



Health Workforce Projections: Nursing Assistants and Home Health Aides

KEY FINDING:

- Between 2014 and 2025 demand for nursing assistants and home health aides are both projected to grow by 34 percent.

This fact sheet presents the national demand projections for nursing assistants and home health aides for 2014 through 2025 using HRSA's Health Workforce Simulation Model (HWSM).¹

Supply projections are not included due to the lack of sufficient data to provide reliable estimates of nursing assistant and home health aide future supply. While the nuances of modeling using the HWSM differ for individual health professions, the basic framework remains the same.

For demand modeling, the major components include population demographics, health care use patterns (including the influence of increased insurance coverage), and demand for health care providers. The model assumes that current national patterns of service demand remain unchanged within each demographic group.² These projections do not account for the geographical distribution of providers, which may impact access to care in certain communities.

BACKGROUND

Nursing assistants and home health aides are two occupations in what is commonly referred to as the "direct care workforce." These two occupations together represent the largest group of workers in the long-term care workforce. The Bureau of Labor Statistics estimates that nursing assistants and home health aides are among the top ten occupations with the most job growth in the United States.³

Nursing assistants provide or assist with basic care under the direction of on-site licensed nursing staff. They perform duties such as monitoring health status and providing assistance with activities of daily living (e.g., feeding, bathing, toileting, or ambulation) for patients in a long-term care facility. Nursing assistants must complete a state-approved educational program and become certified by their state.

Home health aides provide assistance with activities of daily living, routine health care tasks (such as changing bandages or dressing wounds), and monitoring the health status of individual with disabilities

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¹ This model uses a micro-simulation approach demand for health care services is simulated for a representative sample of the current and future U.S. population based on each person's demographic and socioeconomic characteristics, health-related behavior, and health risk factors that affect their health care utilization patterns. For more information on data and methods, please see <http://bhw.hrsa.gov/healthworkforce/supplydemand/simulationmodeldocumentation.pdf>

² Ono T, Lafortune G, Schoenstein M. "Health workforce planning in OECD countries: a review of 26 projection models from 18 countries." OECD Health Working Papers, No. 62. France: OECD Publishing; 2013:8-11.

³ www.bls.gov/news.release/ecopro.t06.htm Accessed August 31, 2016.

and/or illness in home and community-based settings. They may also help with tasks such as preparing meals or doing light housekeeping and laundry, depending on the patient's abilities. They work under the direction of off-site or intermittent on-site licensed nursing staff. There are no formal education requirements for home health aides, but most have a high school diploma. Home health aides working in certified home health or hospice agencies must get formal training and pass a standardized test.

FINDINGS

There were approximately 1.22 million nursing assistants and 704,500 home health aides nationally in 2014. Demand for nursing assistants and home health aides are both projected to grow by 34 percent between 2014 and 2025 (Exhibit 1).⁴

Exhibit 1. Estimated Demand: Nursing Assistants & Home Health Aides in the United States, 2014–2025

	Nursing Assistants	Home Health Aides
<i>Demand</i>		
Estimated demand, 2014	1,219,500	704,500
Total demand growth, 2014-2025:	414,700 (34%)	240,000 (34%)
<i>Changing demographics impact</i>	411,100	238,400
<i>Increased insurance coverage impact</i>	3,600	1,600
Projected demand, 2025	1,634,200	944,500

Demand projections from the HWSM account for the implementation of health system reform and the resulting increase in the number of Americans with health insurance. However, for the occupations discussed here, the increased insurance expansion had minimal impact because these workers primarily serve older individuals who are already covered by Medicare. As such, almost all of the demand growth projected for nursing assistants and home health aides is associated with changing demographics.

The analysis takes into account projected growth in nursing home and residential care stays, hospital visits, and other services provided by nursing assistants, and projected growth in home health visits that involve an aide. With the elderly population expected to continue expanding in coming years, there is high projected growth in demand for nursing home, residential care, hospitals, and other care delivery settings where nursing assistants are employed. If the use and delivery patterns for long-term care continue to emphasize home health services, there will also be high projected demand for home health aides. Future growth in demand for home health services will be driven more by changes in Medicare policy and reimbursement rates than simply by expansion of the aging population.

⁴ The Bureau of Labor Statistics (BLS) estimates that between 2014 and 2024, the number of jobs for nursing assistants and home health aides is projected to grow by 18 percent and 38 percent respectively. These BLS estimates are based on job growth, whereas the HRSA estimates provider requirements based on population characteristics and current service utilization patterns. The variances in these estimates are attributed to the basic differences between a sector specific (HRSA) model, and a macro (BLS) model. The HRSA model holds constant current occupational staffing ratios in person hours and projects staffing requirements based on service utilization. The BLS model projects growth in the industries that employ nursing assistants and home health workers and anticipates a slower growth in employment in hospitals, nursing facilities and other industries that employ nursing assistants. For a full exposition of the BLS model please see: http://www.bls.gov/emp/ep_projections_methods.htm