

The Home and Community-Based Services Access Act

The Home and Community-Based Services Access Act (HAA) is a draft bill that would help people with disabilities and older adults access the Home and Community-Based Services (HCBS) they need in order to live in their community with their friends and family.

The Problem: People with disabilities and older adults often need home and community-based services to help them live the lives they want as active members in their communities. These services help people with things like eating, dressing, personal hygiene, and managing health care or finances. These services are only available through Medicaid, and many state Medicaid programs have long waiting lists for these community services. There are nearly 850,000 people on waiting lists across the country. People with disabilities and their families often wait years or sometimes decades to access these services. This rationing of HCBS services also has a disproportionate impact on Black, Indigenous and other people of color with disabilities and older adults, who often are unable to access services. HCBS waiting lists also trap people with disabilities and their families in one state, because if they move, they may have to go to the bottom of a waiting list in the new state —this lack of portability creates particular challenges for military families.

However, Medicaid **must** cover many institutional services, such as nursing homes and long-term care facilities for people with disabilities without waiting lists. This is the “institutional bias” in Medicaid that the disability community has advocated to change for decades. The institutional bias continues despite the proven cost-effectiveness of HCBS: the average cost to serve a person with a disability in a publicly funded institution in one of the 36 states that still has them is \$294,300 per person, per year. In contrast, the average cost of a person served with Medicaid HCBS is \$49,854 per person per year. More importantly, individuals who have returned to the community report significant and lasting improvements in quality of life and community integration. But changing the Medicaid system requires upfront investment so that states can build capacity and ensure that they can serve everyone.

The Solution: The HCBS Access Act (HAA) would eliminate waiting lists. It requires Medicaid to provide HCBS, increases Medicaid funding for HCBS, and provides additional grant funding to help states to build the capacity that they need to serve all people who need HCBS. The HAA will improve the quality of the direct care workforce and address the decades-long workforce crisis and barriers. In particular, the HAA will ensure that the workers that support people with disabilities and older adults—who are disproportionately women of color—are fairly paid. These changes will also allow people with disabilities and their families to move from state-to-state and still be able to access crucial HCBS services. Finally, the HAA will provide the federal Medicaid resources necessary to fulfill the promises of the Americans with Disabilities Act and the Supreme Court’s *Olmstead* decision so that people with disabilities and older adults can live the lives they want in their homes and communities.