

United States Senate

WASHINGTON, DC 20510

May 20, 2026

Delivering An Affordable Home Care Guarantee for American Families

Dear Colleague,

Too many Americans go to sleep at night worried about how they will pay for a loved one's care. American families are forced to navigate a confusing, fragmented long-term care system filled with gaps, complexity, and staggering price tags. In the richest country in the world, the sticker prices for long-term care devastate families, and the responsibility often falls on family caregivers who are stretched thin on time and resources.¹

A round-the-clock home health aide can cost more than \$288,000 annually. Full-time personal care services, including help with meals and household tasks, cost about \$62,400 per year. A private nursing home room averages more than \$120,000 per year. All of these costs far exceed what the typical person with Medicare lives on, \$36,000 per year.² A lifetime of savings can disappear in a matter of months. Families who worked and saved their entire lives often discover there are no affordable options when care is needed most – *this is a five-alarm fire*.

Families are confronting a care crisis that threatens their savings, their jobs, and their dignity. Meanwhile, the workers delivering this care suffer because of chronically low wages, a lack of benefits, and dire workforce shortages. All the while, the growing influence of private equity is driving up costs and worsening outcomes. America is failing people who are aging and those with disabilities, who should have every opportunity to live at home and thrive in their communities. Democrats want to ensure American families have affordable, high-quality care in the setting they choose with quality jobs and living wages for direct care workers.

Over the last year, Trump and Republicans took a sledgehammer to this already broken system. Republicans cut Medicaid—the largest payer of long-term care services—by \$1 trillion. These historic cuts to Medicaid will force states to cut services that support seniors and people with disabilities living at home, and make care provided in nursing homes less safe. Republican health care cuts will put unbearable pressure on unpaid family caregivers, shrink access to home care, depress wages and benefits for workers—many of whom are not earning a livable wage—and heighten dependence on nursing homes and other institutions. The harm is here: in Idaho, kids with disabilities now face caps on occupational, speech, and physical therapy visits, and in Colorado, the state's Joint Budget Committee voted to cut weekly paid hours for caregivers and reduce services for people with developmental disabilities.³ On top of these devastating cuts,

¹ AARP, National Alliance for Caregiving, "Caregiving in the US: Research Report, July 2025, <https://www.aarp.org/pri/topics/ltss/family-caregiving/caregiving-in-the-us-2025/>

² Genworth, Cost of Care Survey 2024, Annual Median Cost, <https://assets.carescout.com/55da049c1f/282102.pdf>.

³ Sarah Cutler and Becca Savransky, "Idaho changes rules on therapy. What will it mean for kids with disabilities?" Idaho Statesman, January 23, 2026. <https://www.idahostatesman.com/news/politics-government/state-politics/article314385577.html>;

bowing to corporate lobbying and campaign pay-outs, Republicans repealed minimum staffing standards in nursing homes, denying residents and their families guaranteed access to a registered nurse 24/7 and risking the health and safety of nursing home residents and workers nationwide.⁴ Trump and his cronies claim AI nurses can fill the gap, an overtly offensive suggestion to any family who has faced the often painful decision to seek out care for a loved one in a nursing home.⁵

Nearly 7 in 10 Americans who turn 65 will need significant long-term care at some point, including a growing number of Americans living with Alzheimer's disease and related dementias.⁶ Yet fewer than half of these seniors will receive home care.⁷ In many cases, home care can be a less costly alternative to institutional care for both families and taxpayers. Currently, 17.6 million adults and over 7 million children in the United States are living with a disability and require additional supportive services to remain in their own communities.⁸ As a result, millions depend on unpaid family caregivers who reduce their work hours or leave the workforce entirely.⁹ On average, unpaid family caregivers spend 27 hours per week providing care, with more than a quarter providing 40 or more hours per week.¹⁰ Others delay care or drain retirement accounts just to secure basic support. The formal caregiving workforce fares no better. Direct care workers earn a median annual wage of just under \$26,000.¹¹

Contrary to popular belief, Medicare does not cover long-term care beyond limited, short-term medical services. State Medicaid programs are required to cover long-term care in nursing homes, and each state can choose to provide care at home to some people. The reality is that older adults and people with disabilities only qualify after they impoverish themselves to meet strict eligibility limits.¹² States can cap access to services provided in an individual's home or

Bente Birkeland and John Daley, "Impact of state budget cuts gets real as lawmakers start trimming Medicaid programs," CPR News, March 12, 2026, <https://www.cpr.org/2026/03/12/state-budget-medicare-cuts-caregivers-disability-services/>

⁴ Kenneth P. Vogel and Chirstina Jewett, "After Donations, Trump Administration Revoked Rule Requiring More Nursing Home Staff" New York Times, January 28, 2026. <https://www.nytimes.com/2026/01/27/us/politics/after-donations-trump-administration-revoked-rule-requiring-more-nursing-home-staff.html>.

⁵ PBS NewsHour, "WATCH: Senators press Oz on nursing home staffing requirements," March 14, 2025, <https://www.youtube.com/watch?v=baYP9n9xjKw>; Windsor Johnston, "Dr. Oz pushes AI avatars as a fix for rural health care. Not so fast, critics say," NPR, February 14, 2026, <https://www.npr.org/2026/02/14/nx-s1-5704189/dr-oz-ai-avatars-replace-rural-health-workers>.

⁶ 2025 Alzheimer's Disease Facts and Figures, Alzheimer's Association, <https://www.alz.org/getmedia/ef8f48f9-ad36-48ea-87f9-b74034635c1e/alzheimers-facts-and-figures.pdf>

⁷ U.S. Government Accountability Office (GAO), Older Americans Act: Updated Information on Unmet Need for Services, GAO-24-107513, May 17, 2024, <https://www.gao.gov/products/gao-24-107513>.

⁸ United States Census Bureau, American Communities Survey, S1810 Disability Characteristics, 2024, <https://data.census.gov/table/ACSST1Y2024.S1810?q=Disability>; The Child & Adolescent Health Measurement Initiative, 2021-2022 National Survey of Children's Health, Physical, Oral Health and Functional Status, <https://nschdata.org/browse/survey/results?q=10500&r=1>.

⁹ AARP, National Alliance for Caregiving, "Caregiving in the US: Research Report, July 2025, <https://www.aarp.org/content/dam/aarp/ppi/topics/ltss/family-caregiving/caregiving-in-us-2025.doi.10.26419-2fppi.00373.001.pdf>.

¹⁰ Ibid.

¹¹ PHI National, Understanding the Direct Care Workforce, Key Facts & FAQ, <https://www.phinational.org/policy-research/key-facts-faq/>.

¹² Gabriella Aboulafia, Amanda C. Chen, and David C. Grabowski, "Asset Spend-Down and Medicaid Enrollment in Nursing Homes," JAMA Network Open, December 4, 2025, <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2842303>.

community, leaving hundreds of thousands of people who need these services to languish on waiting lists every year.¹³

Trump and Republicans exacerbated this crisis. Finance Committee minority staff will develop policies that directly confront the long-term care access and affordability crisis, addressing the misalignment of lacking supply and intense demand for these services. Alongside the co-signers of this letter, I invite you to join us in advancing reforms that aim to deliver on three core goals:

Make Home Care Affordable and Accessible: Nearly 90 percent of Americans want to live in their homes and communities for as long as possible.¹⁴ To make home care available and affordable, Finance Committee staff will develop policies to invest in Medicaid home- and community-based services and establish a home care guarantee for people with Medicare. These policies will:

- Expand access to home care so families in need are not limited by waiting lists, astronomical out-of-pocket costs, or arbitrary poverty thresholds that force families to hand over their hard-earned assets, like their family home, to qualify for services;
- Build on innovative volunteer models that mobilize community members to care for one another;
- Ensure home care is a dependable and integrated part of the health care system; and
- Guarantee middle-income families can access care without depleting their savings.

Improve the Quality of Care in Nursing Homes: There will always be a need for nursing homes, and for some, they are the preferred setting for care. Today, more than 1.2 million Americans and their families depend on nursing homes for complex health care and supportive services.¹⁵ Families that rely on nursing homes should have the peace of mind that their loved ones will receive quality care, and incentives should reward safe staffing. Chronic understaffing threatens residents' safety and strains an already underpaid workforce. To protect residents and ensure direct care workers are valued for their essential work, Finance committee staff will develop policies to:

- Ensure taxpayer dollars are spent on direct care and not siphoned off through profit-hiding shell games;
- Align incentives to strengthen nursing home staffing standards so residents are safe and workers are supported; and
- Improve transparency and oversight to ensure facilities consistently meet high quality standards.

¹³ Alice Burns, Abby Wolk, and Molly O'Malley Watts, "A Look at Waiting Lists for Medicaid Home- and Community-Based Services from 2016 to 2025," KFF, November 20, 2025, <https://www.kff.org/medicaid/a-look-at-waiting-lists-for-medicaid-home-and-community-based-services-from-2016-to-2025/>.

¹⁴ The Associated Press-NORC Center for Public Affairs Research, "Long Term Care in America: Americans Want to Age at Home," May 2021, https://apnorc.org/wp-content/uploads/2021/04/LTC_Report_AgingatHome_final.pdf.

¹⁵ KFF, Total Number of Residents in Certified Nursing Facilities, State Health Facts, 2025, <https://www.kff.org/other-health/state-indicator/number-of-nursing-facility-residents/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>.

Strengthen the Long-Term Care Workforce: We are nowhere without many more skilled, caring long-term care workers. Long-term care depends on people, and demand is projected to grow 40% over the next decade, making these among the most urgently needed roles in the workforce.¹⁶ Care cannot be entirely automated, outsourced to an app, or replaced by “tools and technology,” as Centers for Medicare & Medicaid Services (CMS) Administrator Mehmet Oz suggests.¹⁷ Home care workers, nursing home staff, and family caregivers provide the hands-on support that allows older adults and people with disabilities to live safely and with dignity. Yet direct care workers often earn low wages with limited benefits, despite performing physically and emotionally demanding work. High turnover and staffing shortages make it harder for families to find reliable care and place a strain on nursing home residents and workers alike.¹⁸ At the same time, an estimated 63 million Americans serve as unpaid family caregivers, often reducing their work hours or leaving jobs entirely, sacrificing income and retirement security to care for loved ones.¹⁹ Building a durable long-term care system requires treating direct care workers as essential, valued infrastructure. To strengthen the long-term care workforce, Finance Committee staff will develop policies to:

- Improve wages, benefits, training, and career pathways for home care and nursing home workers so these are quality jobs;
- Address workforce shortages by creating training incentives to the greatest extent possible, involving government, employers, and labor unions, to ensure vulnerable seniors and people with disabilities are safely cared for;
- Protect, retain, and attract legal immigrants to fill gaps in the domestic workforce;
- Protect working family caregivers from losing their jobs, savings, and retirement security when a loved one needs support; and
- Ensure caregivers, whether paid or unpaid, are recognized as essential members of the care team.

In the coming weeks and months, we plan to release more details about the above policies. We invite any interested colleagues to participate in and provide input on this effort. We want to ensure the Senate is prepared to act on these issues when Democrats have another opportunity to enact the bold, meaningful change the American people demand and deserve.

Sincerely,

¹⁶ National Center for Health Workforce Analysis, Health Resources and Services Administration, United States Department of Health and Human Services, “Long-Term Services and Support: Demand Projections, 2023-2038,” December 2025.

<https://bhw.hrsa.gov/sites/default/files/bureau-health-workforce/data-research/ltss-projections-factsheet.pdf>

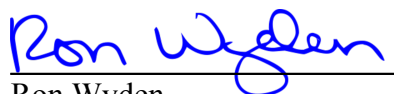
¹⁷ PBS NewsHour, “WATCH: Senators press Oz on nursing home staffing requirements,” March 14, 2025,

<https://www.youtube.com/watch?v=baYP9n9xjKw>.

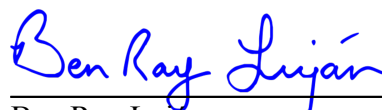
¹⁸ PHI National, Understanding the Direct Care Workforce, Key Facts & FAQ, <https://www.phinational.org/policy-research/key-facts-faq/>.

¹⁹ AARP, National Alliance for Caregiving, “Caregiving in the US: Research Report, July 2025,

<https://www.aarp.org/content/dam/aarp/ppi/topics/ltss/family-caregiving/caregiving-in-us-2025.doi.10.26419-2fppi.00373.001.pdf>.



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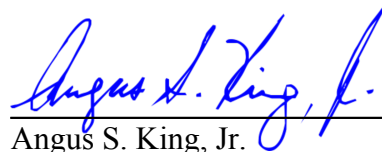
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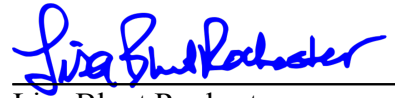
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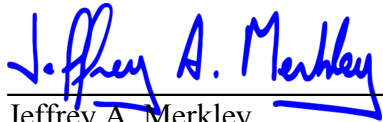
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