

Nursing home care for minorities improves

July 7 2015

A new study of nursing homes has found that, while disparities continue to exist, the quality of care in homes with higher concentrations of racial and ethnic minority residents has improved and that this progress appears to be linked to increases in Medicaid payments.

"Racial and ethnic disparities in quality of care have long been documented in [nursing homes](#)," said Yue Li, Ph.D., an associate professor in the University of Rochester Department of Public Health Sciences and lead author of the study which was published today in the journal *Health Affairs*. "This study shows that recent regulatory, financial, and market driven changes have resulted in an improvement not only in homes with higher numbers of minorities, but across the board."

There are an estimated 1.3 million older and disabled Americans receiving care in some 15,000 nursing homes across the nation. Over the past 20 years, the number of African-American, Hispanic, and Asian individuals in nursing homes has increased rapidly and these populations now comprise nearly 20 percent of nursing home residents. While this number has risen, nursing homes remain segregated and homes with high concentrations of racial and ethnic minorities tend to have more limited financial resources, lower nurse staffing, and provide a lower level of care.

State Medicaid programs are the dominant source of funding for nursing homes, providing roughly half of total payments for long-term care. In recent years states have attempted to influence the quality of care by

increasing [reimbursement rates](#) and linking those payments to improvements.

The researchers looked at data over a six-year period from more than 14,000 nursing homes. The data, which is compiled by Brown University and the Centers for Medicare and Medicaid Services, tracks approximately 180 federal quality standards, including clinical care, patient safety, quality of life, the physical state of the facilities, and quality of its administrative staff.

Using data from 2006 to 2011, the researchers focused on the number of reported deficiencies in clinical and personal care and safety. Nursing homes were divided into categories based on the number of ethnic and racial minorities in residence.

The researchers found that reported deficiencies declined in nursing homes with both low (less than 5 percent) and high (greater than 35 percent) concentrations of minorities. While the number of deficiencies between the two categories narrowed, the disparity did not disappear, meaning that homes with higher concentrations of minority residents reported, on average, a greater number of deficiencies.

The researchers also compared these trends to state Medicaid reimbursement rates and found that an increase of \$10 per resident per day was associated with a reduction in the number of reported clinical care deficiencies.

"This study suggests that a number of factors, such as stronger government enforcement of quality standards, public reporting, and increased Medicaid payments have resulted in improved care in nursing homes," said Li. "Although none of these policies have focused specifically on racial and [ethnic disparities](#), it appears that these global efforts to improve the quality of [nursing home care](#) have effectively

narrowed the gap over time. These findings also suggest the need to reevaluate quality improvement and cost containment efforts to better foster quality and equity in nursing home care."

Provided by University of Rochester Medical Center

Citation: Nursing home care for minorities improves (2015, July 7) retrieved 2 February 2024 from <https://medicalxpress.com/news/2015-07-nursing-home-minorities.html>

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