March 30, 2023

HHS Secretary Xavier Becerra CMS Administrator Chiquita Brooks-LaSure Department of Health and Human Services Hubert Humphrey Building 200 Independence Ave. S.W. Washington, D.C. 20201

Dear Secretary Becerra and Administrator Brooks-LaSure:

We represent a group of individuals and organizations working to bring transformative change to America's residential long-term care system. Near-term solutions to make transformative changes at the national level in the nursing home sector are at hand. This letter highlights our support for a fundamental accountability reform – transparency. There is an urgent need to promulgate clear, comprehensive rules on nursing home ownership and financial transparency now.

Sixteen years ago, a *New York Times* article analyzed the tragic impact that non-transparent, complex ownership structures can have on the quality of nursing home care.¹ Subsequent analyses have clearly demonstrated the deeply negative consequences for both residents and staff of allowing opaque, non-accountable ownership structures in nursing homes to multiply in the absence of organized, proactive federal policy and oversight. ^{2,3,4,5}

As is increasingly understood, acquisitions of nursing homes by private equity and real estate investment trusts (REITs) are key areas where transparency and accountability in nursing home ownership are needed. In private equity acquisition of nursing homes, long-stay residents had higher rates of potentially preventable hospitalizations and Emergency Room visits, as well as higher Medicare costs.⁶ These issues extend to other types of ownership structures, including related party transactions and corporate layers used to obscure profits and provide legal liability protection. The January 2023 GAO report noted ongoing gaps in nursing home industry ownership transparency.⁷ Corrective action by the federal government is possible, just as happened in the wake of a 2019 GAO report on the defense industry documenting how profits had been siphoned off by non-transparent ownership arrangements among defense contractors.⁸

Congress provided authority for making transparency of ownership a reality in Section 6101 of the Affordable Care Act (ACA) of 2010. The statute explicitly requires nursing homes certified by Medicare and licensed by Medicaid to make available specific information on ownership, including a description of the governing body, managing employees, and the organizational structure of each Medicare skilled nursing facility (SNF) or Medicaid licensed nursing facility (NF), along with detailed information from "additional disclosable parties." These parties are "any person or entity who exercises operational, financial, or managerial control over the facility or a part thereof, or provides policies or procedures for any of the operations of the facility, or provides financial or cash management services to the facility."

In 2011, the Centers for Medicare and Medicaid Services (CMS) pledged in a Notice of Proposed Rulemaking (NPRM) that "to respond properly to all of the comments received related to the disclosure of information requirements, we will publish a separate final rule specifically addressing these provisions at a later date." Yet in 2012, the agency indicated that it had no plans to promulgate a final rule, while declining to provide a rationale.

More than a decade later, in a second NPRM published in February 2023, CMS noted: "We did not finalize these proposed disclosure provisions in the subsequent final rule, published on August 8, 2011, due to the need for more time to consider the comments received, though we stated that we would address our provisions in a separate final rule in early 2012. After reviewing the comments, we did not publish a final rule or finalize our proposals." There was no explanation for this decision then, nor is one shared in the second NPRM.

On February 28, 2022, President Biden issued a landmark "Protecting Seniors by Improving Safety and Quality of Care in the Nation's Nursing Homes" Executive Order – an order which he reiterated at his State of the Union Address the next day. Included in the White House initiative is a directive to "Improve Transparency of Facility Ownership and Finances" which calls on CMS to "implement Affordable Care Act requirements regarding transparency in corporate ownership of nursing homes, including by collecting and publicly reporting more robust corporate ownership and operating data."

Adding to the urgency of promulgating clear, comprehensive rules on ownership and financial transparency, a 2022 report issued by the HHS Assistant Secretary for Planning and Evaluation (ASPE) identified the rising frequency of ownership changes in SNFs, ¹³ noting that a labyrinth of poorly described ownership structures complicates efforts to assess the impact of ownership changes on health care costs and quality. An earlier report issued in February 2021 by the National Bureau of Economic Research (NBER) pointed to correlations between investor (private equity) ownership of nursing homes with higher mortality and lower staffing. ¹⁴ In addition, a 2022 report issued by Public Citizen made similar points. ¹⁵

Financial decisions and cost pressures placed on administrators and practitioners working in nursing homes impact quality. Facility operations, staffing and services can be influenced by opaque governance structures. For example, the decision to sell the real estate on which a nursing home is situated can result in staffing changes due to the burden of lease payments that may sharply increase over time and must be satisfied as a priority item in operating budgets.

All studies reinforce the urgency of effectively implementing Section 6101 so that the federal government can know who oversees making key financial, operational and managerial decisions about the operations, thereby influencing the quality of care provided in the nation's nursing homes. The National Academies of Sciences, Engineering and Medicine report issued in April 2022, "*The National Imperative to Improve Nursing Home Quality: Honoring our Commitment to Residents, Families and Staff,*" identifies as a top-level priority "increas[ing] transparency and accountability of finances, operations and ownership," and identifies HHS as the responsible partner for operationalizing this goal and related recommendations (p. 12-13).¹⁷

The massive impact of the COVID-19 pandemic on nursing homes underscores the urgent need for nursing home owners to be held accountable for quality and safety. A lack of infrastructure in many nursing homes to provide effective infection prevention and control practices was consequential during the pandemic. ¹⁸ As conditions changed and the virus spread, family members and public health officials had an incomplete understanding of who was exercising operational, managerial, and financial control in America's nursing homes. The OIG reported 169,291 more nursing home deaths in 2020 than would have normally been expected. ¹⁹

Medicare and Medicaid reimbursements are designed to pay for resident care. Hence, it is essential for the federal government to have a full and complete picture of ownership, and those persons and entities who exercise operational, managerial, and financial control.

We strongly support full realization of the recommendations in the 2022 NASEM report, and therefore recommend:

- CMS work to provide thoughtful discussion, examples, and a clear definition of what constitutes a person or entity that "exercises operational, financial, or managerial control over the facility or a part thereof" as part of promulgating Sec. 6101 of the ACA.
- CMS work to provide clear time parameters and penalties for failure to comply with reporting requirements under 6101, including penalties for submitting false or misleading information.
- CMS establish a requirement for routine auditing that will verify whether ownership information being reported is accurate, and will analyze ownership information together with cost reports, staffing data, survey inspection results, and other relevant information.
- CMS ensure that accurate and comprehensive data on the finances, operations, and ownership of all
 nursing homes are available in real-time, readily usable, through a searchable database providing access
 to consumers, payers, researchers, and federal and state regulators.

We stand ready to support work to achieve these goals, and with this letter, the principal signatories respectfully request a meeting. Under separate cover, we are also sending a letter addressing appropriate nursing home staffing levels.

Respectfully,

Mill Warrer

Michael Wasserman, MD, CMD, Chair, Public Policy Committee, California Association of Long Term Care Medicine (Wassdoc@aol.com)

Charles Houring to

Charlene Harrington, PhD, RN, Professor Emerita, University of California, San Francisco (Charlene.Harrington@ucsf.edu)

Anne Montgomery, *Principal, AHM Enterprises* (anneheathmontgomery@gmail.com)

Authorizary

In Join - vanka

Lori Smetanka, Executive Director, National Consumer Voice for Quality Long-Term Care (Lsmetanka@theconsumervoice.org)

Swan Gran

Susan Ryan, Senior Director, The Greenhouse Project (sryan@thegreenhouseproject.org)

Penny M. Cook

Penny Cook, President/CEO (Penny.Cook@pioneernetwork.net)

Organizational Signatories

National Committee to Preserve Social Security and Medicare

California Association of Long Term Care Medicine (CALTCM)

Individual Signatories

Terry Fulmer PhD, RN, FAAN

President The John A. Hartford Foundation New York, NY 10022 terry.fulmer@johnahartford.org

Fernando Torres-Gil, M.S.W., Ph.D.

Professor, Social Welfare and Public Policy Director, Center for Policy Research on Aging UCLA Luskin School of Public Affairs

Jennie Chin Hansen, RN, MS, FAAN

Joe Angelelli, PhD

Patricia G. Archbold, DNSc, RN

Professor Emerita, Family and Gerontological Nursing, School of Nursing Oregon Health & Sciences University Portland, OR Former National Program Director Building Academic Geriatric Nursing Capacity Pat.Archbold@gmail.com

Louise Aronson, MD, MFA

Professor, UCSF Division of Geriatrics School of Medicine University of California San Francisco http://geriatrics.medicine.ucsf.edu/

Alyce Ashcraft PhD, RN, CNE, ANEF, FGSA, FAAN

President, National Hartford Center for Gerontological Nursing Excellence Professor and Associate Dean for Research and Scholarship, Mildred and Shirley L. Garrison Professorship in Geriatric Nursing University Distinguished Professor School of Nursing, Texas Tech University Health National Hartford Center of Gerontological Nursing Excellence (NHCGNE)

National Association of Health Care Assistants (NAHCA)

Sciences Ct., Lubbock, Texas alyce.ashcraft@ttuhsc.edu

Deb Bakerjian PhD, APRN, FAAN, FAANP, FGSA

Interim Associate Dean for Practice and Clinical Professor
Director, SPLICE Project
Director, Advanced NP PRACTICE- NP Residency
Project and Director, PA PROMISE
Betty Irene Moore School of Nursing
University of California, Davis
dbakerjian@ucdavis.edu

Melissa Batchelor, PhD, RN, FNP, FGSA, FAAN

<u>Director, Center for Aging, Health and Humanities</u>
Associate Professor
School of Nursing
The George Washington University
Washington, DC
<u>MelissaBPhD@gwu.edu</u>

Lazelle Benefield, PhD, RN, FAAN, FGSA

Dean Emeritus, College of Nursing, University of Oklahoma Health Sciences Center, Oklahoma City, OK

Lazelle-Benefield@ouhsc.edu

Kim Bergen-Jackson, PhD, RN-BC, LNHA

Administrator

Oaknoll Retirement Residence. Iowa City, IA Kbergen-jackson@oaknoll.com

Marie Boltz, PhD, GNP-BC, FGSA, FAAN

Elouise Ross Eberly and Robert Eberly Endowed Professor

Ross and Carol Nese College of Nursing, Penn State University mpb40@psu.edu

Barbara J. Bowers, PhD, RN, FAAN

Kathleen Brewer-Smyth, PhD, RN, MSN, CRRN, FAAN

Associate Professor, School of Nursing College of Health Sciences, University of Delaware, Newark, DE

kbsmyth@udel.edu

Kathleen C. Buckwalter, PhD, RN, FAAN

Co-Director, National Health Law and Policy Resource Center, College of Law Professor of Research & Distinguished Nurse Scientist in Aging Donald W. Reynolds Center of Geriatric Nursing Excellence, College of Nursing, OUHSC Professor Emerita, University of Iowa College of Nursing

kathleen-buckwalter@uiowa.edu

Pamela Cacchione, PhD, CRNP, BC, FGSA, FAAN

Ralston House Term Chair in Gerontological Nursing
Professor of Geropsychiatric Nursing
School of Nursing
University of Pennsylvania
Philadelphia, PA
pamelaca@nursing.upenn.edu

Diane Carter, MSN, RN, FAAN

Founder & Previous President/CEO American Association of Post-Acute Care Nursing Denver, Colorado Dianecarterltc.rn@gmail.com

Ramón Castellblanc, Ph.D.

Professor Emeritus, Public Health San Francisco State, San Francisco, CA ramonc@sfsu.edu

Susan Chapman PhD, MPH, RN, FAAN

Professor, Health Policy Nursing
Department of Behavioral Sciences
Core Faculty, National Clinician Scholars Program
University of California, San Francisco
Susan.Chapman@ucsf.edu

Carolyn K Clevenger, DNP, GNP-BC, AGPCNP-BC, FAANP, FGSA, FAAN

Clinical Professor, Nell Hodgson Woodruff School of Nursing

Director, Integrated Memory Care (IMC) Emory University, Atlanta, Georgia carolyn.clevenger@emory.edu

Tara A. Coates, PhD, RN, FAAN

Executive Director, The Hartford Institute For Geriatric Nursing Professor, Rory Meyers College of Nursing New York University Tara.cortes@nyu.edu

Mary Ellen Dellefield, PhD, RN, FAAN

Former Research Nurse Scientist
VA San Diego Healthcare System
Clinical Professor
Clinical Faculty member, School of Nursing
University of California San Francisco
Mary.Dellefield@va.gov

Catherine Dodd, PhD, RN, FAAN

Commonweal Board, Vice-Chair Board Member, National Committee to Protect Social Security and Medicare Principal Consultant Healing the Health System San Francisco, California Catherine.Dodd@gmail.com

Carroll Estes, PhD

Professor Emerita
Department of Social & Behavioral Sciences
Founding Director
Institute for Health & Aging
University of California, San Francisco
Carroll.Estes@gmail.com

Donna M. Fick, RN, GCNS-BC, PhD RN

Elouise Ross Eberly Endowed Professor Ross and Carol Nese College of Nursing Pennsylvania State University Director, Tressa Nese and Helen Diskevich Center of Geriatric Nursing Excellence Editor, *Journal of Gerontological Nursing* President-Elect, *American Geriatrics Society* Dmf21@psu.edu

Cristina Flores, RN, PhD, FGSA

Assistant Adjunct Professor
Department of Social & Behavioral Sciences
University of California San Francisco
cristinafloresRN@gmail.com

Catherine Alicia Georges, EdD, RN, FAAN

Professor Emerita Lehman College-CUNY President, National Black Nurses Foundation

Catherine.georges@lehman.cuny.edu

Shirley Girouard, PhD, RN, FAAN

Professor and Associate Dean Co-director, Geriatric Workforce Enhancement Program SUNY Downstate Health Sciences University, Brooklyn, NY

Carrie Graham, MGS, PhD

Shirley.Girouard@downstate.edu

Adjunct Professor Institute for Health & Aging School of Nursing University of California, San Francisco, CA Carrie.Graham@ucsf.edu

Lisa Grod, PhD MSGCPG, BCPA

LWG & Associates
Vice Chair Public Policy Committee
California Association of Long
Term Care Medicine, Santa Clarita, CA
lawgrod@gmail.com

Atul Gupta, Ph. D.

Assistant Professor, The Wharton School, University of Pennsylvania Senior Fellow, Leonard Davis Institute for Health Economics atulgup@wharton.upenn.edu

Elizabeth Halifax, PhD, RN

Assistant Clinical Professor Department of Physiological Nursing School of Nursing University of California, San Francisco elizabeth.halifax@ucsf.edu

J Taylor Harden, PhD, RN, FGSA, FAAN

Visiting Professor University of Texas at Austin School of Nursing, Executive Director Emeritus National Hartford Center of Gerontological Nursing Excellence jtaylorharden@gmail.com

Tracie C. Harrison, PhD, RN, FAAN, FGSA Professor

Sun Endowed Chair in Geriatric Nursing University of Arkansas Medical Sciences Little Rock, AR tcharrison@uams.edu

Keela Herr, PhD, RN, AGSF, FGSA, FAAN

Professor, College of Nursing University of Iowa, Iowa City, IA keela-herr@uiowa.edu

David Hoffman, JD, FCPP

Practice Professor of Law
Drexel University
Thomas R. Kline School of Law
President, David Hoffman & Associates, PC
Philadelphia, PA
dhoffman@dhoffmanassoc.com

Evie A. Kalmar, MD, MS

Assistant Professor Division of Geriatrics, Department of Medicine University of California, San Francisco Evie.Kalman@va.gov

Jeanie Kayser-Jones, RN, PhD, FAAN

Professor Emerita
Department of Physiological Nursing
School of Nursing & Medical Anthropology
University of California, San Francisco
Jeanie.Kayser-Jones@UCSF.edu

David E. Kingsley, PhD

Professor Emeritus Center for Health Policy & Information Dept. of Health Management & Policy Kansas University Medical Center Kansas City, KS dkingsley@tallgrasseconomics.org

Nina A. Kohn, Ph.D.

David M. Levy Professor of Law Syracuse University, Syracuse, NY nakohn@syr.edu

Ann Kolanowski, PhD, RN, FAAN

Professor Emerita of Nursing Professor Emerita of Psychiatry Penn State Hershey College of Medicine, University Park, PA Amk20@psu.edu

Christine Kovner PhD, RN, FAAN

Professor Emerita
Rory Meyers College of Nursing
New York University
ctk1@nyu.edu

Albert H. Lam, MD

Medical Director, Geriatric Medicine Sutter Health Immediate Past President, CALTCM, Palo Alto, CA Alterthlam@gmail.com

Yue Li, PhD

Professor of Public Health Sciences
Director, Health Services Research & Policy
(HSRP) PhD & MS Programs
Director of Research, Division of Health Policy and
Outcomes Research (HPOR)
Department of Public Health Sciences
University of Rochester Medical Center
Rochester, NY
yue li@urmc.rochester.edu

David Lindeman, PhD

Director, Center for Technology and Aging Executive Director, CITRIS Health CITRIS and the Banatao Institute University of California, Berkeley dlindeman@citris-uc.org

Ruth Ludwick, PhD, RN-BC, APRN-CNS, FAAN

Professor Emeritus, Kent State University, College of Nursing Adjunct Graduate Faculty, Northeast Ohio Medical

University rludwick@kent.edu

Nancy E. Lundebjerg, MPA

CEO

American Geriatrics Society

Steve Lustig, Ph.D.

Associate Vice Chancellor Emeritus Health and Human Services University of California, Berkeley and Chair, The Berkeley Age-Friendly Continuum SteveLustig45@gmail.com

Marty Lynch, Ph.D., MPA

CEO Emeritus, LifeLong Medical Care Alameda County Health Consortium Berkeley- Oakland, CA mlynch@lifelongmedical.org

Caroline Madrigal, PhD, RN

Nurse Scientist VA Boston Healthcare System Geriatrics and Extended Care, Boston, MA Caroline.Madrigal@va.gov

Diane Mahoney PhD, RN, GNP-ret, FAAN

Professor Emerita, Senior Research Scientist Professor Emerita, School of Nursing MGH Institute of Health Professions Massachusetts General Hospital, Boston, MA dmahoney@mghihp.edu

Elizabeth Manias RN BPharm, MPharm, MNStud, PhD, DLF-ACN, MPS, MSHPA, FAAN Monash University
Faculty of Medicine, Nursing and Health Sciences School of Nursing and Midwifery Clayton Victoria Australia
Elizabeth.Manias@monash.edu

Diana J. Mason, PhD, RN, FAAN

Senior Policy Service Professor, Center for Health Policy and Media Engagement, George Washington University School of Nursing djmasonrn@gmail.com

Wendy Max, PhD

Director Emertia, Institute for Health & Aging Professor Emerita of Health Economics Department of Social and Behavioral Sciences University of California, San Francisco Wendy. Max@ucsf.edu

Ann M. Mayo, RN, DNSc, FAAN

Professor, Hahn School of Nursing & Health Science and Beyster Institute for Nursing Research University of San Diego San Diego, CA, <u>Amayo@sandiego.edu</u>

Laura Mosqueda, M.D.

Professor of Family Medicine and Geriatrics Director, National Center on Elder Abuse Keck School of Medicine of USC University of Southern California Laura.Mosqueda@med.usc.edu

Dana B. Mukamel Ph.D.

Professor of Medicine, Public Health and Nursing Director, iTEQC Research Program Medicine-Division of General Internal Medicine University of California, Irvine dmukamel@hs.uci.edu

Christine Mueller, PhD, RN, FGSA, FAAN

Professor I Senior Executive Associate Dean for Academic Programs

Katherine R. & C. Walton Lillehei Chair in Nursing Leadership

Long-term Care Professorship in Nursing (Emeriti) Distinguished Educator in Gerontological Nursing University of Minnesota, School of Nursing cmueller@umn.edu

Ulrike Muench, PhD, RN, FAAN

Associate Professor
Director Health Policy Specialty
Department of Social & Behavioral Sciences
School of Nursing
Philip R. Lee Inst. for Health Policy Studies
University of California, San Francisco
Ulrike.Muench@ucsf.edu

Robert Newcomer, PhD

Professor Emeritus of Medical Sociology Department of Social & Behavioral Sciences Institute for Health & Aging University of California, San Francisco, CA Robert.Newcomer@ucsf.edu

Cheryl Phillips, MD, CMD, AGSF

Larry Polivka, Ph.D.

Retired Director, Claude Pepper Center Professor Emeritus, School of Aging Studies University of South Florida, Tampa, FL Former Director of the Florida Office of Aging and Adult Services, Tallahassee, FL lpolivka2@fsu.edu

Marilyn Rantz, PhD, RN, FAAN

Curators' Professor Emerita Sinclair School of Nursing University of Missouri, Columbia, MO rantzm@missouri.edu

Tom Rice, Ph.D., Professor

Distinguished Professor of Economics Fielding School of Public Health University of California, Los Angeles <u>triceucla@gmail.com</u>

Ellarene Duis Sanders PhD, RN

Executive Director, National Hartford Center of Gerontological Nursing Excellence Reston, VA. edsanders@nhcgne.org

Andrew E. Scharlach, PhD

Kleiner Professor of Aging, Emeritus School of Social Work University of California, Berkeley, scharlach@berkeley.edu

Richard M. Scheffler, PhD

Distinguished Professor in the Graduate Schools School of Public Health and the Goldman School of Public Policy, University of California, Berkeley. rscheff@berkeley.edu

Jack Schnelle, PhD

Professor Emerita, Dept of Geriatric Medicine Center for Quality Aging Brain Dysfunction, and Survivorship (CIBS), Center for Critical Illness

VA Geriatric Research, Education & Clinical Center (GRECC), Vanderbilt University Medical Center Nashville, TN, john.schnelle@vumc.org

Elizabeth Scruth PhD MPH RN CNS CCRN-K CCNS FCCM FCNS CPHQ

Executive Director Clinical Quality Programs, Data Analytics and Tele Critical Care, NCAL Safety, Quality and Regulatory Services
Kaiser Foundation Hospital and Health Plan
Oakland, CA.

Elizabeth.Scruth@kp.org

Lisa Skemp, PhD, RN, FGSA, FAAN

Professor
Marcella Niehoff School of Nursing
Secondary Appointment: Parkinson School of
Health
Sciences and Public Health
Loyola University Chicago, Chicago, IL
lskemp@luc.edu

Joanne Spetz, Ph.D.

Director Philip R. Lee Institute for Health Policy Studies
University of California, San Francisco
Brenda and Jeffrey L. Kang Presidential Chair in
Health Care Finance
University of California, San Francisco
joanne.spetz@ucsf.edu

David G. Stevenson, PhD

Professor, Department of Health Policy Vanderbilt University School of Medicine Nashville, TN david.stevenson@Vanderbilt.Edu

Mark A. Unruh, PhD.

Laura M. Wagner, PhD, RN, GNP, FAAN

Professor of Nursing
Department of Community Health Systems
School of Nursing
University of California, San Francisco
Laura.Wagner@ucsf.edu

Margaret Wallhagen, PhD, GNP-BC, AGSF, FGSA, FAAN, Professor

Department of Physiological Nursing
Director, UCSF Hartford Center of
Gerontological Nursing Excellence
Sr. Nurse Scholar, VA Quality Scholars Program
School of Nursing
University of California, San Francisco
Meg.wallhagen@ucsf.edu

Paul M. Winkler, MPH

Retired Senior Services CEO

Dr. David G. Wolf, Ph.D., MSJ, MSOL

Certified Nursing Home Administrator Fellow American College of Health Care Administrators CNHA, CALA, CAS, CAPM

Heather M. Young, PhD, RN, FAAN, FGSA

Professor, Betty Irene Moore School of Nursing, Founding Dean Emerita National Director, Betty Irene Moore Fellowship for Nurse Leaders and Innovators University of California, Davis Davis, CA hmyoung@ucdavis.edu

Nancy D. Zionts, MBA (TRANSPARENCY)

COO/Chief Program Officer Jewish Healthcare Foundation

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