Member Call Summary

October 31, 2025

Special Guest – Terry Romin, Value First

Share Your Story: National Media Opportunity on Immigration Policies

LeadingAge National has reached out with a media request for members interested in sharing their experiences with national outlets regarding the impact of President Trump's immigration policies on aging services workforce. This is an important opportunity to highlight the real-world effects these policies have had on foreign-born staff and the communities they serve.

If you have seen or experienced challenges among your foreign-born workers, such as issues related to Temporary Protected Status or other policy changes, and are willing to share your story, we want to hear from you. LeadingAge National has confirmed that anonymity can be granted if requested, and all interview details will be coordinated in writing beforehand.

Timing is urgent, as national outlets are looking to arrange interviews in the coming weeks. If you are interested in participating or have questions, please reach out to Sam Heibel at sheibel@leadingageiowa.org . Your voice can help shape the conversation around workforce and immigration policy in aging services.

OIG Releases Report on Nursing Home Special Focus Facility Program

The Health and Human Services (HHS) Office of Inspector General (OIG) released a report and accompanying data snapshot on October 29 evaluating the nursing home Special Focus Facility (SFF) program. The report examined nursing homes participating in the program from 2013 – 2022 and made three recommendations to the Centers for Medicare and Medicaid Services (CMS) based on findings that SFF program graduates often failed to maintain quality improvements in the years following graduation from the program.

What is the SFF Program?

The Centers for Medicare & Medicaid Services (CMS) is required to conduct the SFF based on Sections 1819 and 1919 of the Social Security Act. The SFF program requires CMS to focus on nursing homes that have a persistent record of noncompliance leading to poor quality of care. Statistically, these providers are among the poorest performing nursing homes in each state and must be inspected no less than once every six months

with increasingly severe enforcement action taken as warranted. On October 21, 2022, CMS issued a Quality Safety & Oversight memo (QSO-23-01-NH) revising the SFF program.

Each state is required to maintain a specific number of SFF nursing homes in the program. For example, Iowa is required to have 2 nursing homes and Illinois is required to have 4. Nationwide, there are 88 slots for the SFF program. CMS provides the state survey agency with a list of SFF Candidates. These candidates are based on the number of slots in the state for SFF nursing homes. Using the examples above, Iowa's candidate list includes the worst 10 nursing homes based on the total health facility inspection score, while Illinois is provided with the worst 20.

What happens once a nursing home is selected?

The state survey agency selects the nursing homes for inclusion in the program and notifies CMS of their selections. Once CMS approves the state survey agency's selection, they notify the nursing home of their selection. The nursing home then has 5 business days to provide the state survey agency with contact information of all accountable parties (administrator, chair of the governing body, anyone who owns more than 5% interest in the nursing home, management company, landlord, mortgage holder, and corporate location. The state survey agency then conducts a meeting with all interested parties to outline the SFF actions and resources.

The SFF nursing home undergoes recertification surveys every 6 months instead of annually with progressive enforcement action if they continue to have deficiencies. If deficiencies are cited during these or any other survey actions result in harm or immediate jeopardy, the state survey agency must notify CMS immediately. Additionally, the SFF will not have an opportunity to correct the deficiency before enforcement action is implemented. Any deficiency cited at a scope and severity of an F or higher must increase in severity, which may include higher monetary penalties or stricter enforcement such as mandatory denial of payment.

How does a SFF graduate from the program?

The nursing home will graduate from the SFF program once it has two consecutive standard health surveys with 12 or fewer deficiencies cited at a scope of severity at an E or less on each survey.

The SFF will remain in the program if:

- They have any standard health survey with a deficiency scope and severity of F or higher.
- Any LSC or EP survey cited at a scope and severity of a G or higher.
- Any survey with 13 or more total deficiencies.

- Intervening complaint surveys with 13 or more total deficiencies, or any cited at a scope and severity of an F or higher.
- The SFF has any pending complaint surveys triaged at an IJ, Non-IJ High, or until they have returned to substantial compliance.

CMS also established criteria that may result in discretionary termination from Medicare and Medicaid programs if they have deficiencies cited at an IJ on any two surveys (health, complaint, LSC, or EP) while in the SFF program.

What did the OIG Report Find?

The OIG report indicated that from the years of 2013 – 2022 the graduates from the SFF program rarely sustained improvements that were made within the program.

The report includes several statistical elements including that 88% of SFF nursing homes are for-profit urban providers while only 8% were non-profit, 3% were government owned, and 1% had missing ownership information.

74% of the SFF during this time graduated, 13% remained in the program as of 2022 (as it was their first time in the program), 11% were terminated or closed, while 3% were repeats in the program.

More than half of the graduating nursing homes had a serious deficiency within 3 years of graduating from the program, including nearly 40% in the first year.

CMS does not include staffing as a factor in the SFF candidate list, but nursing homes that graduate from the SFF program and sustain improvements have higher staffing levels than those that did not sustain improvements. Additionally, CMS does not consider ownership at all in the SFF, but a handful of owners stand out as owning many low-quality nursing homes pointing to poor management practices and states reported to the OIG that owners play an important role in whether nursing homes improve the quality of care.

What does OIG recommend?

1. Imposing more nonfinancial enforcement actions that encourage sustained compliance as imposing financial penalties drew resources away from possible staffing improvements.
2. Assess the extent to which CMS took enhanced enforcement action for SFF graduates and the effectiveness of those actions, particularly for graduates that receive deficiencies for staffing.
3. Incorporate nursing home ownership information into the SFF program, such as selecting SFFs and identifying patterns of poor performance.

OIG indicated on their report website that CMS agreed with the second recommendation but did not agree with the first and the third.

Upcoming Events

Midwest State Night Out (in-person)
November 2, 2025 from 6-7:30 p.m.
Location: Cheers Boston, 84 Beacon St., Boston, MA

MDS Validation Audits and QRP Webinar (virtual)
November 13, 2025 from 10:30-11:30 a.m.

Regional Networking Meeting (in-person)
November 13, 2025 from 1-3 p.m.
Location: Ridgecrest Village, 4130 Northwest Blvd., Davenport

Skilled Nursing Bootcamp (in-person)
November 17, 2025 from 9 a.m.-4:15 p.m.
Location: Aurora Training Center, 11159 Aurora Ave., Urbandale

Assisted Living Bootcamp (in-person)
November 18, 2025 from 9 a.m.-4:15 p.m.
Location: Aurora Training Center, 11159 Aurora Ave., Urbandale

Dementia Leadership Course (virtual)
November 19, 21 & December 3, 5, 2025 from 10:15 a.m.-2:15 p.m.