DATE

Seema Verma, Administrator

Centers for Medicare & Medicaid Services

Attention: CMS-3346-P

Baltimore, Maryland 21244

 **Re: Opposing Weakening of Nursing Home Emergency Preparedness Regulations;**

 **CMS-3346-P; Proposed Changes to 42 C.F.R. § 483.73**

Dear Administrator Verma:

[Name of organization] appreciates the opportunity to provide comments on the proposed changes to the emergency preparedness regulations for nursing homes. [Provide brief description of your organization. Explain why your organization is interested in the emergency preparedness regulations for nursing homes.]

We respectfully request that CMS withdraw the proposed changes to the nursing home emergency preparedness regulations. The current regulations sensibly require annual updates to emergency plans, policies and procedures, the communications plan, and the training and testing program. Also, the regulations require that staff receive annual training in emergency preparedness.

CMS now proposes to reduce these annual requirements to every-other-year requirements. We strongly oppose this weakening of resident protections. Much can change over two years. The resident population will change significantly, of course, as may local health care providers, transportation companies, and other vendors. The nursing home should know about these changes ahead of time to the extent possible, rather than encountering these changes while in an emergency situation.

For similar reasons, every-other-year training is insufficient. Nursing homes experience exceptionally high staff turnover rates —commonly from 55 to 75%, with nursing aide turnover rates frequently approaching 100%. Also, even assuming a stable staff, every-other-training is not frequent enough to maintain readiness. If an emergency arose in November 2018 (for example), most staff members at that time would recall little of a training from December 2016.

It is certainly true that annual requirements require somewhat more resources than every-other-year requirements, but CMS is wrong to focus so single-mindedly on the supposed “burden.” The effort and expense of annual updating and training is far outweighed by the benefit of a nursing home prepared for an emergency. Annual training is also in line with other training requirements.

As described in the recently released report, *Sheltering in Danger,[[1]](#footnote-1)* there are dangerous gaps in the existing emergency preparedness rule that should be addressed to better protect nursing home residents. CMS should not make these gaps worse by weakening the standards that are in place. We therefore urge CMS to withdraw its proposal and to maintain the current emergency preparedness regulations.

Sincerely,

NAME

1. Sheltering in Danger. Investigative Report by the Minority Staff of the U.S. Senate Committee on Finance. November 2018. [↑](#footnote-ref-1)