LONG TERM CARE
COMMUNITY COALITION
Advancing Quality, Dignity & Justice

LTCCC RESOURCE GUIDE: COMMUNITY LIVING & DISABILITY INTEGRATION

WHAT DOJ'S 2026 POLICY CHANGE MEANS FOR PEOPLE LIVING WITH DISABILITIES, RESIDENTS, AND FAMILIES

The Americans with Disabilities Act (ADA) was enacted to combat discrimination, including the longstanding isolation and segregation of people with disabilities. In 1999, the U.S. Supreme Court's *Olmstead* decision recognized that unjustified institutionalization can be a form of disability discrimination and affirmed that public services should be provided in the most integrated setting appropriate to a person's needs. Together, the ADA and *Olmstead* have helped move public policy toward supporting people with disabilities to live and receive services in homes and communities rather than institutions.

That promise remains powerful, but it has not been fully realized. More than 25 years after *Olmstead*, many people who want and could benefit from less institutional settings still face long waits, inadequate community services, housing barriers, weak transition planning, and systems that continue to rely on institutional care. Two documents released by the Department of Justice in the summer of 2026 put future progress at risk, because they signal a retreat from the federal government's prior approach to enforcing disability-integration protections. This guide explains what changed, what did not, and practical steps people can take to protect their choices and seek services in a less institutional setting when appropriate.

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Three Key Takeaways

1. **What *Olmstead* Says:** *Olmstead* held that unjustified institutionalization can violate the ADA. A state may be required to provide services in a community setting when community-based care is appropriate, the person does not oppose it, and the change can reasonably be made. *Olmstead* does not require every person to leave a facility.
2. **What DOJ Changed:** DOJ issued two documents that narrow its approach to disability-integration enforcement. A June 18, 2026 legal memorandum argues that *Olmstead* and federal disability laws have been interpreted too broadly. A July 20, 2026 notice states that DOJ will step back from some enforcement activity and will no longer rely on its earlier *Olmstead* guidance while that guidance is under review. These documents state DOJ's current position; they are ***not*** new laws or court decisions.
3. **What This May Mean for You:** With less federal enforcement, people seeking services in less institutional settings may need to rely more heavily on state appeals, the Long-Term Care Ombudsman Program, protection and advocacy agencies, disability-rights organizations, and legal services. Delays in assessments, home care, housing, equipment, provider searches, discharge planning, or appeals can prolong institutional placement or put health, housing, and caregivers at risk.

Understanding Settings and Services

Services may be provided in different settings. The appropriate option depends on the person's wishes, needs, and available supports. Labels alone (such as “assisted living”) do not always show how integrated or institutional a setting is; the actual degree of choice, autonomy, privacy, and access to community life are what matters.

Services in a home or community setting

May include home care, nursing, personal care, transportation, behavioral health care, equipment, housing assistance, or help moving from a facility.

Assisted living and similar residential settings

These settings are generally treated as home- and community-based services, but their level of choice, independence, and community integration can vary. Some assisted living settings provide a truly home-like environment wherein residents have choice, autonomy, and connections to the outside community. Others have policies, practices, and/or environments that are highly institutional.

Nursing homes and other facilities

Provide around-the-clock nursing, rehabilitation, or other institutional care. A person may need or choose this care, but should not be required to remain when their needs can be met in a less institutional setting with appropriate supports.

In this guide, “facility” includes a nursing home, psychiatric hospital, or other institution. “Less institutional setting” refers to a setting that offers greater choice, autonomy, privacy, and opportunity to participate in community life.

Important: This guide provides general information only. It does not provide legal advice or address every situation. Laws and procedures may vary by state and individual circumstances.

What Changed — and What Did Not

DOJ changed its enforcement position. It did not change the Supreme Court's *Olmstead* decision, applicable laws or regulations, or existing court orders.

WHAT CHANGED	WHAT DID NOT CHANGE
• DOJ says it will investigate fewer complaints involving denials of community-based care. • DOJ withdrew its earlier guidance describing how it enforced integration rights. • DOJ says it will bring fewer cases against state programs. • Federal enforcement may be more limited.	• The Supreme Court's *Olmstead* decision remains legal precedent. • Federal disability-integration regulations remain in effect unless changed by a court or through lawful rulemaking. • Existing court orders, settlement agreements, and consent decrees continue to apply. • People may still appeal decisions, file grievances, and seek legal relief.

Why This Matters

Olmstead implementation has always depended on more than a court decision. People need timely assessments, adequate services, accessible housing, informed choice, effective transition planning, and meaningful enforcement. The new DOJ position may make it harder to obtain federal intervention at a time when many of these barriers remain. Acting early and creating a clear written record may therefore be especially important.

The Individual's Choices Come First

Start With What You Want

Write down where and how you want to live and what support you need. Family members, guardians, providers, and clinicians may offer useful information, but their views do not replace your own. Request plain language, an interpreter, large print, sign language, or a communication device when needed.

A Facility Stay Is Not Always Inappropriate

You may need or choose care in a facility. You may also be able to live safely in a less institutional setting with appropriate support. The decision should reflect your needs and wishes. Ask what specific health or safety concern applies to you and what support could address it. A blanket statement such as "not safe" should not end the discussion.

Ask for a Clear, Written Decision

Ask what was denied, reduced, or delayed; why the decision was made; who made it; when it takes effect; and how to request review. General statements such as “there is a waiting list” or “it is not safe” do not explain what applies to you or what you can do next.

Could This Be Happening to You?

- You live in a nursing home and want to leave, but no one helps arrange housing, equipment, home care, or other support.
- You are ready to leave a hospital or institution but remain because services in a less institutional setting have not been arranged.
- Your services at home are reduced or stopped, placing you at risk of hospitalization or institutionalization.
- You are offered only a congregate or group setting even though you may be able to live more independently with appropriate support.
- You are placed on a waiting list without a date, service plan, provider search, or regular update.
- A program denies services using broad explanations such as “no staff,” “no money,” or “not safe,” without assessing your individual needs and possible supports.

Warning Signs

- No one has recently assessed the support you need.
- Your wishes are not documented or are replaced by someone else's wishes.
- You receive no written decision, reason, effective date, or review information.
- There is no provider search, transition plan, or date for reconsidering the case.
- Additional help is offered only if you enter or remain in a facility.
- Delays are affecting your health, housing, or safety, or the ability of others to continue helping you.

Do Not Wait for a Crisis

You do not have to wait until you enter a facility. Seek help when services are ending and hospitalization, homelessness, or institutionalization is becoming likely.

Questions to Ask

1. Where and how do I want to live?
2. What support could address my health or safety needs and make a less institutional setting workable?
3. What service or support is being denied, reduced, or delayed?
4. Why was the decision made, and what specific concern applies to me? Can I get the reason in writing?
5. What other services, providers, settings, or temporary options were considered?

6. How do I request review or appeal, and what is the deadline?

What You Can Do Now

- ☐ **Get the decision in writing.** Ask what is changing, why, when it takes effect, who decided, and how to request review.
- ☐ **Request key records.** These may include the latest assessment, care or service plan, discharge or transition plan, notices, and provider-search notes.
- ☐ **Keep a timeline.** Record missed services, health or safety changes, housing problems, caregiver strain, and any proposed move to a more institutional setting.
- ☐ **Track every deadline.** Reviews, Medicaid appeals, and civil-rights complaints may have different time limits. Filing one may not protect another deadline.
- ☐ **Ask what can happen while you wait.** Find out whether services can continue, temporary help is available, or an emergency review can be requested.
- ☐ **Seek help early.** Contact the state Protection and Advocacy agency, legal services, or an ombudsman before the situation becomes urgent.

Where to Seek Help

You may still file complaints with DOJ and HHS. However, because federal enforcement is less certain, do not wait for a federal response before pursuing an appeal, contacting an ombudsman, protection and advocacy agency, or seeking legal help. A federal complaint may create a useful record, but it may not lead to an investigation or relief.

State Protection & Advocacy (P&A) agency

Every state has a disability-rights P&A agency. It may provide information, advocacy, investigation, or legal assistance. Not every case is accepted.

Long-Term Care Ombudsman

Assists residents of nursing homes and certain other long-term care settings. Ombudsmen can help residents and their families understand their rights and advocate for the resident in accordance with their wishes and goals.

Legal services or a disability/Medicaid attorney

May assist with an appeal, Medicaid review, emergency request, negotiation, or lawsuit. Ask about deadlines and whether services can continue during review.

DOJ ADA complaint

DOJ continues to accept disability complaints, although its review of some community-service or institutional-placement complaints may be more limited.

HHS civil-rights complaint

HHS continues to accept complaints involving health and social-service programs that receive HHS funding. The June DOJ memorandum challenges HHS's community-integration rule, but the July DOJ notice did not itself change the HHS complaint process.

Urgent Situations

If services are about to end, discharge is proposed, or your housing, health, or safety is at risk, seek help promptly. Ask whether services can continue during an appeal and whether emergency assistance is available.

Remember

- Keep copies of notices and records. Write down dates, names, and what was said.
- Ask for information in a format you can understand and use.
- DOJ's 2026 documents did not automatically end your rights.
- This guide provides general information only. It does not provide legal advice or address every situation.

Legal sources: June 18 DOJ legal memorandum | July 20 DOJ notice | *Olmstead* v. L.C. | 28 C.F.R. § 35.130(d) | 45 C.F.R. § 84.76. Information reviewed August 21, 2026.

PUT THIS GUIDE INTO ACTION

Use the printable Resident Advocacy Sheet on the next page to clarify your goals, document barriers, identify what you are asking for, and plan your next steps.

PRINTABLE RESIDENT ADVOCACY SHEET

Use this page to clarify what you want, identify what is standing in the way, and plan your next step.

1. Your Goals

Where and how do you want to live?

_____

What matters most to you about that setting or living arrangement?

_____

What services or supports could help make that possible?

_____

2. Identify the Barrier

What service, support, or living option is being denied, reduced, delayed, or not offered?

_____

What reason were you given, and who gave it?

_____

Did you receive a written decision? ☐ Yes ☐ No ☐ I do not know

Ask for specifics. Statements such as "no staff," "no money," or "not safe" do not explain what applies to you, what options were considered, or what support might address the concern.

3. State What You Are Asking For

What do you want the agency, facility, program, or other decision-maker to do?

_____

_____

☐ Complete or update an assessment

☐ Provide or restore a service

☐ Explore additional providers or settings

☐ Develop or revise a transition plan

☐ Give the decision and reason in writing

☐ Explain review or appeal rights

☐ Continue services during review

☐ Consider temporary or emergency help

4. Plan the Next Step

NEXT ACTION: _____ **WHO WILL DO IT:** _____

NEXT DEADLINE: _____ **DATE TO CHECK AGAIN:** _____

Records or information to request: ☐ assessment ☐ care/service plan ☐ written decision ☐ transition plan ☐ provider-search records ☐ appeal instructions

5. Contact Notes

Date: _____ **Name/Agency:** _____

Notes: _____

Date: _____ **Name/Agency:** _____

Notes: _____

This sheet is for planning and recordkeeping. It does not provide legal advice.