BY KATE BRADFORD

Millions of Americans rely on care provided through long-term services and supports (LTSS). These include a wide range of medical and personal care services that assist people with disabilities and older adults with routine daily activities. Demographic changes in the U.S. indicate further increases in demand for LTSS, led partly by the aging population, increased life expectancies and a higher prevalence of certain chronic health conditions.

Medicaid is the primary payer of LTSS, paying roughly 30% ($167 billion), which includes care offered in nursing facilities and through home and community-based services (HCBS). More than half of Medicaid LTSS spending currently supports HCBS rather than institutional care (e.g., nursing home care). Several factors contribute to this, including individual and family preferences and the relative cost-effectiveness of home and community-based care.

This increased demand for HCBS coincides with an increased demand for workers to deliver these services—the direct care workforce. States use various titles for these workers and often define them in statute. They can include personal care aides (PCAs), home health aides (HHAs), home care workers, long-term care aides and nursing assistants.

Each profession has a slightly different scope of practice depending on the number of required training hours or varying state regulations, and a handful are defined in the Bureau of Labor.

Did You Know?

- 20% of the U.S. population is projected to be age 65 or older by 2030, outnumbering children for the first time in the nation’s history.
- Nearly 90% of this population prefers to remain in their own homes for as long as possible.
- More home care jobs are projected to be added than any other single occupation between 2016 and 2026. Yet one in two workers leave these jobs within 12 months.
overtime protections to domestic workers, which generally extend workplace harassment and passed “Domestic Workers’ Bill of Rights” laws. States such as Oregon, Illinois, and Nevada, have appropriated bill. Additionally, a handful of states, including Oregon, Illinois and Nevada, have passed “Domestic Workers’ Bill of Rights” laws. These generally extend workplace harassment and overtime protections to domestic workers, which often include home care workers.

**Training.** Other states focus on strategies to improve the quality of the direct care workforce through training and career advancement opportunities. Research indicates direct care workers succeed when they can access high-quality entry-level training, ongoing education opportunities and defined career ladders. Some efforts may also enrich the perceived value of direct care jobs for future candidates and improve recruitment and retention.

Washington passed a 2011 ballot initiative that expanded learning objectives, increased training hours and introduced certification requirements for PCAs. The initiative requires the state to approve all pre-service training and continuing education, and the curricula must be more relevant to the specific needs of patients, service settings and the trainees’ career development.

After meeting the certification requirements, PCAs can complete condensed training to become an HHA or a nursing assistant. Arizona also addressed training by implementing a uniform, statewide and state-funded training system in 2012, following recommendations from the Direct Care Workforce Committee.

Other policies focus on specific curricula to meet the unique needs of certain populations. Illinois enacted SB 2301 (2016), establishing minimum training requirements for employees of home health agencies providing services for people with Alzheimer’s and related dementias. Similarly, Oregon’s HB 3359 (2017) outlined specific training on dementia care to direct care workers.

**Other Strategies.** A few states are looking at alternative policies that help address their workforce needs. The Texas Health and Human Services Commission issued a 2018 report (as mandated by the legislature) to improve recruitment and retention among state Medicaid-funded personal care aides.

Some states, including Maine and New Mexico, have convened stakeholder task forces to consider ways to support and strengthen the direct care workforce.

In 2018, Minnesota launched Direct Support Connect, a statewide job board that helps consumers find direct care workers and workers find the right employment fit. The Minnesota Department of Human Services created this resource to help address the shortage of direct support workers in the state.