

AGING SERVICES WORKFORCE



Stop the Federal Minimum Staffing Standard

Nursing homes face persistent workforce shortages that make the Centers for Medicare and Medicaid Services' (CMS) federal minimum staffing rule unrealistic and unattainable without timely workforce development investments and fair reimbursement rates.

Repeal the rule through the fiscal year 2025 budget reconciliation process.

Cosponsor and pass the *Protecting Rural Seniors Access to Care Act*:

- The *Protecting Rural Seniors' Access to Care Act* ([H.R. 1683](#) / [S. 750](#)) would prohibit the Secretary of Health and Human Services from implementing, administering, or enforcing the provisions of the final minimum staffing rule. Instead, it would establish a nursing home workforce advisory panel to analyze and make recommendations to fix workforce shortages. This bill was introduced by Senators Deb Fischer (R-NE) and James Lankford (R-OK) and Representative Michelle Fischbach (R-MN).

Streamline Care Worker Immigration Pipelines

Aging services providers are facing a workforce crisis of unparalleled proportions as they grapple with increasing demand for their services and a severe shortage of professional caregivers. This is a demographic crisis. The population of older adults with complex needs is growing by leaps and bounds while the pool of available workers is declining at a dangerous rate. This mismatch is harming older adults and their families. Foreign-born workers – including those authorized to work under Temporary Protected Status – are needed reduce staffing shortages while they access education, training, and experience in aging services. As outlined in LeadingAge's, [The Immigration Imperative](#), we need clear and accessible pathways to citizenship, as well as permanent and temporary residency status, to support and build the aging services workforce.

Enact legislation to raise caps on employment-based visas:

- The *Healthcare Workforce Resilience Act* ([H.R. 6205](#) / [S. 3211](#) in the previous Congress) would enable skilled immigrant nurses and physicians to secure permanent legal status in the United States by designating 40,000 Congressionally authorized visas for foreign-born healthcare workers from preexisting unused visas (15,000 for foreign-born physicians and 25,000 for foreign-born nurses). These recaptured visas would be drawn from the pool of unused employment-based visas that Congress has previously authorized.

Enact legislation to expand, not restrict, refugee status:

- The *Asylum Seeker Work Authorization Act* ([H.R. 1325](#) in the previous Congress) and the ASPIRE Act ([H.R. 4309](#) / [S. 2175](#) in the previous Congress) would direct the Department of Homeland Security to provide employment authorization for eligible asylum applicants.

Increase Access to Career Pathways

Increasing access to career pathways through innovative education and training models is essential for direct care workers and nurses, who serve as the backbone of aging services. By investing in workforce development, providers can address the growing demand for skilled caregivers, reduce turnover, and enhance job satisfaction. Innovative training programs offer accessible, flexible opportunities for career advancement, ultimately strengthening the workforce and improving care outcomes for older adults and their families.

Reintroduce and Pass the *Nursing Home Workforce Support and Expansion Act*:

- The *Nursing Home Workforce Support and Expansion Act* ([H.R. 7929](#) in the previous Congress) would provide up to \$400 million per year in grant funding to states to support direct care workers across the long-term care continuum, including in skilled nursing, assisted living, home health, hospice, and home- and community-based service settings.
- These funds would be used to attract, recruit, and train direct care workers by providing them with wage subsidies, student loan repayments or tuition assistance, affordable and accessible childcare, and transportation assistance. This bill was included in the *Elder Justice Reauthorization and Modernization Act* ([H.R. 2718](#)) that was introduced in the previous Congress.

Reintroduce and Pass the *Bipartisan Workforce Pell Act*:

- The *Bipartisan Workforce Pell Act* ([H.R. 6585](#) in the previous Congress) would expand student eligibility for Pell Grants by establishing the Workforce Pell Grants Program and require the Department of Education to award Workforce Pell Grants to students enrolled in eligible short-term programs, defined by the bill as those that provide 150 to 600 clock hours of instructional time over a period of eight to 15 weeks and meet other eligibility criteria. Under current law, only students enrolled in programs that run at least 16 weeks (600 clock hours) are eligible for Pell Grants.

Reintroduce and Pass the *SENIOR Act*:

- The Safeguarding Elderly Needs for Infrastructure and Occupational Resources (SENIOR) Act ([H.R. 7605](#) in the previous Congress) would direct the U.S. Department of Labor and the Department of Health and Human Services' Health Resources and Services Administration (HRSA) to establish new, and expand existing, workforce development programs to strengthen the pipeline and incentivize the development of a stronger geriatric workforce.

Reintroduce and Pass the *National Apprenticeship Act*:

- The *National Apprenticeship Act* ([H.R. 2851](#) / [S. 2122](#) in the previous Congress) would support the creation and expansion of registered apprenticeships, youth apprenticeships and pre-apprenticeship programs. In addition to increasing access to hands on learning opportunities, this bill would strengthen connections between the Department of Labor and the Department of Education, ensuring that national apprentice programs connect students with employers from in-demand sectors, like aging services.

Fix the Nursing Home CNA Training Lockout

Certified Nursing Assistants (CNAs) are an integral part of the aging services workforce—and strong training programs are critical to providing the quality care older adults deserve. For almost 40 years, nursing homes that receive civil monetary penalties above a certain threshold on their annual survey have automatically lost their ability to train CNAs for a full two years. These suspensions are required even if the fines are unrelated to the quality of care provided to residents or are caused by situations outside a nursing home's control.

Reintroduce and Pass the *Ensuring Seniors' Access to Quality Care Act*:

- The *Ensuring Seniors' Access to Quality Care Act* ([H.R. 3227](#) / [S. 1749](#) in the last Congress) would fix the two-year CNA training lockout by allowing nursing homes that have resolved their compliance issues to continue their CNA training programs as long as their penalties are not related to the quality of care provided to residents. This legislation would help secure and maintain a robust pipeline of trained CNAs who are essential to our nation's 1.2 million nursing home residents.
- The bill was introduced in the last Congress by Representatives Ron Estes (R-KS) and Gerald Connolly (D-VA) and Senators Mark Warner (D-VA) and Tim Scott (R-SC).