

# DIRECT CARE WORKERS IN THE UNITED STATES

KEY FACTS 2024

# TABLE OF CONTENTS

<b>INTRODUCTION</b> .....	<b>1</b>
<b>U.S. POPULATION PROJECTIONS</b> .....	<b>3</b>
<b>HOME CARE WORKERS</b> .....	<b>5</b>
Who Are Home Care Workers? .....	<b>6</b>
The Role of Home Care Workers .....	<b>8</b>
Challenges for Home Care Workers .....	<b>9</b>
Future Demand for Home Care Workers .....	<b>11</b>
<b>RESIDENTIAL CARE AIDES</b> .....	<b>12</b>
Who Are Residential Care Aides? .....	<b>13</b>
The Role of Residential Care Aides .....	<b>15</b>
Challenges for Residential Care Aides .....	<b>16</b>
Future Demand for Residential Care Aides .....	<b>18</b>
<b>NURSING ASSISTANTS IN NURSING HOMES</b> .....	<b>19</b>
Who Are Nursing Assistants in Nursing Homes? .....	<b>20</b>
The Role of Nursing Assistants in Nursing Homes .....	<b>22</b>
Challenges for Nursing Assistants in Nursing Homes .....	<b>24</b>
Future Demand for Nursing Assistants in Nursing Homes .....	<b>27</b>
<b>OCCUPATIONAL TITLES &amp; INDUSTRY CLASSIFICATIONS</b> .....	<b>28</b>
<b>DATA SOURCES AND METHODS</b> .....	<b>30</b>
<b>NOTES</b> .....	<b>31</b>

# INTRODUCTION

Direct care workers assist older adults and people with disabilities with essential daily tasks and activities across a range of care settings. This report explores the three primary segments of this workforce in long-term care:

- **Home Care Workers** are the more than 2.9 million personal care aides and home health aides (and in some cases, nursing assistants) who support individuals in private homes and community settings.<sup>1</sup>
- **Residential Care Aides** are the 655,950 personal care aides, home health aides, and nursing assistants who assist individuals in group homes, assisted living communities, and other residential care settings.
- **Nursing Assistants in Nursing Homes** are the 458,590 workers who provide services to individuals living in skilled nursing homes.<sup>2</sup>

The growing population of older adults continues to drive up demand for direct care workers. Over the past decade, the direct care workforce added nearly 1.6 million new jobs, growing from 3.5 million workers in 2014 to just over 5 million in 2023.<sup>3</sup> This trend is projected to continue, with the direct care workforce expected to add just over 860,000 new jobs from 2022 to 2032—more new jobs than any other single occupation in the country.<sup>4</sup> When also accounting for jobs that must be filled when existing workers transfer to other occupations or exit the labor force, there will be an estimated 8.9 million total job openings in direct care from 2022 to 2032.<sup>5</sup>

This job growth is occurring primarily in the home and community-based services (HCBS) sector, with the home care workforce projected to increase by 26 percent in the next decade.<sup>6</sup> The number of residential care aides is also projected to increase by 12 percent.<sup>7</sup> In contrast, the nursing assistant workforce is expected to continue decreasing in size, with a projected decrease of three percent over the next decade.<sup>8</sup> These diverging trends across long-term care industries largely result from consumer preferences for home care and public policies that have expanded HCBS funding and access.<sup>9</sup>

In the past 10 years, the direct care workforce has seen incremental but not entirely linear wage growth (accounting for inflation), with wage gains largely driven by state and federal investments in Medicaid programs and the workforce, especially in response to the COVID-19 pandemic. From 2022 to 2023, median wages for all direct care workers increased by \$0.85 per hour, adjusting for inflation.<sup>10</sup> Home care workers saw the largest wage increase (\$1.16 per hour), after seeing a decrease of \$0.72 per hour from 2021 to 2022. Overall, direct care wages remain low—the median hourly wage for all direct care workers was just \$16.72 in 2023,<sup>11</sup> with home care workers earning the least at \$16.13 per hour. Moreover, direct care workers' median wages are lower than median wages for all other occupations with similar or lower entry-level requirements in all 50 states plus D.C.<sup>12</sup> As a result, long-term care employers continue to experience acute recruitment and retention challenges.

Low wages combined with a high rate of part-time work make it challenging for direct care workers to financially support themselves and their families. Median annual earnings for direct care workers are just \$25,015.<sup>13</sup> Thirty-seven percent of direct care workers live in low-income households (defined as subsisting on less than 200 percent of the federal poverty level), and 49 percent rely on public assistance, such as Medicaid, food and nutrition assistance, or cash assistance.<sup>14</sup> These trends both reflect and perpetuate the racial and gender inequities faced by direct care workers, who are majority women and people of color.<sup>15</sup>

This annual report begins by describing how the growing, changing population of older adults is impacting demand for direct care, then provides a comprehensive update on three key segments of the workforce: home care workers, residential care aides, and nursing assistants in nursing homes. Each of the workforce sections focuses on demographics, occupational roles, job quality challenges, and projected job openings. Taken together, these analyses underscore the pressing need for job quality interventions across long-term care settings—building on recent investments and progress—to improve the lives of direct care workers and the older adults and people with disabilities they support.

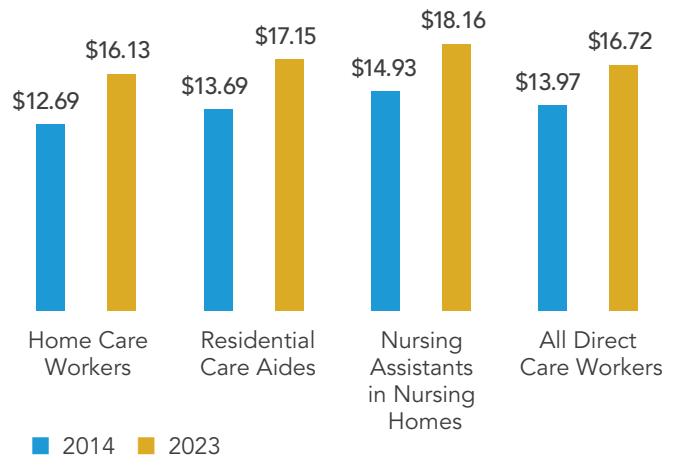
### ALL DIRECT CARE WORKERS

EMPLOYMENT BY INDUSTRY, 2023



<span style="color: #c44e52;">■</span> Home Care Workers	58%
<span style="color: #0072bc;">■</span> Residential Care Aides	13%
<span style="color: #00a08a;">■</span> Nursing Assistants in Nursing Homes	9%
<span style="color: #c49a3b;">■</span> Direct Care Workers in Other Industries	20%

WAGES BY INDUSTRY, 2014 TO 2023



**Chart Sources:** Other industries employing direct care workers include hospitals and numerous others. U.S. Bureau of Labor Statistics (BLS), Division of Occupational Employment and Wage Statistics (OEWS). 2024. *May 2014 to May 2023 National Occupational Employment and Wage Estimates*. [https://www.bls.gov/oes/current/oes\\_nat.htm](https://www.bls.gov/oes/current/oes_nat.htm); BLS OEWS. 2024. *May 2014 to May 2023 National Industry-Specific Occupational Employment and Wage Estimates*. <https://www.bls.gov/oes/current/oesosci.htm>; Analysis by PHI (June 2024).

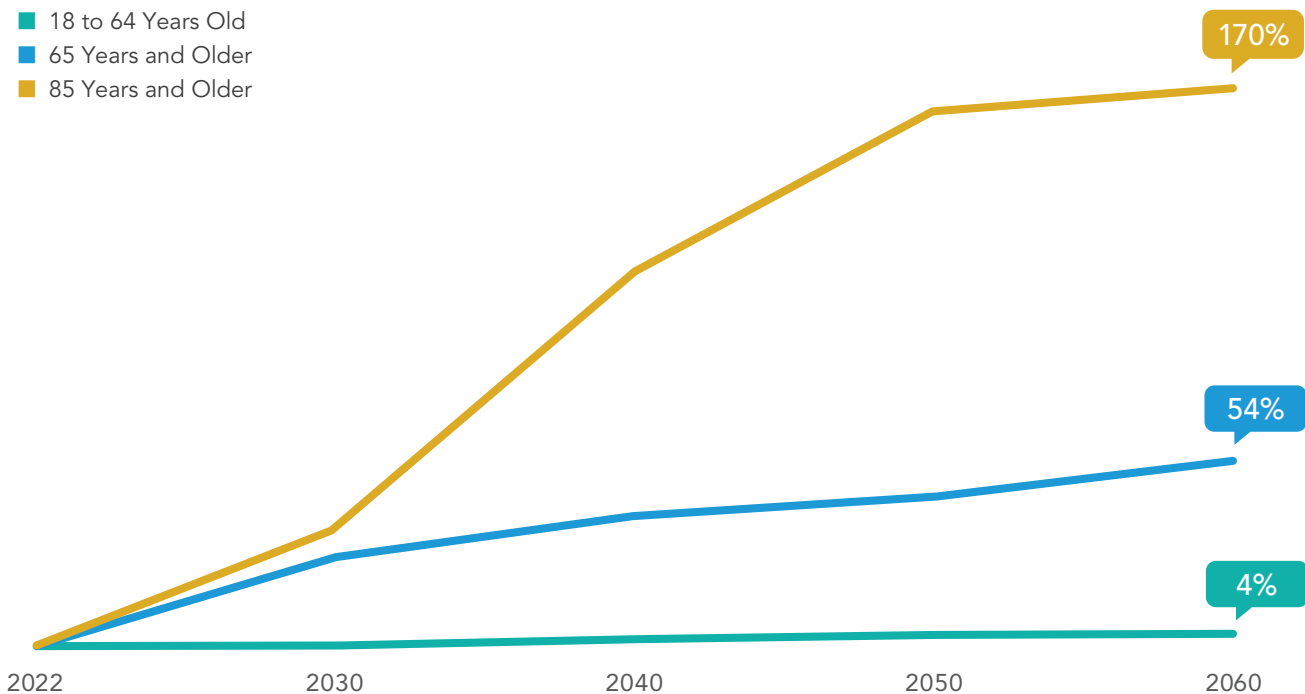
**Chart Sources:** U.S. Bureau of Labor Statistics (BLS), Division of Occupational Employment and Wage Statistics (OEWS). 2024. *May 2014 to May 2023 National Occupational Employment and Wage Estimates*. [https://www.bls.gov/oes/current/oes\\_nat.htm](https://www.bls.gov/oes/current/oes_nat.htm); BLS OEWS. 2024. *May 2014 to May 2023 National Industry-Specific Occupational Employment and Wage Estimates*. <https://www.bls.gov/oes/current/oesosci.htm>; Analysis by PHI (June 2024). Note: Adjusted for inflation using 2023 dollars.

## U.S. POPULATION PROJECTIONS

From 2022 to 2060, the population of adults age 65 and older in the U.S. is projected to increase dramatically from 57.8 million to 88.8 million.<sup>16</sup> The number of adults age 85 and older is expected to nearly triple over the same period from 6.5 million to 17.5 million. This demographic shift is the primary driver of job growth in the direct care workforce.

In contrast to the rapid expansion of the older adult population, the population of adults age 18 to 64 is expected to remain relatively stable, which means that there will be fewer potential paid and unpaid caregivers available to support older adults. Currently, the ratio of adults age 18 to 64 to adults age 85 and older is 31 to 1, but that ratio is projected to drop to 12 to 1 by 2060.

### PROJECTED POPULATION GROWTH BY AGE GROUP, 2022 TO 2060



**Chart Source:** U.S. Census Bureau. 2023. *2023 National Population Projections Datasets, Projected Population by Single Year of Age, Sex, Race, and Hispanic Origin for the United States: 2022 to 2065*. <https://www.census.gov/data/tables/2023/demo/popproj/2023-summary-tables.html>; Analysis by PHI (July 2024).

Growing diversity and acuity among older adults will also shape future demand for direct care workers.<sup>17</sup>

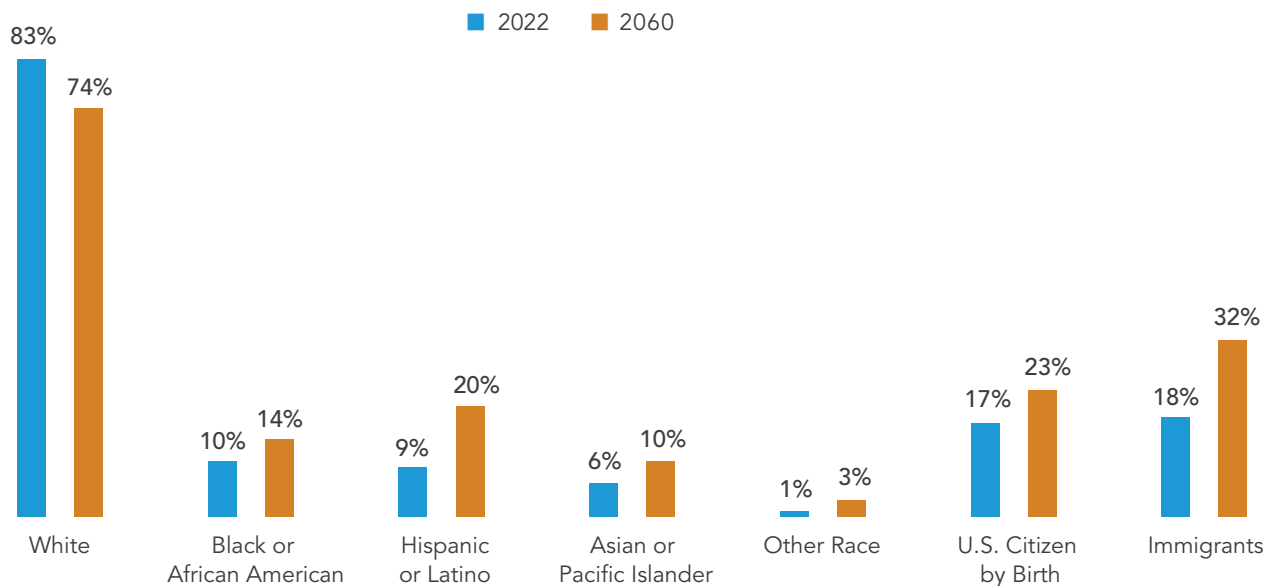
**The population of adults age 65 and over will become more diverse by 2060.** From 2022 to 2060, the proportion of older adults of color will increase from 26 percent to 47 percent, and the proportion of older adults who are immigrants will increase from 18 percent to 32 percent.

Demographic changes among older adults will likely influence overall long-term care needs and service utilization patterns. These changes also highlight the need to promote cultural and linguistic competency within the direct care workforce, while recognizing workers' own diverse backgrounds, experiences, and barriers.<sup>18</sup>

Individuals are also living longer with complex chronic conditions, such as Alzheimer's disease and other forms of dementia (among other conditions).

**About 1 in 9 people age 65 and over are currently living with Alzheimer's disease, the most common form of dementia.<sup>19</sup> As our population grows older, the number of older adults with Alzheimer's disease is expected to more than double, from 6.7 million in 2023 to 13.8 million in 2060.<sup>20</sup>** This trend will drive up demand for direct care workers since more than a third of individuals across all long-term care settings are living with Alzheimer's disease or another form of dementia.<sup>21</sup>

**OLDER ADULTS BY RACE / ETHNICITY, AND NATIVITY, 2022 AND 2060**



**Chart Sources:** U.S. Census Bureau. 2023. *Table 6: Projected Population Distribution by Race, Hispanic Origin, and Selected Age Groups.* 2023 National Population Projections Tables: Main Series, Projections for the United States: 2023 to 2100. <https://www.census.gov/data/tables/2023/demo/popproj/2023-summary-tables.html>; U.S. Census Bureau. 2023. *Table 9: Projected Native-Born Population for Selected Age Groups & Table 10: Projected Foreign-Born Population for Selected Age Groups.* 2023 National Population Projections Tables: Main Series, Projections for the United States: 2023 to 2100. <https://www.census.gov/data/tables/2023/demo/popproj/2023-summary-tables.html>; Analysis by PHI (July 2024).

# HOME CARE WORKERS

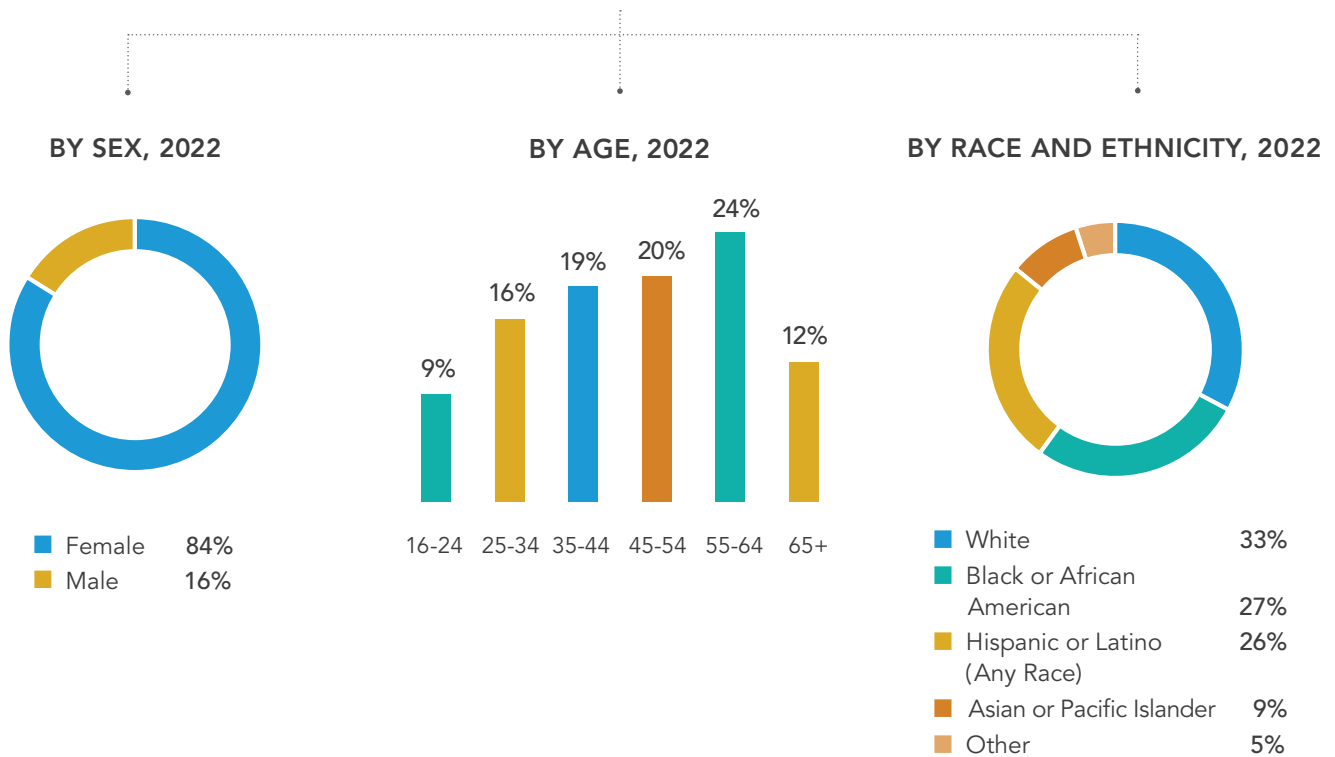
**Home care workers** (primarily personal care aides and home health aides, as well as some nursing assistants) assist more than 9.8 million older adults and people with disabilities living at home.<sup>22</sup> The home care workforce is one of the largest and fastest growing occupations in the U.S. due to a combination of factors, including the rapidly expanding population of older adults, consumer preferences for aging and receiving care in place, and the increasing provision of home and community-based services (HCBS).<sup>23</sup> Home care worker wages increased from 2022 to 2023 (when adjusted for inflation), after having dropped substantially from 2021 to 2022, but remain low, leaving many workers living in or near poverty. In the context of persistently high turnover, home care employers continue to struggle to recruit and retain enough workers to meet escalating demand.<sup>24</sup>

# WHO ARE HOME CARE WORKERS?

Home care workers are primarily women, people of color, and immigrants, and therefore face heightened risks of discrimination throughout their lives in areas including housing, education, employment, health care, and more.<sup>25</sup> Gender, racial, and other forms of equity are central concerns for this workforce.<sup>26</sup>

- **Eighty-four percent of home care workers are women.**<sup>27</sup>
- **Home care workers have a median age of 47.** Thirty-six percent of the home care workforce is age 55 and over, compared to 22 percent of the U.S. labor force overall.<sup>28</sup>
- **While people of color make up 38 percent of the total U.S. labor force,<sup>29</sup> they constitute 67 percent of all home care workers.** Twenty-seven percent of home care workers are Black or African American and 26 percent are Hispanic or Latino (any race).

## HOME CARE WORKERS

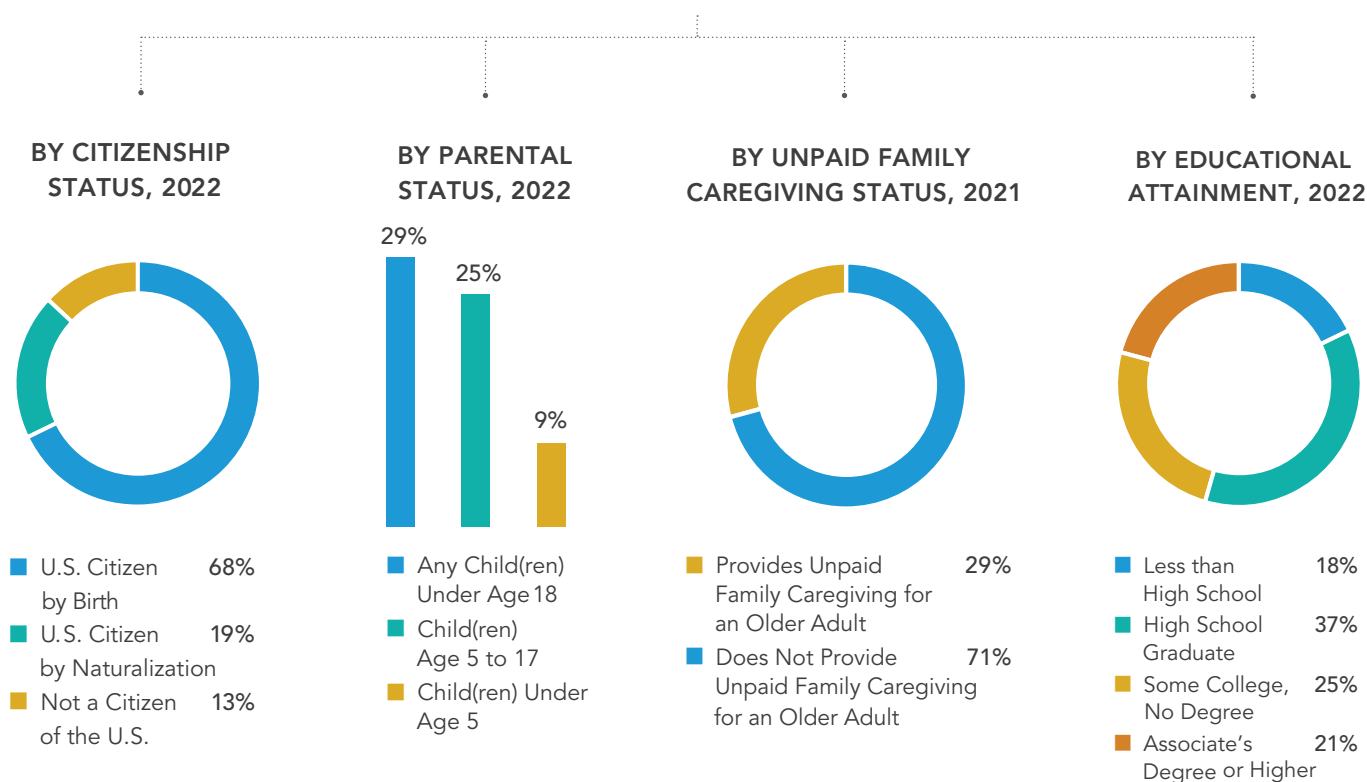


**Chart Source:** “Hispanic or Latino” refers to people of any race who identify as Hispanic or Latino; these individuals are excluded from all other race/ethnicity categories. Ruggles, Steven, Sarah Flood, Matthew Sobek, Daniel Backman, Annie Chen, Grace Cooper, Stephanie Richards, Renae Rodgers, and Megan Schouweiler. 2024. IPUMS USA: Version 15.0 American Community Survey, 2022. Minneapolis, MN: IPUMS. <https://doi.org/10.18128/D010.V15.0>; Analysis by PHI (March 2024).



- Immigrants constitute 32 percent of the home care workforce, compared to 17 percent of the total U.S. labor force.<sup>30</sup>
- Twenty-nine percent of home care workers have at least one child under age 18 living at home, and 9 percent have one or more children under the age of five living at home.
- Nearly 30 percent of home care workers provide unpaid family caregiving for one or more older adults as compared to 19 percent of workers in the U.S. labor force overall.<sup>31</sup>
- Forty-five percent of home care workers have pursued education beyond high school.

## HOME CARE WORKERS



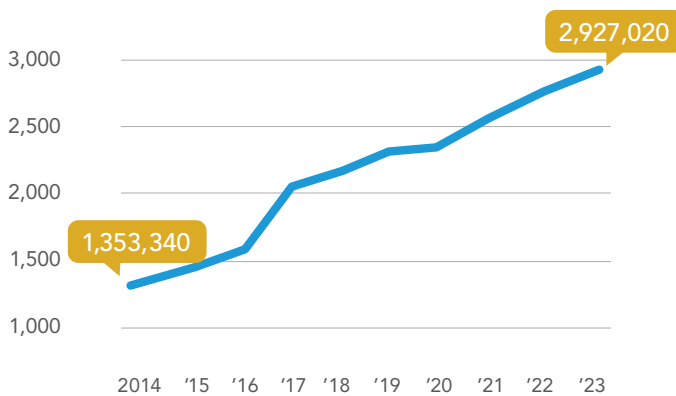
**Chart Sources:** The percentages shown in the education chart do not total 100 percent because they are rounded to the nearest whole percentage. Ruggles, Steven, Sarah Flood, Matthew Sobek, Daniel Backman, Annie Chen, Grace Cooper, Stephanie Richards, Renae Rodgers, and Megan Schouweiler. 2024. IPUMS USA: Version 15.0 American Community Survey, 2022. Minneapolis, MN: IPUMS. <https://doi.org/10.18128/D010.V15.0>; Analysis by PHI (March 2024). Home Care Workers by Unpaid Family Caregiving Status estimate draws on ten years of pooled data from the American Time Use Survey. Flood, Sarah M., Liana C. Sayer, and Daniel Backman. *American Time Use Survey Data Extract Builder: Version 3.1. American Time Use Survey, 2011-2021.* <https://doi.org/10.18128/D060.V3.1>; analysis by PHI (June 2023).

## THE ROLE OF HOME CARE WORKERS

Home care workers assist older adults and people with disabilities living at home with activities of daily living (ADLs), which include eating, dressing, toileting, mobility, and bathing.<sup>32</sup> Other responsibilities differ across occupational groups within the home care sector. **Personal care aides** also provide other household assistance and/or social support to help individuals remain engaged in their communities. **Home health aides** (and in some cases, **nursing assistants**<sup>33</sup>) also perform certain clinical tasks under the remote or intermittent onsite supervision of a licensed professional. Although formally classified as personal care aides in most cases, **direct support professionals** constitute a distinct occupational group within this workforce that provides habilitation services, employment assistance, and other supports to people with intellectual and developmental disabilities.<sup>34</sup> (See *Occupational Titles and Industry Classifications* on page 28 for more details.)

- The home care workforce more than doubled in size over the past 10 years, from 1.4 million in 2014 to more than 2.9 million in 2023.

HOME CARE WORKER EMPLOYMENT, 2014 TO 2023

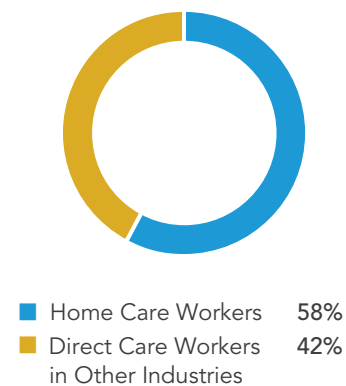


- PHI estimates that **at least 1.5 million home care workers, including family members, are employed as “independent providers” through Medicaid-funded consumer-direction programs**, based on 2022-2023 survey data on consumer enrollment in these programs.<sup>35</sup>

It is very difficult to accurately estimate the number of independent providers, however. Due to a 2017 methodological change, a proportion of workers hired through consumer-direction programs are now captured by the Bureau of Labor Statistics (BLS) Occupational Employment and Wage Statistics (OEWS) program.<sup>36</sup> However, the accuracy of these data varies by state and many independent providers are likely excluded. More broadly, the OEWS data do not include self-employed home care workers who are hired directly and paid out-of-pocket by consumers through the “gray market.”<sup>37</sup>

- Home care workers constitute **58 percent of the total direct care workforce**, which also includes workers who are employed in residential care, nursing homes, and other settings.

DIRECT CARE WORKER EMPLOYMENT BY INDUSTRY, 2023

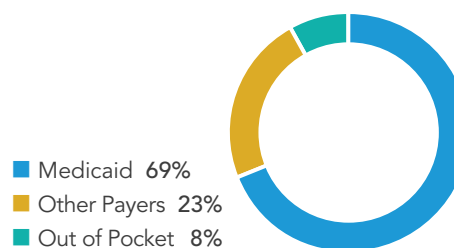


**Chart Sources:** U.S. Bureau of Labor Statistics (BLS), Division of Occupational Employment and Wage Statistics (OEWS). 2024. May 2014 to May 2023 *National Occupational Employment and Wage Estimates*. [https://www.bls.gov/oes/current/oes\\_nat.htm](https://www.bls.gov/oes/current/oes_nat.htm); BLS OEWS. 2023. May 2014 to May 2023 *National Industry-Specific Occupational Employment and Wage Estimates*. <https://www.bls.gov/oes/current/oesrci.htm>; analysis by PHI (June 2024)).

- Home care jobs are predominantly government funded. **Payments from Medicaid constitute 69 percent of the \$284 billion in annual spending on home and community based services (HCBS).**<sup>38</sup>

**Chart Source:** Chidambaram, Priya and Alice Burns. 2024. *10 Things About Long-Term Services and Supports (LTSS)*. Washington, DC: KFF. <https://www.kff.org/medicaid/issue-brief/10-things-about-long-term-services-and-supports-ltss/>; Analysis by PHI (July 2024).

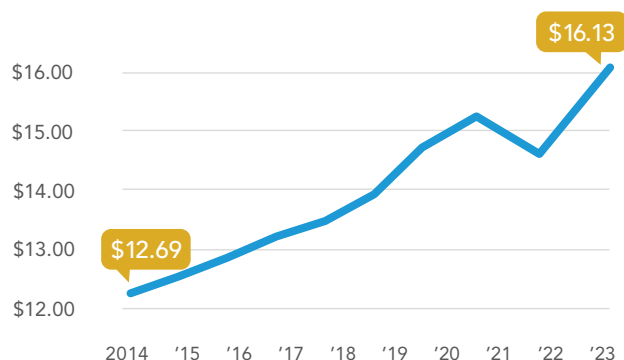
HCBS SPENDING BY SOURCE, 2022



## CHALLENGES FOR HOME CARE WORKERS

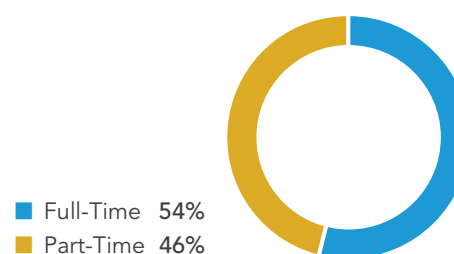
- Home care workers' wages have risen somewhat over the past 10 years.** Inflation-adjusted median hourly wages rose from \$12.69 in 2014 to \$16.13 in 2023. This increase has not been entirely linear, however: inflation-adjusted median wages actually decreased from 2021 to 2022 before increasing again in 2023.<sup>39</sup>
- with **nineteen percent of home care workers employed for only part of the year**, rather than year-round.<sup>41</sup>
- At the other end of the work-hours spectrum, **sixteen percent of home care workers typically work more than 40 hours per week.**<sup>42</sup>

HOME CARE WORKER MEDIAN HOURLY WAGES, ADJUSTED FOR INFLATION, 2014 TO 2023

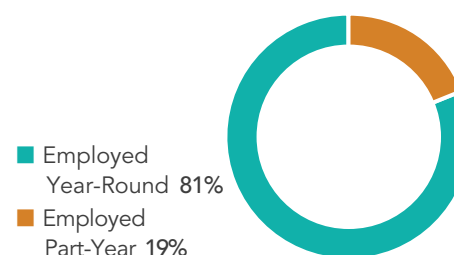


- In addition to experiencing low hourly wages, **nearly half of all home care workers work part-time hours. Forty-six percent of home care workers work part time**, defined as fewer than 35 hours per week.<sup>40</sup>
- Many home care workers also experience unstable employment over the course of the year,

HOME CARE WORKERS BY EMPLOYMENT STATUS, 2022



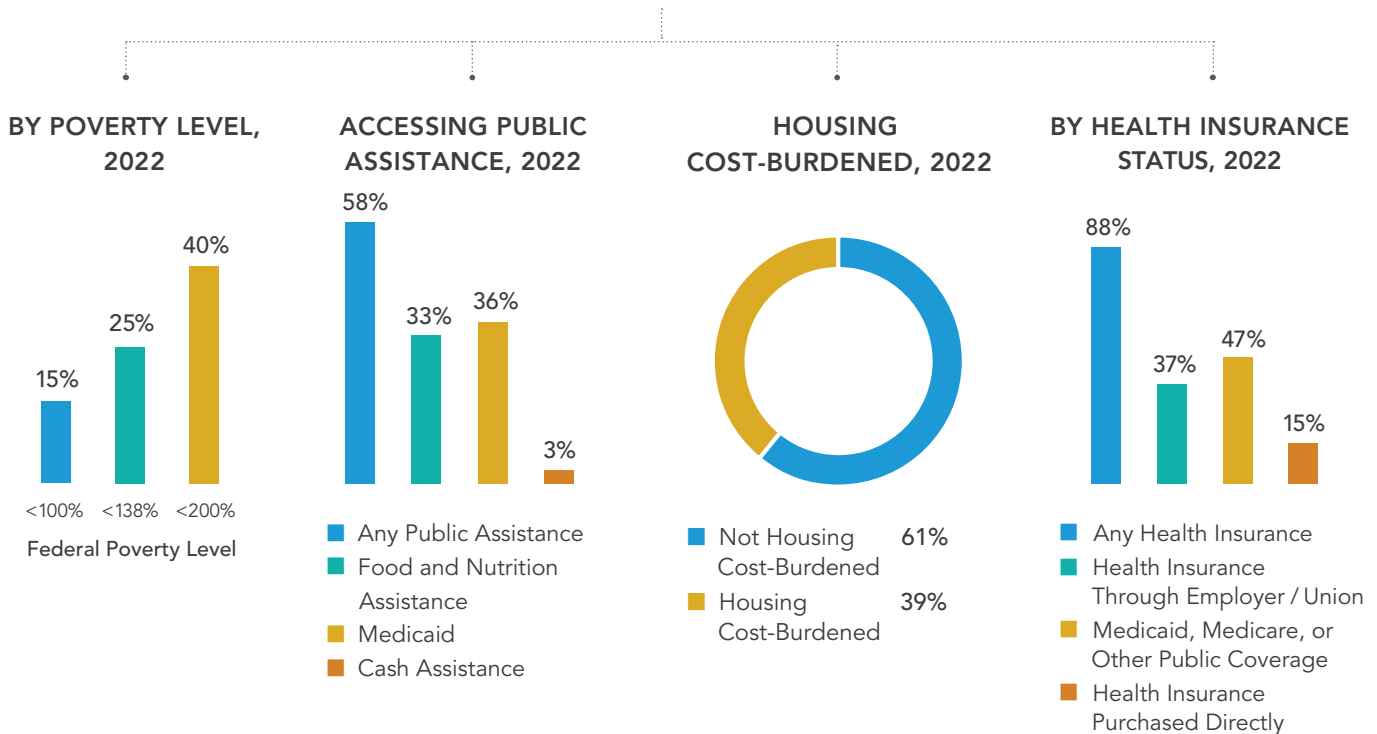
HOME CARE WORKERS BY ANNUAL EMPLOYMENT STATUS, 2022



**Chart Sources:** BLS OEWS. 2024. *May 2014 to May 2023 National Industry-Specific Occupational Employment and Wage Estimates*. <https://www.bls.gov/oes/current/oesrci.htm>; Analysis by PHI (June 2024). The percentages shown in the employment status chart do not total 100 percent because they are rounded to the nearest whole percentage. Ruggles, Steven, Sarah Flood, Matthew Sobek, Daniel Backman, Annie Chen, Grace Cooper, Stephanie Richards, Renae Rodgers, and Megan Schouweiler. 2024. *IPUMS USA: Version 15.0 American Community Survey, 2022*. Minneapolis, MN: IPUMS. <https://doi.org/10.18128/D010.V15.0>; Analysis by PHI (March 2024).

- Because of low wages and the prevalence of part-time work hours and part-year employment, **home care workers earn a median annual income of just \$21,889.**<sup>43</sup>
- Low incomes lead to high poverty rates among home care workers: **15 percent live in a household below the federal poverty level and 40 percent live in low-income households.**<sup>44</sup>
- Because of high poverty rates, **nearly three in five home care workers receive some form of public assistance.**
- **Thirty-nine percent of home care workers are housing cost-burdened, meaning that their housing costs—including rent or mortgage payments—exceed 30 percent of their household income.**
- **Twelve percent of home care workers lack health insurance,** while 47 percent rely on public coverage, most commonly Medicaid.

HOME CARE WORKERS

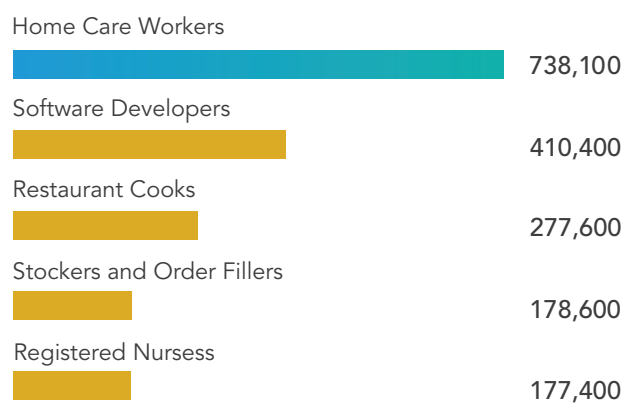


**Chart Source:** Ruggles, Steven, Sarah Flood, Matthew Sobek, Daniel Backman, Annie Chen, Grace Cooper, Stephanie Richards, Renae Rodgers, and Megan Schouweiler. 2024. *IPUMS USA: Version 15.0 American Community Survey, 2022*. Minneapolis, MN: IPUMS. <https://doi.org/10.18128/D010.V15.0>; Analysis by PHI (March 2024). The percentages shown in the health insurance chart are rounded to the nearest whole percentage and the percentages for specific forms of coverage in the health insurance chart do not total 88 percent because workers may have more than one source of coverage.

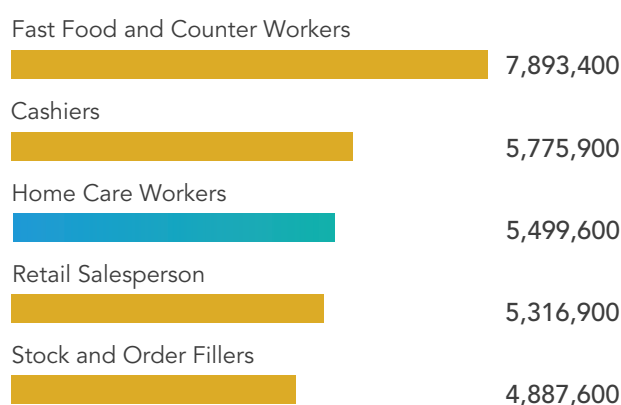
## FUTURE DEMAND FOR HOME CARE WORKERS

- **The home care workforce is projected to add over 738,100 new jobs from 2022 to 2032—more new jobs than any other occupation in the U.S.** The occupation with the second-largest projected growth, software developers, is expected to add 327,600 fewer jobs than the home care workforce.
- **From 2022 to 2032, the home care workforce will have 5.5 million total job openings.** This figure includes 738,100 new jobs created by growth in demand, 2.2 million job openings caused by workers moving into other occupations, and 2.6 million job openings due to workers leaving the labor force altogether.<sup>45</sup> The home care workforce ranks third among all U.S. occupations for total projected job openings.

### OCCUPATIONS WITH MOST JOB GROWTH, 2022 TO 2032



### OCCUPATIONS WITH THE MOST TOTAL JOB OPENINGS, 2022 TO 2032



**Chart Sources:** U.S. Bureau of Labor Statistics (BLS), Employment Projections Program (EPP). 2023a. *National Employment Matrix database*. <https://data.bls.gov/projections/nationalMatrixHome?ioType=o>; Analysis by PHI (July 2024). BLS EPP. 2023b. *EP Data Tables, Table 1.10 Occupational Separations and Openings, Projected 2022–2032*. <https://www.bls.gov/emp/tables/occupational-separations-and-openings.htm>; Analysis by PHI (July 2024).

## CONCLUSION

Median wages for home care workers increased noticeably from 2022 to 2023, likely reflecting state and federal investments in HCBS and this workforce, including through Section 9817 of the American Rescue Plan Act (which provided a short-term but significant increase in the federal match for states' HCBS programs).<sup>46</sup> However, home care wages remain low and a significant proportion of home care workers are employed part-time and/or part-year. As a result, home care workers have low median annual earnings, with many living in low-income households and relying on public assistance to make ends meet. In turn, the home care industry continues to struggle with high turnover and widespread job vacancies.<sup>47</sup> To recruit and retain enough home care workers to meet growing demand, significant job quality improvements are still needed. The new Medicaid Access Rule may help drive improvements, most notably by requiring states to ensure that at least 80 percent of Medicaid payments for homemaker, home health aide, and personal care services are spent on compensation for these workers.<sup>48</sup>

# RESIDENTIAL CARE AIDES

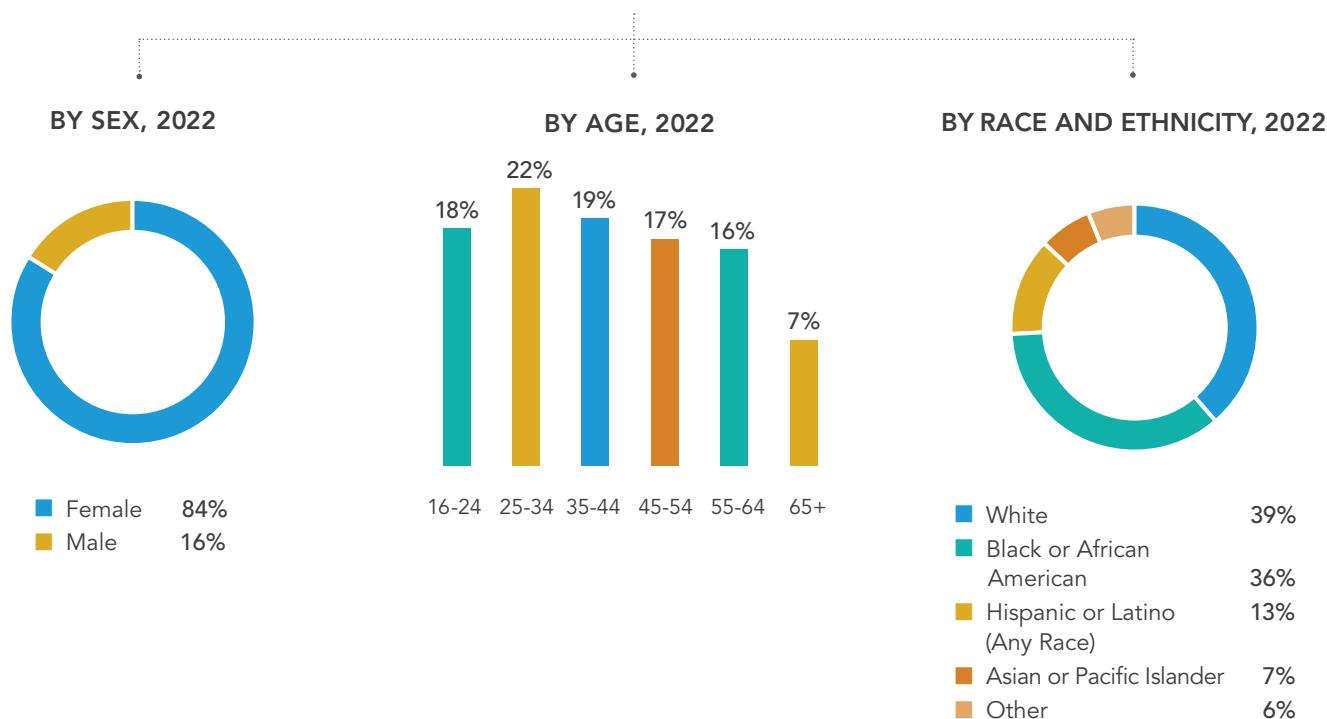
**Residential care aides** support more than 1.1 million individuals living in residential care settings in the U.S., which range from small group homes to assisted living and life plan communities (i.e., senior living communities with tiered levels of care).<sup>49</sup> The number of residential care aides has fluctuated somewhat in recent years: decreasing somewhat in 2021 and 2022, then recovering slightly in 2023, while remaining below the numbers from 2020. Nonetheless, residential care aides continue to play a critical role in the nation's long-term services and supports system but—like other direct care workers—experience persistent job quality challenges.

## WHO ARE RESIDENTIAL CARE AIDES?

Residential care aides are majority women and people of color, and disproportionately immigrants, and therefore face heightened risks of experiencing discrimination throughout their lives in areas including housing, education, employment, health care, and more.<sup>50</sup> Gender, racial, and other forms of equity are central concerns for this workforce.<sup>51</sup>

- **Eighty-four percent of residential care aides are women.**<sup>52</sup>
- **Residential care aides have a median age of 40.** Eighteen percent of residential care aides are age 16 to 24, compared to 14 percent of the total U.S. labor force.<sup>53</sup>
- **While people of color make up 38 percent of the total U.S. labor force, they constitute 61 percent of residential care aides.**<sup>54</sup> Thirty-six percent of residential care aides are Black or African American.

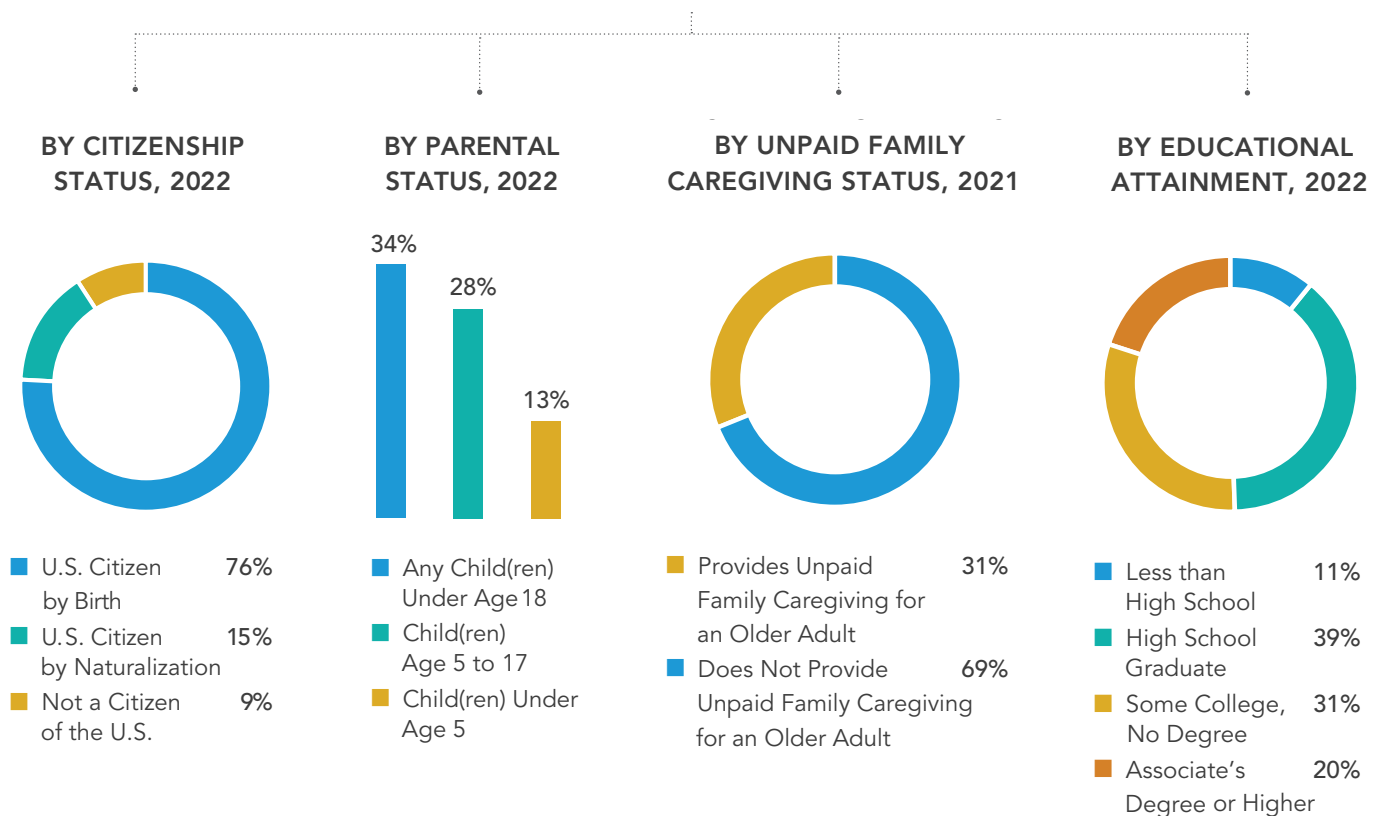
### RESIDENTIAL CARE AIDES



**Chart Sources:** Ruggles, Steven, Sarah Flood, Matthew Sobek, Daniel Backman, Annie Chen, Grace Cooper, Stephanie Richards, Renae Rodgers, and Megan Schouweiler. 2024. *IPUMS USA: Version 15.0 American Community Survey, 2022*. Minneapolis, MN: IPUMS. <https://doi.org/10.18128/D010.V15.0>; Analysis by PHI (March 2024). The percentages shown in the charts do not total 100 percent because they are rounded to the nearest whole percentage. "Hispanic or Latino" refers to people of any race who identify as Hispanic or Latino; these individuals are excluded from all other race/ethnicity categories.

- Immigrants constitute 24 percent of the residential care aide workforce, compared to 17 percent of the total U.S. labor force.<sup>55</sup>
- Thirty-four percent of residential care aides have at least one child under age 18 living at home, and 13 percent have one or more children under the age of five living at home.
- Thirty-one percent of residential care aides provide unpaid family caregiving for one or more older adults as compared to 19 percent of workers in the U.S. labor force overall.<sup>56</sup>
- Over half (51 percent) of residential care aides have pursued education beyond high school.

### RESIDENTIAL CARE AIDES



**Chart Sources:** Ruggles, Steven, Sarah Flood, Matthew Sobek, Daniel Backman, Annie Chen, Grace Cooper, Stephanie Richards, Renae Rodgers, and Megan Schouweiler. 2024. *IPUMS USA: Version 15.0 American Community Survey, 2022*. Minneapolis, MN: IPUMS. <https://doi.org/10.18128/D010.V15.0>; Analysis by PHI (March 2024). This estimate draws on a decade of pooled data from the American Time Use Survey. Flood, Sarah M., Liana C. Sayer, and Daniel Backman. *American Time Use Survey Data Extract Builder: Version 3.1. American Time Use Survey, 2011-2021*. <https://doi.org/10.18128/D060.V3.1>; analysis by PHI (June 2023). The percentages shown in the education chart do not total 100 percent because they are rounded to the nearest whole percentage.



## THE ROLE OF RESIDENTIAL CARE AIDES

Residential care aides assist individuals with daily tasks and activities in community-based residential care settings. These roles are filled by **personal care aides, home health aides, and nursing assistants**, depending on state-level regulations and employers' hiring practices. Although formally classified as personal care aides in most cases, **direct support professionals** specifically support residents with intellectual and developmental disabilities in residential care settings. (See *Occupational Titles and Industry Classifications* on page 28 for more details.)

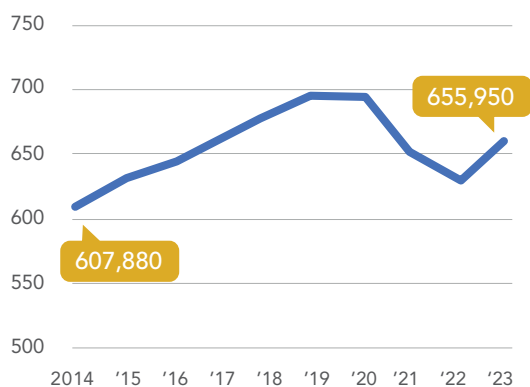
- The residential care aide workforce added **48,070 jobs in total over the past 10 years, increasing in size from 607,880 workers in 2014 to 655,950 in 2023.**<sup>57</sup> After losing over 27,000 jobs from 2020 to 2021 and over 11,000

from 2021 to 2022, the residential care aide workforce gained back over 20,000 jobs in 2023.

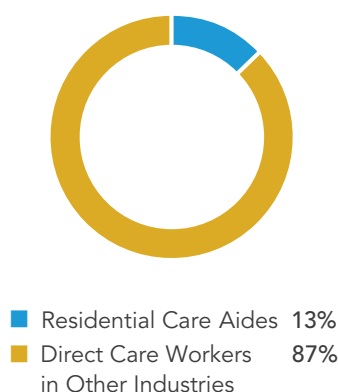
- **Residential care aides constitute 13 percent of the total direct care workforce**, which also includes workers who are employed in home care, nursing homes, and other settings.
- Of the residential care industry's \$138 billion in total annual revenue, **42 percent comes from public programs**, primarily Medicaid and Medicare, and **31 percent comes from** out-of-pocket payments.<sup>58</sup>

**Revenue sources vary across residential care.** Public sources constitute 79 percent of revenue in residential care homes for people with intellectual and developmental disabilities, versus 16 percent of revenue in assisted living and continuing care retirement communities.<sup>59</sup>

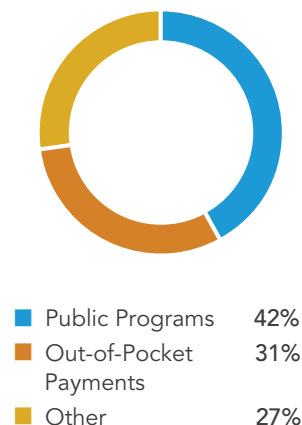
RESIDENTIAL CARE AIDE EMPLOYMENT, 2014 TO 2023



DIRECT CARE WORKER EMPLOYMENT BY INDUSTRY, 2023



RESIDENTIAL CARE REVENUE BY SOURCE, 2022



**Chart Sources:** U.S. Bureau of Labor Statistics (BLS), Division of Occupational Employment and Wage Statistics (OEWS). 2024. *May 2014 to May 2023 National Occupational Employment and Wage Estimates*. [https://www.bls.gov/oes/current/oes\\_nat.htm](https://www.bls.gov/oes/current/oes_nat.htm); BLS OEWS. 2023. *May 2014 to May 2023 National Industry-Specific Occupational Employment and Wage Estimates*. <https://www.bls.gov/oes/current/oesrci.htm>; Analysis by PHI (July 2024). *May 2014 to May 2023 National Industry-Specific Occupational Employment and Wage Estimates*. <https://www.bls.gov/oes/current/oesrci.htm>; Analysis by PHI (June 2024). Other sources of revenue include other health care providers; contributions, gifts, and grants; investment and property income; property, auto, and casualty insurances; and all other non-classifiable sources of revenue. Note that private insurance is not included as a revenue source due to data reporting concerns. U.S. Census Bureau. 2024. *Service Annual Survey, Table 4: Estimated Sources of Revenue for Employer Firms: 2013 through 2022*; Analysis by PHI, July 2024.

## CHALLENGES FOR RESIDENTIAL CARE AIDES

- **Residential care aides' wages have risen somewhat over the past 10 years.**

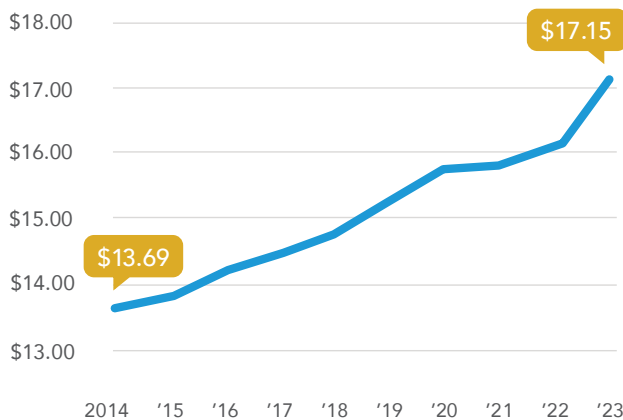
Inflation-adjusted median hourly wages were \$13.69 in 2014 and \$17.15 in 2023. This trend means that residential care aides' wages have increased somewhat faster than the costs of goods and services over the past decade.

- **More than one in four residential care aides work part time, defined as fewer than 35 hours per week.**<sup>60</sup>

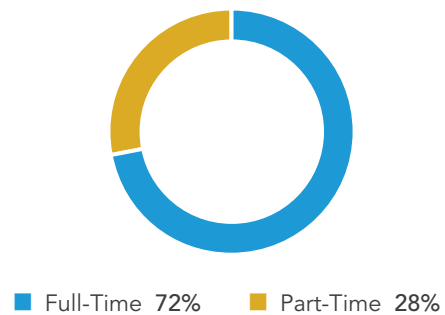
- Many residential care aides also experience unstable employment over the course of the year, with **nineteen percent of residential care aides employed for only part of the year, rather than year-round.**<sup>61</sup>

- At the other end of the work-hours spectrum, **fifteen percent of residential care aides typically work more than 40 hours per week.**<sup>62</sup>

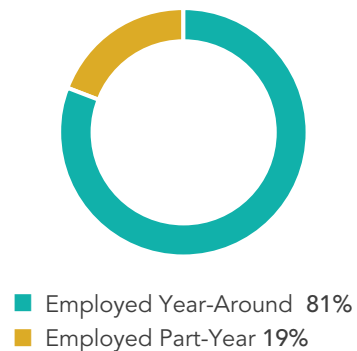
RESIDENTIAL CARE AIDE MEDIAN HOURLY WAGES, ADJUSTED FOR INFLATION, 2014 TO 2023



RESIDENTIAL CARE AIDES BY EMPLOYMENT STATUS, 2022

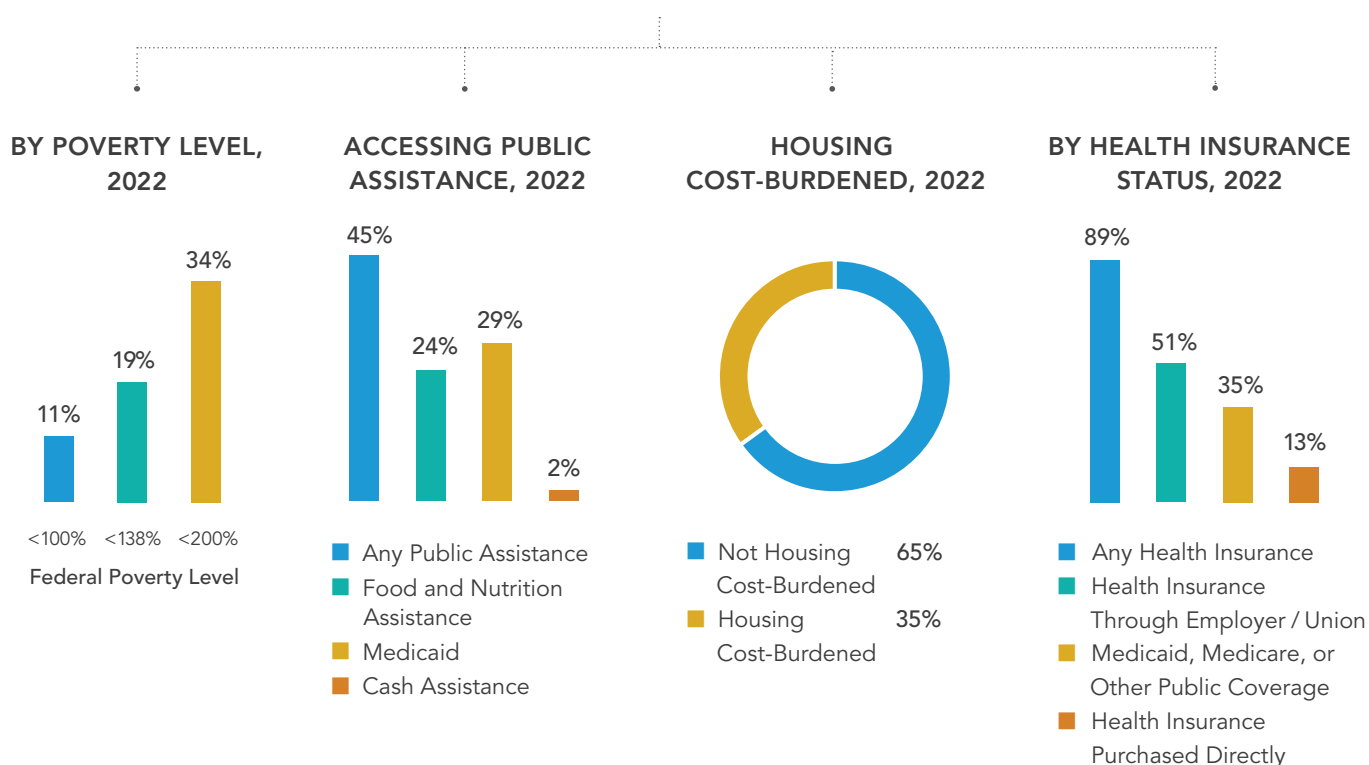


RESIDENTIAL CARE AIDES BY ANNUAL EMPLOYMENT STATUS, 2022



**Chart Sources:** BLS OEWS. 2024. *May 2014 to May 2023 National Industry-Specific Occupational Employment and Wage Estimates*. <https://www.bls.gov/oes/current/oesrci.htm>; Analysis by PHI (June 2024). Ruggles, Steven, Sarah Flood, Matthew Sobek, Daniel Backman, Annie Chen, Grace Cooper, Stephanie Richards, Renae Rodgers, and Megan Schouweiler. 2024. *IPUMS USA: Version 15.0 American Community Survey, 2022*. Minneapolis, MN: IPUMS. <https://doi.org/10.18128/D010.V15.0>; Analysis by PHI (March 2024).

## RESIDENTIAL CARE AIDES



- Because of low wages and a prevalence of part-time work hours and part-year employment, **residential care aides earn a median annual income of \$28,142.**<sup>63</sup>
- Low incomes lead to high poverty rates among residential care aides: **11 percent live in a household below the federal poverty level and 34 percent live in low-income households.**<sup>64</sup>
- Because of high poverty rates among residential care aides, **45 percent receive some form of public assistance.**
- **Thirty-five percent of residential care aides are housing cost-burdened,** meaning that their housing costs—including rent or mortgage payments—exceed 30 percent of their household income.
- **Eleven percent of residential care aides lack health insurance.** Fifty-one percent receive insurance through an employer or union (including insurance through their spouses), while 35 percent rely on public coverage, most commonly Medicaid.

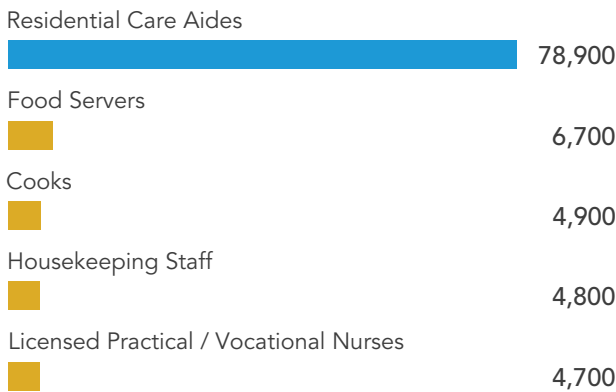
**Chart Source:** Ruggles, Steven, Sarah Flood, Matthew Sobek, Daniel Backman, Annie Chen, Grace Cooper, Stephanie Richards, Renae Rodgers, and Megan Schouweiler. 2024. *IPUMS USA: Version 15.0 American Community Survey, 2022*. Minneapolis, MN: IPUMS. <https://doi.org/10.18128/D010.V15.0>; Analysis by PHI (March 2024). The percentages for specific forms of coverage in the health insurance chart do not total 89 percent because workers may have more than one source of coverage.

## FUTURE DEMAND FOR RESIDENTIAL CARE AIDES

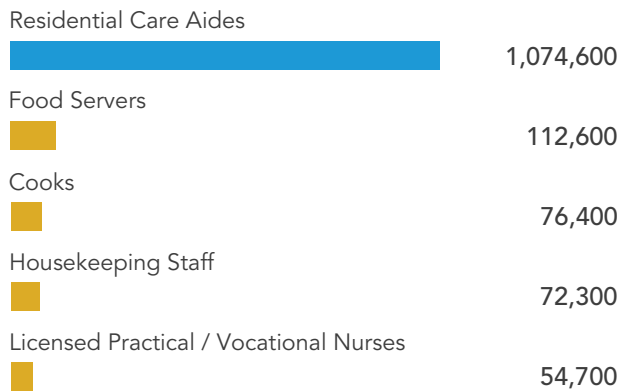
- The residential care aide workforce, which is the largest occupational group within residential care settings by far, is projected to add 78,900 new jobs from 2022 to 2032.
- From 2022 to 2032, the residential care aide workforce will have nearly 1.1 million total job openings. This figure includes 78,900 new

jobs created by growing demand plus 474,800 job openings caused by workers moving into other occupations and 520,800 job openings due to workers leaving the labor force altogether.<sup>65</sup> Projected job openings for residential care aides are more than three times the sum of all projected job openings for the next top four occupations in residential care settings.

### JOB GROWTH IN RESIDENTIAL CARE BY OCCUPATION, 2022 TO 2032



### JOB OPENINGS IN RESIDENTIAL CARE BY OCCUPATION, 2022 TO 2032



**Chart Source:** U.S. Bureau of Labor Statistics (BLS), Employment Projections Program (EPP). 2023a. *National Employment Matrix database*. <https://data.bls.gov/projections/nationalMatrixHome?ioType=o>; Analysis by PHI (July 2024). BLS EPP. 2023b. *EP Data Tables, Table 1.10 Occupational Separations and Openings, Projected 2022–2032*. <https://www.bls.gov/emp/tables/occupational-separations-and-openings.htm>; Analysis by PHI (July 2024).

## CONCLUSION

As in home care, recruitment and retention in the residential care sector has been acutely challenging in recent years. While the total number of residential care aide jobs recovered in 2023 after a temporary decline, the number remains below the number of those employed as residential care aides from 2020 and job quality and retention issues persist; notably, residential care aide median hourly wages and median annual incomes have increased somewhat, but so too have the rates of residential care aides working part-time hours, living in low-income households, and relying on public assistance programs, especially Medicaid. Considering the prominent role of private payers and providers in determining compensation and other aspects of job quality for residential care aides, transforming these jobs continues to require significant investments through private as well as public channels. Given the importance of public assistance programs for residential care aides, as for other direct care workers, particular attention should be focused on the risk of “benefits cliffs,” meaning the potential loss of eligibility for public benefits and lower net income that can accompany incremental but insufficient wage growth.<sup>66</sup>

# NURSING ASSISTANTS IN NURSING HOMES

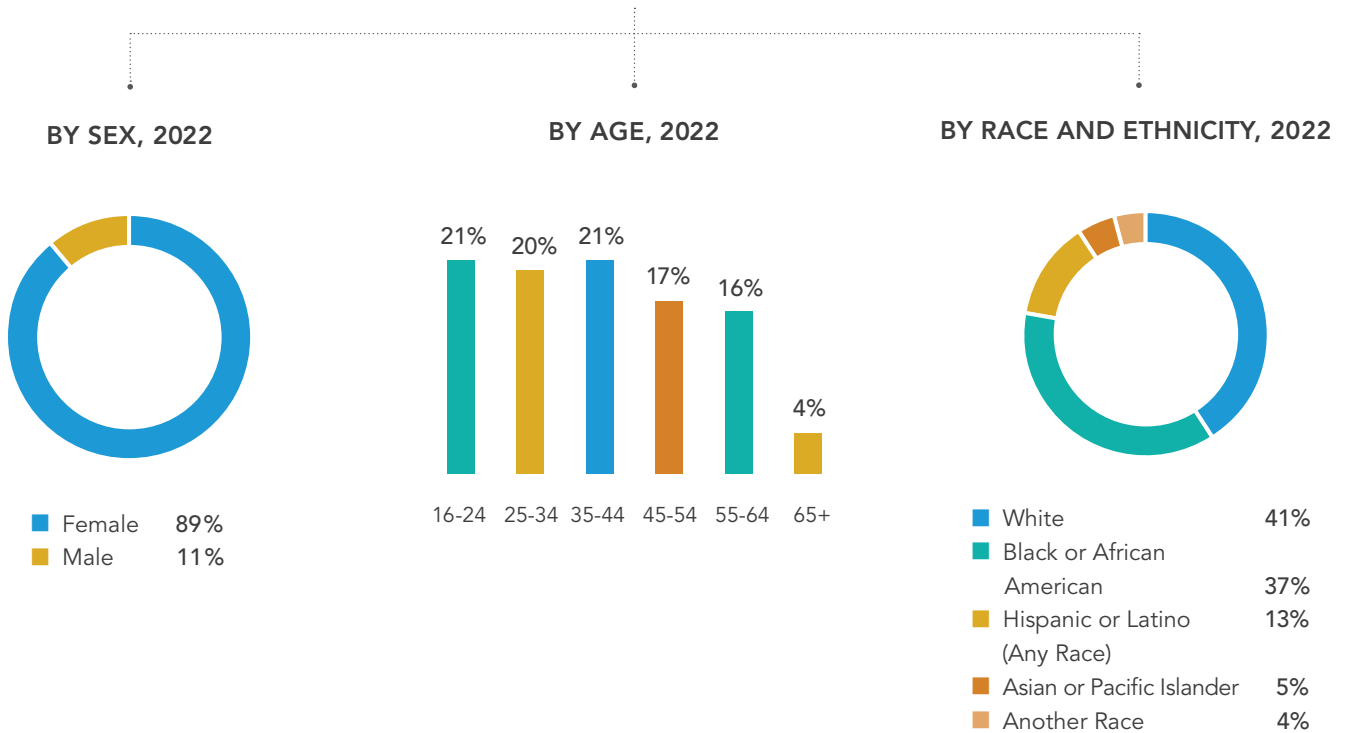
**Nursing assistants** provide 24-hour care and personal assistance to 1.2 million nursing home residents across the U.S.<sup>67</sup> While demand for nursing home care has declined in recent years, nursing homes continue to play a critical role in supporting individuals with complex needs. Low wages, heavy workloads, and long work hours—driven by chronic understaffing that has been greatly exacerbated by the COVID-19 pandemic—contribute to high rates of stress, injury, and burnout among nursing assistants in nursing homes.<sup>68</sup> For these reasons, the median turnover rate among nursing assistants in nursing homes is nearly 100 percent,<sup>69</sup> and employers struggle to fill vacant positions. To ensure quality care for nursing home residents, interventions aimed at improving job quality are needed to strengthen the nursing assistant workforce.

# WHO ARE NURSING ASSISTANTS IN NURSING HOMES?

Nursing assistants are primarily women, people of color, and immigrants, and therefore face heightened risks of experiencing discrimination throughout their lives in areas including housing, education, employment, health care, and more.<sup>70</sup> Gender, racial, and other forms of equity are central concerns for this workforce.<sup>71</sup>

- **Nearly 90 percent of nursing assistants are women.**<sup>72</sup>
- **Nursing assistants have a median age of 39.** Twenty-one percent of nursing assistants are age 16 to 24, compared to 14 percent of the total U.S. labor force.<sup>73</sup>
- **While people of color make up 38 percent of the total U.S. labor force,<sup>74</sup> they constitute 59 percent of all nursing assistants in nursing homes.** Thirty-seven percent of nursing assistants are Black or African American.

## NURSING ASSISTANTS

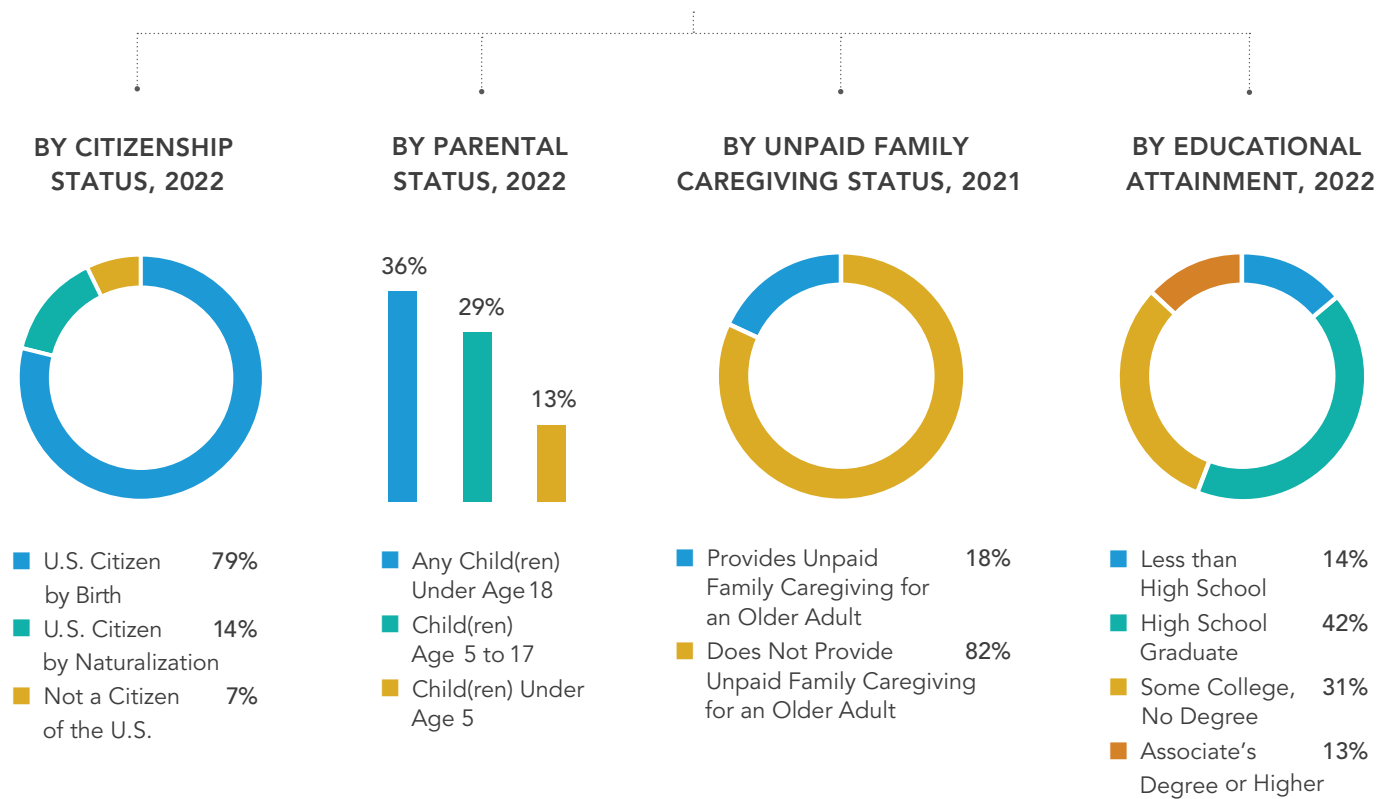


**Chart Sources:** Ruggles, Steven, Sarah Flood, Matthew Sobek, Daniel Backman, Annie Chen, Grace Cooper, Stephanie Richards, Renae Rodgers, and Megan Schouweiler. 2024. *IPUMS USA: Version 15.0 American Community Survey, 2022*. Minneapolis, MN: IPUMS. <https://doi.org/10.18128/D010.V15.0>; Analysis by PHI (March 2024). "Hispanic or Latino" refers to people of any race who identify as Hispanic or Latino; these individuals are excluded from all other race/ethnicity categories. The percentages shown in the age chart do not total 100 because they are rounded to the nearest whole percentage.

- Immigrants constitute 21 percent of the nursing assistant workforce, compared to 17 percent of the total U.S. labor force.<sup>75</sup>
- Thirty-six percent of nursing assistants have at least one child under the age of 18 living at home, and 13 percent have one or more children under the age of five living at home.

- Eighteen percent of nursing assistants provide unpaid family caregiving for one or more older adults, which is similar to the 19 percent of workers who also fulfill this role in the U.S. labor force overall.<sup>76</sup>
- Nearly half (44 percent) of nursing assistants have pursued education beyond high school.

### NURSING ASSISTANTS



**Chart Source:** Ruggles, Steven, Sarah Flood, Matthew Sobek, Daniel Backman, Annie Chen, Grace Cooper, Stephanie Richards, Renae Rodgers, and Megan Schouweiler. 2024. *IPUMS USA: Version 15.0 American Community Survey, 2022*. Minneapolis, MN: IPUMS. <https://doi.org/10.18128/D010.V15.0>; Analysis by PHI (March 2024). Unpaid Family Caregiving Status estimate draws on a decade of pooled data from the American Time Use Survey. Flood, Sarah M., Liana C. Sayer, and Daniel Backman. *American Time Use Survey Data Extract Builder: Version 3.1. American Time Use Survey, 2011-2021*. <https://doi.org/10.18128/D060.V3.1>; Analysis by PHI (June 2023).

# THE ROLE OF NURSING ASSISTANTS IN NURSING HOMES

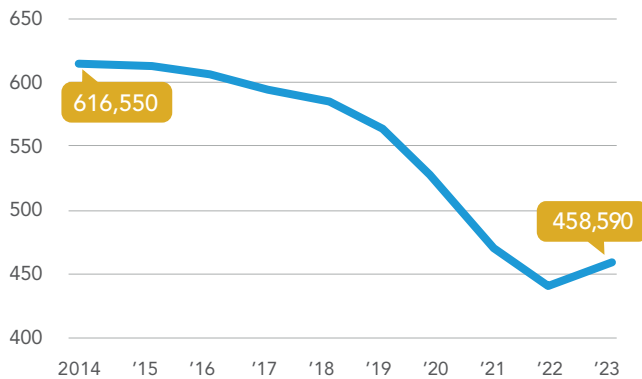
Nursing assistants support nursing home residents with daily tasks such as dressing, bathing, eating, and mobility. They also help residents participate in social activities and events such as classes, performances, and religious services. Further, nursing assistants perform certain clinical tasks under the supervision of onsite licensed professionals. (See *Occupational Titles and Industry Classifications* on page 28 for more details.)

- **The number of nursing assistants in nursing homes increased in 2023 after a steady decline from 2014 to 2022. The number increased from 447,940 in 2022 to 458,590 in 2023. There has still been an overall decline in the number of nursing assistants over the past decade, from 616,550 in 2014 to 458,590 in 2023.** Five-year data indicate

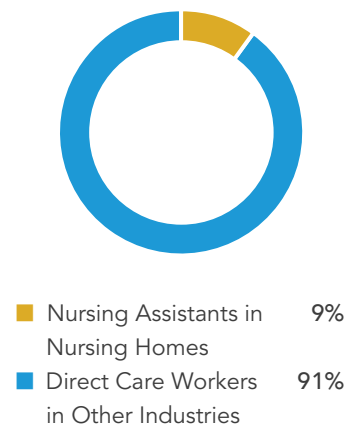
that the number of nursing home residents has also decreased by 14 percent from 2018 to 2023.<sup>77</sup>

- **Nursing assistants in nursing homes constitute nine percent of the total direct care workforce,** which also includes workers employed in home care, residential care, and other settings.
- **Among all nursing staff, nursing assistants spend the most time with residents, providing 58 percent of all nursing hours, at a median of two hours of direct care per resident per day.**<sup>78</sup> Because of their frequent interactions with residents, nursing assistants are well-positioned to observe changes in resident condition and report these changes to licensed nursing staff.

**NURSING ASSISTANT EMPLOYMENT IN NURSING HOMES, 2014 TO 2023**



**DIRECT CARE WORKER EMPLOYMENT BY INDUSTRY, 2023**

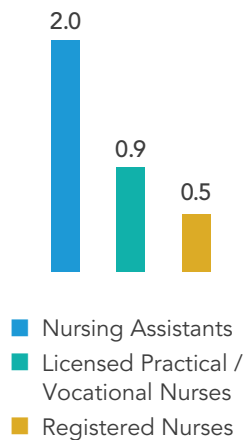


**Chart Sources:** U.S. Bureau of Labor Statistics (BLS), Division of Occupational Employment and Wage Statistics (OEWS). 2024. May 2014 to May 2023 National Occupational Employment and Wage Estimates. [https://www.bls.gov/oes/current/oes\\_nat.htm](https://www.bls.gov/oes/current/oes_nat.htm); BLS OEWS. 2024. May 2014 to May 2023 National Industry-Specific Occupational Employment and Wage Estimates. <https://www.bls.gov/oes/current/oesrci.htm>; Analysis by PHI (June 2024).

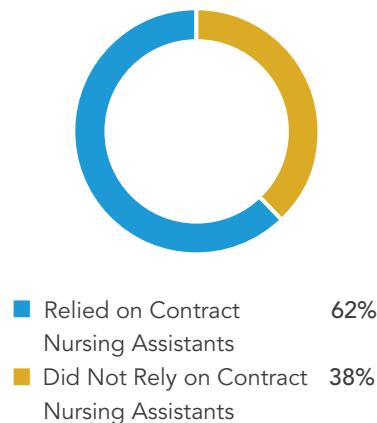


- **On average, nursing assistants support 13 residents during each shift**, while 10 percent of nursing assistants typically assist 18 or more residents.<sup>79</sup>
- **More than half of all nursing homes (62 percent) relied on nursing assistants from staffing agencies to fill staffing vacancies in 2023.** This figure indicates a continued and growing reliance on contract staffing, which decreased slightly in 2022 to 56 percent and then returned to peak levels in 2023.<sup>80</sup>
- **Forty percent of nursing homes employ medication aides**, who are nursing assistants that are trained and authorized to administer medications under the supervision of a licensed professional.<sup>81</sup>
- Nursing assistant jobs are predominantly government funded. Of the nursing home industry’s \$140 billion in total annual revenue, **payments from public programs (primarily Medicaid and Medicare) constitute 66 percent.**<sup>82</sup>

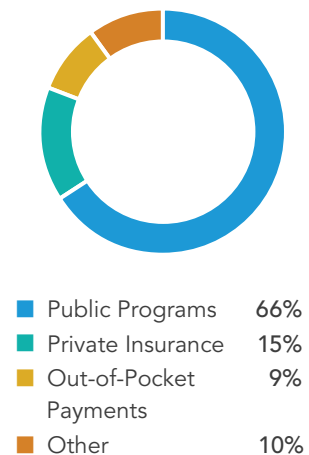
**MEDIAN STAFF HOURS PER RESIDENT PER DAY BY OCCUPATION, 2023**



**NURSING HOMES WITH CONTRACTED NURSING ASSISTANT STAFF, 2023**



**NURSING HOME REVENUE BY SOURCE, 2022**

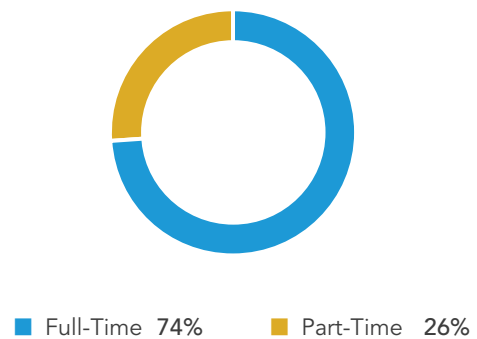


**Chart Sources:** Centers for Medicare & Medicaid Services (CMS). 2023. *Payroll Based Journal Daily Nurse Staffing, Q1 through Q4 2023*. <https://data.cms.gov/quality-of-care/payroll-based-journal-daily-nurse-staffing>; Analysis by PHI (June 2024). Other sources of revenue include other healthcare providers; contributions, gifts, and grants; investment and property income; property, auto, and casualty insurances; and all other non-classifiable sources of revenue. U.S. Census Bureau. 2024. *Service Annual Survey, Table 4: Estimated Sources of Revenue for Employer Firms: 2013 through 2022*; Analysis by PHI, July 2024.

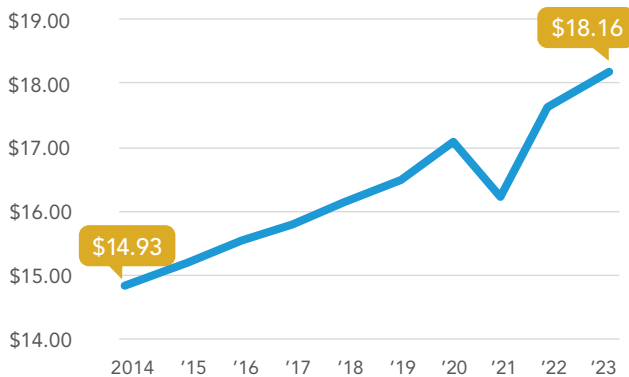
# CHALLENGES FOR NURSING ASSISTANTS IN NURSING HOMES

- Nursing assistants' wages have risen slightly over the past 10 years, but with some variation:** inflation-adjusted median hourly wages increased from \$14.93 in 2014 to \$18.16 by 2023, but with notable wage decreases at certain points during that period as well. This overall trend means that nursing assistants' wages have only increased slightly faster than the costs of goods and services over the past decade.
- More than one in four nursing assistants works part time,** defined as fewer than 35 hours per week.<sup>83</sup>
- Many nursing assistants in nursing homes are also subject to unstable employment over the course of the year, with seventeen percent of nursing assistants employed for only part of the year** rather than year-round.<sup>84</sup>
- At the other end of the work-hours spectrum, thirteen percent of nursing assistants typically work more than 40 hours per week.**<sup>85</sup>

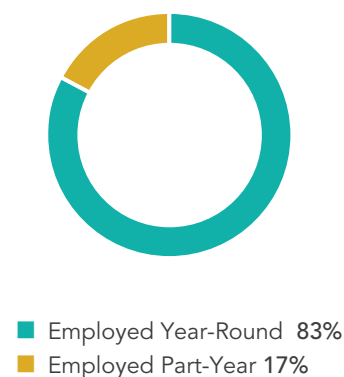
NURSING ASSISTANTS BY EMPLOYMENT STATUS, 2022



NURSING ASSISTANT MEDIAN HOURLY WAGES, ADJUSTED FOR INFLATION, 2014 TO 2023



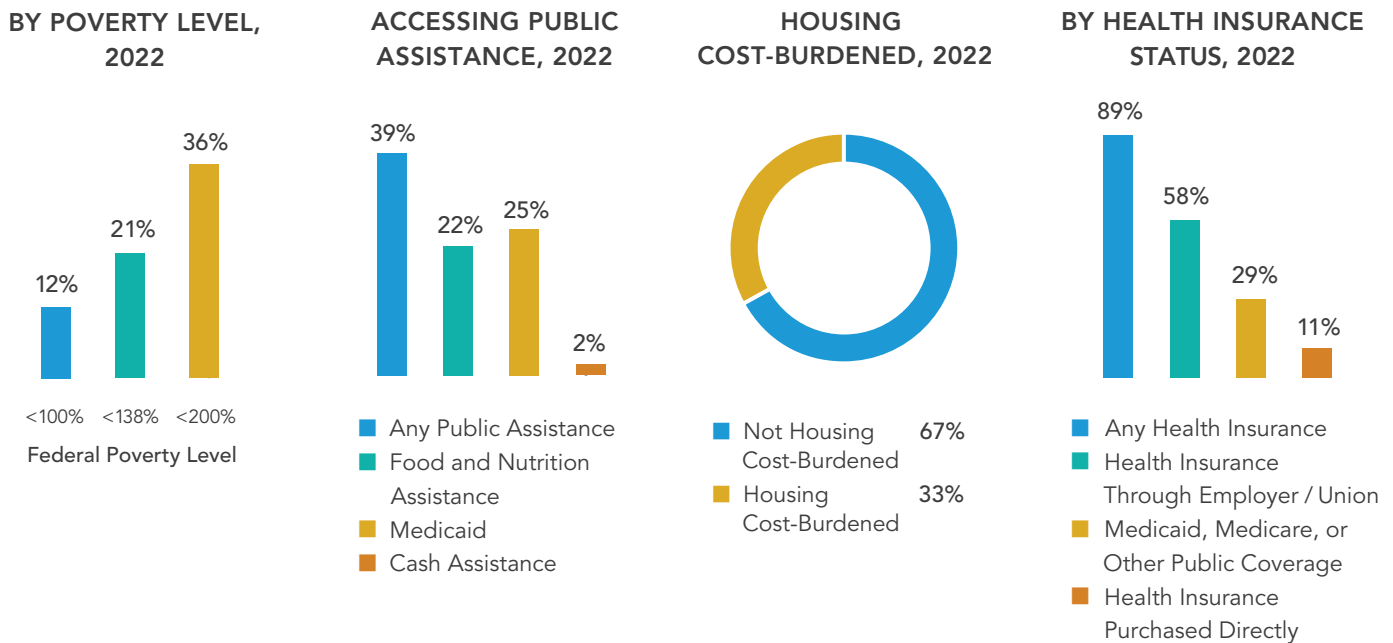
NURSING ASSISTANTS BY ANNUAL EMPLOYMENT STATUS, 2022



**Chart Sources:** BLS OEWS. 2024. *May 2014 to May 2023 National Industry-Specific Occupational Employment and Wage Estimates*. <https://www.bls.gov/oes/current/oesrci.htm>; Analysis by PHI (June 2024). Ruggles, Steven, Sarah Flood, Matthew Sobek, Daniel Backman, Annie Chen, Grace Cooper, Stephanie Richards, Renae Rodgers, and Megan Schouweiler. 2024. *IPUMS USA: Version 15.0 American Community Survey, 2022*. Minneapolis, MN: IPUMS. <https://doi.org/10.18128/D010.V15.0>; Analysis by PHI (March 2024).

- Due to low wages and prevalence of part-time work hours and part-year employment, **nursing assistants earn a median annual income of \$29,185.**<sup>86</sup>
- Low incomes lead to high poverty rates among nursing assistants: **12 percent live in a household below the federal poverty level and 36 percent live in low-income households.**<sup>87</sup>
- Because poverty rates are high among nursing assistants, **39 percent rely on some form of public assistance.**
- **Thirty-three percent of nursing assistants are housing cost-burdened,** meaning that their housing costs—including rent or mortgage payments—exceed 30 percent of their household income.
- **Eleven percent of nursing assistants in nursing homes lack health insurance.** Fifty-eight percent of nursing assistants have insurance through an employer or union (including insurance through their spouses), while 29 percent rely on public coverage, most commonly Medicaid.

### NURSING ASSISTANTS

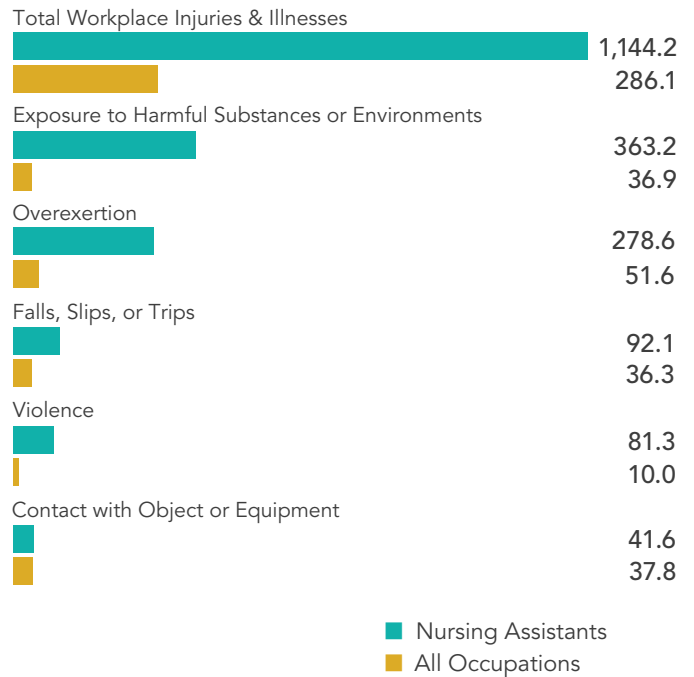


**Chart Source:** Ruggles, Steven, Sarah Flood, Matthew Sobek, Daniel Backman, Annie Chen, Grace Cooper, Stephanie Richards, Renae Rodgers, and Megan Schouweiler. 2024. IPUMS USA: Version 15.0 American Community Survey, 2022. Minneapolis, MN: IPUMS. <https://doi.org/10.18128/D010.V15.0>; Analysis by PHI (March 2024). The percentages for specific forms of coverage in the health insurance chart do not total 89 percent because workers may have more than one source of coverage.

- **Nursing assistants are nearly five times more likely to experience workplace injuries than the typical U.S. worker.**

These injuries and illnesses require a median of 10 days away from work or a job transfer or restriction. (Please note these data are for nursing assistants across industries, as updated data on nursing assistants within nursing homes are not available.) These injuries and illnesses resulted in nursing assistants spending a median of 10 days either away from work entirely or needing a change to their work through a temporary job transfer or other restriction in duties performed.<sup>88</sup>

**ANNUAL INJURY RATES PER 10,000 WORKERS BY CAUSE OF INJURY, 2022**



**Chart Source:** U.S. Bureau of Labor Statistics (BLS), Injuries, Illnesses, and Fatalities (IIF). 2022. *Occupational Injuries and Illnesses and Fatal Injuries Profiles: DART injury and illness annualized rate per 10,000 workers.* <https://data.bls.gov/gqt/InitialPage>.

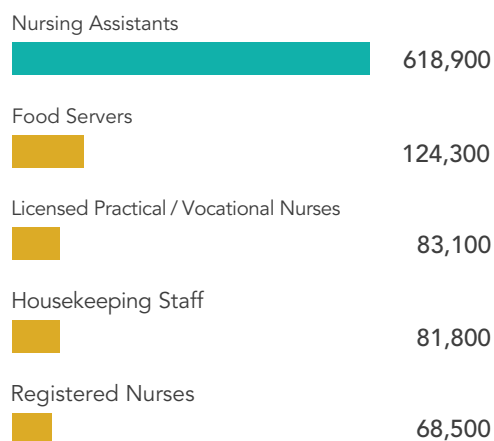
## THE IMPACT OF COVID-19 ON NURSING HOMES

The COVID-19 pandemic has devastated the nursing home sector and continues to impact staffing ratios as well as staff and resident wellbeing. Since 2020, there have been nearly 2.1 million confirmed cases of COVID-19 among nursing home residents (and more than 172,000 deaths)—and 1.9 million confirmed cases among nursing home staff.<sup>89</sup> Yet vaccination rates remain low, with only 31 percent of nursing home residents up-to-date with their COVID-19 vaccines as of July 2024. (Reliable data on nursing home staff vaccination rates are not currently available due to a change in methodology for collecting that data.)<sup>90</sup> Targeted efforts are still needed to address the long-standing challenges that amplified the impact of the COVID-19 pandemic for nursing homes and continue to hinder efforts to increase vaccination uptake, strengthen staffing, and otherwise build resilience against future crises.

## FUTURE DEMAND FOR NURSING ASSISTANTS IN NURSING HOMES

- From 2022 to 2032, the nursing assistant workforce is projected to lose 11,900 jobs due to decreasing demand for nursing home care overall.<sup>91</sup>
- However, the projected number of total job openings for nursing assistants in nursing homes continues to increase. From 2022 to 2032, this workforce will have 618,900 total job openings. This figure includes 348,900 job openings caused by workers moving into other occupations and 281,900 job openings due to workers exiting the labor force altogether.<sup>92</sup> Job openings for nursing assistants in nursing homes during this time period are projected to be over 1.7 times higher than job openings in the next four nursing home occupations combined.

### JOB OPENINGS IN NURSING HOMES BY OCCUPATION, 2022 TO 2032



**Chart Sources:** U.S. Bureau of Labor Statistics (BLS), Employment Projections Program (EPP). 2023b. *EP Data Tables, Table 1.10 Occupational Separations and Openings, Projected 2022–2032*. <https://www.bls.gov/emp/tables/occupational-separations-and-openings.htm>; Analysis by PHI (July 2024).

## CONCLUSION

Although overall demand for nursing homes is declining, there is still a pressing need to recruit and retain enough nursing assistants to support individuals with complex needs in this care setting. The COVID-19 pandemic has both revealed and greatly exacerbated workforce challenges in nursing homes, as indicated, for example, by the increasing reliance on contract nursing assistants to fill staffing gaps.<sup>93</sup> In response to these ongoing challenges, several states have taken steps to improve job quality and care quality by tying Medicaid reimbursement to nursing home staffing and job quality metrics;<sup>94</sup> others have set requirements for the percentage of nursing home revenue that must be invested in resident care, including the direct care workforce;<sup>95</sup> and still others have set minimum staffing requirements to overcome widespread understaffing in nursing homes, a strategy that has now been mandated at the federal level through the Nursing Home Minimum Staffing Standard Rule.<sup>96</sup> The number of nursing assistants in nursing homes increased slightly in 2023 after a steady decline from 2014 to 2022, but still remained below 2021 levels, so more must be done to support these workers. In order to support nursing assistants and nursing home residents now and into the future, such efforts must be significantly expanded and sustained.

# OCCUPATIONAL TITLES AND INDUSTRY CLASSIFICATIONS

## OCCUPATIONAL TITLES

The direct care worker occupational categories used in this report are defined by the Standard Occupational Classification (SOC) system developed by the Bureau of Labor Statistics (BLS) at the U.S. Department of Labor (DOL). Under this classification system, workers are classified based on their on-the-job responsibilities, skills, education, and training. Occupation definitions can be found at: <http://www.bls.gov/SOC>. In practice, state regulations, employer norms, and other factors determine the roles and responsibilities associated with occupational titles in different settings.

TITLE	OTHER TITLES	JOB DESCRIPTION
<b>Personal Care Aides</b> (SOC 31-1122)	Caregiver, Home Care Aide, Personal Care Assistant, Personal Care Attendant, Resident Care Assistant	In addition to assisting with activities of daily living (ADLs), personal care aides often help with housekeeping, chores, meal preparation, and medication management. They may also help individuals engage in employment and/or community life, and provide advice on nutrition, household maintenance, and other activities.
<b>Home Health Aides</b> (SOC 31-1121)	Certified Home Health Aide, Home Hospice Aide, Home Health Attendant	In addition to assisting with ADLs, home health aides may also perform clinical tasks such as wound care, blood pressure readings, and range-of-motion exercises. Their work is supervised remotely or intermittently onsite by a licensed professional.
<b>Nursing Assistants</b> (SOC 31-1131)	Certified Nursing Assistant, Certified Nursing Aide, Nursing Attendant, Nursing Aide, Nursing Care Attendant, Medication Aide	Nursing assistants assist individuals with ADLs and may also perform certain clinical tasks under the onsite supervision of a licensed professional.

### A NOTE ON OTHER OCCUPATIONAL TITLES

Two other direct care occupations have distinct on-the-job responsibilities, but do not have their own federal occupation codes.

**Independent providers** are home care workers who are employed directly by older adults, people with disabilities, or their families through publicly funded consumer-direction programs or using private funds. Their roles may include a mix of personal care and health monitoring and maintenance tasks, depending on the needs and preferences of the individuals who employ them. Due to a 2017 methodological change, a proportion of independent providers hired through consumer-direction programs are now captured by the Bureau of Labor Statistics (BLS)

Occupational Employment and Wage Statistics (OEWS) program.<sup>97</sup> However, the accuracy of these data varies by state and many independent providers are likely excluded. More broadly, these data do not include home care workers who are hired directly and paid out-of-pocket by consumers through the “gray market.”<sup>98</sup>

**Direct support professionals** provide habilitation services, employment assistance, and other supports to people with intellectual and developmental disabilities.<sup>99</sup> They are included in BLS data and other public datasets (unless they are employed directly by consumers or their families in the “gray market”), but because they do not have their own federal occupation code, they are combined with other direct care workers and are not separately quantifiable.

## INDUSTRY CLASSIFICATIONS

Long-term care industries are defined by the North American Industry Classification System (NAICS) developed by the Office of Management and Budget (OMB). Business establishments are coded based on their primary activity. Industry definitions can be found at: <https://www.census.gov/eos/www/naics/>.

TITLE	EXAMPLES	INDUSTRY DESCRIPTION
<b>Home Care</b>		
<b>Home Health Care Services</b> (NAICS 621610)	Home Health Care Agencies, Visiting Nurse Associations, In-Home Hospice Care Services	This industry comprises establishments that provide personal care, homemaking, and companionship services. These establishments also provide skilled nursing care and a range of other home-based medical services.
<b>Services for the Elderly and Persons with Disabilities</b> (NAICS 624120)	Non-Medical Home Care Providers, Homemaker Service Providers, Self-Help Organizations, Companion Service Providers, Adult Day Care Centers, Activity Centers for Older Adults and People with Disabilities	This industry comprises establishments that provide social assistance services to improve the quality of life for older adults, people with intellectual and developmental disabilities, and people with physical disabilities who live in their homes and communities. Services include non-medical personal care and homemaker services.
<b>Residential Care</b>		
<b>Continuing Care Retirement Communities and Assisted Living Facilities for the Elderly</b> (NAICS 623310)	Assisted Living Communities, Continuing Care Retirement Communities, Residential Care Homes, Personal Care Homes	This industry comprises establishments primarily engaged in providing residential and personal care services for older adults and people with disabilities. The care typically includes room, board, supervision, and assistance with daily tasks and activities.
<b>Residential Intellectual and Developmental Disability Facilities</b> (NAICS 623210)	Group Homes, Intermediate Care Facilities, Residential Care Homes, Homes for Individuals with Intellectual and Developmental Disabilities	This industry comprises establishments primarily engaged in providing residential care services for people with intellectual and developmental disabilities. These communities may provide some health care, though their focus is room, board, protective supervision, and counseling.
<b>Nursing Homes</b>		
<b>Nursing Care Facilities (Skilled Nursing Homes)</b> (NAICS 623110)	Skilled Nursing Facilities, Nursing Homes, Rest Homes with Nursing Care, Retirement Homes with Nursing Care, Group Homes for People with Disabilities with Nursing Care, Homes for the Aged with Nursing Care, Inpatient Hospice	This industry comprises establishments that are primarily engaged in providing 24-hour nursing, rehabilitative, and personal care services. These establishments have a permanent core staff of registered and licensed practical/vocational nurses who provide care along with nursing assistants and other staff.

## DATA SOURCES AND METHODS

Hourly wage and employment data were sourced from the Bureau of Labor Statistics (BLS) Occupational Employment and Wage Statistics (OEWS) program and employment projections were sourced from the BLS Employment Projections Program (EPP). While nursing assistant wage data were drawn directly from the OEWS, home care worker and residential care aide wages were calculated as a weighted average of median hourly wages for each occupation in each industry. Median wages are preferable to mean wages in these calculations, since mean wages may be skewed by a small proportion of atypically high-paid workers. The Consumer Price Index for All Urban Consumers (Current Series) was used to adjust wages for inflation to 2023 dollars.

The U.S. Census Bureau's American Community Survey (ACS) and Current Population Survey (CPS) were used to calculate workforce demographics, parental status, full-time/part-time status, full-year and part-year employment, median annual earnings, poverty rate, use of public assistance, health insurance coverage, and access to affordable housing. The U.S. Census Bureau's American Time Use Survey (ATUS) pooled years of data from 2011-2021 were used to estimate the percentages of direct care workers and all U.S. workers that provide unpaid family caregiving for one or more older adults.

For nursing assistants in nursing homes specifically, Payroll-Based Journal data from the Centers for Medicare & Medicaid Services (CMS) were used to analyze staffing, including use of contract CNA staff, hours per resident day, medication aide employment, and residents per nursing assistant. To estimate the ratio of residents to nursing assistants, we divided the number of residents in each nursing home by the estimated number of full-time equivalent (FTE) nursing assistants. We estimated the number of FTE positions by dividing total daily nursing assistant hours by three (the typical number of shifts in a day) and eight (the number of hours in a full-time shift).



# NOTES

1. This figure reflects an update in PHI occupation codes to be consistent across years. In the 2023 Key Facts report, residential care aides included additional occupation codes. We have since updated this to be consistent with our Workforce Data Center, reflecting a decrease in the residential care aide workforce over the past ten years. In this context, the residential care aide workforce did increase slightly from 2022 to 2023, the most recent year of data on employment trends.
2. U.S. Bureau of Labor Statistics (BLS), Division of Occupational Employment and Wage Statistics (OEWS). 2024. *May 2014 to May 2023 National Occupational Employment and Wage Estimates*. <https://www.bls.gov/oes/current/oesrci.htm>; analysis by PHI (June 2024).
3. BLS OEWS, 2024.
4. U.S. Bureau of Labor Statistics (BLS), Employment Projections Program (EPP). 2023a. *National Employment Matrix - Industry*. <https://data.bls.gov/projections/nationalMatrixHome?ioType=i>; analysis by PHI (June 2023).
5. U.S. Bureau of Labor Statistics (BLS), Employment Projections Program (EPP). 2023b. *EPP Data Tables, Table 1.10 Occupational Separations and Openings, Projected 2022–2032*. <https://www.bls.gov/emp/tables/occupational-separations-and-openings.htm>; analysis by PHI (June 2024).
6. BLS EPP, 2023a.
7. BLS EPP, 2023a.
8. BLS EPP, 2023a.
9. Binette, Joanne. 2021. *Where We Live, Where We Age: Trends in Home and Community Preferences*. Washington, D.C.: AARP Research. <https://www.aarp.org/research/topics/community/info-2021/2021-home-community-preferences.html>.
10. BLS OEWS, 2024. All wage trends numbers included in the report are adjusted for inflation
11. BLS OEWS, 2024.
12. PHI. “The Direct Care Workforce State Index.” Last modified July 30, 2024. <https://www.phinational.org/state-index-tool/>.
13. Ruggles, Steven, Sarah Flood, Matthew Sobek, Daniel Backman, Annie Chen, Grace Cooper, Stephanie Richards, Renae Rodgers, and Megan Schouweiler. 2024. IPUMS USA: Version 15.0 American Community Survey, 2022. Minneapolis, MN: IPUMS. <https://doi.org/10.18128/D010.V15.0>; Analysis by PHI (March 2024).
14. Ruggles et al., 2024.
15. McCall, Stephen and Kezia Scales. 2022. *Direct Care Worker Disparities: Key Trends and Challenges*. Bronx, NY: PHI. <https://www.phinational.org/resource/direct-care-worker-disparities-key-trends-and-challenges/>.
16. U.S. Census Bureau. 2023. *2023 National Population Projections Datasets, Projected Population by Single Year of Age, Sex, Race, and Hispanic Origin for the United States: 2022 to 2065*. <https://www.census.gov/data/tables/2023/demo/popproj/2023-summary-tables.html>; analysis by PHI (July 2024).
17. Campbell, Stephen, Angelina Del Rio Drake, Robert Espinoza, and Kezia Scales. 2021. *Caring for the Future: The Power and Potential of America’s Direct Care Workforce*. Bronx, NY: PHI. <https://phinational.org/caringforthefuture/>; Administration for Community Living. 2022. *2021 Profile of Older Americans*. Washington, D.C.: Administration for Community Living, U.S. Department of Health and Human Services. [https://acl.gov/sites/default/files/Profile%20of%20OA/2021%20Profile%20of%20OA/2021ProfileOlderAmericans\\_508.pdf](https://acl.gov/sites/default/files/Profile%20of%20OA/2021%20Profile%20of%20OA/2021ProfileOlderAmericans_508.pdf).
18. Campbell et al., 2021.
19. Alzheimer’s Association. 2024. *2024 Alzheimer’s Disease Facts and Figures*. Chicago, IL: Alzheimer’s Association. <https://www.alz.org/media/Documents/alzheimers-facts-and-figures.pdf>.
20. Alzheimer’s Association. 2024. *2024 Alzheimer’s Disease Facts and Figures*. Chicago, IL: Alzheimer’s Association. <https://www.alz.org/media/Documents/alzheimers-facts-and-figures.pdf>.
21. Harris-Kojetin, Lauren, Manisha Sengupta, Jessica Penn Lendon, Vincent Rome, Roberto Valverde, and Christine Caffrey. 2022. “Long-Term Care Providers and Services Users in the United States, 2017– 2018.” *National Center for Health Statistics, Vital Health Stat 3(43)*. <https://stacks.cdc.gov/view/cdc/115346>.
22. This number of home care consumers includes an estimated number of home health recipients, Medicaid state-plan personal care recipients, and enrollees in Medicaid waiver programs. It does not include the unquantifiable number of consumers who pay out-of-pocket for home care through home care agencies and on the gray market. Harris-Kojetin et al., 2022; O’Malley Watts, Molly, MaryBeth Musumeci, and Meghana Ammula. 2022. *Medicaid Home & Community-Based Services: People Served and Spending During COVID-19*. Washington, D.C.: Kaiser Family Foundation. <https://www.kff.org/report-section/medicaid-home-community-based-services-people-served-and-spending-during-covid-19-appendix/>; Analysis by PHI (June 2022). The estimate for number of home health recipients comes from Harris-Kojetin et al., 2022 because a new version of the CDC NPALS report is forthcoming, but not out yet, so we have continued to use the estimate from the 2022 report. Similarly, the estimates for other categories of home care recipients, including Medicaid state-plan personal care recipients, from Watts et al., 2022 seem to be the most recent estimates of these specific categories of home care recipients.
23. Binette, 2021.
24. Ferguson, Stephanie. 2024. “Understanding America’s Labor Shortage.” *U.S. Chamber of Commerce*, June 24. <https://www.uschamber.com/workforce/understanding-americas-labor-shortage/>; Famakinwa, Joyce. 2024. “Home Care’s Industry-Wide Turnover Rate Reaches Nearly 80%.” *Home Health Care News*, July 3. <https://homehealthcarenews.com/2024/07/home-cares-industry-wide-turnover-rate-reaches-nearly-80/>.
25. Carratala, Sofia. 2020. *Health Disparities by Race and Ethnicity*. Washington, D.C.: Center for American Progress (CAP). <https://www.americanprogress.org/issues/race/reports/2020/05/07/484742/health-disparities-race-ethnicity/>; Nowicki, Jacqueline. 2020. “Racial Disparities in Education and the Role of Government.” *Government Accountability Office*, June 29. <https://www.gao.gov/blog/racial-disparities-education-and-role-government>; Nunn, Ryan, Jana Parsons, and Jay Shambaugh. 2019. *Race and Underemployment in the US Labor Market*. Washington, D.C.: Brookings Institution. <https://www.brookings.edu/blog/up-front/2019/08/01/race-and-underemployment-in-the-u-s-labor-market/>; Carratala, Sofia and Connor Maxwell. 2020. *Health Disparities by Race and Ethnicity*. Washington, D.C.: CAP. <https://www.americanprogress.org/issues/race/reports/2020/05/07/484742/health-disparities-race-ethnicity/>.
26. McCall and Scales, 2022.
27. The U.S. Census Bureau asks American Community Survey respondents about their current sex identity, and allows for “male” or “female” response. While sex and gender are different and neither sex nor gender are binary, this data source currently only asks about current sex with a binary response option. In this report we use “women” to refer to those who responded to the sex question with “female” and “men” to refer to those who responded to the sex question with “male.”; Ruggles et al., 2024
28. Ruggles et al., 2024.
29. Ruggles et al., 2024.
30. Ruggles et al., 2024.
31. Flood, Sarah M., Liana C. Sayer and Daniel Backman. 2023b. American Time Use Survey Data Extract Builder: Version 3.1 “American Time Use Survey, 2011–2021.” College Park, MD: University of Maryland and Minneapolis, MN: IPUMS, 2022. <https://doi.org/10.18128/D060.V3.1>; Analysis by PHI (June 2023).
32. Edemekong, Peter, Deb L. Bomgaars, Sukesh Sukumaran, and Caroline Schoo. “Activities of Daily Living.” Last modified November 19, 2022. <https://www.ncbi.nlm.nih.gov/books/NBK470404/>.
33. Certain states require some or all home care workers to complete training to become nursing assistants. Also, some employers might choose to hire certified nursing assistants to fill home health aide positions. PHI. “Personal Care Aide Training Requirements.” Last modified August 10, 2020. <https://phinational.org/advocacy/personal-care-aide-training-requirements/>.
34. U.S. Department of Labor Office of Disability Employment Policy (ODEP). “Direct Support Professionals (DSPs).” <https://www.dol.gov/agencies/odep/program-areas/individuals/DSP>.
35. Murray, Kate, Molly Morris, Merle Edwards-Orr, Mark Sciegaj, and Brendan Flinn. 2024. *National Inventory of Self-Directed Long-Term Services and Supports Programs for the 2023 AARP LTSS State Scorecard*. Washington, D.C.: AARP Public Policy Institute. <https://doi.org/10.26419/ppi.00217.001>.
36. U.S. Bureau of Labor Statistics (BLS), Quarterly Census of Employment and Wages (QCEW). “QCEW News Release Notes.” Last updated February 3, 2023. <https://www.bls.gov/cew/about-data/news-release-notes.htm>.
37. Campbell et al., 2021.
38. Chidambaram, Priya and Alice Burns. 2024. *10 Things About Long-Term Services and Supports (LTSS)*. Washington, DC: KFF. <https://www.kff.org/medicaid/issue-brief/10-things-about-long-term-services-and-supports-ltss/>; analysis by PHI (July 2024).

39. BLS OEWS. 2024. *May 2014 to May 2023 National Industry-Specific Occupational Employment and Wage Estimates*. <https://www.bls.gov/oes/current/oessrci.htm>; Analysis by PHI (June 2024).
40. U.S. Bureau of Labor Statistics (BLS). "Concepts and Definitions." Last updated January 11, 2023. <https://www.bls.gov/cps/definitions.htm#fullparttime>.
41. Ruggles et al., 2024.
42. Under the Fair Labor Standards Act (FLSA), workers must be paid overtime (at least one-and-a-half times their hourly wage) for any hours they work over 40 in a workweek for a single employer. U.S. Department of Labor (DOL) Wage and Hour Division (WHD). "Overtime Pay." Accessed July 8, 2020. <https://www.dol.gov/agencies/whd/overtime>; Ruggles et al., 2023
43. Ruggles et al., 2024.
44. Federal poverty thresholds, which are updated each year, can be accessed here: <https://www.census.gov/data/tables/time-series/demo/income-poverty/historical-poverty-thresholds.html>.
45. BLS EPP, 2023a; 2023b.
46. Centers for Medicare & Medicaid Services. 2024. American Rescue Plan Act of 2021 (ARP) Section 9817, State Spending Plan Summaries, Federal Fiscal Year 2023 Q1 Update. Washington, DC: CMS. <https://www.medicare.gov/sites/default/files/2024-01/states-arpa-spending-plan-summaries-fy2023q1.pdf>.
47. Famakinwa, Joyce. 2024. "Home Care's Industry-Wide Turnover Rate Reaches Nearly 80%." *Home Health Care News*. July 3. <https://homehealthcarenews.com/2024/07/home-cares-industry-wide-turnover-rate-reaches-nearly-80/#:~:text=That%20was%20one%20of%20the,wide%20turnover%20rate%20is%2079.2%25;> Filbin, Patrick. 2023. "Home-Based Care Leaders Report Worsening Staffing Trends." September 21. [https://homehealthcarenews.com/2023/09/home-based-care-leaders-report-worsening-staffing-trends/?itm\\_source=parsely-api&itm\\_campaign=parsely\\_recommended\\_widget-2&itm\\_medium=site\\_widget&itm\\_source=parsely\\_recommended\\_widget&itm\\_content=widget\\_item-3](https://homehealthcarenews.com/2023/09/home-based-care-leaders-report-worsening-staffing-trends/?itm_source=parsely-api&itm_campaign=parsely_recommended_widget-2&itm_medium=site_widget&itm_source=parsely_recommended_widget&itm_content=widget_item-3).
48. Centers for Medicare & Medicaid Services. 2024. Medicaid Program; Ensuring Access to Medicaid Services. Federal Register, 89 Fed. Reg. 40542 (May 10, 2024). <https://www.federalregister.gov/documents/2024/05/10/2024-08363/medicaid-program-ensuring-access-to-medicare-services>; Robins, Amy. 2024. "PHI Applauds the Biden Administration's Actions on Behalf of the Direct Care Workforce." PHI Newsroom, April 25, 2024. <https://www.phinational.org/phi-applauds-the-biden-administrations-actions-on-behalf-of-the-direct-care-workforce/>.
49. Centers for Disease Control and Prevention (CDC), National Center for Health Statistics. 2020. *National Post-Acute and Long-term Care Study (NPALS)*. <https://www.cdc.gov/nchs/npals/webtables/overview.htm#table4>; National Residential Information Systems Project (RISP). "Chart Gallery, Long-Term Supports and Services (LTSS) Recipients by Setting Type and Year, 2019." Accessed July 30, 2024. <https://risp.umn.edu/viz>; Analysis by PHI (June 2024). This number combines 2020 NPALS data on number of users in residential care community with 2019 RISP data on people with intellectual and developmental disabilities (IDD) living in group homes.
50. Carratala, 2020; Nowicki, 2020; Nunn et al., 2019; Carratala and Maxwell, 2020.
51. McCall and Scales, 2022.
52. The U.S. Census Bureau asks American Community Survey respondents about their current sex identity, and allows for "male" or "female" response. While sex and gender are different and neither sex nor gender are binary, this data source currently only asks about current sex with a binary response option. In this report we use "women" to refer to those who responded to the sex question with "female" and "men" to refer to those who responded to the sex question with "male."
53. Ruggles et al., 2024.
54. Ruggles et al., 2024.
55. Ruggles et al., 2024.
56. Flood et al., 2023b.
57. BLS OEWS, 2023a; 2023b.
58. Due to less precise coding in this data source, these data include residential mental health and substance abuse facilities. Also of note, these data do not include "private insurance" as a revenue source due to reporting concerns. U.S. Census Bureau, 2024; U.S. Census Bureau. "Service Annual Survey Methodology." Last updated March 5, 2024. [https://www.census.gov/programs-surveys/sas/technical-documentation/methodology.html#par\\_textimage\\_18](https://www.census.gov/programs-surveys/sas/technical-documentation/methodology.html#par_textimage_18).
59. U.S. Census Bureau, 2024.
60. Ruggles et al., 2024.
61. Ruggles et al., 2024.
62. Under the Fair Labor Standards Act (FLSA), workers must be paid overtime (at least one-and-a-half times their hourly wage) for any hours they work over 40 in a workweek for a single employer. DOL WHD, 2020; Ruggles et al., 2024.
63. Ruggles et al., 2024.
64. Federal poverty thresholds, which are updated each year, can be accessed here: <https://www.census.gov/data/tables/time-series/demo/income-poverty/historical-poverty-thresholds.html>.
65. BLS EPP 2023a; 2023b.
66. National Conference of State Legislatures. "Introduction to Benefits Cliffs and Public Assistance Programs." Last modified November 29, 2023. [https://www.ncsl.org/human-services/introduction-to-benefits-cliffs-and-public-assistance-programs#:~:text=Benefits%20cliffs%20\(the%20E2%80%9Ccliff%20effect,a%20small%20increase%20in%20earnings](https://www.ncsl.org/human-services/introduction-to-benefits-cliffs-and-public-assistance-programs#:~:text=Benefits%20cliffs%20(the%20E2%80%9Ccliff%20effect,a%20small%20increase%20in%20earnings).
67. KFF. 2023. "Total Number of Residents in Certified Nursing Facilities." KFF State Health Facts. <https://www.kff.org/other/state-indicator/number-of-nursing-facility-residents/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>.
68. White, Elizabeth M., Terrie Fox Wetle, Ann Reddy, and Rosa R. Baier. 2021. "Front-line Nursing Home Staff Experiences During the COVID-19 Pandemic." *Journal of the American Medical Directors Association*, 22(1), 199-203. <https://pubmed.ncbi.nlm.nih.gov/33321076/>
69. Ghandi, Ashvin, Huizi Yu, and David Grabowski. 2021. "High Nursing Staff Turnover in Nursing Homes Offers Important Quality Information." *Health Affairs* 40(3): 384-391. doi: 10.1377/hlthaff.2020.00957.
70. Carratala, 2020; Nowicki, 2020; Nunn, Parsons, and Shambaugh, 2019; Carratala and Maxwell, 2020.
71. McCall and Scales, 2022.
72. The U.S. Census Bureau asks American Community Survey respondents about their current sex identity, and allows for "male" or "female" response. While sex and gender are different and neither sex nor gender are binary, this data source currently only asks about current sex with a binary response option. In this report we use "women" to refer to those who responded to the sex question with "female" and "men" to refer to those who responded to the sex question with "male."
73. Ruggles et al., 2024.
74. Ruggles et al., 2024.
75. Ruggles et al., 2024.
76. Flood et al., 2023b.
77. Centers for Medicare and Medicaid Services (CMS). 2024. *Payroll Based Journal Daily Nurse Staffing, Q1 through Q4 2023*. <https://data.cms.gov/quality-of-care/payroll-based-journal-daily-nurse-staffing>.
78. CMS, 2024.
79. CMS, 2024.
80. CMS, 2024; Contract CNA staffing is associated with worse care quality outcomes: Stepick, Lina, Laurie Hailer, Kezia Scales and Laura M. Wagner. 2024. *The Increase in Contract CNA Staffing in U.S. Nursing Homes and Associated Care Quality Outcomes*. San Francisco, CA: University of California, San Francisco. <https://healthworkforce.ucsf.edu/publication/increase-contract-cna-staffing-us-nursing-homes-and-associated-care-quality-outcomes>.
81. CMS, 2024.
82. U.S. Census Bureau, 2024.
83. Ruggles et al., 2024.
84. Ruggles et al., 2024.
85. Under the Fair Labor Standards Act (FLSA), workers must be paid overtime (at least one-and-a-half times their hourly wage) for any hours they work over 40 in a workweek for a single employer. DOL WHD, 2020; Ruggles et al., 2024.
86. Ruggles et al., 2024.
87. Federal poverty thresholds, which are updated each year, can be accessed here: <https://www.census.gov/data/tables/time-series/demo/income-poverty/historical-poverty-thresholds.html>.
88. U.S. Bureau of Labor Statistics (BLS), Injuries, Illnesses, and Fatalities (IIF). 2022. *Occupational Injuries and Illnesses and Fatal Injuries Profiles: DART injury and illness annualized rate per 10,000 workers*. <https://data.bls.gov/gqt/InitialPage>.
89. Centers for Medicare & Medicaid Services (CMS). "COVID-19 Nursing Home Data." Last modified July 14, 2024. <https://data.cms.gov/covid-19/covid-19-nursing-home-data>.
90. Centers for Medicare & Medicaid Services (CMS). "COVID-19 Nursing Home Data." Last modified July 14, 2024. <https://data.cms.gov/covid-19/covid-19-nursing-home-data>.
91. BLS EPP, 2023a.
92. BLS EPP, 2023b.
93. Porter, Kristie A., Denise A. Tyler, Angela Gasdaska, Micah Segelman, Galina Khatutsky, Marie Squillace, Judy Dey, and Iara Oliveira. 2022. *COVID-19 Pandemic Increased Nursing Homes' Reliance on Contract Staff to Address Staffing Shortages in 2020*. Washington, DC: Office of the

Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services. <https://aspe.hhs.gov/sites/default/files/documents/f7c0751d7b3ae7337a3b5d5e3dcc2ae7/nh-reliance-contract-staff-brief.pdf>.

94. Siddiqi, Zahida. 2024. "Why the Medicaid Battle Is Leading to More Quality-Based Nursing Home Payments." *Skilled Nursing News*, February 12. <https://skillednursingnews.com/2024/02/why-the-medicaid-battle-is-leading-to-more-quality-based-nursing-home-payments/>; Brown, Erin, Marsida Domi, and David Gifford. 2022. *A Review of Nursing Home Medicaid Value-Based Purchasing (VBP) Programs*. Washington, DC: The Center

for Health Policy Evaluation in Long-Term Care. <https://www.ahcancal.org/Data-and-Research/Center-for-HPE/Documents/CHPE-Report-A%20Review%20of%20NH%20Medicaid%20VBP%20Programs%2002.23.2022.pdf>; Hancock, Peter. 2022. "Nursing Home Payment Reform Drives \$700 Million to Improve Staffing, Quality of Care." Northern Public Radio, April 8. <https://www.northernpublicradio.org/2022-04-08/nursing-home-payment-reform-drives-700-million-to-improve-staffing-quality-of-care>.

95. Jaffe, Susan. 2021. "3 states limit nursing home profits in bid to improve care." *Kaiser Health News*, October 25. [https://khn.org/news/article/3-states-](https://khn.org/news/article/3-states-limit-nursing-home-profits-in-bid-to-improve-care/)

[limit-nursing-home-profits-in-bid-to-improve-care/](https://khn.org/news/article/3-states-limit-nursing-home-profits-in-bid-to-improve-care/).

96. Robins, Amy. "PHI Applauds the Biden Administration's Actions on Behalf of the Direct Care Workforce." April 25, 2024. <https://www.phinational.org/phi-applauds-the-biden-administrations-actions-on-behalf-of-the-direct-care-workforce/>.

97. BLS QCEW, 2021.

98. Campbell et al., 2021.

99. PCPID, 2017.

## ABOUT PHI

PHI works to transform eldercare and disability services. We foster dignity, respect, and independence for all who receive care, and all who provide it. As the nation's leading authority on the direct care workforce, PHI promotes quality direct care jobs as the foundation for quality care.

Drawing on more than 30 years of experience working side-by-side with direct care workers and their clients in cities, suburbs, and small towns across America, PHI offers all the tools necessary to create quality jobs and provide quality care. PHI's trainers, researchers, and policy experts work together to:

- Learn what works and what doesn't in meeting the needs of direct care workers and their clients, in a variety of long-term care settings;
- Implement best practices through hands-on coaching, training, and consulting, to help long-term care providers deliver high-quality care;
- Support policymakers and advocates in crafting evidence-based policies to advance quality care.

For more information, visit PHI at [PHInational.org](https://PHInational.org).

