



Improving Home and Community-Based Services Infrastructure

There is a growing need to assist states with improving their home and community-based services (HCBS) infrastructure. Key priorities include strengthening housing, transportation, employment, workforce and caregiver supports in communities across the country that address social determinants of health (SDOH), so that persons with disabilities and older adults with disabilities are served where they wish to be served. A working policy proposal has been developed by AUCD and the Disability and Aging Collaborative, a coalition of more than 40 national organizations, with additional input provided by associations representing states and other key informants.

Need for Investment

In recent years, many states have made significant progress in shifting their Medicaid long-term services and supports (LTSS) systems from heavy reliance on institutional care to systems that include a range of home and community-based services (HCBS) options and waiver programs. Still, significant disparities remain. While more than half of all states (27) and the District of Columbia are spending at least 50% on HCBS, this still falls short of the 69% target set by Centers for Medicare and Medicaid Services (CMS).¹ Additionally, in 2016, states reported 656, 195 individuals were on waiting lists for HCBS 1915(c) or 1115 waiver services.²

Key Proposal Objectives

1. Strengthen HCBS infrastructure to accelerate initiatives that improve integration with Medicare, Older Americans Act programs and others to better address SDH.
2. Assist states with ways to improve access to HCBS, particularly among populations with significant unmet need.
3. Leverage evolving state Medicaid information technology systems to improve HCBS reporting among managed long-term services and supports (MLTSS) and other types of HCBS providers, including outcomes that focus on individual experience of care.

Proposal Specifics

- Competitive grant program – authorizes and appropriates funding for a multi-year grant program
- Robust state application guidelines – requires data on current expenditures, extent to balance LTSS system, efforts to shift HCBS systems to emphasize community integration, balancing targets, and three target areas for HCBS infrastructure improvement (including **housing, transportation, workforce and unpaid caregiver needs, employment supports, no wrong door/single entry point system**)
- Includes stakeholder input and comment period
- Funding based on the percentage of state's total baseline LTSS spending on HCBS adjusted annually

Action Needed

- Co-sponsors are needed to introduce both a House and Senate version of the **Home and Community Based Services Infrastructure Improvement Act**.

¹ Eiken, S, Srdel, K., Burwell, B., & Amos, A. (May, 2018). Medicaid Expenditures for Long-Term Services and Supports in FY2016. Prepared by IBM Watson Health for CMS. Available at: <https://www.medicare.gov/medicaid/ltss/downloads/reports-and-evaluations/ltssexpenditures2016.pdf>

² Watts, M. & Musumeci, M. (December, 2018). Medicaid Home and Community-Based Services: Results From a 50-State Survey of Enrollment, Spending, and Program Policies. Washington DC: Kaiser Family Foundation. Available at: <http://files.kff.org/attachment/Report-Medicaid-Home-and-Community-Based-Services>