Medicaid home and community-based services (HCBS) are an economic necessity for American communities, for people with disabilities, for older adults, for workers who are injured, and for all of their families. These critical services enable people to remain in their homes, stay active in their communities, and lead independent lives. Better Care Better Jobs Act will expand access to good-quality care, lead to better pay and benefits for workers, enhance quality of life for families, and help create middle-class jobs. The investment will enhance funding to strengthen long-term care today and for the future and create a workforce with good jobs that make it possible for families and communities to thrive economically.

The COVID-19 pandemic highlighted the urgent need to ensure all Americans have the option to receive quality, long-term care in the setting that meet their needs and preferences. The vast majority of Americans would prefer to receive services and supports at home. Today, over 3.5 million older adults and people with disabilities receive Medicaid HCBS. Though all states provide coverage for some HCBS services, eligibility and benefit standards vary, leading to significant variation and gaps in coverage. Some states cap the number of individuals who may receive services, which has left over 650,000 Americans on wait lists for the services states choose to provide, leaving hundreds of thousand, or even millions without long-term care and support.

The proposed investment prioritizes wage and benefit increases for the workers who provide home care services. Nationwide, home care workers—a majority of whom are women and people of color—earn a median wage of $13 per hour. Roughly 18 percent of these workers live in poverty and many receive few or no benefits. Compensation, paired with the difficulty of the work, results in exceptionally high turnover rates among direct care workers, often estimated between 40 and 60 percent.

The Better Care Better Jobs Act would:

- **Enhance Medicaid funding for HCBS**: States would be eligible for a permanent 10 percentage point increase in the federal Medicaid match for delivering HCBS as well as enhanced funding for administrative activities associated with improvement efforts. To receive these dollars, states must:

  - **Strengthen and expand access to HCBS** by expanding financial eligibility criteria for HCBS to federal limits; requiring coverage for personal care services; expanding supports for family caregivers; adopting programs that help people navigate enrollment and eligibility; expanding access to behavioral health care; improving coordination with housing, transportation, and employment supports; and developing or improving programs to allow working people with disabilities to access HCBS.
• **Strengthen and expand the HCBS workforce** by addressing HCBS payment rates to promote recruitment and retention of direct care workers; regularly updating HCBS payment rates with public input; passing rate increases through to direct care workers to increase wages; and updating and developing training opportunities for this workforce as well as family caregivers.

• **Show improvement over time** by demonstrating improved availability of services; reduced disparities in accessing and using HCBS; evidence of competitive wages and benefits for workers; and increases in HCBS spending.

• **Comply with a strong maintenance of effort** for HCBS eligibility and benefit standards to ensure that additional federal dollars go towards growing and improving HCBS programs.

**Encourage innovative models that benefit direct care workers and care recipients:** Provide additional incentives to help states build HCBS workforce programs that register direct care workers; help connect them to seniors and people with disabilities seeking care; facilitate coordination between the state and direct care workers; support care safety and quality; and help workers organize, among other functions.

**Support quality and accountability:** Provide funding to the Centers for Medicare & Medicaid Services to carry out the bill’s programs; conduct oversight and monitoring; and offer technical assistance to states participating in the funding opportunities described above. Additionally, participating states would be required to establish state HCBS ombudsman programs to support care quality. The bill would also require all state Medicaid programs to adopt HCBS quality measures.

**Facilitate state planning:** Provide funding for states to develop HCBS infrastructure improvement plans with public input, to outline how they would expand access to HCBS, strengthen the workforce, and meet requirements tied to increased federal Medicaid funding. States would be required to develop these plans in order to receive enhanced federal Medicaid funding for HCBS.

**Permanent spousal impoverishment protections:** Permanently authorize protections against impoverishment for individuals whose spouses are receiving Medicaid HCBS.

**Make Permanent Money Follows the Person:** Make the Money Follows the Person Rebalancing Demonstration permanent.