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RULES CLEARINGHOUSE

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CLEARINGHOUSE RULE 00-151

Comments

[NOTE: All citations to “Manual” in the comments below are to the Administrative Rules Procedures Manual, prepared by the Revisor of Statutes Bureau and the Legislative Council Staff, dated September 1998.]

2. Form, Style and Placement in Administrative Code

- a. The material in SECTIONS 2, 3 and 4 could be combined into a single SECTION. See s. 1.04 (2) (a) 4., Manual.
- b. In SECTION 3, to facilitate future insertions of material, it is suggested that sub. (8g) be relettered (8m), as provided in s. 1.03 (7), Manual.
- c. As in comment a., above, the material in SECTIONS 5 and 6 could be combined into a single SECTION.
- d. In SECTION 8, the title “HEARINGS” should be inserted after the notation “(8)” on line 1.

5. Clarity, Grammar, Punctuation and Use of Plain Language

- a. In s. HFS 133.02 (8g), the phrase “the net of” on line 1 could be deleted.
- b. In s. HFS 133.02 (8g) Note, the word “Uniform” on line 2 should read “Uniformed.” Also, there should be commas surrounding the phrase “as authorized under 32 C.F.R. 199.” Finally, the word “payers” on line 3 should be singular.

c. Section HFS 133.03 (4) (b) 1. b. refers to s. 50.49 (10), Stats., which governs granting of *provisional* licenses to home health agencies which are temporarily unable to conform to rules of the department. However, sub. (4) (b) 2. refers to the department issuing a *probationary* license. Are these two licenses the same? If so, consistent terminology should be used. If not, the differences should be clarified.

d. Section HFS 133.03 (4) (d) refers to a home health agency's financial information "submitted to the department in the form prescribed by the department." Where does the department "prescribe" the form in which that information must be provided? It appears that it should be in this rule. See also s. 227.14 (3), Stats.

e. In the treatment clause to SECTION 8, the notation "(9)" should be "(8)" and the word "is" should be "are."

f. In s. HFS 133.03 (8) (b), the comma on line 1 should be replaced by the word "and."

g. In s. HFS 133.03 (9), a period should be inserted after the phrase "and sub. (4) (d)" on line 4. Also, the comma following the word "report" on line 6 should be deleted.

h. Section HFS 133.04 (4) (a) requires that, upon determining that a home health agency is in violation of a requirement of this chapter, the department must promptly serve a statement of deficiency "to the home health agency." The current rule specifies that the statement must be served "on the administrator or another designated person." Is there a reason why the more specific language is not included in this rule?

i. In s. HFS 133.04 (4) (b) 4., the word "that" should be inserted after the word "verify" on line 1. The same insertion should be made after the word "verified" in s. HFS 133.04 (4) (c) 1.

j. In s. HFS 133.04 (4) (c) (intro.), the word "rule" on line 1 should be changed to "chapter."

k. The Legislative Reference Bureau recently began spelling the word "employe" in its more conventional form, "employee" in statutory drafting. Therefore, it is suggested that the department also use the conventional spelling of the word, for example, in s. HFS 133.06 (4) (d) 1.

l. In s. HFS 133.09 (3) (a) 1., the abbreviation "subd." on line 5 should be changed to "subds."

m. In s. HFS 133.09 (3) (a) 2. b., is it obvious to the reader what is meant by a "non-emergent change" in the patient's condition?

n. In s. HFS 133.09 (3) (b) 3., the language should be rewritten in the active voice to clarify who is responsible for reviewing and responding to a patient's appeal of a discharge decision. Further, more information should be provided regarding the manner in which the agency "shall hold a review" of an appeal. Is there or should there be a time period within

which the review must be conducted? Finally, in par. (b) 4., the agency is required to provide “written documentation of the appeal review.” Does this mean that the agency only has to indicate that a review was conducted or must it also set forth a decision on the appeal?

o. In s. HFS 133.09 (3) (c), a patient may file a formal complaint with the department if he or she believes the agency has not complied with this chapter. Does the patient first have to appeal the discharge decision to the agency under sub. (3) (b) 1. before filing a complaint with the department?

p. The language in s. HFS 133.14 (6) is awkward and could be improved as follows:

A home health agency may purchase nursing services on an hourly or per visit basis, in accordance with the requirements in s. HFS 133.19. Persons providing nursing services under contract shall meet the requirements in s. HFS 133.06 (4) (a) and be assigned only to duties for which they are licensed and trained.

Also, in addition to meeting the orientation requirements in s. HFS 133.06 (4) (a), should persons providing contract nursing services also be required to meet the health requirements in s. HFS 133.06 (4) (d) or any other requirements in sub. (4)?