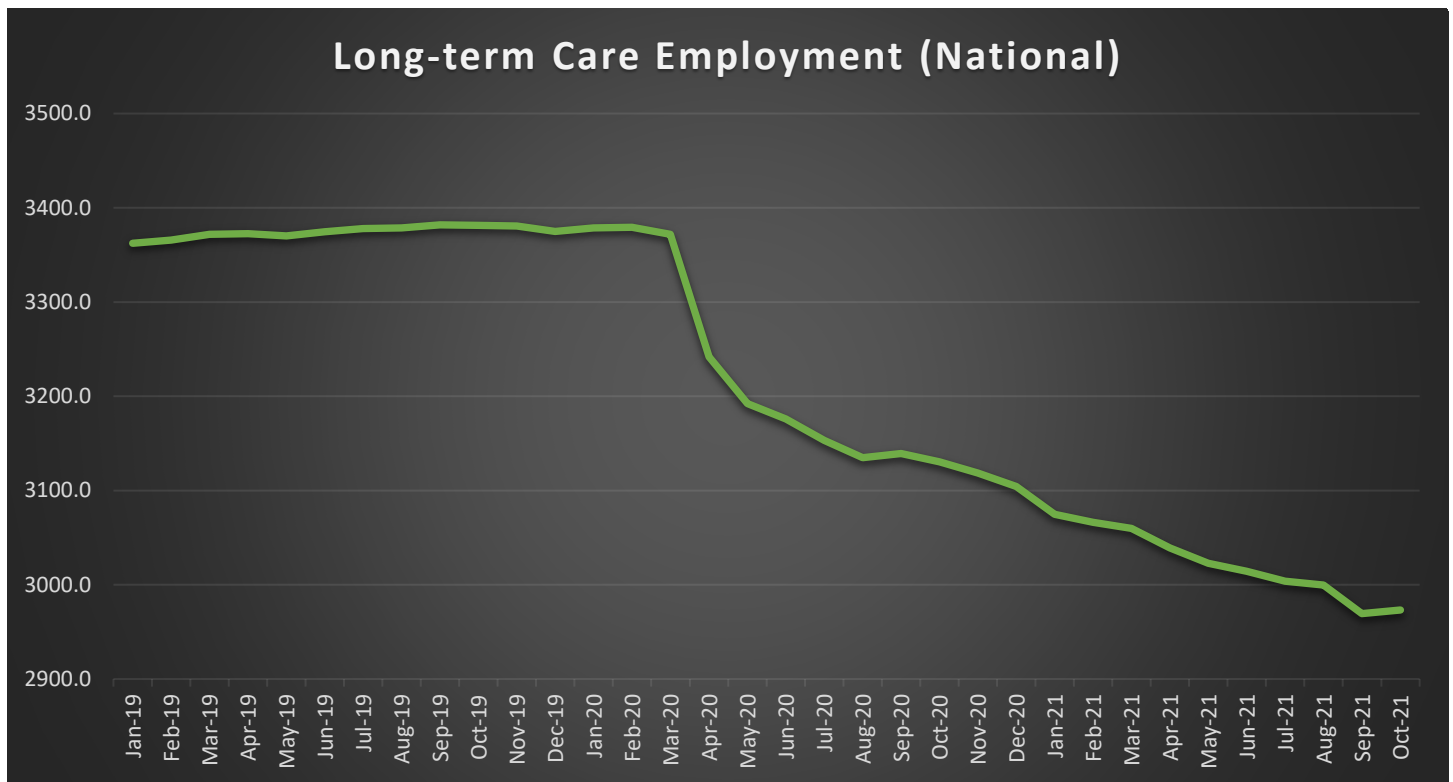


Assessing the Nursing Facility Staffing Shortage and the Pending Impact of the Federal CMS Medicare and Medicaid COVID-19 Vaccination Mandate

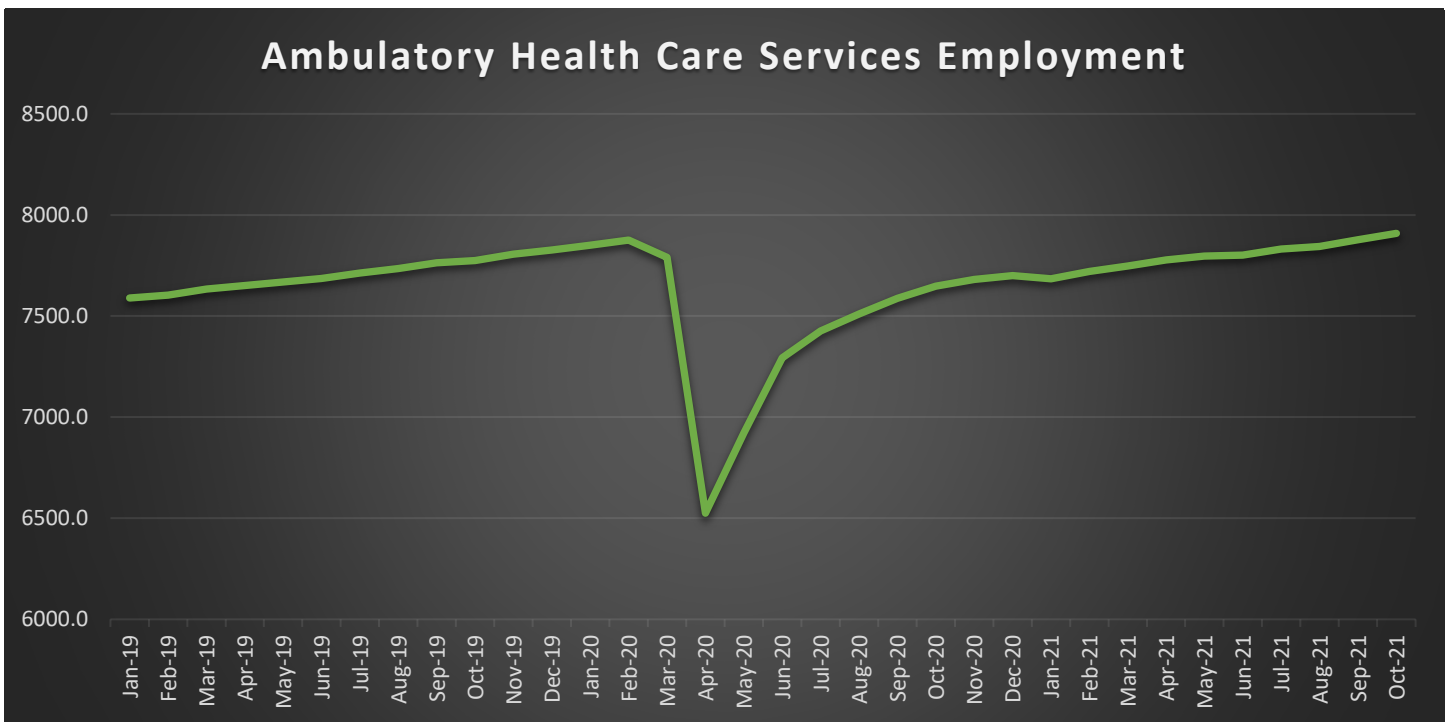
Given the current staffing crisis, impending federal COVID-19 vaccination mandate, and rising concerns of placement to long-term care, LeadingAge Wisconsin reviewed available data to objectively identify the potential ramifications of losing staff in long-term care through a vaccine mandate. We examined data from both the National Health Safety Network (NHSN) and the Bureau of Labor Statistics (BLS). Nursing facilities across the country have been reporting over 240 data elements to NHSN each week, throughout the COVID-19 pandemic.

First, how has the staffing crisis in long-term care impacted admissions? The initial step in evaluating this question is to first identify if there is, in fact, a staffing crisis in long-term care. Below is a graph from the BLS data that shows the number of individuals employed in long-term care since the start of 2018:



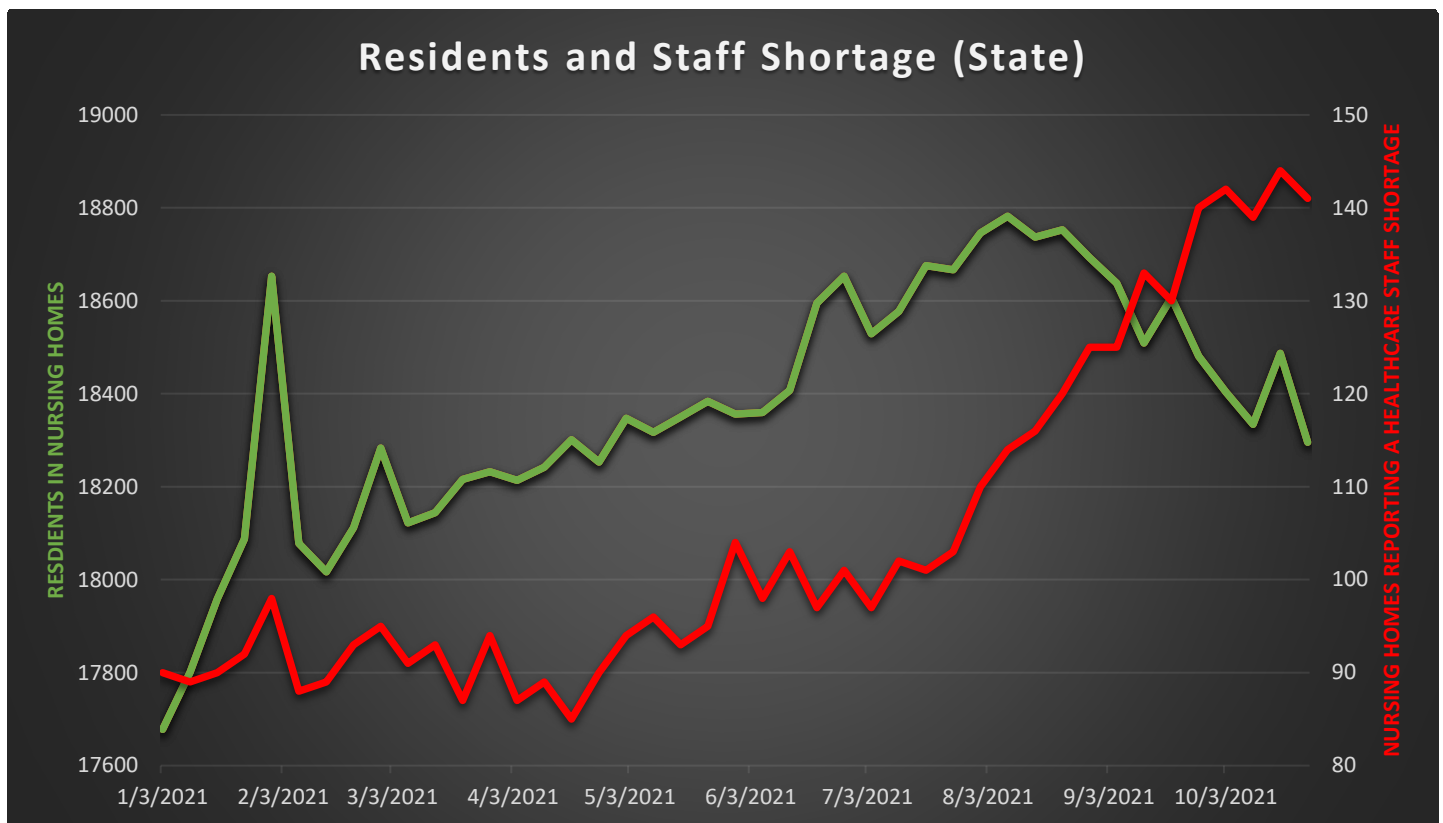
As the data shows, there was a precipitous decline in long-term care employment that started during the early stages of the pandemic and has continued to fall. Most recently, national long-term care employment further experienced a large drop from August 2021 to September 2021. This single month drop of 1.01% was second only to the 3.86% drop that was experienced from March to April of 2020.

Policy discussions on the systemwide implications of the healthcare staffing challenge are critical, so it is also important to compare long-term care to other health-care sectors that have experienced declines in employment over the course of the pandemic. Below are national graphs for both hospital employment, as well as ambulatory health care services (clinics).



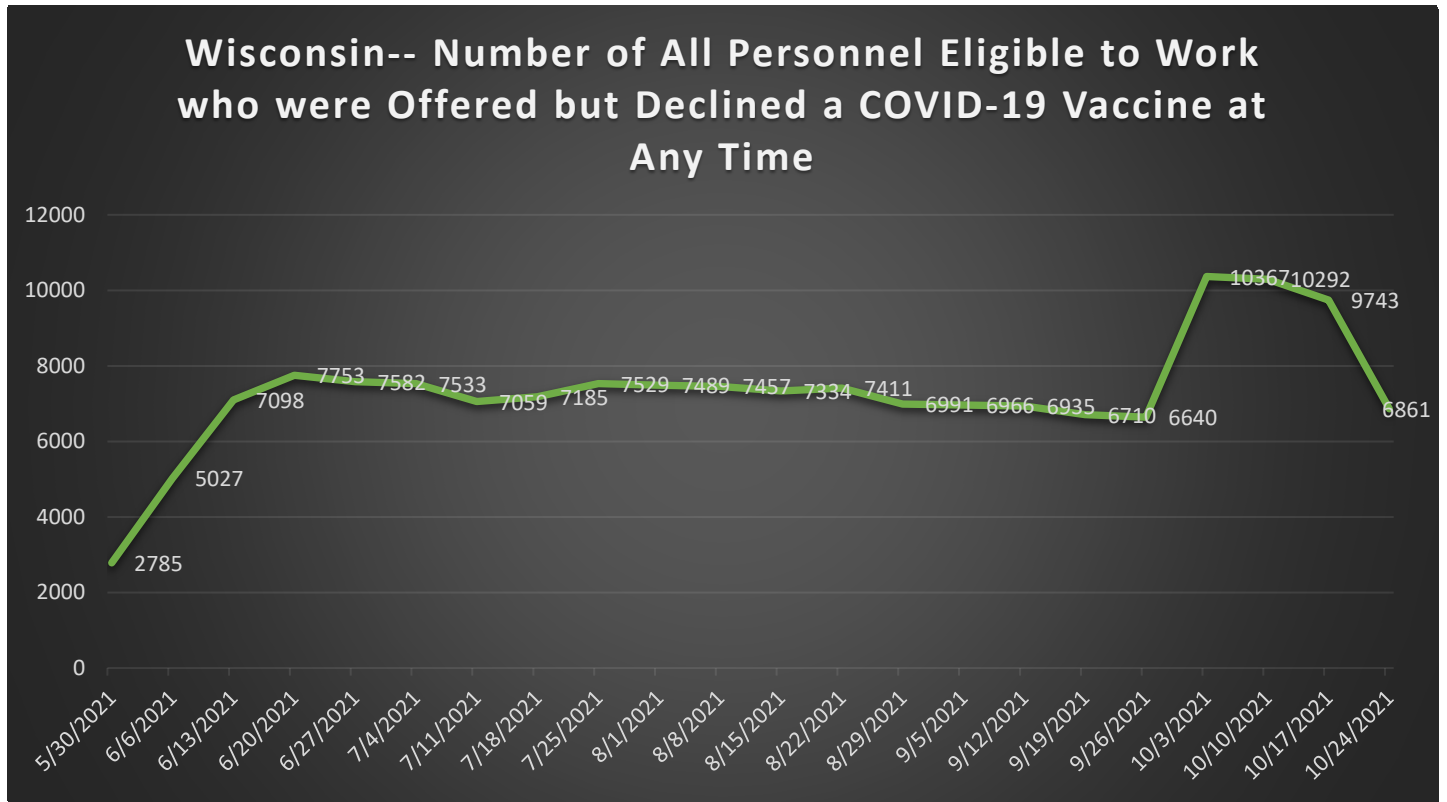
As noted, the staffing return in these sectors has fared significantly better than the continued decline of long-term care. Nationally, hospitals are currently staffed at 98.46% of January 2020 levels, clinics at 100.75%, but long-term care is only staffed at 88.00% of pre-pandemic levels, with no stabilization yet noticed in the data.

The next question worth answering is if the decline in long-term care staff has had an impact on access to care. NHSN data monitors total individuals cared for and asks nursing facilities if they have a shortage of healthcare staff. Overlaying those two data points (Wisconsin-specific) over the course of 2021 paints an interesting picture.



The green line represents individuals being care for in a Wisconsin nursing facility that week, the red line represents the number of the roughly 360 Wisconsin nursing facilities that reported being short of healthcare staff that week. We see a steady increase in nursing facility occupancy over the course of 2021 as three things were happening; temporary funding was being utilized, vaccines were being administered, and more was becoming known about the virus. For a brief period in early 2021 the number of facilities reporting a shortage of healthcare staff was also falling. In August of 2021, however, the data shows a large jump in the number of nursing facilities reporting a shortage of healthcare staff. Following very soon after that, we see a decline in nursing facility occupancy that has not stabilized to date. From conversations our members have had with their hospital partners, this dramatic occupancy decline is not due to a lack of potential admissions, but rather a forced-choice that has been made by many nursing facilities to stop admissions because they simply do not have enough staff to care for additional residents. *This forced-choice to stop or curtail admissions, consequently, has created significant challenges in securing post-acute care placements for hospital patients.*

The data is fairly clear in showing that having staff available directly impacts access to long-term care in Wisconsin. Since May of 2021, NHSN data has also been tracking the number of staff that have chosen to not be vaccinated. Below is a graph that shows the number of staff each week that have chosen not to be vaccinated.



Under the recent federal COVID-19 vaccine mandate, all eligible staff must have received the necessary shots to be fully vaccinated – either two doses of Pfizer or Moderna or one dose of Johnson & Johnson – by January 4, 2022. Based on the most recent available data (last week in October 2021), *6,861 staff in Wisconsin nursing facilities have declined the COVID-19 vaccine*. This is despite the best efforts of the nursing facilities themselves, as well as efforts on the part of DHS and the Federal government to increase vaccination rates among health care workers. Clearly not all staff will agree to be vaccinated by the January 4th federal deadline. How many nursing facility staff will agree to be vaccinated is unknown at this point; however, if 85% of unvaccinated staff agree to be vaccinated, that would still leave over 1,000 staff no longer able to work in a nursing home. Thus, the staffing challenge is expected to intensify in the coming months.

Without access to additional resources to hire more staff, retain current staff, or access to additional care workers through avenues such as the National Guard, more nursing facilities will fall far short of the number of staff they need to care for current and new admissions. This will cause even greater accessibility challenges for our Wisconsin long-term care system.