

## **Funding woes reduce nursing homes ability to recruit top staff**

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**Tim Graves** - Special to the Express-News

The Feb. 14 Express-News stories, "Elders unprotected" and "Ratings don't tell full story," are a reminder that while incidents of abuse and neglect are infrequent and far from the norm, according to the government's own statistics, they receive a great deal of media attention.

We acknowledge we still have challenges in addressing and improving troubled facilities and ensuring uniformity in care quality, but, for consumers, it is essential to recognize the actions of a handful of nursing staff can unfortunately overshadow the outstanding work of 100,000 dedicated health professionals who provide quality, compassionate care every hour of every day.

Thus, we hope your stories will shed needed light not just on the need for sustaining quality improvement initiatives now under way in Texas facilities, but also the problematic nature of the survey system, the obvious flaws in the federal "Five-Star" ratings system and, most important, the direct correlation between Medicaid and Medicare funding adequacy, staffing stability and patient care quality.

Our profession continues its commitment to increased quality and transparency. We are dismayed by the lack of communication between the federal government and providers to, for example, ensure the index associated with the "Five-Star" ratings system includes accurate, consistent and comparable data.

The haste with which this system was put in place has created a system that is far from optimal. Does this mean the "Five-Star" system is useless? No, it is a well-intended initiative that still provides consumers with a method of assessing a facility.

Unfortunately, this is premised on the nursing home survey system. Today's system does not specifically measure quality; it merely assesses compliance with federal and state regulations.

Customer satisfaction is a superior indicator of the quality of care and quality of life experienced by residents.

Also key is to ensure all facilities have the resources necessary to sustain facility improvement efforts for the long term — and to ensure the Texas Medicaid system funds the actual cost of providing quality care. Since 1999, state and federal funding for Texas Medicaid nursing home care has fallen short of the

state's own estimates of the dollars needed for patient care. In 2010, the funding shortfall is approximately \$200 million.

The combination of \$725 million federal Medicare cuts made in 2009 by the federal Center for Medicare and Medicaid Services for Texas alone, and state Medicaid cuts now being considered by (our political leadership), will have a direct, negative impact on resident care as well as our local caregiver jobs base.

Before we discuss cutting seniors' key Medicaid-financed programs, we must first look at the fact facilities are already dealing with a state and federal funding environment that squeezes their collective ability to recruit and retain high quality direct care staff. Ultimately, this affects patient care itself.

Eighty to 85 percent of Texas' nursing home residents — most of whom are 85 or older and afflicted with multiple chronic health conditions — are dependent upon programs that have already been cut or are being examined for cuts in Austin.

This double whammy merits scrutiny from federal, state and local officeholders in the months ahead. We encourage the Express-News to also examine this facet of the funding quandary faced by nursing homes, their staff, and their elderly patients.

*Tim Graves is president/CEO of the Texas Health Care Association.*