

Key Facts About Home and Community-Based Services

Millions of Americans living with disabilities rely on home and community-based services (HCBS) for essential supports that enable them to live independently in their homes and communities. Medicaid is the primary source of coverage for HCBS.

Here are key facts you need to know about the vital role of HCBS for the disability community, their families, and caretakers:

1. More than [4 million people](#) use Medicaid home and community-based services (HCBS).
2. All Medicaid programs [cover](#) “long term services and supports” (LTSS), which are supportive services that help people with their activities of daily living (ADL), such as toileting, bathing, dressing, and eating meals. While state Medicaid programs are required to provide these services in nursing facilities, states also may elect to provide services in people’s homes and community settings. Services provided in this manner are referred to as “home and community-based services” (HCBS).
3. All Medicaid programs [cover medical services in the home](#), such as home health nursing services and physical/occupational/speech therapies. In contrast, HCBS are long-term, non-medical, supportive personal care services that enable people to remain living in their communities.
4. Medicaid funds [more](#) than two-thirds (66%) of total spending on HCBS.
5. More than [half of all states](#) deliver some or all HCBS through Medicaid managed care.
6. HCBS serve a [diverse population](#), including individuals with intellectual or developmental disabilities, physical disabilities, and/or mental illnesses.
7. Without the critical services HCBS provide, patients’ family members often have to fill in the gaps to provide care. More than [53 million people](#) across the country serve as family caregivers who provide vital assistance to family members, including children or adults with disabilities and aging parents.
8. While some family caregivers can be [paid through Medicaid](#) for providing personal care, these payments are only authorized through certain waiver programs and are at the discretion of state Medicaid programs.
9. Nearly [692,000](#) Americans remain on waitlists to receive HCBS, oftentimes for years. Most people on waiting lists or interest lists have intellectual or developmental disabilities.
10. People who use HCBS are at heightened risk of serious illness or death from exposure to COVID-19. During the public health emergency (PHE), the federal government provided [states with new authorities](#) to maintain access to HCBS.
11. States leveraged these PHE authorities to [strengthen their HCBS programs](#) by expanding access to services and investing in the HCBS workforce. While some of those changes have transitioned into permanent policies, others have ended as the PHE authorities expired.
12. While strides were made to provide adequate funding for HCBS throughout the COVID-19 public health crisis, there is more work to do to expand patients’ access to quality services and support the essential workers who provide these services.

[For more information about HCBS, check out the Alliance’s Medicaid Home and Community-Based Services \(HCBS\) Toolkit.](#)