

Home and Community-Based Services

June 2020



The membership of LeadingAge includes nonprofit nursing homes; assisted living, affordable housing, and market-rate independent living communities; and providers of home and community-based services (HCBS).

A 2019 survey of LeadingAge members yielded the following key facts about LeadingAge HCBS providers.

Overview:

HCBS agencies provided adult day services (AD), hospice, home health care (HHC), and non-medical home care (HC). Surveys were completed by 219 AD centers, 100 hospice agencies, 139 HHC agencies, and 191 HC agencies. The overall HCBS response rate was 24%.

- Few HCBS agencies—only 8%—reported being providers of the Program of All-Inclusive Care for the Elderly (PACE).
- More than half of AD service centers employed an approach that combined social and medical models (57%).
- Hospices services were most commonly provided by free-standing hospice agencies (40%).

Client Profile:

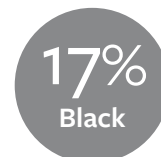
- **AD centers** had a more equal distribution of participants than other HCBS settings. More than half of participants (57%) were women. While 73% of participants were white, 17% of participants were Black, and 5% were Hispanic. One-quarter of participants were under age 65.
- **Hospice, HCC, and HC agencies** reported that their users were overwhelmingly women, white, and aged 75 and older.



AD center participants

57% women

25% under the age of 65



Services:



- **AD centers:** The top services available to AD participants were dietary/nutrition, skilled nursing, daily round-trip transportation, and congregate meals. Adult day service centers were most likely to provide three services directly: skilled nursing, congregate meals, and dietary/nutrition services. Therapy services were more likely to be provided through arrangements with outside service providers than provided directly by center employees.



- **Hospice agencies:** At least three-quarters of hospice agencies reported that they provided social work, pharmacy, pastoral care, skilled nursing, respite care, therapy, dietary/nutrition, physician, and alternative therapy services. Hospice agencies were most likely to provide social work, pastoral care, and skilled nursing services directly to clients. Pharmacy and therapy services were more commonly delivered through arrangements with outside service providers.



- **HHC agencies:** More than half of HHC agencies reported providing the services asked about in the survey: dietary/nutrition, pastoral care, infusion therapy, non-hospice palliative care, continuous home care, home-delivered meals, pharmacy, respiratory health, and podiatry. Less than half of the HHC agencies provided any service directly with HHC staff, with the exception of podiatry services. Dietary/nutrition, infusion therapy, home-delivered meals, pharmacy, respiratory therapy, and podiatry services were more likely to be provided through arrangements with outside partners than provided by staff. Respiratory health and podiatry were the least frequently provided services.

- **HC agencies:** The top five HC services were personal care, homemaker services, medical and social transportation, and respite care. Home care agencies were more likely to provide the majority of services directly, rather than arranging for services with outside partners. At least two-thirds of HC agencies provided three services directly: personal care, respite care, and homemaker services. Less than half of HC agencies provided pastoral care services, either directly or through outside providers.

Revenue: HHC, HC, and hospice providers were most likely to have an annual revenue of up to \$1 million. The majority of AD service centers had an annual revenue below \$500,000.

HHC, HC,
Hospice providers
**up to
\$1 million**
annual revenue

majority of
AD centers
< \$500,000
annual revenue



**aides: majority
of employee
full-time
equivalents**

Workforce: Aides were the most common employee in HHC agencies, HC agencies, and AD service centers. Aides in AD service centers spent the most time per AD participant per day (56 minutes) of all staff in AD service centers.

Technology Use: Two-thirds of HCBS agencies used electronic health records or electronic medical records. HCBS agencies were more likely to exchange electronic health information with other long-term care providers (38%) and physicians (34%).



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**use electronic health
records or electronic
medical records**



For a complete profile of LeadingAge members, read our full report of 2019 survey findings at [LeadingAge.org/MemberSurvey2019](https://www.leadingage.org/MemberSurvey2019)