# Bach Nguyen, Nicolas Loke, Rajan Shukla - Advisor: Dr. Raju Mainali

Missouri State University

2024 Business Analytics Competition

# BACKGROUND



The U.S. nursing home sector is a critical component of the national healthcare system. Eider Lee and Matt Chur are looking for investing options in nursing home.

Geri Attrick and his team will be analyzing financial patterns,

key elements, and the effects of Covid-19 on the U.S. nursing



homes market to identify possible investment opportunities. From the data analysis, Elder and Matt will understand the investment opportunities in nursing homes, including



# RESEARCH QUESTIONS —

the locations and methods for their investment.



**INFLUENTIAL FACTORS:** Which operational, regulatory, and market factors have had the most significant impact on the health of U.S. nursing homes during the study

FINANCIAL PERFORMANCE: How has the key factors of the financial performance in U.S. nursing homes influenced



**COVID-19 IMPACTS:** How has the onset of the COVID-19 pandemic altered the financial situation of U.S. nursing homes, and what implications does this have for future pandemic preparedness?

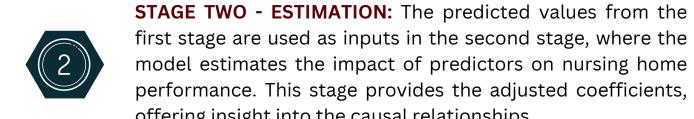
# **METHODOLOGY**

TWO-STAGE LEAST SQUARES (2SLS) APPROACH: To predict the financial and overall performance of nursing homes, 2SLS regression model was used to address potential endogeneity in explanatory variables.

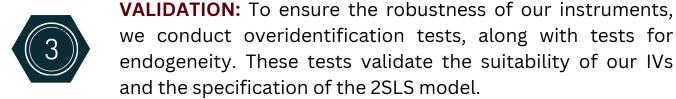


(IVs) are identified and utilized to predict the endogenous variables. IVs are chosen based on their strong correlation with endogenous predictors and their expected zero correlation with the error term in the outcome equation.

**STAGE ONE - INSTRUMENTATION:** Instrumental variables



first stage are used as inputs in the second stage, where the model estimates the impact of predictors on nursing home performance. This stage provides the adjusted coefficients, offering insight into the causal relationships.



we conduct overidentification tests, along with tests for endogeneity. These tests validate the suitability of our IVs and the specification of the 2SLS model.



**IMPLEMENTATION:** The 2SLS analysis is conducted using specialized econometric software, ensuring precision in our estimations and interpretations. The final model is assessed for statistical significance and the strength of the predictors.

# REFERENCES

- Cuadros, D. F., Branscum, A. J., Mukandavire, Z., Miller, F. D., & MacKinnon, N. (2021, April 22). Dynamics of the covid-19 epidemic in urban and rural areas in the United States. PubMed Central.
- https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8061094/ Centers for Disease Control and Prevention. (2024, April 7). COVID-19 Nursing Home Data. Centers for Medicare & Medicaid Services Data.
- https://data.cms.gov/covid-19/covid-19-nursing-home-data • Economic Research. (2023, December 19). Inflation, consumer prices for the United States. FRED.
- https://fred.stlouisfed.org/series/FPCPITOTLZGUSA
- Maldonado, R. W., Pradhan, R., Dayama, N., Lord, J., & Gupta, S. (2019, February 9). Sage Journals.
- Http://journals.sagepub.com/doi/abs/10.1177/0887302x07303626/ • Mather, M., & Scommegna, P. (2024, January 9). Fact sheet: Aging in the United States. PRB. https://www.prb.org/resources/fact-sheet-aging-inthe-united-states/
- Nursing home compare five-star quality rating system. (n.d.). https://www .cms.gov/medicare/provider-enrollment-and-certification/certification andcomplianc/downloads/consumerfactsheet.pdf
- Nursing facilities. KFF. (n.d.-b). https://www.kff.org/state-category/
- providers-service-use/nursing-facilities/ • The impact of covid-19 on Medicare beneficiaries in ... Centers for Medicare & Medicaid Services. (n.d.-b). https://www.cms.gov/files/document/medicare-covid-19-nursing-home-analysis.pdf

# TOOLS USED





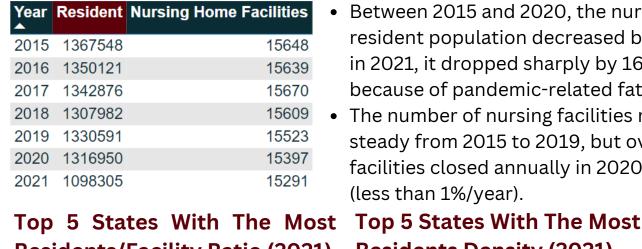








### Number of Nursing Home Facilities and Residents (2015-2021)



Residents/Facility Ratio (2021)

Residents Density (2021)

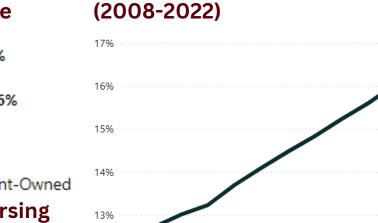
#### **Facilities by Ownership Type** Between 2015 and 2020, the nursing facility resident population decreased by 3.70%, then in 2021, it dropped sharply by 16.60%, mainly because of pandemic-related fatalities. • The number of nursing facilities remained steady from 2015 to 2019, but over 100 facilities closed annually in 2020 and 2021

D.C. stands out as its

● For Profit ● Non-Profit ● Government-Owned **Distribution of Certified Nursing Facilities by Certification Type** 

# ■ Dual ■ Medicare ■ Medicaid

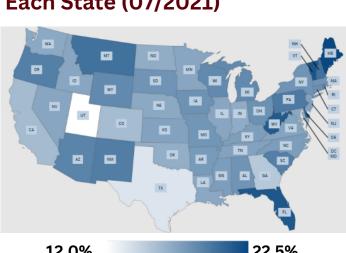
## Distribution of Certified Nursing (2008-2022)



• The 65+ age group's share of the total population rose 4.79% from 2008 to 2022. According to PRB, it is projected to increase 47% from 58 million in 2022 to 82 million by 2050, and the share of the total population

is projected to rise from 17% to 23%.

# GENERAL INFORMATION **Each State (07/2021)**



 The age group share in most Southeast and Northeast states exceeds the US average. • The Southern states' age group

the Northern states.

share that is generally lower than

### **Nursing Home Facilities** Distribution (07/2021)



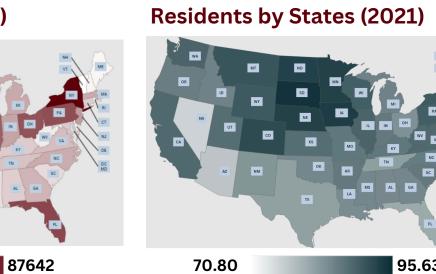
Both maps share the similar distribution structure. Most of the Nursing

• On the remaining part of the US, California, Texas, and Florida placed 2nd,

Home Facilities are located in the Midwest and Northeast region.

3rd, and 4th states in the number of nursing home residents.

### Nursing Home Facility Residents Distribution (07/2021)



## **Average of Percent Vaccinated**

**Distribution - Popular Density Comparison:** Although California, Texas, and Florida are among the states with the highest populations, they do not rank in the top five for population density, owing to their large geographical sizes. **Age Group Share - Distribution Comparison:** 

The Age Group Share map shows an inverse relationship to the Distribution maps, where states with many facilities and residents have a lower percentage of people aged 65 and above, except for Florida, where the trend does not apply

#### Residents Distribution - Residents Vaccinated Comparison:

In both maps, there is a contrasting trend where states with smaller populations tend to have higher vaccination rates. However, in some states like California, Nevada, and Arizona, there is a correlation between the distribution of vaccines and the percentage of vaccinated residents.

# **DISCUSSION AND RESULTS**

ranging in 4 different levels and 3 different types.

• In 2016, the number of codes declined and ha

trending upwards, nearing their 2015 peak.

since stabilized, except for D-level codes which are

Nursing homes report the highest number of codes

at level 2 (which includes D, E, F codes), with D

(Isolated type) being the most frequent, occurring

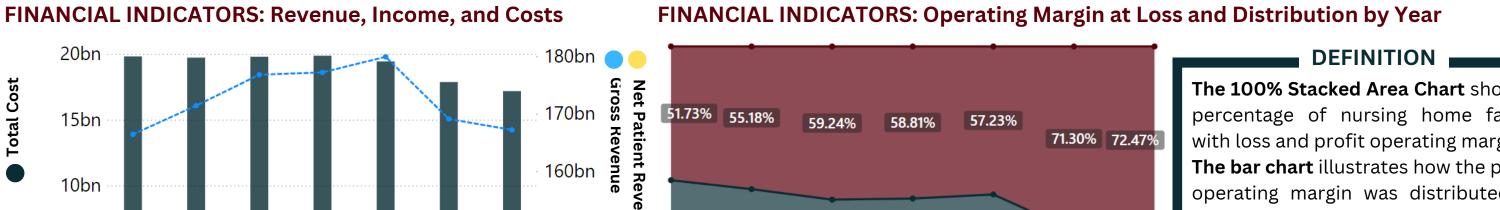
twice as often as E (Pattern type), the second most

Note: The definitions of scope levels and types can be viewed at

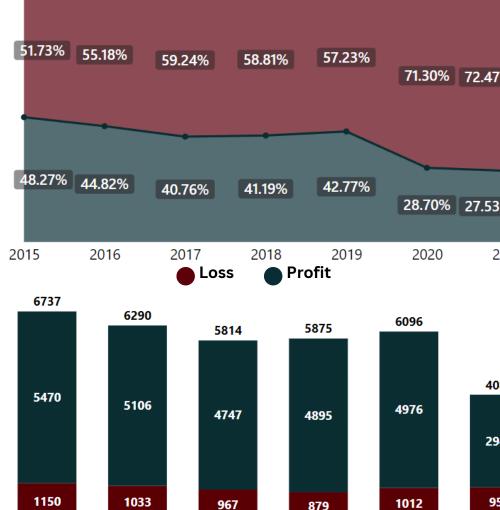
https://anha.org/uploads/ScopeSeverity2018.pdf

After Covid

### FINANCIAL PERFORMANCE & INFLUENTIAL FACTORS WHAT INSIGHTS CAN BE DERIVED FROM THE AVAILABLE DATA REGARDING THE FINANCIAL PERFORMANCE OF NURSING HOME?



- 2015 2016 2017 2018 2019 2020 2021 • Gross Revenue and Net Patient Revenue experienced an increase from 2015 to 2019, followed by a decline during the pandemic
- Total Costs were stable from 2015 to 2018, dipped in 2019, and 5470 significantly decreased in 2020 and 2021. As a result, **Net Income** and **Total Income** are low from 2015 to 2018 but increased from 2019 to 2021
- Note: Net Patient Revenue is calculated by deducting Contractual Allowances and Discounts from Gross Revenue. Using Gross Revenue alone for financial ratios is inaccurate due to significant allowances and discounts. Therefore, it's essential to adjust Gross Revenue to Net Patient Revenue to 2015 avoid errors like facilities reporting a Net Income higher than Gross Revenue.



### The 100% Stacked Area Chart shows th percentage of nursing home facilitie with loss and profit operating margin. The bar chart illustrates how the positive operating margin was distributed ove the period. 28.70% 27.53% • In 2015, 51.73% of nursing homes were

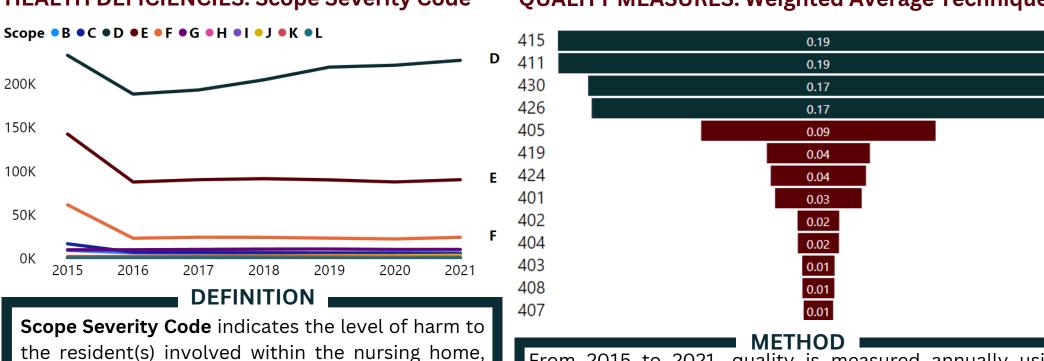
were nonprofit or government-owned facilities. • By 2019, this figure had risen slightly to 57.23%, with 33.81% being nonprofit or government facilities.

operating at a loss, of which 33.60%

• In 2015, operating margins of 10% or less were reported by 81.19% of

# profit nursing homes, with a slight increase to 81.63% by

### **HEALTH DEFICIENCIES: Scope Severity Code QUALITY MEASURES: Weighted Average Technique**



From 2015 to 2021, quality is measured annually usir Measure Codes (MCs) with varying weights. The Weighted Average Technique calculated weighted values for Q1, Q2 Q3, Q4, and the annual average. • Every year, the highest weighted percentages (>10%) are

attributed to the percentage of long-stay and short-stay accessed and appro-priately given the seasonal influenza vaccine and pneumococcal vaccine (MCs: 415, 411, 430, Note: Quality is measured from 2015 to 2021. The chart above shows the score in 2015.

19 restrictions

# \_\_\_\_\_\_\_ Average Number of Residents per Day

ARIMA is employed to forecast

and estimate Total Income ove

time, utilizing both current and

projected data, with its accuracy

Average Number of Residents per Day comes fron the MDS daily census. Due to variations collection, the data is grouped for clarity. For example "<40" covers a range from 20 to just under 40.

**PROVIDER INFO: Number of Residents per Day** 

• From 2020 to 2021, there was a reduction in the number of facilities where the average daily resident count was over 80, whereas facilities with an average daily resident count between 20 and 80 experienced growth. This shift is believed to be a result of COVID-

# **KEY TAKEAWAY**

The COVID-19 pandemic has impacted nursing homes, leading to a decrease in revenue. However, there has also been a reduction in costs and a sharp increase in

During the COVID-19 pandemic, the proportion of nursing homes with a negative operating margin rose from about 58% to approximately 72%.

Meanwhile, about 81% of nursing homes with a positive operating margin reported margins of 10% or less.

Some Health Deficiency Scope Codes and Quality Measure Codes are disproportionately higher than others and should be closely examined in the operation

During the pandemic, the daily number of residents has decreased, showing a shift towards lower numbers (right skew).

of Nursing Homes

### COVID-19 IMPACTS HOW HAS THE COVID-19 IMPACTED THE NURSING HOME OVERALL AND FINANCIAL PERFORMANCE?

### **OVERVIEW COVID-19 2020 OVERALL PERFORMANCE: Nursing Home vs Community** 29.9%

Community

654583

National Percent of Residents Up to Date with Vaccines per Facility

Total Resident COVID-19 **Confirmed Cases** 170,099

1,897,763 Total Staff COVID-19 Confirmed

Avg Number of Beds

Avg Residents Per Day

Note: Up-to-Date Data as of the week ending 04/14/2024 from data.cms.gov

Total Resident COVID-19 Deaths



### **Nursing home residents** account f about 2% of the Medicare population, but about 22% of all COVID-19 cases. Nursing home residents were 14 times more likely to be

diagnosed with COVID-19 compared to beneficiaries in the community. **Nursing home** residents consistently faced a higher risk of COVID-19 diagnosis

compared to those in the **community**, being at least 11 times more likely even when community spread

-0.03\*\*\*

0.59\*\*\*

1165

< 2e - 16\*\*

## **NET INCOME PERFORMANCE: Before and After COVID**

Intercept OVERALL\_RATING 100.27 \*\*\* AVG Number of residents per day (RESTOT) 2.00 \*\*\*Medicare and Medicaid/Medicaid (1,0) 266.98 \*\*\* 114.09 \*\*\* Rural/Urban (1,0) -210.29 \*\*\*

Note: \*\*\*p < 0.001; \*\*p < 0.010; \*p < 0.050Regression Output for Net Income in Millions Before and After COVID Initially, the model primarily focused on Nonprofit and Certification (Medicare/Medicaid). However, the COVID-19 pandemic significantly

elevated the importance of **Rural/Urban** and **Nonprofit** factors in managing case distribution. The National Library of Medicine highlighted that in 2020, states with higher rural infection and mortality rates became epidemic centers. Meanwhile, the influence of

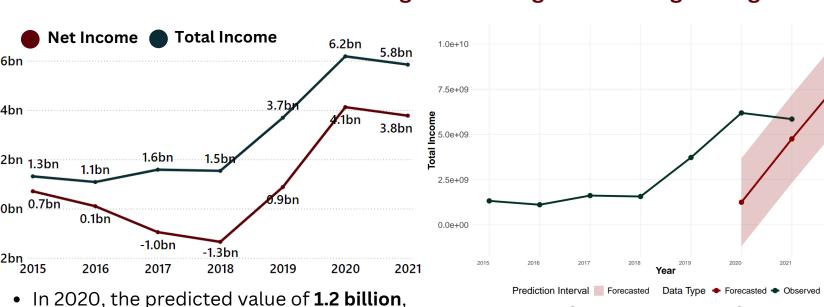
Overall Rating and Certification decreased slightly. Additionally, the model showed a shift in the Intercept, suggesting higher Net Income under the same conditions in the second model, indicating potential profit increases for Nursing Homes.

# regression model

performed to see the change Net Income performance the period from 2015 to 2021 especially the change durin the pandemic. From th model, we run the model times, one of them it befor the pandemic and one after the pandemic.

NOTE: The provided data contains or L50 variables. To select the appropria ariables for our model, we consider to orrelation between each variable. ndependent variables selected are n orrelated with each other, but they orrelate with the response variable. ariables was applied to the model acro two periods: Before Covid and After Covid

# **TOTAL INCOME FORECASTING: Autoregressive Integrated Moving Average Model**



with a 95% confidence high of 3.7 billion, was four times lower than the actual 6.2 **billion** due to COVID-19 impacts, including alignment is thought to be due to the lower costs from layoffs and higher stabilization following the introduction

regulations.

enhanced by adjusting fo inflation. The data was used to predict is from 2015 to 2019. 2020 and 2021 is the predicted value which will be compare with the actual data. • In 2021, the forecasted value of **4.7 billior** with a 95% confidence high of 7.2 billion, matched the actual figure of **5.8 billion**.

**Income**, which includes **No** Income and Total Income, i favored over Revenue due to the uncertainties or inconsistencies from Contractual Allowance: and Discounts. Total Income the COVID-19 vaccine and government determined by summing Net Income and Total Other Income

### **KEY TAKEAWAY** The mortality rate among residents is approximately 8.4%

Nursing homes perform significantly poorer in handling COVID-19 compared to the community.

Net income has improved during the pandemic. Given similar conditions, a nursing home facility will experience an

increase in net income.

### Forecasting for nursing homes indicate a potential increase in total income, which is expected to continue growing strongly.

# INVESTMENT SOLUTION SHOULD ELDER LEE AND MATT CHUR INVEST IN NURSING HOME? IF SO, HOW AND WHERE?

COVID(1,0)

Avg Residents Per Day

Rural vs Urban(1,0)

Medicare and Medicaid/Medicaid

Avg Residents Per Day: Medicare and

1st Stage Model Estimate for Overall Rating

Note: Data on COVID-19 cases was sourced from cms.gov, covering the study period from March 2020 to December 2020

### STEP 1: Variables Chosen and Descriptive Statistics 26.301295.22Net Income (in Ten Thousand \$) 708 (5%) 750 (5%) 742 (5%) 725 (5%) 723 (5%) 687 (5%) 692 (5%)Government 2923 (21%) 2921 (21%) 2989 (21%) 2993 (21%) 3024 (21%) 3029 (21%) 2984 (21%) Non-profit Rural vs Urban 3972 (29%) 3892 (28%) 3885 (27%) 3857 (27%) 3779 (27%) 3751 (27%) 3722 (26%) 9941 (71%) 10077 (72%) 10322 (73%) 10361 (73%) 10378 (73%) 10388 (73%) 10364 (74%) Certification Medicare and Medicaid Overall Rating

The provided data contains over 150 variables. To select the appropriate variables for our model, we consider the correlation between each variable. The independent variables selected are not correlated with each other, but they do correlate with the response variable.

The two-stage least squares approach mitigates the influence of hidden

biases, yielding more accurate insights into the determinants of financial

and overall performance in nursing homes.

Nursing Home Descriptive Statistics for 2015-2021

88.18

122.78

88.41

88.26

122.70 79.22

**COMPONENT + RESIDUAL PLOTS** 2 3 4 5 500000 1000000 150000 1 2 3 4 5 STAFFING RATING

### STEP 2: 2SLS Stage I - Assessing Overall Rating First Stage (Predicting Overall Rating with RU as IV) Overall\_Rating<sub>i,t</sub> = $\beta_0 + \beta_1 \times \text{Covid}_{i,t}(1,0) + \beta_2 \times \text{Average Residents Per Day}_{i,t}$ $+ \beta_3 \times \text{Nonprofit}_{i,t} + \beta_4 \times \text{Medicare and Medicaid/Medicaid}_{i,t}$ $+ \beta_5 \times \text{Rural vs Urban}_{i,t}$ $+ \beta_6 \times (\text{Average Residents Per Day}_{i,t} \times \text{Medicare and Medicaid/Medicaid}_{i,t}) + \varepsilon_i$

We're focusing on what influences a nursing home's **Overall Rating**. Some key factors here are: • COVID(1,0): A coefficient of -0.033 suggests that an increased impact from COVID-19 lowers the Overall Rating. • Nonprofit: Nonprofit status positively correlates with higher ratings in nursing homes, as

indicated by a coefficient of +0.5884. • Rural vs Urban (RU): As an instrumental variable, its negative coefficient of -0.1035 indicates that nursing homes in rural areas, or those with certain characteristics represented by this variable, generally receive lower ratings

> • RESTOT: Representing total residents per day, the negative coefficient of -0.0039 indicates that higher numbers of residents are associated with a lower Overall Rating.

The plots shows that higher survey and staffing ratings correlate with better nursing home quality perceptions, while the impact of financial penalties on ratings is less clear, suggesting they don't directly influence quality ratings. Additionally, the number of certified beds has little effect on ratings, indicating that a nursing home's size doesn't necessarily determine its quality. These insights are useful for evaluating nursing home performance and the factors affecting their ratings.

## STEP 3: 2SLS Stage II and OLS Model: Predicting Net Income

	OLS Model	IV Model
Variable		
Intercept***	0.14***	0.15***
COVID(1,0)	$0.32^{***}$	0.31***
Avg Residents Per Day	-0.02***	-0.02***
Nonprofit	-0.28**	-0.27***
Medicare and Medicaid/Medicaid	-0.65**	-0.59***
OVERALL_RATING	$0.10^{***}$	0.10***
Avg Residents Per Day:Medicare and	$0.02^{***}$	0.02***
Medicaid/Medicaid(1,0)		
Rural vs Urban(1,0)(Instrument Variable)	$0.14^{***}$	
Observations	96990	96991
F-Statistic	179.8	200.4
p-value	$< 2e - 16^{***}$	$< 2e - 16^{***}$
R-squared	0.01821	0.01225

Net Income (in millions),  $t = \delta_0 + \delta_1 \times \text{Average Residents Per Day}_{i,t}$ 

operating revenue.

2nd Stage and OLS Model Estimates for Net Income (In Millions) financial outcomes. Second Stage (Main Model: Predicting Net Income)

**Note**: Data was sourced from cms.gov. The reported data is recorded until 2021. There is no data for 2022 yet.

 $+\delta_2 \times \text{Nonprofit}_{i,t} + \delta_3 \times \text{Covid}_{i,t}(1,0)$  $+\delta_4 \times (\text{Average Residents Per Day}_{i,t} \times \text{Medicare and Medicaid/Medicaid})$  $+\delta_5 \times \text{Medicare and Medicaid/Medicaid}_{i,t}$  $+\delta_6 \times \text{Overall\_Rating}_{i,t} + \mu_{i,t}$ • COVID(1,0): The positive coefficient (+0.3122) suggests that

COVID-19 is linked to higher scaled income, possibly due to

additional funding received by nursing homes facing the

• Nonprofit: A negative coefficient (-0.2729) shows that nonprofit status correlates with lower financial performance, likely due to different objectives compared to for-profits.

The initial prediction of the **Overall Rating** is incorporated into the main model to examine its impact on a nursing home's financia performance. It is hypothesized that a higher Overall Rating, indicative of better quality, will lead to greater Net Income.

In this analysis, the Rural vs Urban classification is used as an instrumental variable. This approach helps to isolate the effect of daily resident counts on quality ratings, minimizing the direct impact of location. This method strengthens our confidence that the observed relationships accurately represent the true influence of these variables on a nursing home's rating and its

For the 2nd model, we still consider the same variables, in addition to Overall Rating, to have better insights in finding the solution for the investors.

• Overall Rating: The positive coefficient (+0.0964) indicates that higher ratings correlate with better financial performance, suggesting that well-rated homes may attract more residents or funding.

• **RESTOT**: Again, similar to model 1, in model 2, the average resident per day with the negative coefficient of -0.018 indicates that higher numbers of residents are associated with a lower Net Income

### **SOLUTION RECOMMENDATION**

liven the data from the General Information section and Keys Takeaway from Financial Performance & Influential Factors and COVID-19 **Impacts** sections, we have brought the following

### **Elder Lee and Matt Chur should** invest in Nursing Home

# Location: Midwest and Northeast region, or

- California, Texas, and Florida Certification: Both Medicare and Medicaid **Location Type**: Urban Size: Concentrate on numerous medium-sized
- facilities (60-100 residents per day) rather than a few larger ones.
- Taking care of Health Deficiency Scope Codes (especially level 2) and Quality Measure Codes. Focusing on optimizing operational costs.

Study on the effectiveness of community

management in enhancing COVID-19 protocols.

\_\_\_\_\_\_



 Department of Information Technology and Cybersecurity, College of Business, Missouri State University





than urban ones.



## The Nursing Home Project began in February 2024, and was funded by Department of

