



May 11, 2024

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Brian Pasternak, Administrator
Office of Foreign Labor Certification
Employment and Training Administration
United States Department of Labor
200 Constitution Avenue, NW, Room N-5311
Washington, DC 20210

Re: *Request for Information Relating to Labor Certification for Permanent Employment of Foreign Workers in the United States; Modernizing Schedule A, [Docket Number ETA-2023-0006](#), [RIN Number 1205-AC16](#)*

Dear Administrator Pasternak,

The [Home Care Association of America](#) (HCAOA) appreciates the opportunity to submit our thoughts to the Employment and Training Administration (ETA) in connection with its [Request for Information](#) regarding possible revisions to Schedule A of the permanent labor certification process.

I. Home Care Association of America

HCAOA is the home care community's leading trade association and the trusted voice of the home care industry, strengthening its members and caregivers through advocacy, education, and research. HCAOA's purpose is to provide leadership, representation, and education for the advancement of home care and provide a strong, unified voice to speak to issues of concern within the home care industry.

Founded in 2002, HCAOA represents over 4,600 companies that employ countless dedicated caregivers across the United States. Caregivers provide medical, skilled, personal, and companion home care, enabling seniors and individuals with disabilities to remain in their homes as long as possible at a cost that is more affordable than institutionalized care. Caregivers often assist with a variety of activities of daily living, such as bathing, dressing, and eating. Our industry also encompasses Private Duty Nursing (PDN)—medically necessary nursing services under Medicaid for medically fragile patients, primarily children.

HCAOA is heavily invested in legal and policy developments related to immigration, as approximately one third of our caregivers are foreign born. The issues raised in this particular RFI are highly relevant to our members, their clients, and the thousands of caregivers they employ. HCAOA is heartened by ETA's decision to substantively reevaluate Schedule A for the first time since 1991, as economic and labor market conditions have since changed considerably for industries such as home care that rely on foreign workers and various visa programs.



HCAOA respectfully submits the following response to ETA with the hope that our insight will help DOL strike an appropriate balance between the need to provide U.S. workers notice of and ability to apply to available, permanent job opportunities with the need to offer employers access to foreign labor through effective administration of the permanent labor certification program.

II. The Caregiving Crisis and the Home Care Workforce Action Alliance

The caregiver shortage in the home care industry has reached crisis proportions. To help address the crisis, HCAOA established the [Home Care Workforce Action Alliance](#) with the [National Association for Home Care & Hospice](#) and released a comprehensive [report](#) offering concrete recommendations to address the workforce shortage. One of those recommendations involves immigration reform such as updating the occupations listed on Scheule A.

The need for more home care workers is on a direct collision course with the population demographics of the United States. Data predicts that between 2020 and 2030, the number of U.S. citizens 85 years of age or older will double from the current 2.4 million. Many are calling this demographic shift a “silver tsunami.” Such growth in the U.S. aged population exacerbates the current shortage of caregivers that millions of Americans of all ages rely on today.

As this “silver tsunami” crests, we are witnessing a simultaneous and dramatic decrease in the flow of immigrants, who traditionally make up about a third of the caregiving workforce. According to the [Migration Policy Institute](#), the pandemic led to sharp drops in immigration to the United States, to levels not seen in decades. Issuance of visas for legal permanent residence fell 48 percent between fiscal years 2019 and 2020, while temporary visa issuances dropped 54 percent.

Despite the best efforts of industry leadership and management, the gap between the numbers of patients and families seeking assistance and the availability of caregivers is accelerating at an unsustainable pace. Workforce think tank [PHI](#) reports that the caregiver workforce more than doubled in size over the past decade, jumping from just over 1 million workers in 2010 to more than 2.4 million in 2020. Unfortunately, even this sizeable increase will not keep pace with the 84 million citizens who will be over the age of 65 by 2050.

The caregiving crisis has repercussions far beyond the impacted families. When families cannot get the care they need and must step in with more support, there are implications for their employers, their coworkers, and other members of their families, including spouses and children. The [AARP Public Policy Institute](#) reports that 69% of working caregivers rearrange their work schedule, decrease their hours, or take an unpaid leave to meet their caregiving responsibilities.

The [National Alliance for Caregiving and AARP](#) found that approximately 43.5 million caregivers have provided unpaid care to an adult or child in the last twelve months. Accordingly, a [Gallup study](#) found that more than 1 in 6 Americans who work full or part-time also assist with caring for an elderly or disabled family member, relative, or friend. The [Kaiser Family Foundation also noted the COVID-19 pandemic](#) has magnified the unmet need for home and community-based services (HCBS)



among older adults and people with disabilities, where Medicaid is often the primary payer of these services. Additionally, a [family caregiver survey published by the ARC of the United States in 2017](#) identified the extent of the financial, emotional, physical, and psychological impact on family caregivers. Finding assistance in providing care is imperative to improving the health and well-being of *all* care partners.

Our acute health and long-term care sectors depend on the availability of the home care workforce as well. The accessibility of home-based care is essential to their ability to move patients out of inpatient settings, maintain bed availability for the most acute, and to contain health care costs. Home health care providers currently report turning away over 25% of referred patients due to staff shortages.

Ongoing labor and talent shortages threaten U.S. economic leadership and future growth. Even as the country returns to pre-pandemic levels of employment and workforce participation, it faces historic job vacancies: there were 9 million job openings as of December 29, 2023, [according to BLS](#). To address this shortage, U.S. policymakers must act decisively and enact reforms that can be immediately felt within the labor market. We believe one of these changes should be the inclusion of caregiving as a Schedule A occupation.

As ETA [notes in the instant RFI](#), Schedule A is the product of an extensive process of economic and labor market analysis of employment demand and supply by DOL which incorporates the application of multiple factors, including evidence submitted by trade associations such as HCAOA. To that end, we offer the following data points and suggestions toward our shared goal of establishing a roster of Schedule A professions that will best suit the modern needs of a diverse economy while serving an aging population.

III. The Caregiving Crisis by the Numbers

In the forty year span between 2020 to 2060, the population of adults over age 65 is projected to increase dramatically from 56.1 million to 94.7 million.¹ The number of adults age 85 and older is expected to nearly triple over the same period from 6.7 million to 19 million.² This alarming demographic shift is the underlying driver of the explosive job growth we are seeing in the caregiving space.

The need for caregivers has been skyrocketing for years. From 2021 to 2031, the home care workforce will have nearly 5.5 million total job openings. This figure includes 924,000 new jobs created by growth in demand, 2.3 million job openings caused by workers moving into other occupations, and 2.3 million job openings due to workers leaving the labor force altogether.³ As you can see in the graphic below, the home care workforce ranks second among all U.S. occupations for total projected job openings.

According to the Bureau of Labor Statistics, the home care workforce is projected to add over 900,000 new jobs from 2021 to 2031, more new jobs than any other occupation in the U.S. The occupation

¹ U.S. Census Bureau, 2017 National Population Projections Datasets, Projected Population by Single Year of Age, Sex, Race, and Hispanic Origin for the United States: 2016 to 2060.

² <https://www.phinational.org/wp-content/uploads/2022/08/DCW-in-the-United-States-2022-PHI.pdf>

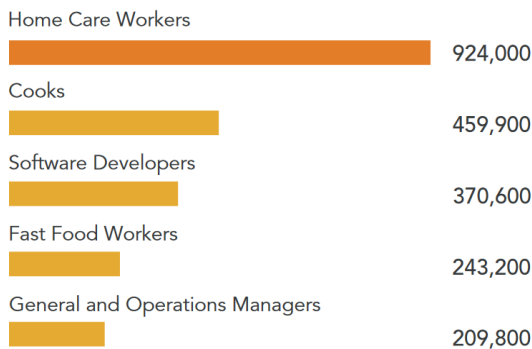
³ BLS EPP, 2022a; 2022b.



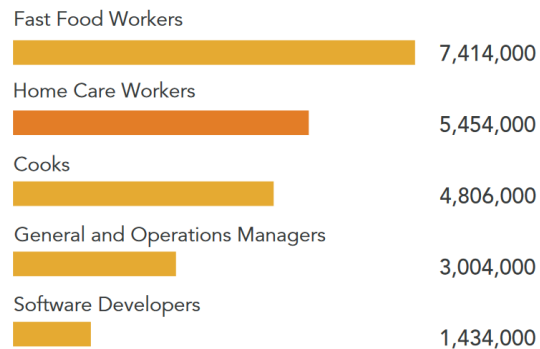
with the second-largest projected growth, which is cooks, will add nearly 500,000 fewer jobs than the home care workforce.

According to ETA’s own [National Center for O*NET Development](#), Personal Care Aide is listed as a “Bright Outlook” occupation that is projected to grow much faster than average and have more than 100,000 job openings between 2022 and 2032.⁴ This unprecedented growth and demand necessitates a nimble response from ETA and other immigration policymakers. This response should include adding caregiving to Schedule A to alleviate the evidently unnecessary permanent labor certification process.

OCCUPATIONS WITH MOST JOB GROWTH, 2021 TO 2031



OCCUPATIONS WITH THE MOST TOTAL JOB OPENINGS, 2021 TO 2031

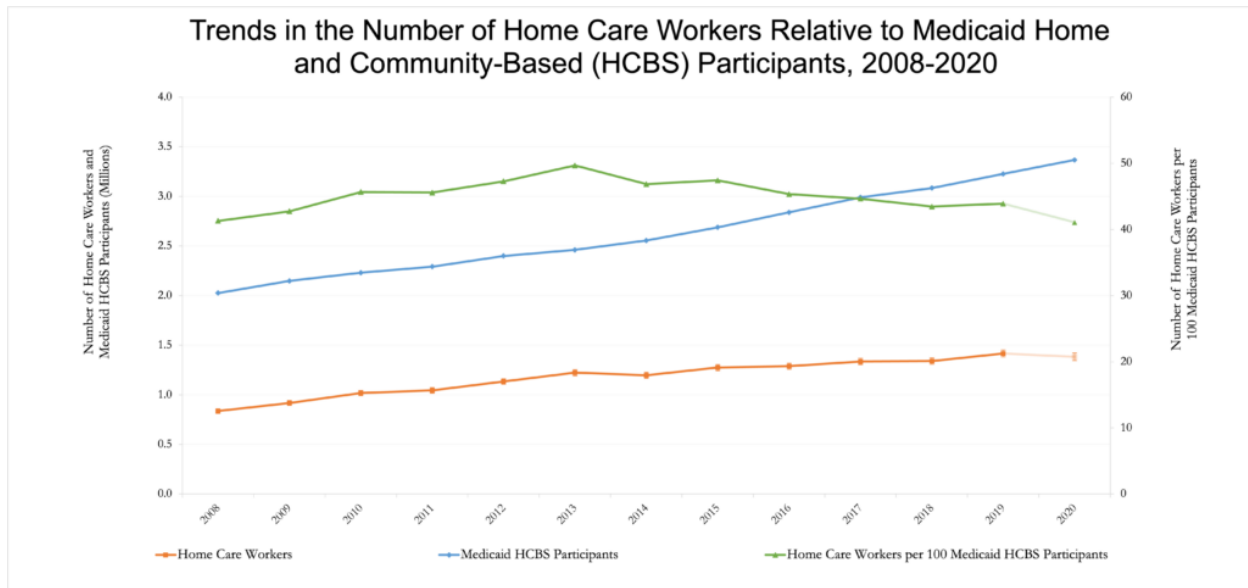


Using data from the [American Community Survey](#) and the [Kaiser Family Foundation](#), [Amanda Kreider](#) and [Dr. Rachel Werner](#) from the [University of Pennsylvania](#) compared trends in the size of the home care workforce with data on Medicaid HCBS participation between 2008 and 2020⁶. The authors found that the home care workforce grew from approximately 840,000 to 1.42 million workers between 2008 and 2019 (orange line). Simultaneously, the number of people participating in HCBS programs increased even more rapidly (blue line). As a result, the number of home care workers per 100 Medicaid HCBS participants decreased by 11.6% from 2013-2019 (green line), suggesting that the demand for home care workers dramatically outstripped the supply.

⁴ <https://www.onetonline.org/link/summary/31-1122.00>

⁵ U.S. Bureau of Labor Statistics (BLS), Employment Projections Program (EPP). 2022. National Employment Matrix - Industry. <https://data.bls.gov/projections/nationalMatrixHome?ioType=i>; BLS EPP. 2022. EP Data Tables, Table 1.10 Occupational Separations and Openings, Projected 2021–2031. <https://www.bls.gov/emp/tables.htm>

⁶ <https://www.healthaffairs.org/doi/full/10.1377/hlthaff.2022.01351>



The discrepancy is significant, given the fact that HCBS are the predominant approach to long-term services and supports (LTSS) in our country. Medicaid, the primary payer for LTSS, has also expanded HCBS coverage in recent years. These statistics plainly indicate the dire need to supplement our insufficient caregiving workforce with foreign labor.

Lastly, would be remiss not to mention the workgroup that has sprung from President Biden’s [Executive Order on Increasing Access to High-Quality Care and Supporting Caregivers](#) as a source of data for ETA relating to the critical lack of caregivers nationwide. The workgroup – which consists of experts from the [Department of Labor’s Women’s Bureau](#), [Office of Disability Employment Policy](#), and [Office of the Assistant Secretary for Policy](#), and experts from HHS’s [Office of the Assistant Secretary for Planning and Evaluation](#), [Administration for Community Living](#), [Centers for Medicare and Medicaid Services](#), [Health Resources and Services Administration](#), [National Center for Health Statistics](#) and [National Institute on Aging](#) – is scheduled to release its recommendations in Spring, 2024. Those recommendations will undoubtedly be congruent with the rest of the statistics we have presented thus far: the caregiver shortage is nothing short of a crisis that can be at least partially alleviated through sensible, immediately achievable changes to our immigration policy such as Schedule A reform.

IV. The Lack of Caregivers is Holding the Economy Back

In a March, 2022 report entitled [State Efforts to Address Medicaid Home- and Community-Based Services Workforce Shortages](#), the [Medicaid and CHIP Payment and Access Commission](#) (MACPAC) stated that, “...there is evidence that an insufficient supply of HCBS workers has led to providers being unable to take on new clients, vacancies in the workforce, and unmet beneficiary need. A 2021 survey of HCBS agencies found that 77 percent have turned away new referrals, 58 percent have discontinued



certain programs or services, and 84 percent have delayed programs due to staffing shortages.” These unfilled caregiver positions represent opportunity costs that stifle economic growth.

As McKinsey noted in a report entitled “[From facility to home: How healthcare could shift by 2025](#),” there is an estimated \$265 billion worth of care services (representing up to 25 percent of the total cost of care) for Medicare and Medicare Advantage beneficiaries that could shift from traditional facilities to the home by 2025. A lack of qualified and willing caregivers is essentially all that stands in the way of this extremely beneficial economic activity.

V. Conclusion

Thank you for the opportunity to submit these comments to the RFI. We share ETA’s goal of ensuring that the employment of more foreign workers through Schedule A reform does not adversely affect the wages and working conditions of U.S. workers.

We strongly believe that updating ETA’s list of Schedule A occupations would provide certainty, predictability, and regulatory relief to eligible visa beneficiaries and employers hiring in occupations where job vacancies are chronically high. A new, quantitatively compiled Schedule A could also serve as a holistic way for the federal government to monitor and diagnose labor supply gaps and market shortages. With this new data, the federal government could better target its funding of workforce training programs, educational programs, and similar initiatives.⁷ Most importantly, an updated Schedule A list would make the lives of the millions of citizens (and their families) who rely on home care every day healthier, easier, and more fulfilling. Americans have made it clear that they wish to remain in their homes as they age and receive care. They deserve a robust, well-trained workforce that supports them in that goal.

Sincerely,

x/Eric M. Reinerman

Vice President, Government Relations
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⁷ Stephanie Ferguson, “[Understanding America’s Labor Shortage](#),” U.S. Chamber of Commerce (August 10, 2023); “[2.1 Million Manufacturing Jobs Could Go Unfilled By 2030](#),” National Association of Manufacturers (May 4, 2021); Anneken Tappe and Allison Morrow, “[Three key numbers that explain America’s labor shortage](#),” CNN Business (December 25, 2021); and “[Workforce Participation Shortages](#),” National Conference of State Legislatures, last updated March 23, 2022.