



July 10, 2025

Jackson Keuler
Administrative Rules Officer
Department of Health Services Office of Legal Counsel
1 West Wilson Street, Room 651
Madison, WI 53701

Dear Jackson:

The Wisconsin Association for Home Health Care (WiAHC) is a statewide membership-based organization that represents the interests of home health care agencies and their employees, as well as promotes home health care as a high-quality, cost-effective health care option in Wisconsin. Home health care encompasses a wide range of care to treat an illness or injury provided by skilled practitioners, such as nurses and physical therapists, in a patient's home.

On behalf of WiAHC, I am writing to you to submit economic impact analysis comments related to the 2023 biennial review of administrative rules under s. 227.29, Stats. (Scope Statement 032-23). In particular, I am writing to you regarding the provision in the 2023 biennial review of administrative rules that removes DHS 133.05(2) from the state administrative code. This is an outdated administrative rule relating to professional advisory bodies for home health care agencies. Removing DHS 133.05(2) from the state administrative code would bring Wisconsin's regulations in line with federal regulations by eliminating professional advisory bodies but maintaining governing bodies along with regulatory oversight for ensuring the quality of care and patient safety.

WiAHC supports the removal of professional advisory bodies from DHS 133.05(2) of the state administrative code since federal regulations eliminated professional advisory committees in 2017 as home health agencies are already overseen by a governing body pursuant to federal regulations [Title 42, Part 484.105]. They are also overseen by governing bodies in Wisconsin administrative rules [DHS 133.05(1)]. In 2017, the Centers for Medicare & Medicaid Services (CMS) also put in place federal regulations requiring home health agencies to implement ongoing quality assessment and performance improvement (QAPI) programs [Title 42, Part 484.65]. Essentially, CMS replaced professional advisory committees in federal regulations with the creation of the QAPI program.

Under federal regulations, a home health agency's governing body oversees the agency's QAPI program. <u>Title 42, Part 484.65(e)</u> of federal regulations state: "The HHA's [home health agency's] governing body is responsible for ensuring the following:

- 1) That an ongoing program for quality improvement and patient safety is defined, implemented, and maintained.
- That the HHA-wide quality assessment and performance improvement efforts address priorities for improved quality of care and patient safety, and that all improvement actions are evaluated for effectiveness.
- 3) That clear expectations for patient safety are established, implemented, and maintained; and

4) That any findings of fraud or waste are appropriately addressed."

An additional professional advisory body is no longer needed in state administrative rules now that the federal government has eliminated professional advisory committees and required home health agencies to implement QAPI programs, which prioritize quality of care and patient safety. Consumer protections will still be in place, as governing bodies will continue to oversee QAPI programs.

The state administrative code requirement that each home health agency in Wisconsin must have a professional advisory body certainly has an economic impact on Wisconsin's home health agencies and their employees. We surveyed our home health agency members regarding professional advisory bodies and received the following information.

- How many hours of staff time does it generally take your home health agency to prepare for a professional advisory body meeting, assuming your agency holds one such meeting per year?
 - Our home health agency members informed us that it took them varying amounts of time to prepare for such meetings, ranging from 5 – 24 hours. However, most responses ranged between 10-20 hours.
- What are your agency's estimated costs to organize and carry out each professional advisory body meeting, including staff time, catering and attendee per diem (if applicable)?
 - Our home health agency members provided us with varied estimated costs, ranging from \$330 - \$4000.
- On average, how long do members of your professional advisory body serve?
 - Our home health agency members informed us that individuals remained as members
 of professional advisory bodies for varying amounts of time, ranging from 1 meeting/1
 year 15 years. However, the majority of the responses were within the 1-2 year range.
- Does your agency experience challenges in recruiting members of your professional advisory body? If so, please explain.
 - Nearly all respondents noted that they faced challenges in recruiting professional advisory body members. In particular, several respondents stated that they had to cancel meetings since some members – typically health care clinicians, who have busy schedules – had to cancel due to last-minute scheduling conflicts. Only one home health agency noted that recruitment was not a challenge for them.
 - One respondent stated, "Yes, it's often difficult to recruit outside professional attendees for advisory meetings to meet current body requirements and we have found this a struggle for years regardless of the different efforts and action plans we've put into place for this."
 - Another home health agency employee noted, "yes- due to being in rural areas and not affiliated with a hospital it is hard to find members. There is an abundance of time spent trying to find members each year that would like to join-specially a physician to meet the regulation."
- Has your agency received feedback from professional advisory body members regarding the value of such meetings? If so, please explain.
 - Generally speaking, responses either indicated that home health agencies did not receive such feedback or the feedback they received indicated that the meetings did not provide value to the agency.
 - One respondent stated, "They report there is no value to the meetings at all and that the 1 hour could be used better elsewhere."

Another home health agency employee noted, "Often members are frustrated as we cannot act on their suggestion's d/t [due to] regulatory requirements from CMS. It is an area of health care that has so many regulations that unless the person is very familiar with home care regulations it is difficult to give input that is meaningful."

Thank you for reviewing our organization's economic impact comments on the 2023 biennial review of administrative rules under s. 227.29, Stats. (Scope Statement 032-23). Should you have any further questions, do not hesitate to contact our Government Affairs Director, Tim Hoven, at tim@hovenconsulting.com or at 414-305-2011.

Sincerely,
Jayne Thill, BSN, MSN, RN – Board Chair
Wisconsin Association for Home Health Care