory requirements were impacted and we hope that you will consider prioritizing the following issues.

"Up to Date" Definition for COVID-19 Vaccination Status. Each week, nursing home providers are required to report data on respiratory illnesses including COVID-19, influenza, and respiratory syncytial virus (RSV). This data includes new cases and hospitalizations of residents occurring during the reporting week and the vaccination status of those residents. Additionally, nursing homes are required to report at least one week each month on the COVID-19 vaccination status of healthcare personnel working in the building. This data is reported through the National Healthcare Safety Network (NHSN) and relies upon of a definition of "up to date" status for COVID-19 vaccination, released by the Centers for Disease Control & Prevention (CDC).

The [current reference document](#), last updated in July 2025, provided a definition for up-to-date through Reporting Period Calendar Year 2025 Quarter 3, which ended on September 28, 2025. The Advisory Committee for Immunization Practices (ACIP) to CDC approved COVID-19 vaccination recommendations on September 19, 2025; however, these recommendations were not adopted by the CDC until October 6, 2025, after the federal government shutdown began. As a result, a Reporting Period Calendar Year 2025 Quarter 4 definition for up-to-date was not released prior to the beginning of the reporting period and no definition has been released to date for Reporting Period Calendar Year 2026 Quarter 1 reporting, which will begin on December 29, 2025.

While nursing homes have continued to submit weekly and monthly NHSN reporting as required, there has been no clear direction on how vaccination status should be reported. We have heard that providers were recommended to continue reporting according to the Reporting Period Quarter 4 definition in which individuals under 65 years of age were considered "up-to-date" with one dose of a 2024/2025 COVID vaccine and those 65 years and older were considered "up-to-date" with at least one dose in the past six months. Some providers may be reporting according to that definition, while other providers may be creating a definition for "up-to-date" according to 2025/2026 recommendations in which individuals are recommended for vaccination only under circumstances of shared clinical decision-making. Without a clear definition for reporting, there is no way of knowing what the reported data tells us. For this reason, **we recommend that CMS suppress FY 2026 Quarter 1 data from the COVID-19 Vaccination Among Healthcare Personnel measure calculations in the Skilled Nursing Facility (SNF) Quality Reporting Program (QRP).**

We are further concerned that, due to the Administration's goal of realigning CDC functions to what the Administration sees as its "core mission", CDC may not release a new definition of "up-to-date" for COVID-19 vaccination at all. In this case, CDC would need to revise the respiratory pathogens data elements and we would recommend that CMS remove the COVID-19 vaccination measure from the SNF QRP entirely.

Respiratory Illness Guidance. Through the COVID-19 public health emergency (PHE) and in the years following, nursing homes have relied upon CDC guidance as the accepted national standard for management of residents and staff with COVID-19 infection. Last updated in 2023 at the end of the PHE, it has been generally recognized that this guidance is outdated and CDC's Healthcare Infection Control Practices Advisory Committee (HICPAC) was working to revise recommendations. Infection prevention and control strategies for respiratory illnesses were under review and draft guidance on work restrictions for healthcare personnel was approved at the November 2024 Committee meeting. However, the Committee was disbanded in early 2025 and no further work was done within CDC to address this issue. CDC publicly released much of the research and reviews conducted by the Committee and since that time, various states, local public health authorities, and professional associations have taken on the task of issuing guidance to fill the void resulting from the disbandment of HICPAC and arrest of related activities.

While certainly useful, the release of alternative guidance has left many providers uncertain as to whether they should be following this newer guidance released by state authorities, local public health, and professional associations, or whether they are required to continue following the outdated CDC guidance that has not yet been rescinded. We ask CMS to issue a memo or other official communication clarifying that nursing homes and other healthcare settings may refer to updated state requirements, local public health recommendations, and guidance from professional associations and other reputable sources for accepted national standards for infection prevention and control of respiratory illnesses and work restrictions of healthcare personnel.

Care Compare Updates. Nursing Home Care Compare, the public-facing website displaying the Five Star Quality Ratings System and other quality indicators, is typically updated on a monthly basis, with a comprehensive refresh every quarter. In August 2025, [CMS announced](#) that the monthly updates would be frozen for a period of time to allow CMS to verify the accuracy of health inspection data following the July transition of the Long-Term Care Survey Process to the Internet Quality Improvement and Evaluation System (iQIES). We note that during this time, refreshes to other websites relying on this data such as the Quality, Certification & Oversight Reports (QCOR) were also frozen. Subsequently, with the government shutdown, the quarterly refresh of all Five Star domains including the Staffing domain and Quality Measures domain did not take place on October 29 as scheduled, and it is assumed that verification of health inspection data was also paused on October 1. We urge CMS to prioritize this work and recommend an off-cycle refresh as soon as possible to update Care Compare and the Five Star Quality Rating System and associated data sites rather than delaying to the next quarterly refresh scheduled for January 28, 2026.

CMP Reinvestment Program Information. On September 29, CMS [released a memo](#) announcing updates to the Civil Money Penalty Reinvestment Program (CMPRP). Updates included an increase on project funding caps and revisions to "allowable uses of funds" to include certain technologies, behavioral health, and workforce development projects. CMS anticipated releasing additional resources

on October 6 but was unable to do so as a result of the government shutdown. We ask that CMS please release resources as quickly as possible, including additional information and instruction on the expansion of allowable uses of CMPRP funds and circumstances under which a project may be approved for more than the recently adjusted \$6,000 funding cap. As LeadingAge and our state partners have advocated previously, we urge CMS to include technologies and supplies supporting the use of telehealth services and expansion of health information technologies, including Electronic Health Records, in our nursing homes to improve quality of and access to care.

Survey Backlogs and Risk-based Survey. With the lapse in appropriations for FY 2026, CMS activated the lapse plan prioritizing survey and certification activities that would continue during the shutdown, providing additional information through [a memo on October 1](#). On October 15, LeadingAge advocated for a change related to Denials of Payment for New Admissions and we were pleased with CMS's revisions on October 21 to allow revisits for providers being enforced this remedy. As we transition out of the shutdown, we know that CMS will provide direction to State Survey Agencies on how to resolve outstanding survey issues and address backlogs. We would like to remind CMS that the risk-based survey approach, which CMS has been piloting since 2024, would not only help to more quickly address survey backlogs resulting from the government shutdown, but also aligns with the bigger goal of improving survey processes and more effectively focusing CMS' and state agencies' resources on the areas and nursing homes most in need. We encourage CMS to prioritize incorporation of the risk-based survey approach into survey and certification processes as we transition out of the shutdown and going forward.

Thank you for your attention to these issues. We look forward to resuming our shared work toward improving nursing home care for older adults and the individuals who serve them. Please reach out with any questions.

Sincerely,



Jodi Eyigor
Senior Director, Nursing Home Quality & Policy

Cc: Will Harris, Deputy Director, Center for Clinical Standards & Quality
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