

119TH CONGRESS
2^D SESSION

S. 3886

To establish total nurse staffing hours per resident day, to require 24-hour use of registered professional nurses in nursing homes, and for other purposes.

IN THE SENATE OF THE UNITED STATES

FEBRUARY 12, 2026

Mr. WYDEN (for himself, Mr. KIM, Mr. BOOKER, Ms. WARREN, Mr. LUJÁN, Mr. MURPHY, and Mr. BLUMENTHAL) introduced the following bill; which was read twice and referred to the Committee on Finance

A BILL

To establish total nurse staffing hours per resident day, to require 24-hour use of registered professional nurses in nursing homes, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Nurses Belong in
5 Nursing Homes Act”.

6 **SEC. 2. NURSE STAFFING REQUIREMENTS.**

7 (a) ESTABLISHING TOTAL NURSE STAFFING HOURS
8 PER RESIDENT DAY; REQUIRING 24-HOUR USE OF REG-

1 REGISTERED PROFESSIONAL NURSES IN NURSING HOMES;
2 REMOVAL OF WAIVER AUTHORITY.—

3 (1) MEDICARE.—Section 1819(b)(4) of the So-
4 cial Security Act (42 U.S.C. 1395i–3(b)(4)) is
5 amended by striking subparagraph (C) and inserting
6 the following:

7 “(C) REQUIRED NURSING CARE.—

8 “(i) IN GENERAL.—A skilled nursing
9 facility must provide—

10 “(I) 24-hour licensed nursing
11 services which are sufficient to meet
12 the nursing needs of its residents;

13 “(II) not later than the date de-
14 scribed in clause (iii), a minimum
15 staffing requirement of at least 3.48
16 hours per resident day (or the number
17 of hours per resident day rec-
18 ommended in the report most recently
19 submitted by the Secretary under sec-
20 tion 1128L(b)(2), provided that such
21 number is at least 3.48 hours per
22 resident day) of nursing care provided
23 by a combination of a registered pro-
24 fessional nurse, licensed practical

1 nurse (or licensed vocational nurse),
2 or certified nursing assistant that—

3 “(aa) provides direct care
4 services to residents in a skilled
5 nursing facility; and

6 “(bb) reflects an appropriate
7 combination of competencies and
8 skills that is sufficient to ensure
9 the safety of each resident in the
10 facility; and

11 “(III) the services of a registered
12 professional nurse, such that such
13 services are furnished—

14 “(aa) before the date de-
15 scribed in clause (iii), at least 8
16 consecutive hours a day, 7 days a
17 week; and

18 “(bb) on or after such date,
19 24 hours a day, 7 days a week.

20 “(ii) DEFINITION OF HOURS PER
21 RESIDENT DAY.—In this subparagraph,
22 the term ‘hours per resident day’ means
23 the total number of hours worked by each
24 type of staff described in clause (i)(II) di-
25 vided by the total number of residents, as

1 calculated by the Administrator of the
2 Centers for Medicare & Medicaid Services.

3 “(iii) DATE DESCRIBED.—For pur-
4 poses of subclauses (II) and (III) of clause
5 (i), the date described in this clause is the
6 date that is 180 days after the date of en-
7 actment of the Nurses Belong in Nursing
8 Homes Act.”.

9 (2) MEDICAID.—Section 1919(b)(4) of the So-
10 cial Security Act (42 U.S.C. 1396r(b)(4)) is amend-
11 ed by striking subparagraph (C) and inserting the
12 following:

13 “(C) REQUIRED NURSING CARE.—

14 “(i) IN GENERAL.—A nursing facility
15 must provide—

16 “(I) 24-hour licensed nursing
17 services which are sufficient to meet
18 the nursing needs of its residents;

19 “(II) not later than the date de-
20 scribed in section 1819(b)(4)(C)(iii), a
21 minimum staffing requirement of at
22 least 3.48 hours per resident day (or
23 the number of hours per resident day
24 recommended in the report most re-
25 cently submitted by the Secretary

1 under section 1128L(b)(2), provided
2 that such number is at least 3.48
3 hours per resident day) of nursing
4 care provided by a combination of a
5 registered professional nurse, licensed
6 practical nurse (or licensed vocational
7 nurse), or certified nursing assistant
8 that—

9 “(aa) provides direct care
10 services to residents in a nursing
11 facility; and

12 “(bb) reflects an appropriate
13 combination of competencies and
14 skills that is sufficient to ensure
15 the safety of each resident in the
16 facility; and

17 “(III) the services of a registered
18 professional nurse, such that such
19 services are furnished—

20 “(aa) before the date de-
21 scribed in section
22 1819(b)(4)(C)(iii), at least 8 con-
23 secutive hours a day, 7 days a
24 week; and

1 “(bb) on or after such date,
2 24 hours a day, 7 days a week.

3 “(ii) DEFINITION OF HOURS PER
4 RESIDENT DAY.—In this subparagraph,
5 the term ‘hours per resident day’ has the
6 meaning given such term in section
7 1819(b)(4)(C)(ii).”.

8 (b) STUDY.—Title XI of the Social Security Act (42
9 U.S.C. 1301 et seq.) is amended by inserting after section
10 1128K the following new section:

11 **“SEC. 1128L. STUDY AND REPORTS RECOMMENDING MIN-**
12 **IMUM STAFFING REQUIREMENTS FOR**
13 **SKILLED NURSING FACILITIES AND NURSING**
14 **FACILITIES; PROMULGATION OF REGULA-**
15 **TIONS.**

16 “(a) STUDY.—

17 “(1) IN GENERAL.—Not later than 2 years
18 after the date of enactment of this section, and not
19 less frequently than once every 4 years thereafter,
20 the Secretary shall direct the Assistant Secretary for
21 Planning and Evaluation, the Comptroller General,
22 or the Medicare Payment Advisory Commission, in
23 consultation with the Medicaid and CHIP Payment
24 and Access Commission (in this section referred to
25 as the ‘designated entity’), to complete a study ana-

1 lyzing nurse staffing requirements at skilled nursing
2 facilities (as defined in section 1819(a)) and nursing
3 facilities (as defined in section 1919(a)) to provide
4 care to individuals seeking their services.

5 “(2) CONTENTS.—With respect to each study
6 required under paragraph (1), the designated entity
7 shall—

8 “(A) consult with—

9 “(i) residents, family members of resi-
10 dents, or authorized representatives of resi-
11 dents;

12 “(ii) registered professional nurses, li-
13 censed practical nurses (or licensed voca-
14 tional nurses), certified nursing assistants,
15 and other categories of direct care profes-
16 sionals (as determined by the Secretary)
17 who work at such skilled nursing facilities
18 or nursing facilities;

19 “(iii) collective bargaining units or
20 unions that represent direct care workers
21 or direct care professionals who work at
22 such skilled nursing facilities and nursing
23 facilities;

24 “(iv) operators of nursing facilities
25 and skilled nursing facilities;

1 “(v) researchers with expertise in the
2 nursing home and long-term care work-
3 force, including the disclosure of funding
4 sources for previously conducted research
5 and conflicts of interest; and

6 “(vi) long-term care ombudsmen; and
7 “(B) address the following:

8 “(i) Whether the minimum staffing
9 requirements established in sections
10 1819(b)(4)(C)(i)(II) and
11 1919(b)(4)(C)(i)(II) should be maintained
12 or increased (but in no event decreased
13 below a minimum staffing requirement of
14 at least 3.48 hours per resident day),
15 based on the severity of the health condi-
16 tions, complexity of health care needs, or
17 other measures of patient acuity of resi-
18 dents at such skilled nursing facilities and
19 nursing facilities, and, if so, how such min-
20 imum staffing requirements shall be in-
21 creased.

22 “(ii) Whether other minimum hours
23 per resident day minimum staffing require-
24 ments should be established for other cat-
25 egories of direct care professionals or di-

1 rect care workers in addition to the re-
2 quirements established in sections
3 1819(b)(4)(C)(i)(II) and
4 1919(b)(4)(C)(i)(II).

5 “(iii) A review of staffing, safety, and
6 quality data, as well as staffing require-
7 ment exception data, to assess the ade-
8 quacy of existing staffing practices in such
9 nursing facilities and skilled nursing facili-
10 ties.

11 “(b) REPORTS.—

12 “(1) TO THE SECRETARY.—The designated en-
13 tity shall submit to the Secretary a report on the re-
14 sults of the study conducted under subsection (a),
15 together with recommendations for such legislation
16 and administrative action as the designated entity
17 determines appropriate.

18 “(2) TO CONGRESS.—Not later than 180 days
19 after receiving each report under paragraph (1), the
20 Secretary shall submit to Congress a report on—

21 “(A) the findings and recommendations in-
22 cluded in such report; and

23 “(B) any plan to implement such rec-
24 ommendations, including a justification for any

1 recommendations the Secretary determines
2 should not be implemented.

3 “(c) REGULATIONS.—

4 “(1) IN GENERAL.—Not later than 1 year after
5 the Secretary submits an initial report under sub-
6 section (b)(2), the Secretary shall—

7 “(A) specify through regulations, con-
8 sistent with such report, a minimum staffing
9 requirement for nursing staff for skilled nursing
10 facilities (as defined in section 1819(a)) and
11 nursing facilities (as defined in section
12 1919(a)); and

13 “(B) require such skilled nursing facilities
14 and such nursing facilities to comply with such
15 staffing requirements, including by providing
16 the minimum staffing sufficient to meet the
17 needs of each resident in any such facility.

18 “(2) UPDATE.—Not later than 1 year after the
19 Secretary submits each subsequent report under
20 subsection (b)(2), the Secretary shall, consistent
21 with each such report, update the regulations de-
22 scribed in paragraph (1)(A) as necessary.

23 “(d) FUNDING.—The Secretary shall provide for the
24 transfer, from the Federal Hospital Insurance Trust Fund
25 under section 1817 to the Centers for Medicare & Med-

1 Medicaid Services Program Management Account, of
 2 \$50,000,000 for fiscal year 2027 for purposes of carrying
 3 out this section. Amounts transferred pursuant to the pre-
 4 vious sentence shall remain available until expended.”.

5 (c) RULE OF CONSTRUCTION.—The moratorium im-
 6 posed under section 71111 of the Act titled “An Act to
 7 provide for reconciliation pursuant to title II of H. Con-
 8 Res. 14” (Public Law 119–21) (relating to implementa-
 9 tion of certain staffing standards for long-term care facili-
 10 ties under the Medicare and Medicaid programs) shall not
 11 be construed to apply to the amendments made by this
 12 section.

13 **SEC. 3. PERMANENT FUNDING FOR THE SURVEY AND CER-**
 14 **TIFICATION PROGRAM FOR NURSING HOMES**
 15 **AND OTHER HEALTH CARE ENTITIES.**

16 Part A of Title XI of the Social Security Act (42
 17 U.S.C. 1301 et seq.) is amended by inserting after section
 18 1150C the following new section:

19 **“SEC. 1150D. FUNDING FOR THE SURVEY AND CERTIFI-**
 20 **CATION PROGRAM.**

21 “There is appropriated to the Secretary, out of the
 22 Federal Hospital Insurance Trust Fund under section
 23 1817 and the Federal Supplementary Medical Insurance
 24 Trust Fund under section 1841 (in such proportions as
 25 the Secretary determines to be appropriate),

1 \$800,000,000 for fiscal year 2027 and each subsequent
2 fiscal year for the purpose of conducting the Secretary’s
3 Survey and Certification Program, including under section
4 1864. Amounts appropriated under the preceding sentence
5 shall remain available until expended.”.

6 **SEC. 4. INVESTING IN THE NURSING HOME WORKFORCE.**

7 (a) **MEDICARE.**—Section 1819(h) of the Social Secu-
8 rity Act (42 U.S.C. 1395i–3(h)) is amended—

9 (1) in paragraph (2)(B)(ii)(IV)(ff), by inserting
10 “, provided that not less than half of such amounts
11 are provided to the State in which the facility is lo-
12 cated for the purposes described in paragraph (7),”
13 after “collected may”; and

14 (2) by adding at the end the following new
15 paragraph:

16 “(7) **USE OF CIVIL MONEY PENALTY AMOUNTS**
17 **TO SUPPORT THE SKILLED NURSING FACILITY**
18 **WORKFORCE.**—

19 “(A) **IN GENERAL.**—Subject to subpara-
20 graph (B), a State shall use the amounts pro-
21 vided to such State pursuant to paragraph
22 (2)(B)(ii)(IV)(ff) for the fiscal year in which
23 such amounts are provided for the following
24 purposes:

1 “(i) Providing grants to entities such
2 as educational institutions, advocacy orga-
3 nizations for skilled nursing facility resi-
4 dents, senior citizens, or individuals with
5 disabilities, and unions that represent the
6 skilled nursing facility workforce to sup-
7 port projects that use community-driven
8 approaches to recruit, educate, and train
9 individuals to expand the skilled nursing
10 facility workforce.

11 “(ii) The funding of projects that de-
12 velop new career pathway programs for the
13 skilled nursing facility workforce.

14 “(iii) The repayment of student loans
15 for qualified skilled nursing facility pro-
16 viders (as defined in subparagraph (C)) or
17 the payment of tuition for such providers
18 who commit to serving in a skilled nursing
19 facility or a nursing facility (as defined in
20 section 1919(a)) for not less than 3 years
21 within a 10-year period.

22 “(B) PROHIBITIONS ON USE OF FUNDS.—

23 “(i) PROHIBITION ON PROVIDING
24 FUNDS TO ENTITIES RELATED TO FACILI-
25 TIES.—A State may not provide any

1 amounts provided to such State pursuant
 2 to paragraph (2)(B)(ii)(IV)(ff) to an entity
 3 that has a related party relationship with
 4 a nursing facility or skilled nursing facility
 5 in such State.

6 “(ii) PROHIBITION ON USING FUNDS
 7 FOR REIMBURSEMENT OF COSTS IN-
 8 CURRED IN COMPLETING NURSE AIDE
 9 TRAINING AND COMPETENCY EVALUATION
 10 PROGRAMS AND NURSE AIDE COMPETENCY
 11 EVALUATION PROGRAMS.—A State may
 12 not use any amounts provided to such
 13 State pursuant to paragraph
 14 (2)(B)(ii)(IV)(ff) to—

15 “(I) reimburse costs incurred in
 16 completing a nurse aide training and
 17 competency evaluation program or a
 18 nurse aide competency evaluation pro-
 19 gram under subsection (f)(2)(A); or

20 “(II) supplant the payment of
 21 such costs under such subsection.

22 “(C) DEFINITIONS.—In this paragraph:

23 “(i) QUALIFIED SKILLED NURSING
 24 FACILITY PROVIDER.—The term ‘qualified
 25 skilled nursing facility provider’ means—

1 “(I) a geriatrician or other physi-
2 cian, nurse practitioner, physician as-
3 sistant, or other practitioner who pro-
4 vides services in a skilled nursing fa-
5 cility or nursing facility; or

6 “(II) a registered professional
7 nurse, a licensed practical nurse (or a
8 licensed vocational nurse), or a cer-
9 tified nursing assistant who provides
10 direct care services to residents in a
11 skilled nursing facility or nursing fa-
12 cility, as determined by the Secretary.

13 “(ii) RELATED PARTY.—The term ‘re-
14 lated party’ means an entity that, to a sig-
15 nificant extent is associated or affiliated
16 with, or has control of, or is controlled by,
17 a nursing facility or skilled nursing facility.

18 “(D) ANNUAL REPORTING.—

19 “(i) REPORT FROM STATES.—Not
20 later than 1 year after the date of enact-
21 ment of this paragraph, and annually
22 thereafter, each State that receives
23 amounts pursuant to paragraph
24 (2)(B)(ii)(IV)(ff) shall submit to the Sec-
25 retary a report describing—

1 “(I) how amounts received in the
2 previous fiscal year were allocated;

3 “(II) the mechanisms to ensure
4 such amounts benefit the development
5 of the skilled nursing facility work-
6 force;

7 “(III) how such amounts will im-
8 pact measurable outcomes for resi-
9 dents of skilled nursing facilities and
10 nursing facilities, such as staff va-
11 cancy rates, turnover rates, median
12 hourly wages, staffing hours per resi-
13 dent, and resident quality outcomes;
14 and

15 “(IV) how such State is ensuring
16 compliance with subparagraph (B).

17 “(ii) REPORT TO CONGRESS.—Not
18 later than 180 days after the Secretary re-
19 ceives the annual reports from States
20 under clause (i), the Secretary shall submit
21 to Congress a report describing the infor-
22 mation contained in such reports.”.

23 (b) MEDICAID.—Section 1919(h) of the Social Secu-
24 rity Act (42 U.S.C. 1396r(h)) is amended—

25 (1) in paragraph (2)(A)(ii)—

1 (A) in the second sentence, by striking
 2 “Funds collected” and inserting “Subject to the
 3 last sentence of this clause, funds collected”;
 4 and

5 (B) by inserting the following sentence at
 6 the end: “Not less than half of the funds col-
 7 lected pursuant to this clause shall be used for
 8 the purposes described in paragraph (10).”;

9 (2) in paragraph (3)(C)(ii)(IV)(ff), by inserting
 10 “, provided that not less than half of such amounts
 11 are provided to the State in which the facility is lo-
 12 cated for the purposes described in paragraph
 13 (10),”; and

14 (3) by adding at the end the following new
 15 paragraph:

16 “(10) USE OF CIVIL MONEY PENALTY AMOUNTS
 17 TO SUPPORT THE NURSING FACILITY WORKFORCE.—

18 “(A) IN GENERAL.—Subject to subpara-
 19 graph (B), a State shall use not less than half
 20 of the funds collected under paragraph
 21 (2)(A)(ii) and the amounts provided to such
 22 State pursuant to paragraph (3)(C)(ii)(IV)(ff)
 23 (collectively referred to in this paragraph as
 24 ‘civil money penalty amounts’) for the fiscal

1 year in which such amounts are collected or
2 provided for the following activities:

3 “(i) Providing grants to entities such
4 as educational institutions, advocacy orga-
5 nizations for nursing facility residents, sen-
6 ior citizens, or individuals with disabilities,
7 and unions that represent the nursing fa-
8 cility workforce to support projects that
9 use community-driven approaches to re-
10 cruit, educate, and train individuals to ex-
11 pand the nursing facility workforce.

12 “(ii) The funding of projects that de-
13 velop new career pathway programs for the
14 nursing facility workforce.

15 “(iii) The repayment of student loans
16 for qualified nursing facility providers (as
17 defined in subparagraph (C)) or the pay-
18 ment of tuition for such providers who
19 commit to serving in a skilled nursing fa-
20 cility (as defined in section 1819(a)) or a
21 nursing facility for not less than 3 years
22 within a 10-year period.

23 “(B) PROHIBITION ON USE OF FUNDS.—

24 “(i) PROHIBITION ON PROVIDING
25 FUNDS TO ENTITIES RELATED TO FACILI-

1 TIES.—A State may not provide any civil
 2 money penalty amounts to an entity that
 3 has a related party relationship with a
 4 nursing facility or skilled nursing facility
 5 in such State.

6 “(ii) PROHIBITION ON USING FUNDS
 7 FOR REIMBURSEMENT OF COSTS IN-
 8 CURRED IN COMPLETING NURSE AIDE
 9 TRAINING AND COMPETENCY PROGRAMS
 10 AND NURSE AIDE COMPETENCY EVALUA-
 11 TION PROGRAMS.—A State may not use
 12 any civil money penalty amounts to—

13 “(I) reimburse costs incurred in
 14 completing a nurse aid training and
 15 competency evaluation program or a
 16 nurse aide competency evaluation pro-
 17 gram under subsection (f)(2)(A); or

18 “(II) supplant the payment of
 19 such costs under such subsection.

20 “(C) DEFINITIONS.—In this paragraph:

21 “(i) QUALIFIED NURSING FACILITY
 22 PROVIDER.—The term ‘qualified nursing
 23 facility provider’ means—

24 “(I) a geriatrician or other physi-
 25 cian, nurse practitioner, physician as-

1 sistant, or other practitioner who pro-
2 vides services in a skilled nursing fa-
3 cility or nursing facility; or

4 “(II) a registered professional
5 nurse, licensed practical nurse (or a li-
6 censed vocational nurse), or certified
7 nursing assistant who provides direct
8 care services to residents in a skilled
9 nursing facility or nursing facility, as
10 determined by the Secretary.

11 “(ii) RELATED PARTY.—The term ‘re-
12 lated party’ means an entity that, to a sig-
13 nificant extent is associated or affiliated
14 with, or has control of, or is controlled by,
15 a nursing facility or skilled nursing facility.

16 “(D) ANNUAL REPORTING.—

17 “(i) REPORT FROM STATES.—Not
18 later than 1 year after the date of enact-
19 ment of this paragraph, and annually
20 thereafter, each State that receives any
21 civil money penalty amounts shall submit
22 to the Secretary a report describing—

23 “(I) how amounts received in the
24 previous fiscal year were allocated;

1 “(II) the mechanisms to ensure
2 such amounts benefit the development
3 of the nursing facility workforce;

4 “(III) how such amounts will im-
5 pact measurable outcomes for resi-
6 dents of skilled nursing facilities and
7 nursing facilities, such as staff va-
8 cancy rates, turnover rates, median
9 hourly wages, staffing hours per resi-
10 dent, and resident quality outcomes;
11 and

12 “(IV) how such State is ensuring
13 compliance with subparagraph (B).

14 “(ii) REPORT TO CONGRESS.—Not
15 later than 180 days after the Secretary re-
16 ceives the annual reports from States
17 under clause (i), the Secretary shall submit
18 to Congress a report describing the infor-
19 mation contained in such report.”.

1 **SEC. 5. CODIFICATION OF REGULATIONS REGARDING RE-**
2 **QUIREMENTS FOR LONG-TERM SERVICES**
3 **AND SUPPORTS AND PAYMENT TRANS-**
4 **PARENCY REPORTING.**

5 Sections 438.72 and 442.43 of title 42, Code of Fed-
6 eral Regulations (as in effect on May 10, 2024), shall have
7 the force and effect of law.

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