

Residential Care Community Resident Characteristics: United States, 2022

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Key findings

Data from the National Post-acute and Long-term Care Study

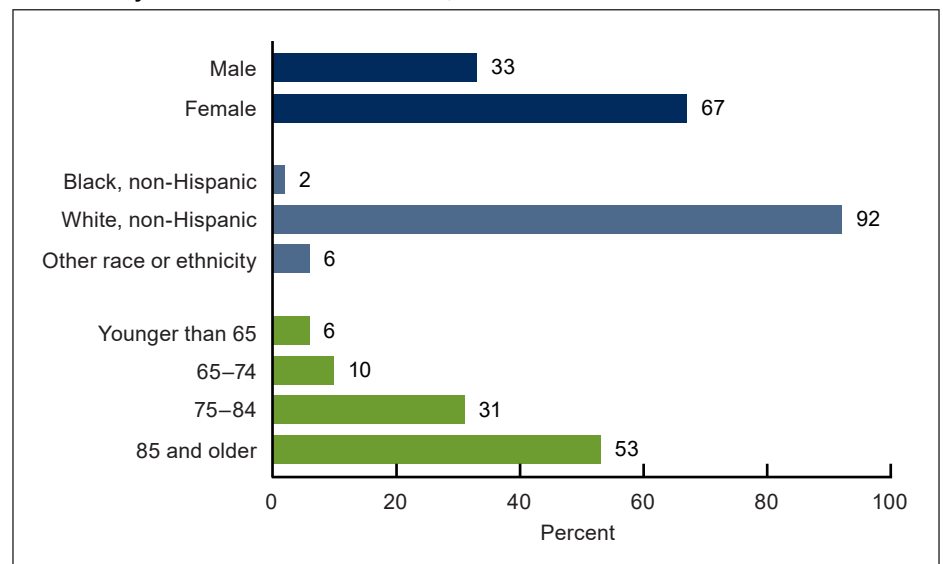
- In 2022, most residential care community residents were female (67%), White non-Hispanic (92%), and age 85 and older (53%).
- About 17% of residential care community residents were Medicaid beneficiaries, and the percentage of residents with Medicaid varied by age.
- Among residential care community residents, 75% needed assistance with bathing, 71% needed assistance with walking, and 62% needed assistance with three or more activities of daily living.
- Among residential care community residents, about three in five had a diagnosis of high blood pressure and about two in five had a diagnosis of Alzheimer disease or other dementias.

Residential care communities provide housing for people who cannot live independently but generally do not require the skilled care provided by nursing homes. In 2022, on a given day, about 1,016,400 residents lived in residential care communities (1). With the aging of the U.S. population, the number of residential care community residents will likely increase, becoming a substantial segment of the long-term care population. This report presents national estimates of selected characteristics of residential care community residents in 2022.

In 2022, most residential care community residents were female, White non-Hispanic, and age 85 and older.

- Residential care community residents were 67% female and 33% male (Figure 1, Table 1).

Figure 1. Sex, race and ethnicity, and age group of residential care community residents: United States, 2022



NOTES: Other race or ethnicity includes Hispanic, Latino, or Spanish origin or descent; American Indian and Alaska Native non-Hispanic; Asian non-Hispanic; Native Hawaiian or Other Pacific Islander non-Hispanic; non-Hispanic people of more than one race; and non-Hispanic people of unknown race. Figure excludes cases with missing data. See the "Data source and methods" section of this report for details.

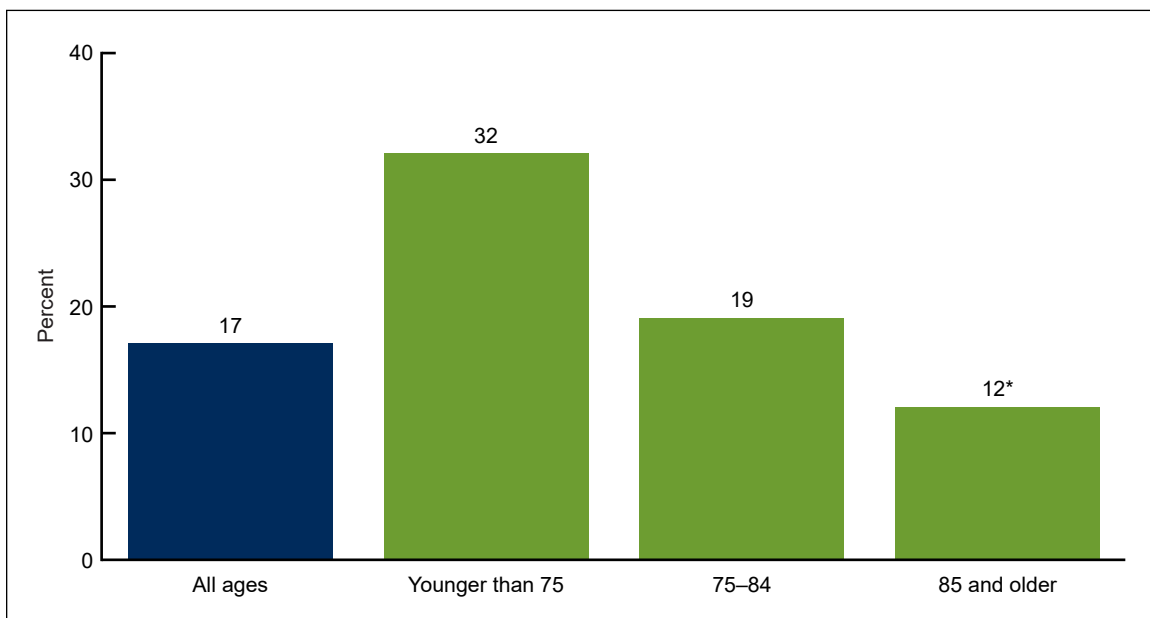
SOURCE: National Center for Health Statistics, 2022 National Post-acute and Long-term Care Study.

- Among residential care community residents, 92% were White non-Hispanic (subsequently, White), about 2% were Black non-Hispanic, and about 6% were of another race or Hispanic origin.
- Most residential care community residents were age 85 and older (53%), 31% were ages 75–84, 10% were ages 65–74, and 6% were younger than age 65.

Almost 2 in 10 residential care community residents were Medicaid beneficiaries, and the percentage of residents with Medicaid varied by age.

- About 17% of residential care community residents were Medicaid beneficiaries (Figure 2, Table 2).
- By age, about 32% of residents younger than age 75, 19% of residents ages 75–84, and 12% of residents age 85 and older were Medicaid beneficiaries (this estimate did not meet National Center for Health Statistics standards of reliability).

Figure 2. Percentage of residential care community residents with Medicaid, overall and by age group: United States, 2022



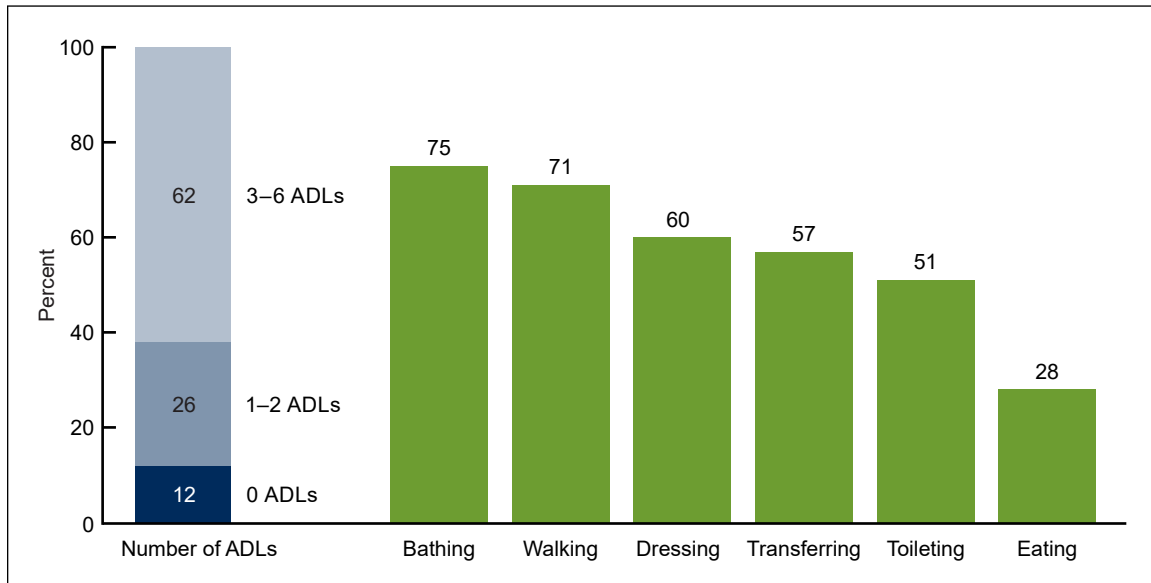
* Estimate does not meet National Center for Health Statistics standards of reliability.
 NOTES: Medicaid includes residents who had some or all of their long-term care services paid by Medicaid during the 30 days before the interview. Figure excludes cases with missing data. See the "Data source and methods" section of this report for details.
 SOURCE: National Center for Health Statistics, 2022 National Post-acute and Long-term Care Study.

Residential care community residents needed the most assistance with bathing and walking, and almost two-thirds needed assistance with three or more activities of daily living.

- Among residential care community residents, 62% needed assistance with three or more activities of daily living, 26% needed assistance with one or two activities of daily living, and 12% did not need assistance with any activities of daily living (Figure 3, Table 3).

- Residential care community residents needed assistance with bathing (75%), walking (71%), dressing (60%), transferring in and out of a bed or chair (57%), toileting (51%), and eating (28%).

Figure 3. Percentage of residential care community residents needing assistance with activities of daily living: United States, 2022



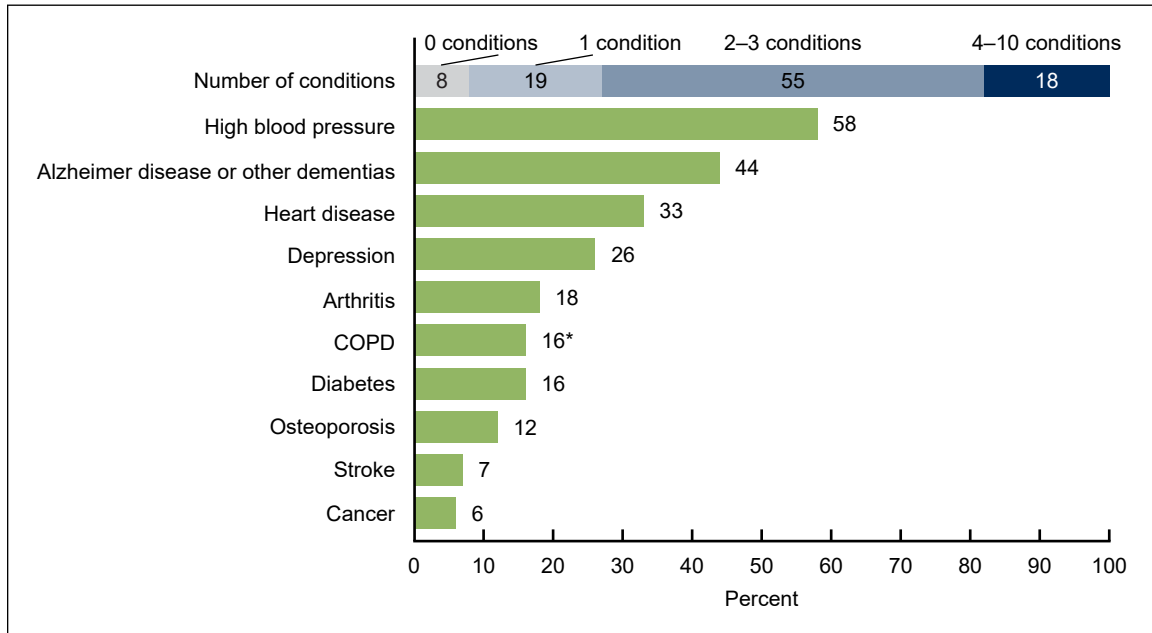
NOTES: Activities of daily living (ADLs) refers to residents needing any help or supervision from another person, use of assistive devices, or both. Walking includes using a cane, walker, or wheelchair, or help from another person. Transferring includes needing assistance getting in and out of a bed or chair. Individual ADLs are not mutually exclusive; a resident can be counted in more than one ADL. Figure excludes cases with missing data. See the "Data source and methods" section of this report for details.

SOURCE: National Center for Health Statistics, 2022 National Post-acute and Long-term Care Study.

About 6 in 10 residential care community residents had ever been diagnosed with high blood pressure, and about 4 in 10 had ever been diagnosed with Alzheimer disease or other dementias.

- About 18% of residential care community residents had ever been diagnosed with 4–10 of the 10 most common chronic conditions (Figure 4, Table 4).
- Among residents, 55% had ever been diagnosed with two or three of the most common chronic conditions, 19% had ever been diagnosed with one of these conditions, and the remaining 8% had never been diagnosed with any of these conditions.
- The 10 most frequently observed chronic conditions among residential care community residents were high blood pressure (58%), Alzheimer disease or other dementias (44%), heart disease (33%), depression (26%), arthritis (18%), chronic obstructive pulmonary disease (chronic bronchitis or emphysema) (16%), diabetes (16%), osteoporosis (12%), stroke (7%), and cancer (6%).

Figure 4. Percentage of selected chronic conditions of residential care community residents: United States, 2022



* Estimate does not meet National Center for Health Statistics standards of reliability.
 NOTES: Heart disease includes conditions such as congestive heart failure, coronary or ischemic, and heart attack. COPD is chronic obstructive pulmonary disease (chronic bronchitis and emphysema). Individual conditions are not mutually exclusive; a resident can be counted in more than one condition. Figure excludes cases with missing data. See the "Data source and methods" section of this report for details.
 SOURCE: National Center for Health Statistics, 2022 National Post-acute and Long-term Care Study.

Summary

In the United States in 2022, the resident population living in residential care communities were mostly female (67%), White (92%), and age 85 and older (53%). Overall, 17% of residential care community residents were Medicaid beneficiaries, and residents younger than age 75 made up the largest percentage of Medicaid beneficiaries (32%). The most common activities of daily living that residential care community residents needed assistance with were bathing (75%) and walking (71%). A substantial percentage of residential care community residents had been diagnosed with high blood pressure (58%), Alzheimer disease or other dementias (44%), and heart disease (33%).

This report presents the most current national estimates of selected characteristics of residents in residential care communities. This brief profile of residential care community residents provides information to policy makers, providers, researchers, and consumer advocates as they plan how to best meet the needs of an aging population.

Definitions

Assistance with selected activities of daily living: Refers to residents needing any help or supervision from another person, use of assistive devices, or both, with limitations in up to six activities of daily living (bathing; walking, including using a cane, walker, or wheelchair, or help from another person; dressing; transferring in and out of a bed or chair; toileting; and eating) that reflect a resident’s capacity for self-care.

Heart disease: Includes conditions such as congestive heart failure and coronary or ischemic heart attack.

Medicaid beneficiaries: Refers to residents who had some or all of their long-term care services paid by Medicaid during the 30 days before the interview.

Race and ethnicity: Based on responses to two questions that determine Hispanic or Latino origin and race. Three categories were constructed from these questions: White non-Hispanic, Black non-Hispanic, and Other race or ethnicity. Other race or ethnicity includes people of Hispanic, Latino, or Spanish origin or descent; American Indian and Alaska Native non-Hispanic; Asian non-Hispanic; Native Hawaiian or Other Pacific Islander non-Hispanic; non-Hispanic people of more than one race; and non-Hispanic people of unknown race.

Residential care communities: Includes assisted living communities and other residential care communities (for example, personal care homes, adult care homes, board care homes, or adult foster care) that meet the study eligibility criteria. More details about the study eligibility criteria are available from https://www.cdc.gov/nchs/npals/questionnaires/#cdc_listing_res3-2022 and in the survey methodology document (1).

Data source and methods

Data for this report are from the residential care community survey component of the 2022 wave of the biennial National Post-acute and Long-term Care Study, conducted by the National Center for Health Statistics. To be eligible for the study, a residential care community must:

1. Be regulated by the state to provide room and board with at least two meals a day, around-the-clock on-site supervision, and help with personal care such as bathing and dressing or with health-related services such as medication management
2. Have four or more licensed, certified, or registered beds
3. Have at least one resident currently living in the community at the time of the survey
4. Serve a predominantly adult population

The survey used a sample of residential care community residents selected from a stratified sample of residential care communities, obtained from a frame that was constructed from lists of licensed residential care communities acquired from the state licensing agencies in each of the 50 states and the District of Columbia. More details about the National Post-acute and Long-term Care Study, including eligibility criteria, design, and outcomes, are available online from https://www.cdc.gov/nchs/npals/questionnaires/#cdc_listing_res3-2022 and in the survey methodology document (1).

The percentage of cases with missing data for variables in this report ranged from 0.4% for needing assistance with transferring, eating, dressing, and bathing to 1.6% for needing assistance with walking. These cases were excluded from the analyses on a variable-by-variable basis. Data analyses were performed using SAS version 9.4 (2), SAS-callable SUDAAN version 11.0.0 (3), and Stata/SE version 17 (4). Analyses accounted for complex survey design of the study, included complex survey weights, and used appropriate subsetting techniques. All estimates presented in

this report meet National Center for Health Statistics guidelines for reliability of proportions (5) and confidentiality unless indicated otherwise.

About the authors

Amanuel Melekin, Manisha Sengupta, and Christine Caffrey are with the National Center for Health Statistics, Division of Health Care Statistics.

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Figure tables

Data table for Figure 1. Sex, race and ethnicity, and age group of residential care community residents: United States, 2022

Characteristic	Percent (95% confidence interval)	Standard error
Sex		
Male.....	33.1 (28.2–38.2)	2.5
Female.....	66.9 (61.8–71.8)	2.5
Race and ethnicity		
Black, non-Hispanic.....	1.65 (3.8–10.2)	0.5
White, non-Hispanic.....	91.87 (88–94.8)	1.6
Other race and ethnicity.....	6.48 (0.8–3.1)	1.5
Age group		
Younger than 65.....	5.76 (2.9–10.2)	1.7
65–74.....	10.2 (7.3–13.7)	1.6
75–84.....	31.21 (26.1–36.7)	2.6
85 and older.....	52.83 (48–57.6)	2.4

NOTES: Other race and ethnicity includes Hispanic, Latino, or Spanish origin or descent; American Indian and Alaska Native non-Hispanic; Asian non-Hispanic; Native Hawaiian or Other Pacific Islander non-Hispanic; non-Hispanic people of more than one race; and non-Hispanic people of unknown race. Figure excludes cases with missing data. See the "Data sources and methods" section of this report for details.

SOURCE: National Center for Health Statistics, 2022 National Post-acute and Long-term Care Study.

Data table for Figure 2. Percentage of residential care community residents with Medicaid, overall and by age group: United States, 2022

Age group	Percent (95% confidence interval)	Standard error
All age groups	16.9 (11.3–23.9)	3.1
Younger than 75	31.5 (18.8–46.6)	6.7
75–84.	18.7 (10.6–29.3)	4.4
85 and older.	11.7* (3.2–26.7)	5.3

* Estimate does not meet National Center for Health Statistics standards of reliability.
 NOTES: Medicaid includes residents who had some or all of their long-term care services paid by Medicaid during the 30 days before the interview. Figure excludes cases with missing data. See the "Data sources and methods" section of this report for details.

SOURCE: National Center for Health Statistics, 2022 National Post-acute and Long-term Care Study.

Data table for Figure 3. Percentage of residential care community residents needing assistance with activities of daily living: United States, 2022

Characteristic	Percent (95% confidence interval)	Standard error
Number of ADLs		
0.	11.9 (8.1–16.8)	2.1
1–2.	26.4 (19.3–34.4)	3.7
3–6.	61.7 (52.7–70.1)	4.3
ADL		
Bathing	74.5 (67.8–80.5)	3.1
Walking	70.9 (63.6–77.5)	3.4
Dressing	60.4 (52.7–67.7)	3.7
Transferring	56.8 (47.7–65.6)	4.4
Toileting	50.8 (42.3–59.2)	4.2
Eating	28.2 (19.2–38.7)	4.7

NOTES: Activities of daily living (ADL) refers to residents needing any help or supervision from another person, use of assistive devices, or both. Walking includes using a cane, walker, or wheelchair, or help from another person. Transferring includes needing assistance getting in and out of a bed or chair. Individual ADLs are not mutually exclusive; a resident can be counted in more than one ADL. Figure excludes cases with missing data. See the "Data sources and methods" section of this report for details.

SOURCE: National Center for Health Statistics, 2022 National Post-acute and Long-term Care Study.

Data table for Figure 4. Percentage of selected chronic conditions among residential care community residents: United States, 2022

Characteristic	Percent (95% confidence interval)	Standard error
Number of conditions		
0.....	8.2 (5.8–11.1)	1.3
1.....	19.4 (14.3–25.4)	2.7
2–3.....	54.6 (46.8–62.2)	3.8
4–10.....	17.8 (12.9–23.7)	2.6
Condition		
High blood pressure.....	58.3 (52.2–64.3)	3.0
Alzheimer disease or other dementias.....	44.1 (35.4–53.1)	4.3
Heart disease.....	33.3 (28–38.9)	2.7
Depression.....	26.0 (20.4–32.2)	2.9
Arthritis.....	18.1 (12.7–24.5)	2.9
COPD.....	16.4* (7.3–29.6)	5.2
Diabetes.....	16.0 (12.2–20.4)	2.0
Osteoporosis.....	11.9 (8.1–16.7)	2.1
Stroke.....	7.0 (4.1–11.0)	1.7
Cancer.....	6.1 (3.8–9.1)	1.3

* Estimate does not meet National Center for Health Statistics standards of reliability.

NOTE: Heart disease includes conditions such as congestive heart failure, coronary or ischemic, and heart attack. COPD is chronic obstructive pulmonary disease (chronic bronchitis or emphysema). Individual conditions are not mutually exclusive; a resident can be counted in more than one condition. Figure excludes cases with missing data. See the "Data sources and methods" section of this report for details.

SOURCE: National Center for Health Statistics, 2022 National Post-acute and Long-term Care Study.

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NCHS Data Brief ■ No. 506 ■ August 2024

Keywords: assisted living • activities of daily living • chronic conditions • long-term services and supports • National Post-acute and Long-term Care Study

Suggested citation

Melekin A, Sengupta M, Caffrey C. Residential care community resident characteristics: United States, 2022. NCHS Data Brief, no 506. Hyattsville, MD: National Center for Health Statistics. 2024. DOI: <https://dx.doi.org/10.15620/cdc/158327>.

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ISSN 1941–4927 Print ed.
ISSN 1941–4935 Online ed.

CS350696