

119TH CONGRESS  
1ST SESSION

# S. 2076

To provide for an emergency increase in Federal funding to State Medicaid programs for expenditures on home and community-based services.

---

## IN THE SENATE OF THE UNITED STATES

JUNE 12, 2025

Mr. LUJÁN (for himself, Mr. KAINE, Mr. HEINRICH, Mr. FETTERMAN, Mr. MERKLEY, Ms. WARREN, Ms. SMITH, Ms. KLOBUCHAR, Ms. DUCKWORTH, Mrs. GILLIBRAND, Mr. BOOKER, Mr. BLUMENTHAL, Mr. REED, Mr. WELCH, Ms. BALDWIN, Mr. VAN HOLLEN, and Mr. WYDEN) introduced the following bill; which was read twice and referred to the Committee on Finance

---

## A BILL

To provide for an emergency increase in Federal funding to State Medicaid programs for expenditures on home and community-based services.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “HCBS Relief Act of  
5 2025”.

6 **SEC. 2. ADDITIONAL SUPPORT FOR MEDICAID HOME AND**  
7 **COMMUNITY-BASED SERVICES.**

8 (a) INCREASED FMAP.—

1           (1) IN GENERAL.—Notwithstanding section  
2           1905(b) of the Social Security Act (42 U.S.C.  
3           1396d(b)), in the case of an HCBS program State,  
4           the Federal medical assistance percentage deter-  
5           mined for the State under section 1905(b) of such  
6           Act and, if applicable, increased under subsection  
7           (y), (z), or (aa) of section 1905 of such Act (42  
8           U.S.C. 1396d), or section 1915(k) of such Act (42  
9           U.S.C. 1396n(k)), shall be increased by 10 percent-  
10          age points with respect to expenditures of the State  
11          under the State Medicaid program for home and  
12          community-based services that are provided during  
13          fiscal years 2026 and 2027. In no case may the ap-  
14          plication of the previous sentence result in the Fed-  
15          eral medical assistance percentage determined for a  
16          State being more than 95 percent.

17           (2) DEFINITIONS.—In this section:

18           (A) HCBS PROGRAM STATE.—The term  
19           “HCBS program State” means a State that  
20           meets the condition described in subsection (b)  
21           by submitting an application described in such  
22           subsection, which is approved by the Secretary  
23           pursuant to subsection (c).

1 (B) HOME AND COMMUNITY-BASED SERV-  
2 ICES.—The term “home and community-based  
3 services” means—

4 (i) home health care services author-  
5 ized under paragraph (7) of section  
6 1905(a) of the Social Security Act (42  
7 U.S.C. 1396d(a));

8 (ii) behavioral health services author-  
9 ized under paragraph (13) of such section;

10 (iii) personal care services authorized  
11 under paragraph (24) of such section;

12 (iv) PACE services authorized under  
13 paragraph (26) of such section;

14 (v) services authorized under sub-  
15 sections (b), (c), (i), (j), and (k) of section  
16 1915 of such Act (42 U.S.C. 1396n);

17 (vi) such services authorized under a  
18 waiver under section 1115 of such Act (42  
19 U.S.C. 1315); and

20 (vii) such other services specified by  
21 the Secretary.

22 (b) CONDITION.—The condition described in this sub-  
23 section, with respect to a State, is that the State submits  
24 an application to the Secretary, at such time and in such  
25 manner as specified by the Secretary, that includes, in ad-

1 dition to such other information as the Secretary shall re-  
2 quire—

3 (1) a description of which activities described in  
4 subsection (d) that a State plans to implement and  
5 a description of how it plans to implement such ac-  
6 tivities;

7 (2) assurances that all Federal funds attrib-  
8 utable to the increase under subsection (a) will be—

9 (A) expended by the State in accordance  
10 with this section not later than September 30,  
11 2029; and

12 (B) used—

13 (i) to implement the activities de-  
14 scribed in subsection (d);

15 (ii) to supplement, and not supplant,  
16 the level of State funds expended for home  
17 and community-based services for eligible  
18 individuals through programs in effect as  
19 of the date of the enactment of this sec-  
20 tion; and

21 (iii) to increase reimbursement rates  
22 for home and community-based services to  
23 a level that will support recruitment and  
24 retention of a sufficient workforce to pro-

1           vide home and community-based services  
2           to eligible individuals; and

3           (3) assurances that the State will conduct ade-  
4           quate oversight and ensure the validity of such data  
5           as may be required by the Secretary.

6           (c) APPROVAL OF APPLICATION.—Not later than 90  
7           days after the date of submission of an application of a  
8           State under subsection (b), the Secretary shall certify if  
9           the application is complete. Upon certification that an ap-  
10          plication of a State is complete, the application shall be  
11          deemed to be approved for purposes of this section.

12          (d) ACTIVITIES TO IMPROVE THE DELIVERY OF  
13          HCBS.—

14               (1) IN GENERAL.—A State shall work with  
15               community partners, such as Area Agencies on  
16               Aging, Centers for Independent Living, non-profit  
17               home and community-based services providers, and  
18               other entities providing home and community-based  
19               services, to implement the purposes described in  
20               paragraph (2).

21               (2) FOCUSED AREAS OF HCBS IMPROVE-  
22               MENT.—The purposes described in this paragraph,  
23               with respect to a State, are the following:

24                       (A) To increase rates for home health  
25                       agencies and agencies that employ direct sup-

1 port professionals (including independent pro-  
2 viders in a self-directed or consumer-directed  
3 model) to provide home and community-based  
4 services under the State Medicaid program,  
5 provided that any agency or individual that re-  
6 ceives payment under such an increased rate in-  
7 creases the compensation it pays its home  
8 health workers or direct support professionals.

9 (B) To provide paid sick leave, paid family  
10 leave, and paid medical leave for home health  
11 workers and direct support professionals.

12 (C) To provide hazard pay, overtime pay,  
13 and shift differential pay for home health work-  
14 ers and direct support professionals.

15 (D) To improve stability of home health  
16 worker and direct support professional jobs, in-  
17 cluding consistent hours, scheduling, pay, and  
18 benefit eligibility.

19 (E) To provide home and community-based  
20 services to eligible individuals who are on wait-  
21 ing lists for programs approved under sections  
22 1115 or 1915 of the Social Security Act (42  
23 U.S.C. 1315, 1396n).

24 (F) To purchase emergency supplies and  
25 equipment, which may include items not typi-

1 cally covered under the Medicaid program, such  
2 as personal protective equipment, necessary to  
3 enhance access to services and to protect the  
4 health and well-being of home health workers  
5 and direct support professionals.

6 (G) To pay for the travel of home health  
7 workers and direct support professionals to con-  
8 duct home and community-based services.

9 (H) To recruit new home health workers  
10 and direct support professionals.

11 (I) To support family care providers of eli-  
12 gible individuals with needed supplies, equip-  
13 ment, and services, which may include such  
14 items as family caregiver pay and respite serv-  
15 ices.

16 (J) To pay for training for home health  
17 workers and direct support professionals.

18 (K) To pay for assistive technologies, staff-  
19 ing, and training to facilitate eligible individ-  
20 uals' communication, and other costs incurred  
21 in order to facilitate community integration and  
22 ensure an individual's person-centered service  
23 plan continues to be fully implemented.

24 (L) To prepare information and public  
25 health and educational materials in accessible

1 formats (including formats accessible to people  
2 with low literacy or intellectual disabilities)  
3 about prevention, treatment, recovery and other  
4 aspects of communicable diseases and threats to  
5 the health of eligible individuals, their families,  
6 and the general community served by agencies  
7 described in subparagraph (A).

8 (M) To protect the health and safety of  
9 home health workers and direct support profes-  
10 sionals during public health emergencies and  
11 natural disasters.

12 (N) To pay for interpreters to assist in  
13 providing home and community-based services  
14 to eligible individuals and to inform the general  
15 public about communicable diseases and other  
16 public health threats.

17 (O) To allow day services providers to pro-  
18 vide home and community-based services.

19 (P) To pay for other expenses deemed ap-  
20 propriate by the Secretary to enhance, expand,  
21 or strengthen Home and Community-Based  
22 Services, including retainer payments, and ex-  
23 penses which meet the criteria of the home and  
24 community-based settings rule published on  
25 January 16, 2014.

1           (Q) To assist eligible individuals who had  
2 to relocate to a nursing facility or institutional  
3 setting from their homes in—

4           (i) moving back to their homes (in-  
5 cluding by paying for moving costs, first  
6 month's rent, and other one-time expenses  
7 and start-up costs);

8           (ii) resuming home and community-  
9 based services;

10          (iii) receiving mental health services  
11 and necessary rehabilitative service to re-  
12 gain skills lost while relocated; and

13          (iv) while funds attributable to the in-  
14 creased FMAP under this section remain  
15 available, continuing home and community-  
16 based services for eligible individuals who  
17 were served from a waiting list for such  
18 services during the emergency period de-  
19 scribed in section 1135(g)(1)(B) of the So-  
20 cial Security Act (42 U.S.C. 1320b-  
21 5(g)(1)(B)).

22       (e) REPORTING REQUIREMENTS.—

23           (1) STATE REPORTING REQUIREMENTS.—Not  
24 later than December 31, 2029, any State with re-  
25 spect to which an application is approved by the Sec-

1       retary pursuant to subsection (c) shall submit a re-  
2       port to the Secretary that contains the following in-  
3       formation:

4               (A) Activities and programs that were  
5       funded using Federal funds attributable to such  
6       increase.

7               (B) The number of eligible individuals who  
8       were served by such activities and programs.

9               (C) The number of eligible individuals who  
10      were able to resume home and community-  
11      based services as a result of such activities and  
12      programs.

13       (2) HHS EVALUATION.—

14              (A) IN GENERAL.—The Secretary shall  
15      evaluate the implementation and outcomes of  
16      this section in the aggregate using an external  
17      evaluator with experience evaluating home and  
18      community-based services, disability programs,  
19      and older adult programs.

20              (B) EVALUATION CRITERIA.—For pur-  
21      poses of subparagraph (A), the external eval-  
22      uator shall—

23                      (i) document and evaluate changes in  
24      access, availability, and quality of home

1 and community-based services in each  
2 HCBS program State;

3 (ii) document and evaluate aggregate  
4 changes in access, availability, and quality  
5 of home and community-based services  
6 across all such States; and

7 (iii) evaluate the implementation and  
8 outcomes of this section based on—

9 (I) the impact of this section on  
10 increasing funding for home and com-  
11 munity-based services;

12 (II) the impact of this section on  
13 achieving targeted access, availability,  
14 and quality of home and community-  
15 based services; and

16 (III) promising practices identi-  
17 fied by activities conducted pursuant  
18 to subsection (d) that increase access  
19 to, availability of, and quality of home  
20 and community-based services.

21 (C) DISSEMINATION OF EVALUATION FIND-  
22 INGS.—The Secretary shall—

23 (i) disseminate the findings from the  
24 evaluations conducted under this para-  
25 graph to—

1 (I) all State Medicaid directors;  
2 and

3 (II) the Committee on Energy  
4 and Commerce of the House of Rep-  
5 resentatives, the Committee on Fi-  
6 nance of the Senate, and the Special  
7 Committee on Aging of the Senate;  
8 and

9 (ii) make all evaluation findings pub-  
10 licly available in an accessible electronic  
11 format and any other accessible format de-  
12 termined appropriate by the Secretary.

13 (D) OVERSIGHT.—Each State with respect  
14 to which an application is approved by the Sec-  
15 retary pursuant to subsection (c) shall ensure  
16 adequate oversight of the expenditure of Fed-  
17 eral funds pursuant to such increase in accord-  
18 ance with the Medicaid regulations, including  
19 section 1115 and 1915 waiver regulations and  
20 special terms and conditions for any relevant  
21 waiver or grant program.

22 (3) NON-APPLICATION OF THE PAPERWORK RE-  
23 DUCATION ACT.—Chapter 35 of title 44, United  
24 States Code (commonly referred to as the “Paper-

1 work Reduction Act of 1995”), shall not apply to the  
2 provisions of this subsection.

3 (f) ADDITIONAL DEFINITIONS.—In this section:

4 (1) ELIGIBLE INDIVIDUAL.—The term “eligible  
5 individual” means an individual who is eligible for or  
6 enrolled for medical assistance under a State Med-  
7 icaid program.

8 (2) MEDICAID PROGRAM.—The term “Medicaid  
9 program” means, with respect to a State, the State  
10 program under title XIX of the Social Security Act  
11 (42 U.S.C. 1396 et seq.) (including any waiver or  
12 demonstration under such title or under section  
13 1115 of such Act (42 U.S.C. 1315) relating to such  
14 title).

15 (3) SECRETARY.—The term “Secretary” means  
16 the Secretary of Health and Human Services.

17 (4) STATE.—The term “State” has the mean-  
18 ing given such term for purposes of title XIX of the  
19 Social Security Act (42 U.S.C. 1396 et seq.).

○