

2005

Wisconsin
Home Health
Agencies
and Patients

*Bureau of Health Information and Policy
Division of Public Health
Wisconsin Department of Health and Family Services*

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2005

February 2007

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Division of Public Health
Wisconsin Department of Health and Family Services*

Foreword

This report presents selected statistics on Wisconsin-licensed home health agencies and their patients for 2005.

The source of data for most of the information in this report is the 2005 Annual Survey of Home Health Agencies. This survey has been conducted annually by the Wisconsin Department of Health and Family Services, Division of Public Health, Bureau of Health Information and Policy, in cooperation with the Division of Health Care Financing, Bureau of Fee-for-Service Health Care Benefits; the Office of Quality Assurance, DHFS; the Division of Disability and Elder Services; and Wisconsin-licensed home health agencies.

The Bureau of Health Information and Policy would like to acknowledge and thank the personnel of Wisconsin home health agencies who provided information on their agencies and the patients they serve.

Yiwu Zhang, lead analyst for the project, prepared this report. Jane Conner coordinated and implemented the data collection and editing activities. Kitty Klement, LuAnn Hahn and Kim Voss implemented survey follow-up and data editing activities. Graphics were developed by Yiwu Zhang. Patricia Nametz edited the report. Review and comments were provided by Curtis Cunningham in the Bureau of Fee-for-Service Health Care Benefits, Division of Health Care Financing, and Marianne Missfeldt in the Office of Quality Assurance, DHFS. The report was prepared under the supervision of Judith Nugent, Chief, Health Care Information Section, and the overall direction of Patricia Guhleman, Interim Director, Bureau of Health Information and Policy.

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Suggested citation:

Wisconsin Department of Health and Family Services, Division of Public Health, Bureau of Health Information and Policy. *Wisconsin Home Health Agencies and Patients, 2005* (PPH 5354-05). February 2007.

Contents

| | |
|---|----|
| Foreword | i |
| Introduction | 1 |
| Key Findings | 3 |
| Characteristics of Home Health Agencies | |
| Table 1. Home Health Agencies, Patients and Visits by Ownership Type, 1998-2005 | 5 |
| Table 2. Home Health Agencies Certified to Provide Medicare, Medicaid, Personal Care, Hospice, and HealthCheck (EPSDT) Services; and Agencies that are a Department of or Affiliated with a Hospital, 1998-2005 | 6 |
| Table 3. Full-time Equivalent Employees (FTEs) of Home Health Agencies by Ownership Type | 7 |
| Table 4. Number of Home Health Patients and Full-time Equivalent Employees (FTEs) by County | 8 |
| Figure 1. Full-time Staff Employed by Home Health Agencies, 1998-2005 | 10 |
| Figure 2. Part-time Staff Employed by Home Health Agencies, 1998-2005 | 10 |
| Characteristics of Home Health Patients | |
| Figure 3. Home Health Patients by Age | 11 |
| Figure 4. Home Health Patients Under Age 55 and Age 85 and Older, 1998-2005 | 11 |
| Table 5. Primary Diagnosis of Home Health Patients by Age | 12 |
| Map Home Health Utilization Rate by County of Residence..... | 13 |
| Table 6. Home Health Utilization Rate by County of Residence..... | 14 |
| Figure 5. Home Health Utilization Rate by Sex, 1998-2005..... | 15 |
| Table 7. Number, Percent and Utilization Rate of Home Health Patients by Age and Sex | 15 |
| Table 8. Home Health Agencies and Patients in Selected Wisconsin Counties..... | 16 |
| Figure 6. Home Health Admissions from Private Residences, Hospitals, and Nursing Homes, 1998-2005..... | 17 |
| Figure 7. Home Health Discharges to Private Residences, Hospitals, and Nursing Homes, 1998-2005..... | 17 |
| Table 9. Home Health Patient Need for Help with Selected Activities of Daily Living (ADLs) by Age | 18 |
| Table 10. Home Health Patient Need for Help with Selected Instrumental Activities of Daily Living (IADLs) by Age | 19 |
| Table 11. Home Health Patient Frequency of Assistance from Primary Caregiver by Age | 20 |
| Table 12. Race/Ethnicity of Home Health Patients by Age | 21 |
| Table 13. “Length of Stay” of Home Health Patients by Age..... | 21 |
| Table 14. Pay Source of Home Health Patients by Age | 22 |

Home Health Services

| | | |
|-----------|---|----|
| Table 15. | Services Provided to Home Health Patients | 23 |
| Table 16. | Home Health Agencies That Shared Cases and/or Provided Services in Selected Group Settings | 24 |
| Figure 8. | Average Number of Hours Per Home Health Visit, 1998-2005..... | 25 |
| Figure 9. | Average Number of Visits Per Home Health Patient, 1998-2005..... | 25 |

Home Health Agency Financial Information

| | | |
|------------|---|----|
| Table 17. | Home Health Agency Revenue by Ownership Type | 26 |
| Figure 10. | Net Agency Revenue by Ownership Type | 27 |
| Table 18. | Self-Reported Agency Revenue and Expenses by Ownership Type..... | 27 |
| Figure 11. | Home Health Patients by Payment Source | 28 |
| Figure 12. | Home Health Patients Using Medicare as a Source of Payment by Ownership Type, 1998-2005 | 29 |
| Figure 13. | Home Health Patients Using Medicaid as a Source of Payment by Ownership Type, 1998-2005 | 29 |
| Table 19. | Medicare Payments to Home Health Agencies by Ownership Type | 30 |
| Table 20. | Medicaid Payments to Home Health Agencies and Other Home Care Providers as Reported by the Wisconsin Division of Health Care Financing..... | 30 |

| | |
|------------------------------|----|
| Technical Notes | 31 |
|------------------------------|----|

| | |
|--------------------------------|----|
| Survey Instrument | 33 |
|--------------------------------|----|

Introduction

The source of all agency-based data and most of the patient-based data for this report is the Annual Survey of Home Health Agencies, conducted by the Wisconsin Department of Health and Family Services. This survey collects information from agencies that provide both home health care and personal care, as well as those that provide home health care only. **It does not collect information from agencies that provide personal care only.**

In general, *home health care services* may include the following services in accordance with the patient's plan of care: skilled nursing, respiratory care, home health aide, personal care, medication management, medical social services, and physical, occupational, and speech and language therapies. Home health agencies may also provide durable medical equipment and durable medical supplies. *Personal care services* assist an individual with activities of daily living necessary to maintain the individual in his or her place of residence in the community. Personal care may include assistance with bathing, transferring, eating, grooming, dressing, toileting, meal preparation, and light cleaning in essential areas of the home used during personal care service activities.

Over the period 1997-2002, the total number of home health agencies in Wisconsin declined 24 percent, with governmental agencies declining 34 percent, nonprofit agencies 19 percent, and proprietary agencies 25 percent. In 2003, there was a net increase of five home health agencies, the first increase since 1997. In 2004, there was a net decrease of three home health agencies. In 2005, there was an overall increase of six home health agencies.

These declines in the number of home health agencies also occurred nationally, and came after the federal government made changes in the levels of reimbursement for home health services in 1997. The federal Balanced Budget Act (October 1997) reduced Medicare reimbursements for home health care to 1994 levels. In addition, it required the Centers for Medicare and Medicaid Services (then called the Health Care Financing Administration) to replace Medicare's cost-based, per-visit payment method with a prospective payment system or PPS (see Technical Notes on Page 32). The PPS was implemented on October 1, 2000, and incorporates payment rates based on the national average cost of providing care in 1997, adjusted downward to reflect projected utilization in the current year.

The Government Accountability Office, an arm of the U.S. Congress, found that the introduction of Medicare's PPS, while encouraging efficiency, also provides incentives for home health agencies to decrease services in order to increase net revenues. Because the payment for a particular patient's care is divorced from the agency's cost of delivering that care, an agency that delivers care for less than the payment amount can profit; conversely, an agency will lose financially if its service costs are higher than the payment (GAO-02-663, May 6, 2002).

The 2005 Wisconsin survey population consisted of 153 home health agencies. The Office of Quality Assurance (OQA) sent the survey form to all licensed home health agencies in April 2006 as part of the annual reporting requirements. Only agencies that were still in operation in April 2006 were mailed the 2005 survey. Agencies in operation in 2005 that did not complete the survey consisted of agencies that closed before April 2006, and agencies that were still operating in April 2006 but closed within several months and did not return the survey. Because agencies that closed in 2005 did not contribute data to this survey, the survey findings understate actual home health activity in 2005.

The information in this report is for calendar year 2005, with the following exceptions:

-
- Home health agency staffing information (Tables 3 and 4, Figures 1 and 2) presents the number of employees during the week of November 26 to December 2, 2005.
 - The statewide financial information combines revenue and expenses of various fiscal years (12-month periods), nearly all of which ended in 2005. The effect of this variation on inter-agency comparison is not known.

This report includes six tables of patient-based data derived from the federal Home Health Care Outcome and Assessment Information Set (OASIS). (See Tables 9, 10, 11, 12, 13, and 14.)

Since October 1999, the federal Centers for Medicare and Medicaid Services has required the collection and reporting of OASIS data by home health agencies as a Condition of Participation in the Medicare and Medicaid programs. The purpose of OASIS is to improve the quality of home health care services through outcome measurement and performance improvement.

Home health agencies collect OASIS data as part of a comprehensive assessment of each patient used to develop the patient's plan of care, assess that care over the course of treatment, and improve the quality of care provided. OASIS includes information on medical conditions and patient history; medical, physical, mental and cognitive status; drug therapy; and other measures of mental and physical well-being. It also includes information on living arrangements and supportive assistance, and needs for assistance with instrumental activities of daily living (IADLs) and activities of daily living (ADLs).

OASIS data for 2005 were submitted by the 140 Medicare- and Medicaid-certified home health agencies in Wisconsin, an increase of six agencies from 2004. The six OASIS-based tables in this report contain information for only 59 percent of all Wisconsin home health care patients in 2005: those who had either Medicare or Medicaid (or both) as a payment source and were receiving skilled care. Nevertheless, the detailed data in these tables are an important source of information about home health patients in Wisconsin.

Key Findings

- One hundred fifty-three home health agencies completed the 2005 survey, representing an overall increase of six agencies (4 percent) from 2004. Two governmental agencies and one proprietary agency closed in 2005. Nine proprietary agencies opened.
- The number of home health patients in Wisconsin increased less than 1 percent in 2005, while the number of home health visits increased 12 percent.
- Between 1998 and 2005, the number of home health patients declined by 13 percent, and the number of home health visits increased just 0.4 percent.
- During the week of November 26 to December 2, 2005, there were 5,004 full-time equivalent employees (FTEs) employed by Wisconsin home health agencies, an increase of 368 (8 percent) from the 4,636 FTEs reported in December 2004.
- Between December 2004 and December 2005, the number of FTE home health aides employed by home health agencies decreased 4 percent. The number of patients served by home health aides declined 22 percent.
- There were 1,548 FTE personal care workers employed by Wisconsin home health agencies during the week of November 26 to December 2, 2005, up 24 percent from 2004. During the same period, the number of patients receiving personal care services from home health agencies was down less than 1 percent.
- On average, there were 7.2 home health agency FTEs per 100 home health patients in 2005 in Wisconsin (up from 6.7 FTEs per 100 home health patients in 2004).
- Of the 137 home health agencies located in 56 counties in Wisconsin (16 counties had no agency), 64 agencies in 36 counties had a below-average FTE-patient ratio. In 2004, 80 agencies in 36 counties had a below-average FTE-patient ratio.
- There were 12.5 home health patients per 1,000 total Wisconsin population in 2005, unchanged from 2004.
- The home health utilization rate of Wisconsin females age 65 and older in 2005 was 65.9 per 1,000 (65.2 per 1,000 in 2004). The utilization rate for males age 65 and older was 55.6 per 1,000 (56.2 per 1,000 in 2004).
- Among Wisconsin males aged 85 and older, 129 of every 1,000 used home health services in 2005, down from 138 per 1,000 in 2004. The utilization rate for females aged 85 and older increased from 113 per 1,000 in 2004 to 117 per 1,000 in 2005.
- Total home health admissions increased 1 percent in 2005 (to 63,412). Total home health discharges decreased 1 percent in 2005 (to 62,450).
- Out of 33,194 Medicare and/or Medicaid home health patients receiving skilled care in 2005, 11 percent were independent in bathing, 15 percent were independent in ambulating, 32 percent were independent in transferring, 71 percent were independent in toilet use, and 77 percent were independent in eating. All these percentages were decreases from 2004.
- In 2005, only 2 percent to 5 percent of home health patients with Medicare and/or Medicaid and requiring skilled care were independent in shopping, housekeeping, laundry and transportation – four of the daily tasks called “Instrumental Activities of Daily Living (IADLs).”

Key Findings

- In 2005, 50 percent of Medicare and/or Medicaid home health patients receiving skilled care had a “length of stay” between 181 days and 365 days. Nine percent of these patients had been receiving home health service for one year or longer.
- Among all home health patients in 2005, 80 percent received skilled nursing services (down from 83 percent in 2004), 18 percent received home health aide services (down from 23 percent in 2004), and 43 percent received physical therapy (up from 41 percent in 2004 and 38 percent in 2003). In 1996, only 49 percent of home health patients received skilled nursing services and 12 percent received physical therapy.
- The average length of a home health visit in 2005 statewide was 1.6 hours, down from 1.7 hours in 2004.
- Home health patients received an average of 56 visits each in 2005, up from 50 visits in 2004.
- Reported gross patient revenue of home health agencies statewide increased 5.4 percent, from \$267.7 million in 2004 to \$282.2 million in 2005.
- Gross revenue from Medicare increased 5 percent, constituting 42 percent of gross patient revenue in 2005 (the same percentage as in 2004).
- Gross revenue from Medicaid also increased 5 percent, constituting 39 percent (the same percentage as in 2004).
- Total agency revenue statewide was \$247.0 million in 2005, up 8 percent from \$228.3 million in 2004.
- Statewide, total expenses reported by home health agencies exceeded total self-reported revenue by \$6.1 million in 2005, 40 percent less than the reported difference in 2004 (\$10.2 million).
- A total of 42,358 home health patients used Medicare as a source of payment in 2005, an increase of 3 percent from 2004 (41,319).
- Medicaid was used by 12,789 (or 17 percent) home health patients in 2005, an 8 percent increase from 2004 (11,831).
- In 2005, Medicare payments as reported by home health agencies statewide totaled \$115.4 million, an increase of 8 percent from \$106.7 million in 2004. The number of home health patients using Medicare as a source of payment increased 3 percent in 2005.
- In State Fiscal Year 2005, total Medicaid payments to the state’s home care industry, as reported by the Wisconsin Division of Health Care Financing, were approximately \$16.2 million more than in SFY 2004. This represents an increase of 9 percent. DHCF-reported payments to home health agencies only (excluding other home care providers) increased by \$4.9 million, or 8 percent.

Table 1. Home Health Agencies, Patients and Visits by Ownership Type, Wisconsin 1998-2005

| Number of Home Health Agencies | | | | |
|---------------------------------------|--------------------|----------------------------|------------------|--------------------|
| Year | State Total | Ownership of Agency | | |
| | | Governmental | Nonprofit | Proprietary |
| 1998 | 172 | 36 | 74 | 62 |
| 1999 | 157 | 32 | 73 | 52 |
| 2000 | 155 | 32 | 70 | 53 |
| 2001 | 150 | 31 | 69 | 50 |
| 2002 | 145 | 27 | 66 | 52 |
| 2003 | 150 | 26 | 65 | 59 |
| 2004 | 147 | 25 | 62 | 60 |
| 2005 | 153 | 23 | 62 | 68 |

| Number of Home Health Patients | | | | |
|---------------------------------------|--------------------|----------------------------|------------------|--------------------|
| Year | State Total | Ownership of Agency | | |
| | | Governmental | Nonprofit | Proprietary |
| 1998 | 80,052 | 7,772 | 57,907 | 14,373 |
| 1999 | 74,600 | 6,369 | 57,808 | 10,423 |
| 2000 | 72,046 | 5,987 | 54,765 | 11,294 |
| 2001 | 69,929 | 5,310 | 53,473 | 11,146 |
| 2002 | 68,834 | 4,863 | 52,914 | 11,057 |
| 2003 | 69,746 | 4,759 | 53,327 | 11,660 |
| 2004 | 69,510 | 4,893 | 52,320 | 12,297 |
| 2005 | 69,978 | 4,799 | 52,145 | 13,034 |

| Number of Home Health Visits | | | | |
|-------------------------------------|--------------------|----------------------------|------------------|--------------------|
| Year | State Total | Ownership of Agency | | |
| | | Governmental | Nonprofit | Proprietary |
| 1998 | 3,897,641 | 355,848 | 2,232,184 | 1,309,609 |
| 1999 | 3,634,574 | 266,537 | 2,061,098 | 1,306,939 |
| 2000 | 3,436,034 | 250,059 | 1,892,554 | 1,293,421 |
| 2001 | 3,274,139 | 205,186 | 1,758,153 | 1,310,800 |
| 2002 | 3,202,652 | 194,067 | 1,707,659 | 1,300,926 |
| 2003 | 3,444,244 | 193,383 | 1,722,717 | 1,528,144 |
| 2004 | 3,496,851 | 191,480 | 1,666,586 | 1,638,785 |
| 2005 | 3,911,520 | 199,469 | 1,610,684 | 2,101,367 |

Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

- One hundred fifty-three home health agencies completed the 2005 survey, representing an overall increase of six agencies (4 percent) from 2004. Two governmental agencies and one proprietary agency closed in 2005. Nine proprietary agencies opened.
- The number of home health patients in Wisconsin increased less than 1 percent in 2005, while the number of home health visits increased 12 percent.
- Between 1998 and 2005, the number of home health patients declined by 13 percent, and the number of home health visits increased just 0.4 percent.
- The share of home health patients served by governmental agencies declined from 10 percent in 1998 to 7 percent in 2005, while the share served by nonprofit agencies increased from 72 percent to 75 percent.

Characteristics of Home Health Agencies

Table 2. Home Health Agencies Certified to Provide Medicare, Medicaid, Personal Care, Hospice, and HealthCheck (EPSDT) Services; and Agencies that are a Department of or Affiliated with a Hospital, Wisconsin 1998-2005

| Number of Agencies | | | | |
|--------------------|-----------------------|-----------------------|--|---|
| Year | Certified by Medicare | Certified by Medicaid | Certified by Medicaid to Provide Personal Care | Certified by Medicare and/or Medicaid to Provide Hospice Care |
| 1998 | 164 | 167 | 130 | 42 |
| 1999 | 150 | 152 | 117 | 42 |
| 2000 | 142 | 146 | 112 | 42 |
| 2001 | 137 | 142 | 107 | 41 |
| 2002 | 132 | 137 | 103 | 37 |
| 2003 | 137 | 142 | 105 | 35 |
| 2004 | 135 | 139 | 104 | 36 |
| 2005 | 138 | 144 | 110 | 37 |

| Number of Agencies | | | |
|--------------------|---|----------------------------|----------------------------|
| Year | Certified to Provide HealthCheck Services | A Department of a Hospital | Affiliated with a Hospital |
| 1998 | 32 | 39 | 15 |
| 1999 | 30 | 39 | 15 |
| 2000 | 26 | 38 | 13 |
| 2001 | 26 | 39 | 12 |
| 2002 | 23 | 39 | 12 |
| 2003 | * | 37 | 14 |
| 2004 | * | 36 | 13 |
| 2005 | * | 37 | 12 |

Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Notes: An asterisk (*) indicates the question was not included in that year's survey. HealthCheck is Wisconsin Medicaid's federally required Early Periodic Screening, Diagnosis and Treatment program (EPSDT) for children up to age 21. The goal of HealthCheck is to promote early detection and treatment of health conditions before they require chronic and more expensive medical intervention. HealthCheck includes routine comprehensive screenings, including vision and hearing; dental screening; appropriate immunizations; appropriate tests, including laboratory and lead poisoning screening; and necessary referrals for follow-up care.

- Between 1998 and 2005, the number of home health agencies certified to provide services declined at least 14 percent in three categories: Medicare (16 percent), Medicaid (14 percent), and Medicaid personal care (15 percent).
- The number of home health agencies certified by Medicare and/or Medicaid to provide hospice services decreased 12 percent between 1998 and 2005.
- The number of home health agencies affiliated with a hospital decreased 20 percent between 1998 and 2005, from 15 to 12.

Characteristics of Home Health Agencies

Table 3. Full-Time Equivalent Employees (FTEs) of Home Health Agencies by Ownership Type, Wisconsin, 2005

| Employee Category | Statewide FTEs | | Number of FTEs by Ownership of Agency | | |
|--------------------------|----------------|-------------|---------------------------------------|--------------|--------------|
| | Number | Percent | Governmental | Nonprofit | Proprietary |
| Administrator | 128 | | 15 | 51 | 62 |
| RN Supervisor | 185 | | 15 | 98 | 71 |
| Subtotal | 313 | 6% | 31 | 149 | 133 |
| Registered Nurse | 1,022 | | 92 | 678 | 252 |
| Licensed Practical Nurse | 179 | | 7 | 42 | 130 |
| Subtotal | 1,201 | 24 | 99 | 721 | 382 |
| Home Health Aide | 746 | 15 | 44 | 372 | 330 |
| Physical Therapist | 181 | | 5 | 145 | 30 |
| Occupational Therapist | 64 | | 1 | 49 | 14 |
| Speech Pathologist | 16 | | 0 | 13 | 2 |
| Respiratory Therapist | 2 | | 0 | 2 | 0 |
| Medical Social Worker | 33 | | 1 | 24 | 8 |
| Subtotal | 296 | 6 | 7 | 234 | 55 |
| Personal Care Worker | 1,548 | | 54 | 263 | 1,231 |
| Homemaker | 131 | | 17 | 54 | 60 |
| Other | 769 | | 58 | 468 | 243 |
| Subtotal | 2,448 | 49 | 129 | 785 | 1,534 |
| Total | 5,004 | 100% | 309 | 2,262 | 2,433 |

Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Notes: This count of employees is from the week of November 26 to December 2, 2005. Percentages may not add to 100 percent due to rounding.

- During the week of November 26 to December 2, 2005, there were 5,004 full-time equivalent employees (FTEs) employed by Wisconsin home health agencies, an increase of 368 (8 percent) from the 4,636 FTEs reported in December 2004. From 2004 to 2005, the number of home health patients increased less than 1 percent and home health visits increased 12 percent.
- Between December 2004 and December 2005, the number of FTE home health aides employed by home health agencies decreased 4 percent. The number of patients served by home health aides declined 22 percent.
- There were 1,548 FTE personal care workers employed by Wisconsin home health agencies during the week of November 26 to December 2, 2005, up 24 percent from 2004. During the same period, the number of patients receiving personal care services from home health agencies was down less than 1 percent.
- Between December 2004 and December 2005, the number of FTE registered nurses working in home health agencies decreased less than 1 percent. FTE licensed practical nurses in these agencies increased 9 percent.

Characteristics of Home Health Agencies

Table 4. Number of Home Health Patients and Full-time Equivalent Employees (FTEs) by County, Wisconsin, 2005

| | Number of Agencies | Home Health Patients | | FTEs | | Number of FTEs per 100 Patients |
|-------------|--------------------|----------------------|---------|--------|---------|---------------------------------|
| | | Number | Percent | Number | Percent | |
| State Total | 153 | 69,978 | 100 | 5,004 | 100 | 7.2 |
| Adams | 1 | 201 | 0.3 | 9 | 0.2 | 4.5 |
| Ashland | 1 | 284 | 0.4 | 57 | 1.1 | 20.1 |
| Barron | 1 | 325 | 0.5 | 12 | 0.2 | 3.7 |
| Bayfield | 1 | 90 | 0.1 | 5 | 0.1 | 5.6 |
| Brown | 6 | 3,945 | 5.6 | 170 | 3.4 | 4.3 |
| Burnett | 1 | 102 | 0.1 | 4 | 0.1 | 3.9 |
| Calumet | 2 | 196 | 0.3 | 19 | 0.4 | 9.7 |
| Chippewa | 2 | 987 | 1.4 | 40 | 0.8 | 4.1 |
| Clark | 1 | 52 | 0.1 | 3 | 0.1 | 5.8 |
| Columbia | 1 | 288 | 0.4 | 8 | 0.2 | 2.8 |
| Crawford | 1 | 276 | 0.4 | 15 | 0.3 | 5.4 |
| Dane | 9 | 7,177 | 10.3 | 442 | 8.8 | 6.2 |
| Dodge | 3 | 885 | 1.3 | 25 | 0.5 | 2.8 |
| Door | 1 | 373 | 0.5 | 9 | 0.2 | 2.4 |
| Douglas | 2 | 311 | 0.4 | 31 | 0.6 | 10.0 |
| Dunn | 2 | 331 | 0.5 | 18 | 0.4 | 5.4 |
| Eau Claire | 5 | 944 | 1.3 | 260 | 5.2 | 27.5 |
| Fond du Lac | 2 | 831 | 1.2 | 61 | 1.2 | 7.3 |
| Grant | 2 | 591 | 0.8 | 83 | 1.7 | 14.0 |
| Green | 1 | 457 | 0.7 | 9 | 0.2 | 2.0 |
| Green lake | 1 | 494 | 0.7 | 14 | 0.3 | 2.8 |
| Iowa | 1 | 406 | 0.6 | 12 | 0.2 | 3.0 |
| Jackson | 1 | 191 | 0.3 | 29 | 0.6 | 15.2 |
| Jefferson | 3 | 500 | 0.7 | 21 | 0.4 | 4.2 |
| Juneau | 1 | 160 | 0.2 | 7 | 0.1 | 4.4 |
| Kenosha | 3 | 612 | 0.9 | 36 | 0.7 | 5.9 |
| La Crosse | 4 | 873 | 1.2 | 91 | 1.8 | 10.4 |
| Lafayette | 1 | 142 | 0.2 | 9 | 0.2 | 6.3 |
| Manitowoc | 2 | 611 | 0.9 | 36 | 0.7 | 5.9 |
| Marathon | 2 | 2,481 | 3.5 | 120 | 2.4 | 4.8 |
| Marinette | 2 | 454 | 0.6 | 41 | 0.8 | 9.0 |
| Marquette | 1 | 211 | 0.3 | 19 | 0.4 | 9.0 |
| Milwaukee | 23 | 26,310 | 37.6 | 1,975 | 39.5 | 7.5 |
| Monroe | 1 | 138 | 0.2 | 7 | 0.1 | 5.1 |
| Oconto | 1 | 89 | 0.1 | 5 | 0.1 | 5.6 |
| Oneida | 1 | 909 | 1.3 | 29 | 0.6 | 3.2 |

(Continued)

Characteristics of Home Health Agencies

Table 4. Number of Home Health Patients and Full-time Equivalent Employees (FTEs) by County, Wisconsin, 2005 (Continued)

| | Number of Agencies | Home Health Patients | | FTEs | | Number of FTEs per 100 Patients |
|--------------|--------------------|----------------------|---------|--------|---------|---------------------------------|
| | | Number | Percent | Number | Percent | |
| Pepin | 1 | 101 | 0.1 | 12 | 0.2 | 11.9 |
| Pierce | 2 | 210 | 0.3 | 40 | 0.8 | 19.0 |
| Polk | 1 | 348 | 0.5 | 21 | 0.4 | 6.0 |
| Price | 3 | 468 | 0.7 | 48 | 1.0 | 10.3 |
| Racine | 2 | 829 | 1.2 | 35 | 0.7 | 4.2 |
| Rock | 4 | 1,644 | 2.3 | 128 | 2.6 | 7.8 |
| Rusk | 2 | 232 | 0.3 | 12 | 0.2 | 5.2 |
| St. Croix | 2 | 418 | 0.6 | 29 | 0.6 | 6.9 |
| Sauk | 2 | 540 | 0.8 | 67 | 1.3 | 12.4 |
| Sawyer | 1 | 131 | 0.2 | 7 | 0.1 | 5.3 |
| Sheboygan | 2 | 727 | 1.0 | 70 | 1.4 | 9.6 |
| Trempealeau | 1 | 88 | 0.1 | 2 | <0.1 | 2.3 |
| Vernon | 1 | 132 | 0.2 | 6 | 0.1 | 4.5 |
| Walworth | 1 | 182 | 0.3 | 6 | 0.1 | 3.3 |
| Washburn | 3 | 405 | 0.6 | 22 | 0.4 | 5.4 |
| Washington | 1 | 323 | 0.5 | 12 | 0.2 | 3.7 |
| Waukesha | 8 | 3,192 | 4.6 | 248 | 5.0 | 7.8 |
| Waupaca | 1 | 100 | 0.1 | 27 | 0.5 | 27.0 |
| Winnebago | 5 | 4,041 | 5.8 | 367 | 7.3 | 9.1 |
| Wood | 1 | 1,290 | 1.8 | 33 | 0.7 | 2.6 |
| Out of state | 16 | 1,350 | 1.9 | 84 | 1.7 | 6.2 |

Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

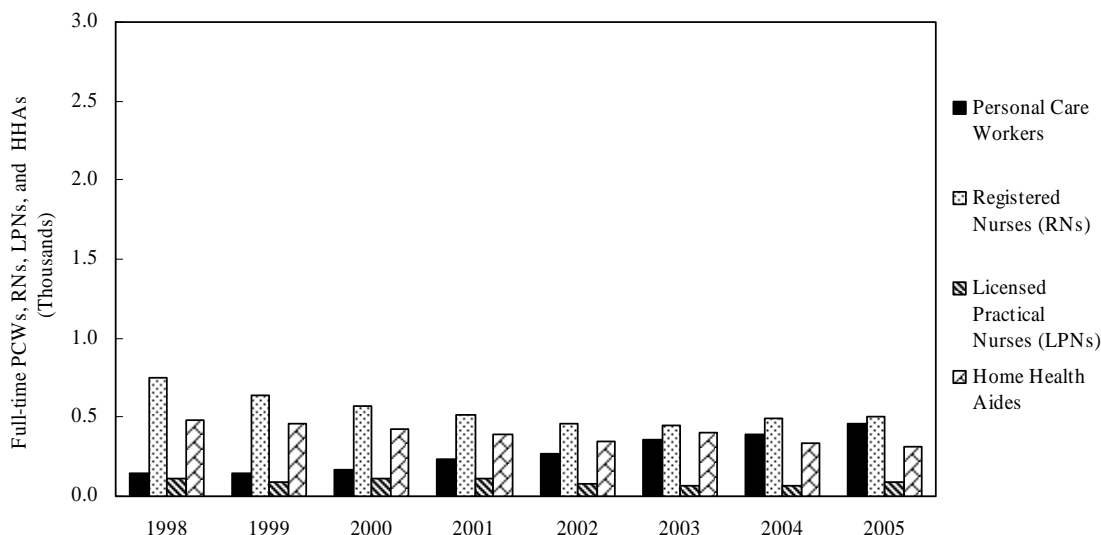
Notes: This count of employees is from the week of November 28 to December 4, 2005.

Percentages may not add to 100 percent due to rounding.

Patient counts in this table reflect the number of patients served by agencies located in that county (not patient county of residence).

- On average, there were 7.2 home health agency FTEs per 100 home health patients in 2005 in Wisconsin (up from 6.7 FTEs per 100 home health patients in 2004).
- Trempealeau County had the lowest number of FTEs per 100 home health patients (2.3) while Eau Claire County had the highest (27.5).
- Of the 10 counties with more than 1,000 home health patients, Winnebago County had the highest FTE-patient ratio (9.1 per 100 patients), and Wood County had the lowest (2.6 FTEs per 100 patients).
- Of the 137 home health agencies located in 56 counties in Wisconsin (16 counties had no agency), 64 agencies in 36 counties had a below-average FTE-patient ratio. In 2004, 80 agencies in 36 counties had a below-average FTE-patient ratio.

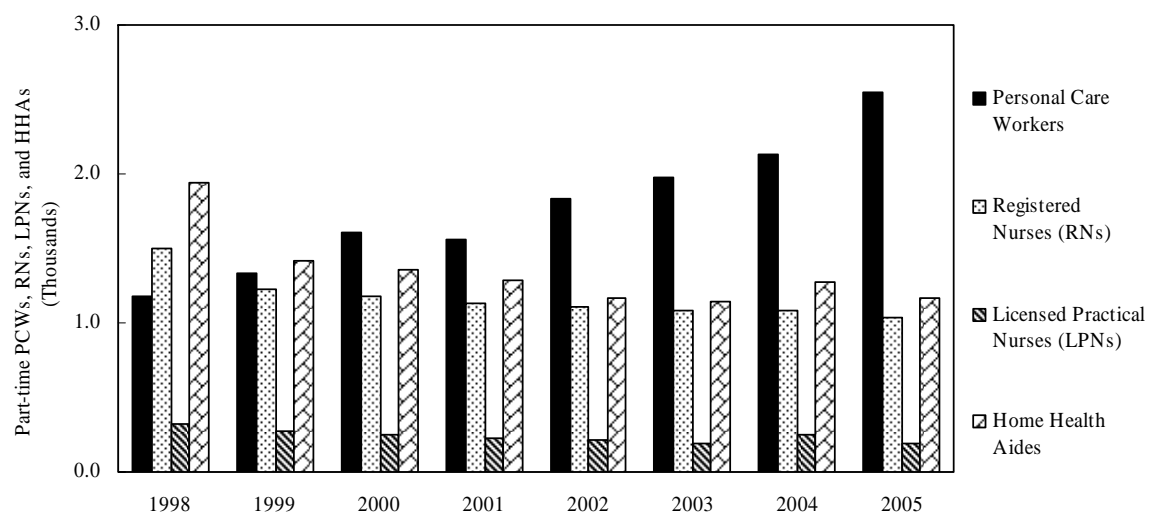
Figure 1. Full-Time Staff Employed by Home Health Agencies, Wisconsin 1998-2005



Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.
 Note: The survey does not include agencies that provide only personal care, but does include agencies that provide both home health care and personal care.

- Between December 2004 and December 2005, the number of full-time RNs employed by home health agencies increased 2 percent (from 491 to 500), the number of full-time LPNs increased 24 percent (from 71 to 88), and the number of full-time personal care workers increased 17 percent (from 391 to 459). The number of full-time home health aides declined 7 percent (from 338 to 313).

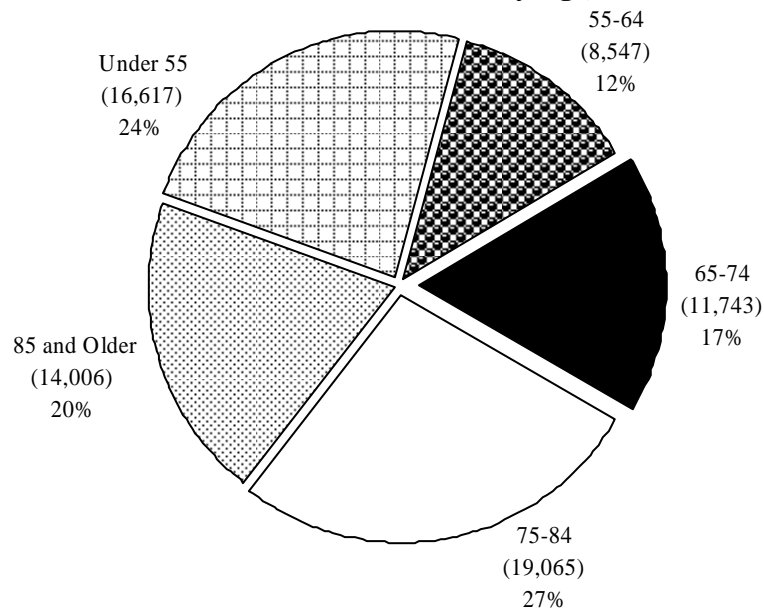
Figure 2. Part-Time Staff Employed by Home Health Agencies, Wisconsin, 1998-2005



Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.
 Note: The survey does not include agencies that provide only personal care, but does include agencies that provide both home health care and personal care.

- From December 2004 to December 2005, the number of part-time LPNs declined 23 percent (from 253 to 194), the number of part-time home health aides decreased 8 percent (from 1,272 to 1,166), and the number of part-time RNs employed by home health agencies was down 5 percent (from 1,080 to 1,031). The number of part-time personal care workers increased 19 percent (from 2,135 to 2,543).

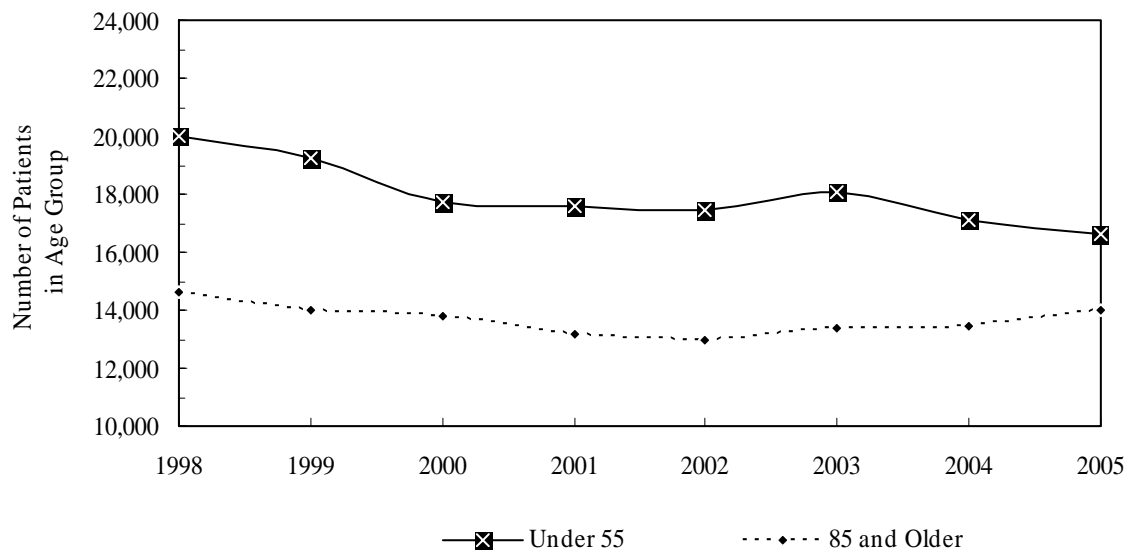
Figure 3. Home Health Patients by Age, Wisconsin 2005



Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

- In 2005, 24 percent of Wisconsin home health patients were under age 55, 12 percent were aged 55-64, 17 percent were aged 65-74, 27 percent were aged 75-84, and 20 percent were aged 85 and older.

Figure 4. Home Health Patients under Age 55 and Age 85 and Older, Wisconsin 1998-2005



Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

- Between 1998 and 2005, the number of patients under age 55 declined 17 percent, and the number of patients aged 85 and above decreased 4 percent.

Characteristics of Home Health Patients

Table 5. Primary Diagnosis of Home Health Patients by Age, Wisconsin 2005

| Primary Diagnosis | Number of Patients | Percent in Age Group | | | | | Percent Age 65+ |
|--|--------------------|----------------------|-------|-------|-------|-----|-----------------|
| | | <55 | 55-64 | 65-74 | 75-84 | 85+ | |
| Total | 69,978 | 24% | 12% | 17% | 27% | 20% | 64% |
| Cardiovascular | 7,157 | 7 | 8 | 15 | 36 | 34 | 85 |
| Ill-Defined Conditions | 4,553 | 18 | 10 | 16 | 29 | 28 | 72 |
| Arthritis (Arthropathies, Dorsopathies and Rheumatism) | 3,935 | 14 | 12 | 20 | 35 | 27 | 82 |
| Respiratory Diseases | 3,531 | 13 | 9 | 20 | 35 | 24 | 78 |
| Diabetes | 3,285 | 19 | 16 | 22 | 30 | 13 | 65 |
| Cancer | 2,927 | 22 | 20 | 23 | 25 | 10 | 58 |
| Conditions Orig. in the Perinatal Period | 2,081 | 93 | 1 | 2 | 2 | 2 | 6 |
| Complications Of Surgery | 2,048 | 38 | 20 | 19 | 17 | 6 | 42 |
| Wounds, Burns and Other Injuries | 1,766 | 30 | 12 | 16 | 23 | 19 | 58 |
| Central Nervous System/Multiple Sclerosis | 1,457 | 39 | 18 | 14 | 18 | 11 | 43 |
| Digestive Disorders | 1,303 | 26 | 14 | 16 | 24 | 20 | 60 |
| Stroke | 1,171 | 10 | 14 | 21 | 35 | 21 | 77 |
| Genitourinary System | 1,163 | 19 | 12 | 15 | 29 | 26 | 70 |
| Fractures, Dislocations and Sprains | 1,110 | 21 | 11 | 14 | 29 | 26 | 69 |
| Psychoses and Neurotic Disorders | 1,044 | 38 | 12 | 14 | 20 | 16 | 50 |
| Paralysis and Cerebral Palsy | 986 | 80 | 9 | 6 | 3 | 2 | 11 |
| Osteopathies | 809 | 23 | 12 | 16 | 28 | 20 | 65 |
| Mental Retardation | 691 | 73 | 14 | 8 | 4 | 1 | 13 |
| Congenital Anomalies | 637 | 78 | 5 | 4 | 7 | 5 | 17 |
| Dementia and Alzheimer's Disease | 579 | 2 | 4 | 12 | 40 | 42 | 94 |
| Blood Diseases | 548 | 13 | 8 | 10 | 24 | 45 | 79 |
| Other Infectious & Parasitic Diseases | 520 | 44 | 16 | 13 | 15 | 12 | 40 |
| Eye/Ear Problems | 231 | 27 | 12 | 13 | 26 | 23 | 61 |
| Pregnancy and Childbirth | 161 | 100 | 0 | 0 | 0 | 0 | 0 |
| Dehydration | 139 | 14 | 9 | 9 | 27 | 41 | 77 |
| Poisoning and Toxic Effects | 52 | 27 | 15 | 27 | 19 | 12 | 58 |
| HIV Infection | 23 | 78 | 17 | 0 | 4 | 0 | 4 |
| Other Conditions | 26,071 | 21% | 14% | 18% | 28% | 19% | 66% |

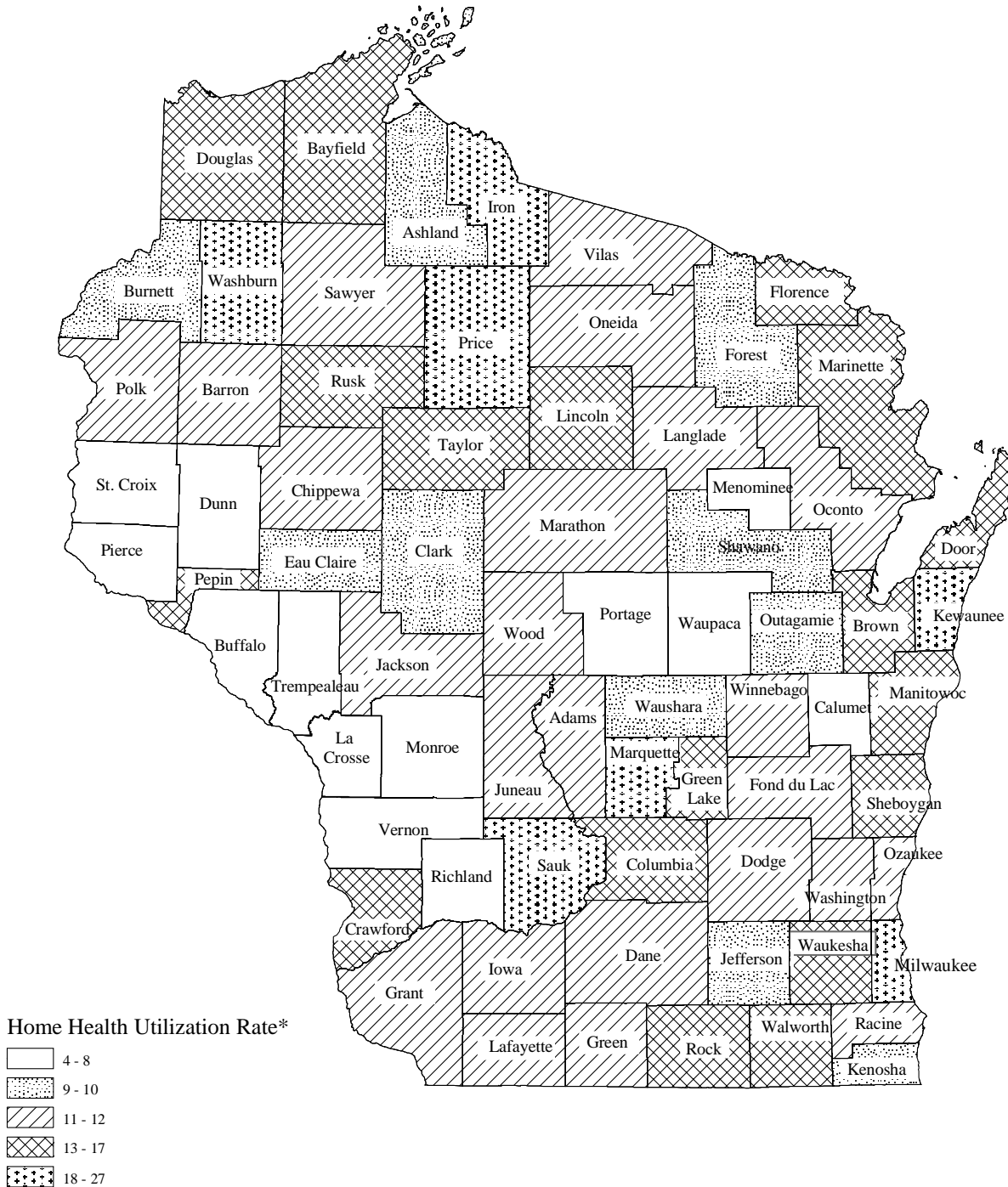
Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Notes: These numbers reflect unduplicated counts.

Primary diagnosis refers to grouped ICD-9 codes. See survey instrument for more details.

- Sixty-four percent of home health patients in Wisconsin were age 65 and over, the same proportion as in 2004.
- Patients age 65 and older made up 85 percent or more of patients with the following diagnoses: cardiovascular disease and dementia/Alzheimer's.
- Eighty percent of home health patients with paralysis or cerebral palsy were aged 55 or younger, compared with 81 percent in 2004.

Map. Home Health Utilization Rate by County of Residence, Wisconsin 2005



Statewide Rate: 12.5 per 1,000

*Number of home health patients per 1,000 estimated county population for 2005.

Wisconsin Division of Public Health
Bureau of Health Information and Policy

Characteristics of Home Health Patients

Table 6. Home Health Utilization Rate (Patients per 1,000 Population) by County of Residence, Wisconsin 2005

| County | Patients | Population | Rate per 1,000 | County | Patients | Population | Rate per 1,000 |
|--------------------|----------|------------|----------------|-------------|----------|------------|----------------|
| State Total | 69,978 | 5,581,847 | 12.5 | Marathon | 1,523 | 131,038 | 11.6 |
| Adams | 240 | 21,266 | 11.3 | Marinette | 733 | 44,206 | 16.6 |
| Ashland | 175 | 16,792 | 10.4 | Marquette | 312 | 15,200 | 20.5 |
| Barron | 499 | 46,566 | 10.7 | Menominee | 18 | 4,605 | 3.9 |
| Bayfield | 233 | 15,520 | 15.0 | Milwaukee | 17210 | 933,092 | 18.4 |
| Brown | 3,030 | 240,788 | 12.6 | Monroe | 295 | 43,072 | 6.8 |
| Buffalo | 85 | 14,056 | 6.0 | Oconto | 411 | 38,238 | 10.7 |
| Burnett | 160 | 16,586 | 9.6 | Oneida | 455 | 37,831 | 12.0 |
| Calumet | 346 | 45,094 | 7.7 | Outagamie | 1,475 | 171,400 | 8.6 |
| Chippewa | 728 | 60,528 | 12.0 | Ozaukee | 910 | 86,092 | 10.6 |
| Clark | 324 | 34,362 | 9.4 | Pepin | 119 | 7,535 | 15.8 |
| Columbia | 793 | 55,195 | 14.4 | Pierce | 317 | 39,493 | 8.0 |
| Crawford | 219 | 17,370 | 12.6 | Polk | 492 | 44,763 | 11.0 |
| Dane | 5,291 | 460,758 | 11.5 | Portage | 454 | 68,912 | 6.6 |
| Dodge | 968 | 88,688 | 10.9 | Price | 331 | 15,746 | 21.0 |
| Door | 423 | 29,045 | 14.6 | Racine | 2,244 | 194,524 | 11.5 |
| Douglas | 570 | 44,036 | 12.9 | Richland | 149 | 18,164 | 8.2 |
| Dunn | 284 | 42,198 | 6.7 | Rock | 2,127 | 157,662 | 13.5 |
| Eau Claire | 883 | 96,434 | 9.2 | Rusk | 206 | 15,365 | 13.4 |
| Florence | 76 | 5,134 | 14.8 | Saint Croix | 509 | 77,227 | 6.6 |
| Fond du Lac | 1,109 | 100,087 | 11.1 | Sauk | 1,144 | 58,984 | 19.4 |
| Forest | 88 | 10,134 | 8.7 | Sawyer | 180 | 17,131 | 10.5 |
| Grant | 621 | 50,372 | 12.3 | Shawano | 394 | 41,825 | 9.4 |
| Green | 409 | 35,579 | 11.5 | Sheboygan | 1,619 | 115,798 | 14.0 |
| Green Lake | 245 | 19,316 | 12.7 | Taylor | 288 | 19,866 | 14.5 |
| Iowa | 254 | 23,768 | 10.7 | Trempealeau | 211 | 27,991 | 7.5 |
| Iron | 180 | 6,822 | 26.4 | Vernon | 168 | 29,231 | 5.7 |
| Jackson | 212 | 19,859 | 10.7 | Vilas | 262 | 22,337 | 11.7 |
| Jefferson | 758 | 79,519 | 9.5 | Walworth | 1,272 | 99,428 | 12.8 |
| Juneau | 327 | 27,077 | 12.1 | Washburn | 306 | 16,947 | 18.1 |
| Kenosha | 1,473 | 159,705 | 9.2 | Washington | 1,514 | 126,795 | 11.9 |
| Kewaunee | 391 | 21,076 | 18.6 | Waukesha | 4,793 | 379,224 | 12.6 |
| La Crosse | 631 | 109,907 | 5.7 | Waupaca | 294 | 53,157 | 5.5 |
| Lafayette | 201 | 16,313 | 12.3 | Waushara | 224 | 24,912 | 9.0 |
| Langlade | 236 | 21,221 | 11.1 | Winnebago | 1,735 | 162,449 | 10.7 |
| Lincoln | 411 | 30,419 | 13.5 | Wood | 809 | 76,310 | 10.6 |
| Manitowoc | 1,411 | 83,707 | 16.9 | | | | |

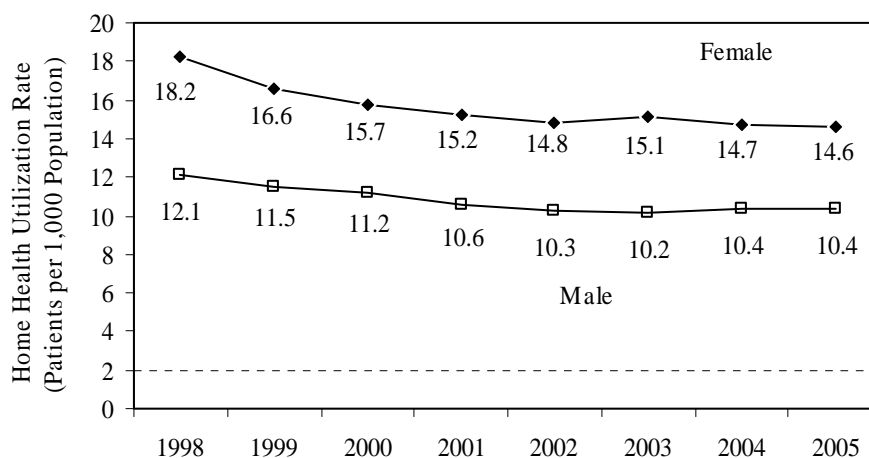
Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Note: The rate is the number of patients per 1,000 population in each age group, based on 2005 population estimates. The total includes 191 out-of-state patients.

Tables 4 and 8 show the number of patients by county of agency location, while this table (Table 6) shows the number of patients by county of residence.

- There were 12.5 home health patients per 1,000 total Wisconsin population in 2005, unchanged from 2004.
- Iron County had the highest home health utilization rate in the state, with 26.4 patients per 1,000 residents. Two other counties had a utilization rate of 20 per 1,000 population or higher in 2005 (Marquette and Price counties).
- Among the 14 counties with a population of 100,000 or more, Milwaukee had the highest home health utilization rate in 2005, with 18.4 patients per 1,000 population. La Crosse had the lowest utilization rate in 2005 among these larger counties, with only 5.7 patients per 1,000 population.
- Menominee County had the lowest home health utilization rate in the state, 3.9 patients per 1,000 residents.

Figure 5. Home Health Utilization Rate by Sex, Wisconsin 1998-2005



Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Table 7. Number, Percent and Utilization Rate of Home Health Patients by Age and Sex, Wisconsin 2005

| Age | Total | | | Female | | | Male | | |
|---------------------|--------|---------|-------|--------|---------|-------|--------|---------|-------|
| | Number | Percent | Rate | Number | Percent | Rate | Number | Percent | Rate |
| All Patients | 69,978 | 100% | 12.5 | 41,179 | 59% | 14.6 | 28,799 | 41% | 10.4 |
| Under 55 | 16,617 | 24 | 3.9 | 8,678 | 12 | 4.1 | 7,939 | 11 | 3.7 |
| 55-64 | 8,547 | 12 | 14.7 | 4,721 | 7 | 16.1 | 3,826 | 5 | 13.4 |
| 65-74 | 11,743 | 17 | 33.4 | 6,676 | 10 | 35.5 | 5,067 | 7 | 30.9 |
| 75-84 | 19,065 | 27 | 73.5 | 11,570 | 17 | 76.1 | 7,495 | 11 | 69.7 |
| 85 or older | 14,006 | 20 | 120.5 | 9,534 | 14 | 117.1 | 4,472 | 6 | 128.6 |
| 65 or older | 44,814 | 64 | 61.6 | 27,780 | 67 | 65.9 | 17,034 | 59 | 55.6 |

Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Notes: The utilization rate is the number of patients per 1,000 population in each age group, based on 2004 population estimates.

- Of the total 44,814 home health patients aged 65 and older in 2005, 62 percent (27,780) were females, and 38 percent (17,034) were males.
- The home health utilization rate of Wisconsin females age 65 and older in 2005 was 65.9 per 1,000 (65.2 per 1,000 in 2004). The utilization rate for males age 65 and older was 55.6 per 1,000 (56.2 per 1,000 in 2004).
- Among Wisconsin males aged 85 and older, 129 of every 1,000 used home health services in 2005, down from 138 per 1,000 in 2004. The utilization rate for females aged 85 and older increased from 113 per 1,000 in 2004 to 117 per 1,000 in 2005.

Table 8. Home Health Agencies and Patients in Selected Counties, Wisconsin 2005

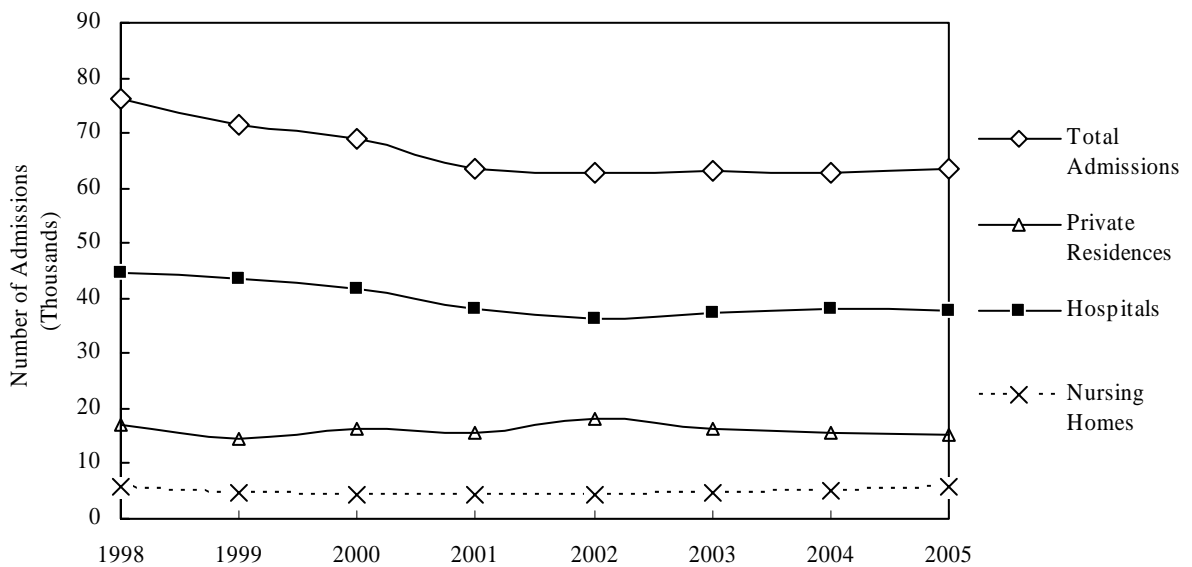
| County of Agency | Agencies | Patients | Percent of Statewide Total Patients |
|------------------|----------|----------|-------------------------------------|
| All Agencies | 153 | 69,978 | 100% |
| Milwaukee | 23 | 26,310 | 38 |
| Dane | 9 | 7,177 | 10 |
| Winnebago | 5 | 4,041 | 6 |
| Brown | 6 | 3,945 | 6 |
| Waukesha | 8 | 3,192 | 5 |
| Marathon | 2 | 2,481 | 4 |
| Rock | 4 | 1,644 | 2 |
| Wood | 1 | 1,290 | 2 |
| Chippewa | 2 | 987 | 1 |
| Dodge | 3 | 885 | 1 |
| Eau Claire | 5 | 944 | 1 |
| Oneida | 1 | 909 | 1 |
| Fond du Lac | 2 | 831 | 1 |
| La Crosse | 4 | 873 | 1 |
| Racine | 2 | 829 | 1 |
| Sheboygan | 2 | 727 | 1 |
| Kenosha | 3 | 612 | 1 |
| Manitowoc | 2 | 611 | 1 |
| Grant | 2 | 591 | 1 |
| Sauk | 2 | 540 | 1 |
| Green | 1 | 457 | 1 |
| Green Lake | 1 | 494 | 1 |
| Jefferson | 3 | 500 | 1 |
| Price | 3 | 468 | 1 |
| Iowa | 1 | 406 | 1 |
| Marinette | 2 | 454 | 1 |
| St. Croix | 2 | 418 | 1 |
| Washburn | 3 | 405 | 1 |
| Out-of-state | 16 | 1,350 | 2 |

Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Note: Patient counts in this table reflect the number of patients served by agencies located in that county (not patient county of residence). Counties whose home health agencies served less than 1 percent of total Wisconsin home health patients were excluded from this table. (Percent column will therefore not add to 100.)

- In 2005, 65 percent of Wisconsin home health patients were served by 51 agencies located in five counties (Milwaukee, Dane, Waukesha, Brown and Winnebago), even though these five counties had 39 percent of the state population.
- The 32 home health agencies in Milwaukee and Dane counties served 48 percent of the state's home health patients. These two counties had 25 percent of the total Wisconsin population in 2005.
- Sixteen counties had no home health agencies in 2005, compared with 14 counties in 2004. Only four counties had no home health agencies in 1997.

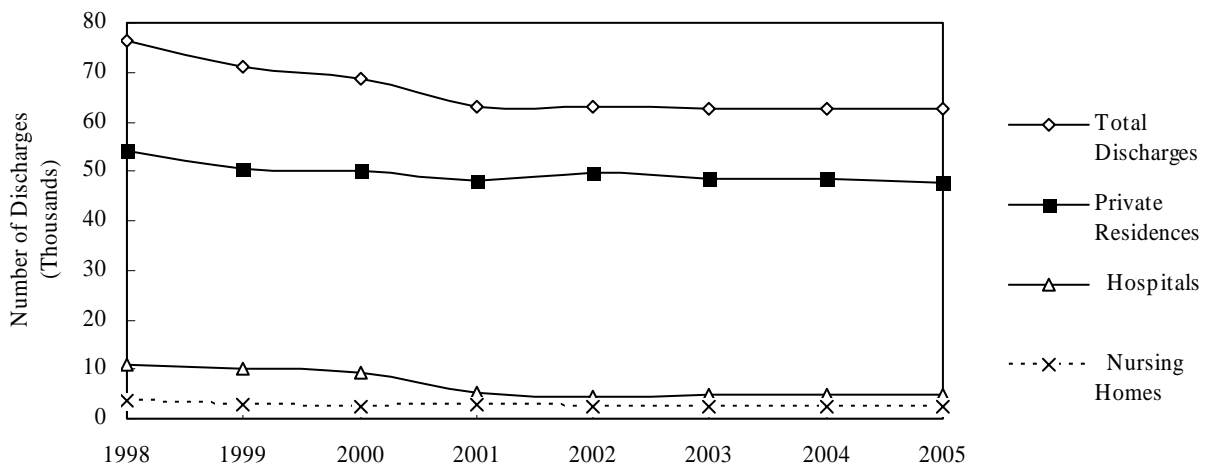
Figure 6. Home Health Admissions from Private Residences, Hospitals, and Nursing Homes, Wisconsin 1998-2005



Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

- Total home health admissions increased 1 percent in 2005 (to 63,412). Admissions from nursing homes increased 11 percent, admissions from hospitals were down 0.3 percent, and admissions from private residences declined 2 percent.

Figure 7. Home Health Discharges to Private Residences, Hospitals, and Nursing Homes, Wisconsin 1998-2005



Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

- Total home health discharges decreased 1 percent in 2005 (to 62,450), and discharges to private residences were down 2 percent. Discharges to hospitals increased 7 percent, and discharges to nursing homes increased 0.4 percent.

Characteristics of Home Health Patients

Table 9. Home Health Patient Need for Help with Selected Activities of Daily Living (ADLs) by Age (Based on Start of Care Assessments of Medicare and/or Medicaid Recipients Receiving Skilled Care), Wisconsin 2005

| Activities of Daily Living (Current Condition) | Age | | | | | Total |
|---|-------|-------|-------|--------|-------|--------|
| | <55 | 55-64 | 65-74 | 75-84 | 85+ | |
| Total Number | 2,632 | 2,007 | 7,155 | 12,569 | 8,831 | 33,194 |
| Ambulation/Locomotion | | | | | | |
| Independent | 35% | 21% | 20% | 14% | 8% | 15% |
| Requires use of a device | 39 | 54 | 59 | 63 | 63 | 60 |
| Needs supervision/assistance | 9 | 11 | 14 | 17 | 22 | 16 |
| Chairfast (able to wheel self) | 10 | 10 | 4 | 3 | 3 | 4 |
| Chairfast (unable to wheel self) | 5 | 4 | 3 | 3 | 4 | 3 |
| Bedfast | 2 | 1 | 1 | <1 | 1 | 1 |
| Total Percent | 100% | 100% | 100% | 100% | 100% | 100% |
| Transferring | | | | | | |
| Independent | 48% | 39% | 36% | 31% | 25% | 32% |
| Needs minimal assistance | 38 | 49 | 54 | 59 | 62 | 57 |
| Unable to transfer self | 10 | 10 | 8 | 9 | 12 | 10 |
| Bedfast | 4 | 2 | 1 | 1 | 1 | 1 |
| Total Percent | 100% | 100% | 100% | 100% | 100% | 100% |
| Toilet Use | | | | | | |
| Independent | 73% | 74% | 75% | 72% | 66% | 71% |
| Needs assistance | 13 | 15 | 18 | 21 | 25 | 21 |
| Able to use bedside commode | 4 | 5 | 4 | 4 | 4 | 4 |
| Totally dependent | 9 | 5 | 3 | 3 | 5 | 4 |
| Total Percent | 100% | 100% | 100% | 100% | 100% | 100% |
| Bathing | | | | | | |
| Independent | 25% | 16% | 13% | 9% | 7% | 11% |
| Requires devices | 11 | 13 | 11 | 11 | 10 | 11 |
| Needs assistance | 31 | 39 | 41 | 46 | 51 | 45 |
| Unable to use shower/tub | 32 | 31 | 35 | 34 | 32 | 33 |
| Total Percent | 100% | 100% | 100% | 100% | 100% | 100% |
| Eating | | | | | | |
| Independent | 79% | 78% | 80% | 77% | 74% | 77% |
| Needs limited assistance | 14 | 18 | 17 | 20 | 23 | 19 |
| Must be assisted | 3 | 2 | 1 | 2 | 3 | 2 |
| Able to take in nutrients orally, and receives supplemental nutrients through tube or gastrostomy | 1 | 1 | 1 | <1 | <1 | <1 |
| Unable to take in nutrients orally | 3 | 1 | 1 | 1 | <1 | 1 |
| Total Percent | 100% | 100% | 100% | 100% | 100% | 100% |

Source: **Patient-based Home Health Care Outcome and Assessment Information Set (OASIS)**. See Technical Notes, p. 31.

Notes: "Current condition" means as of assessment date. ADLs are defined in the Technical Notes, Page 31.

The data for this table included only the latest Start of Care Assessment for each patient (see Technical Notes). ADL data were not reported on eight patient records.

- Out of 33,194 Medicare and/or Medicaid home health patients receiving skilled care in 2005, 11 percent were independent in bathing, 15 percent were independent in ambulating, 32 percent were independent in transferring, 71 percent were independent in toilet use, and 77 percent were independent in eating. All these percentages were decreases from 2004.
- The proportion of these home health patients who were independent in transferring decreased to 32 percent in 2005 from 35 percent in 2004. Forty-seven percent were independent in transferring in 2000.
- Six percent (1,987) of these home health patients were independent in all five of these Activities of Daily Living (not shown), down from 7 percent in 2004. The total number of Medicare and/or Medicaid home health patients receiving skilled care in 2005 increased 2 percent.

Table 10. Home Health Patient Need for Help with Selected Instrumental Activities of Daily Living (IADLs) by Age (Based on Start of Care Assessments of Medicare and/or Medicaid Recipients Receiving Skilled Care), Wisconsin 2005

| Instrumental Activities of Daily Living (Current Condition) | Age | | | | | Total |
|---|-------|-------|-------|--------|-------|--------|
| | <55 | 55-64 | 65-74 | 75-84 | 85+ | |
| Total Number | 2,632 | 2,007 | 7,155 | 12,569 | 8,831 | 33,194 |
| Shopping | | | | | | |
| Independent | 6% | 3% | 2% | 1% | 1% | 2% |
| Needs help | 26 | 20 | 14 | 13 | 12 | 14 |
| Unable to go shopping but able to arrange home delivery | 43 | 49 | 60 | 55 | 48 | 53 |
| Needs someone to do all shopping and errands | 25 | 28 | 25 | 30 | 40 | 31 |
| Total percent | 100% | 100% | 100% | 100% | 100% | 100% |
| Housekeeping | | | | | | |
| Independent | 8% | 5% | 3% | 3% | 2% | 3% |
| Able to do light housekeeping | 33 | 31 | 31 | 31 | 27 | 30 |
| Needs some assistance | 7 | 8 | 7 | 7 | 7 | 7 |
| Unable to do housekeeping tasks | 52 | 57 | 59 | 60 | 64 | 60 |
| Total percent | 100% | 100% | 100% | 100% | 100% | 100% |
| Laundry | | | | | | |
| Independent | 10% | 6% | 5% | 5% | 5% | 5% |
| Able to do light laundry | 31 | 29 | 27 | 25 | 22 | 25 |
| Unable to do any laundry | 59 | 65 | 68 | 70 | 73 | 69 |
| Total percent | 100% | 100% | 100% | 100% | 100% | 100% |
| Transportation/Driving | | | | | | |
| Independent | 8% | 4% | 2% | 2% | 1% | 2% |
| Able to ride in car/van/bus | 89 | 93 | 96 | 96 | 97 | 96 |
| Unable to ride, requires ambulance | 3 | 3 | 2 | 2 | 2 | 2 |
| Total percent | 100% | 100% | 100% | 100% | 100% | 100% |

Source: **Patient-based Home Health Care Outcome and Assessment Information Set (OASIS)**. See Technical Notes, p. 31.

Notes: “Current condition” means as of assessment date. IADLs are defined in the Technical Notes.

The data for this table included only the latest Start of Care assessment for each patient (see Technical Notes). IADL data were not reported on eight patient records.

- In 2005, only 2 percent to 5 percent of home health patients with Medicare and/or Medicaid and requiring skilled care were independent in shopping, housekeeping, laundry and transportation – four of the daily tasks called “Instrumental Activities of Daily Living (IADLs).”
- Sixty percent of these home health patients were unable to do any housekeeping tasks, up from 58 percent in 2004; and 69 percent were unable to do any laundry, up from 67 percent in 2004.
- Fifty-three percent of these home health patients were unable to go shopping alone, and 31 percent needed someone to do all the shopping.

Table 11. Home Health Patient Frequency of Assistance from Primary Caregiver by Age (Based on Start of Care Assessments of Medicare and/or Medicaid Recipients Receiving Skilled Care), Wisconsin 2005

| Frequency of Assistance from Primary Caregiver | Total | | Age Group | | | | |
|--|--------|---------|-----------|-------|-------|-------|------|
| | Number | Percent | < 55 | 55-64 | 65-74 | 75-84 | 85 + |
| No primary caregiver (other than agency staff) | 6,244 | 19% | 25% | 24% | 18% | 19% | 20% |
| Has a primary caregiver, and receives help: | | | | | | | |
| Several times during day and night | 11,126 | 35 | 31 | 31 | 37 | 35 | 35 |
| Several times during day | 9,395 | 29 | 31 | 29 | 33 | 30 | 25 |
| Once daily | 1,929 | 6 | 5 | 6 | 5 | 6 | 7 |
| Three or more times per week | 2,103 | 7 | 5 | 6 | 5 | 7 | 8 |
| 1-2 times per week | 1,114 | 3 | 3 | 4 | 2 | 3 | 4 |
| Less often than weekly | 255 | 1 | 1 | 1 | 1 | 1 | 1 |
| Total | 32,166 | 100% | 100% | 100% | 100% | 100% | 100% |

Source: **Patient-based Home Health Care Outcome and Assessment Information Set (OASIS)**. See Technical Notes, p. 31.

Notes: The data for this table included only the latest Start of Care Assessment for each patient (see Technical Notes).

The data on 1,036 patient records were unreported or unknown.

Percentages may not add to 100 percent due to rounding.

- Of home health patients in 2005 who had Medicare and/or Medicaid as a payment source and were receiving skilled care, 19 percent had no primary caregiver other than home health agency staff (20 percent in 2004).
- Thirty-five percent received help from a primary caregiver (other than agency staff) several times during the day and night.
- An additional 29 percent of these home health patients received assistance from their caregiver several times during the day.
- Eleven percent of these home health patients had a primary caregiver but received that person's help less than once daily.

Characteristics of Home Health Patients

Table 12. Race/Ethnicity of Home Health Patients by Age (Based on All Types of Assessments of Medicare and/or Medicaid Recipients Receiving Skilled Care), Wisconsin 2005

| Age | White | Asian/Pacific Islander | Black or African American | | | Hispanic/Latino | Total | |
|-------------------------|---------------|------------------------|---------------------------|-------------|-------------|-----------------|-------------|---------|
| | | | American | Indian | | | Number | Percent |
| Less than 55 | 6% | 15% | 32% | 23% | 23% | 2,635 | 8% | |
| 55-64 | 5 | 16 | 17 | 10 | 17 | 2,014 | 6 | |
| 65-74 | 21 | 26 | 22 | 33 | 26 | 7,149 | 22 | |
| 75-84 | 39 | 25 | 20 | 24 | 25 | 12,556 | 38 | |
| 85 and over | 28 | 20 | 8 | 11 | 9 | 8,814 | 27 | |
| Total Percent | 100% | 100% | 100% | 100% | 100% | | 100% | |
| 65 and over | 26,949 | 140 | 1,048 | 135 | 247 | 28,519 | 86% | |
| Total Number | 30,292 | 200 | 2,065 | 200 | 411 | 33,168 | 100% | |
| Percent of Total | 91% | 1% | 6% | 1% | 1% | 100% | | |

Source: **Patient-based Home Health Care Outcome and Assessment Information Set (OASIS)**. See Technical Notes, p. 31.

Notes: The data for this table included all types of assessment (see Technical Notes).

The data on race/ethnicity were not reported on 8,010 patient records.

Percentages may not add to 100 percent due to rounding.

- Ninety-one percent of Medicare and/or Medicaid home health patients receiving skilled care were reported to be white, compared with 88 percent of all Wisconsin home health patients (not shown).
- Home health patients of minority race/ethnicity were generally younger than patients who were white.
- In 2005, 27 percent of Medicare and/or Medicaid home health patients receiving skilled care were age 85 and older (up from 26 percent in 2004); 20 percent of all Wisconsin home health patients were in this age group.

Table 13. “Length of Stay” of Home Health Patients by Age (Based on All Types of Assessments of Medicare and/or Medicaid Recipients Receiving Skilled Care), Wisconsin 2005

| Length of Stay | Total | | Age | | | | |
|----------------|---------------|-------------|-------------|-------------|-------------|-------------|-------------|
| | Number | Percent | < 55 | 55-64 | 65-74 | 75-84 | 85 + |
| < 30 Days | 2,802 | 7% | 7% | 6% | 8% | 7% | 6% |
| 31 - 90 Days | 5,588 | 14 | 14 | 14 | 15 | 14 | 12 |
| 91 - 180 Days | 8,332 | 20 | 21 | 20 | 20 | 20 | 20 |
| 181 - 365 Days | 20,537 | 50 | 46 | 49 | 49 | 50 | 52 |
| 1+ Years | 3,911 | 9 | 12 | 10 | 8 | 9 | 11 |
| Total | 41,170 | 100% | 100% | 100% | 100% | 100% | 100% |

Source: **Patient-based Home Health Care Outcome and Assessment Information Set (OASIS)**. See Technical Notes, p. 31.

Notes: The data for this table included all types of assessment (see Technical Notes).

Percentages may not add to 100 percent due to rounding.

- In 2005, 50 percent of Medicare and/or Medicaid home health patients receiving skilled care had a “length of stay” between 181 days and 365 days. “Length of stay” is the amount of time a patient has been receiving home health agency services during the current admission.
- Nine percent of these patients had been receiving home health service for one year or longer, the same as in 2004.

Characteristics of Home Health Patients

Table 14. Pay Source of Home Health Patients by Age (Based on all Types of Assessments of Medicare and/or Medicaid Recipients Receiving Skilled Care), Wisconsin 2005

| Age | Total | | | Female | | | Male | | |
|---------------------------|-------------|-------------|---------------|-------------|-------------|---------------|-------------|-------------|---------------|
| | Medicare | Medicaid | Dual Entitlee | Medicare | Medicaid | Dual Entitlee | Medicare | Medicaid | Dual Entitlee |
| Number of Patients | 36,295 | 3,502 | 1,373 | 22,240 | 2,238 | 943 | 14,055 | 1,264 | 430 |
| Percent | | | | | | | | | |
| Under 55 | 3% | 56% | 26% | 3% | 54% | 22% | 4% | 59% | 35% |
| 55-64 | 4 | 24 | 16 | 4 | 24 | 15 | 5 | 24 | 19 |
| 65-74 | 22 | 8 | 24 | 21 | 8 | 24 | 25 | 8 | 23 |
| 75-84 | 41 | 8 | 22 | 40 | 9 | 24 | 42 | 6 | 18 |
| 85 or older | 29 | 4 | 12 | 32 | 5 | 15 | 24 | 2 | 4 |
| Total Percent | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% |
| 65+ (Number) | 33,503 | 705 | 791 | 20,742 | 497 | 595 | 12,761 | 208 | 196 |
| 65+ (Percent) | 92% | 20% | 58% | 93% | 22% | 63% | 91% | 16% | 46% |

Source: **Patient-based Home Health Care Outcome and Assessment Information Set (OASIS)**. See Technical Notes, p. 31.

Notes: A dual entitlee is a person eligible for health care coverage under Medicaid *and* Medicare.

The data for this table included all types of assessment (see Technical Notes).

Percentages may not add to 100 percent due to rounding.

- Of 41,170 home health patients who received skilled care paid for by Medicare and/or Medicaid in 2005, 62 percent (25,421) were female and 38 percent (15,749) were male (not shown).
- Ninety-two percent of Medicare home health patients receiving skilled care were over age 65, while only 20 percent of Medicaid patients were in this age group.
- Overall, 85 percent of the Medicare and/or Medicaid home health patients receiving skilled care in 2005 were aged 65 and over (not shown). Sixty-four percent of all Wisconsin home health patients were 65 and over (see Table 7, Page 15).

Home Health Services

Table 15. Services Provided to Home Health Patients, Wisconsin 2005

| | Statewide Total | | Ownership of Agency | | |
|--|-----------------|---------|---------------------|-----------|-------------|
| | Number | Percent | Governmental | Nonprofit | Proprietary |
| Total Patients | 69,978 | 100% | 100% | 100% | 100% |
| Therapeutic Services | | | | | |
| Skilled Nursing | 56,037 | 80 | 82 | 84 | 66 |
| Home Health Aide Services | 12,346 | 18 | 26 | 17 | 18 |
| Physical Therapy | 30,159 | 43 | 39 | 46 | 32 |
| Speech Pathology | 1,632 | 2 | 1 | 3 | 2 |
| Occupational Therapy | 12,335 | 18 | 11 | 19 | 15 |
| Medical Social Service | 5,079 | 7 | 3 | 9 | 4 |
| Private Duty Nursing (Ventilator-Dependent) | 72 | <1 | 0 | <1 | 1 |
| Private Duty Nursing (Excluding Ventilator-Dependent) | 359 | 1 | 0 | <1 | 2 |
| Other Home Health Care | 289 | <1 | 0 | <1 | 1 |
| Non-Therapeutic Services | | | | | |
| Personal Care Service | 7,200 | 10 | 14 | 4 | 34 |
| Personal Care RN Supervisory | 6,368 | 9 | 13 | 3 | 31 |
| Homemaker Service | 1,085 | 2 | 3 | 1 | 3 |
| Other Non-Therapeutic Care | 503 | 1% | 3% | <1% | 2% |

Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Note: Percents will add to more than 100 because each patient could receive more than one type of service.

- Among all home health patients in 2005, 80 percent received skilled nursing services (down from 83 percent in 2004), 18 percent received home health aide services (down from 23 percent in 2004), and 43 percent received physical therapy (up from 41 percent in 2004 and 38 percent in 2003). In 1996, only 49 percent of home health patients received skilled nursing services and 12 percent received physical therapy.
- The percent of home health patients who received occupational therapy increased from 16 percent in 2004 to 18 percent in 2005. In 1996, only 4 percent of home health patients received occupational therapy services.
- The number of patients who received private duty nursing services from home health agencies increased 11 percent (431 patients in 2005 vs. 389 patients in 2004). There were 853 patients receiving private duty nursing services from home health agencies in 2000.
- According to Wisconsin Medicaid program data, home health agencies bill Wisconsin Medicaid fewer hours of private duty nursing (PDN), including PDN for ventilator-dependent recipients, than do nurses in independent practice. Of Medicaid expenditures for PDN in Calendar Year 2005, home health agencies claimed 18.9 percent (down from 22.6% in CY 2004) and nurses in independent practice claimed 81.1 percent (up from 77.4 in CY 2004). (Expenditure data obtained from internal Wisconsin Medicaid reports, Budget Analysis/Forecasting Date of Payment Reports HMMR900A, Jan.-Dec. 2004 and 2005.)

Table 16. Home Health Agencies That Shared Cases and/or Provided Services in Selected Group Settings, Wisconsin 2003-2005

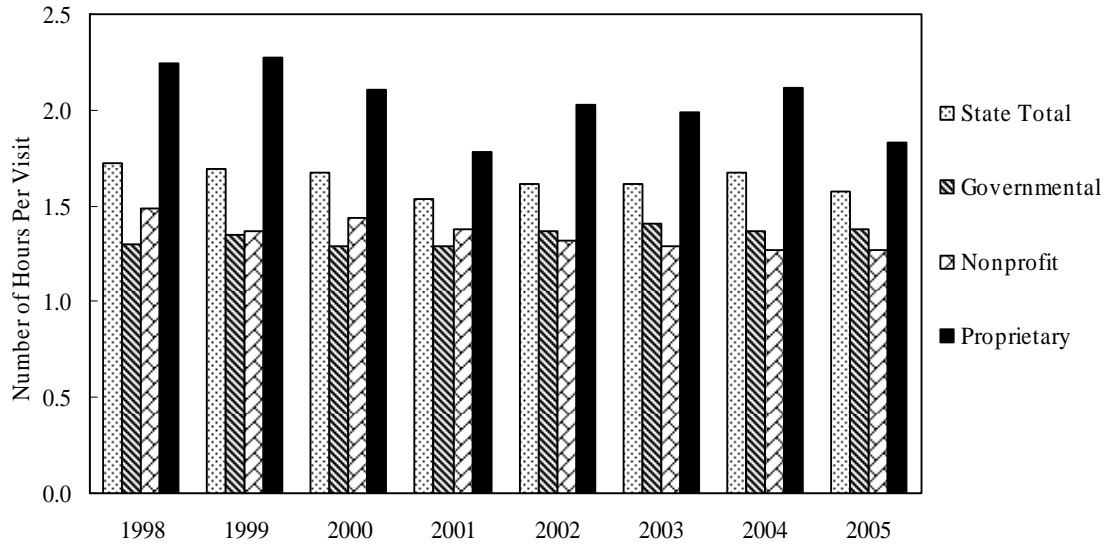
| Agencies/Settings | 2003 Agencies | | 2004 Agencies | | 2005 Agencies | |
|---|------------------|---------|------------------|---------|------------------|---------|
| | Number | Percent | Number | Percent | Number | Percent |
| Total home health agencies | 150 | 100% | 147 | 100% | 153 | 100% |
| Agencies shared cases with other home health agencies | 48 | 32 | 51 | 35 | 50 | 33 |
| Number of cases shared | 133 | | 153 | | 125 | |
| Agencies shared cases with personal care agencies | 67 | 45 | 68 | 46 | 66 | 43 |
| Number of cases shared | 493 | | 528 | | 639 | |
| Agencies shared cases with independent providers | 42 | 28 | 27 | 18 | 22 | 14 |
| Number of cases shared | 356 | | 175 | | 177 | |
| Agencies provided services at: | | | | | | |
| Adult family homes | 58 | 39 | 62 | 42 | 55 | 36 |
| Number of patients on Dec. 31 | 250 | | 296 | | 316 | |
| Adult day care centers | 12 | 8 | 10 | 7 | 7 | 5 |
| Number of patients on Dec. 31 | 3 | | 8 | | 12 | |
| Residential care/assisted living apts. | 62 | 41 | 60 | 41 | 63 | 41 |
| Number of patients on Dec. 31 | 326 | | 335 | | 474 | |
| Community-based residential facilities (CBRFs) | 99 | 66% | 90 | 61% | 90 | 59% |
| Number of patients on Dec. 31 | 932 | | 802 | | 892 | |

Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Note: Percentages may not add to 100 percent due to rounding.

- Forty-three percent of home health agencies shared cases with personal care agencies in 2005. The number of these cases increased to 639 (from 528 in 2004).
- Fourteen percent of home health agencies shared cases with nurses in independent practice in 2005 (18 percent in 2004). The number of these cases increased by 2 to 177.
- Thirty-six percent of home health agencies provided services in adult family homes in 2005 (down from 42 percent in 2004). The number of home health patients in adult family homes on December 31, 2005 increased to 316 (from 296 in 2004).
- Fifty-nine percent of home health agencies provided services in Community-Based Residential Facilities (CBRFs). The number of home health patients in CBRFs increased 11 percent between 2004 and 2005 (to 892).

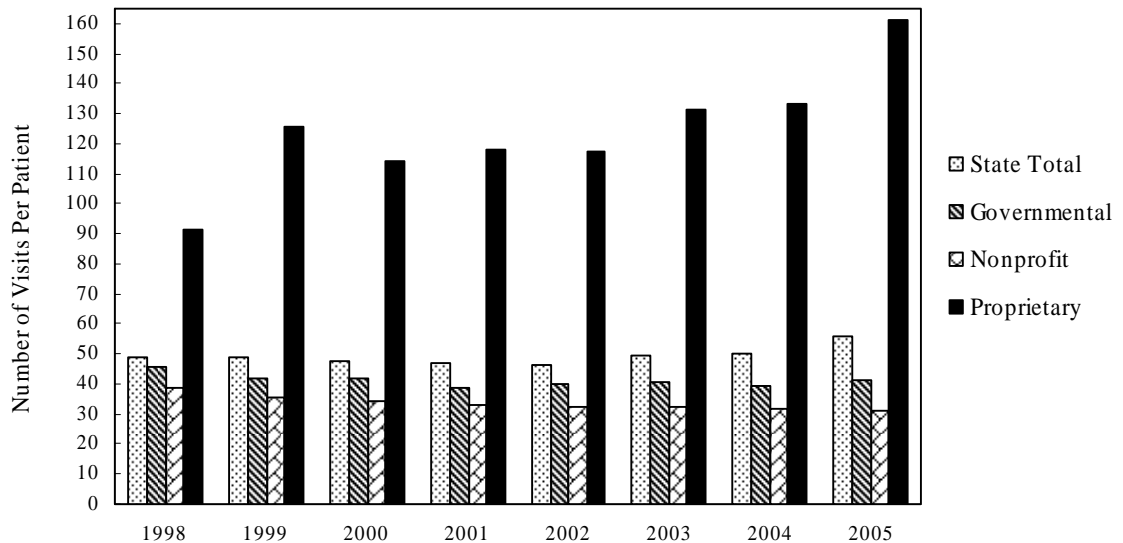
Figure 8. Average Number of Hours per Home Health Visit, Wisconsin 1998-2005



Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

- The average length of a home health visit in 2005 statewide was 1.6 hours, down from 1.7 hours in 2004.
- Home health visits by governmental agencies lasted an average of 1.4 hours (ranging from 0.6 hour to 2.7 hours per visit); visits by nonprofit agencies averaged 1.3 hours (ranging from 0.8 hour to 3.1 hours per visit); and visits by proprietary agencies averaged 1.8 hours (ranging from 0.3 hour to 8.0 hours per visit).

Figure 9. Average Number of Visits per Home Health Patient, Wisconsin 1998-2005



Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

- Home health patients received an average of 56 visits each in 2005, up from 50 visits in 2004.
- On average, proprietary agencies made 161 visits to each patient in 2005 (a 21 percent increase from 2004). Average visits per patient were 31 visits for nonprofit agencies and 42 visits for governmental agencies.

Home Health Agency Financial Information

Table 17. Home Health Agency Revenue by Ownership Type, Wisconsin 2005

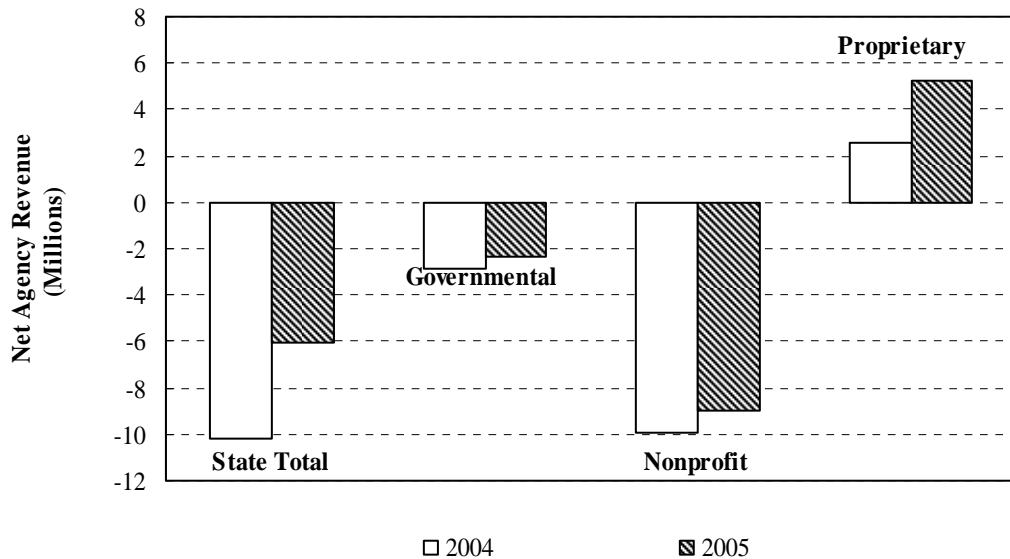
| | State Total Amount Percent | | Ownership of Agency | | | | | | |
|---|-------------------------------|------------|--------------------------------|--------------|-----------------------------|------------|-------------------------------|--------------|--|
| | | | Governmental Amount Percent | | Nonprofit Amount Percent | | Proprietary Amount Percent | | |
| Gross Patient Revenue | | | | | | | | | |
| Medicare | \$117,302,859 | 42% | \$7,957,646 | 47% | \$88,233,764 | 60% | \$21,111,449 | 18% | |
| Medicaid | 110,619,224 | 39 | 4,520,572 | 27 | 32,769,436 | 22 | 73,329,216 | 63 | |
| Other Federal Government | 951,159 | <1 | 431,688 | 3 | 142,752 | <1 | 376,719 | <1 | |
| State Government (COP, CIP, Family Care, etc.) | 11,209,344 | 4 | 1,093,853 | 6 | 1,479,068 | 1 | 8,636,423 | 7 | |
| All Other Government | 1,543,057 | 1 | 800,685 | 5 | 611,455 | <1 | 130,917 | <1 | |
| Third Party | 32,083,428 | 11 | 1,811,594 | 11 | 20,949,802 | 14 | 9,322,032 | 8 | |
| Self Pay | 7,942,970 | 3 | 365,881 | 2 | 3,582,791 | 2 | 3,994,298 | 3 | |
| Other Sources of Revenue | 562,067 | <1 | 43,509 | <1 | 406,971 | <1 | 111,587 | <1 | |
| Reported Gross Patient Revenue | \$282,214,108 | 100 | \$17,025,428 | 100 | \$148,176,039 | 100 | \$117,012,641 | 100 | |
| Deductions from Revenue | | | | | | | | | |
| Medicare | 1,922,276 | 1 | 325,318 | 2 | (845,611) | (1) | 2,442,569 | 2 | |
| Medicaid | 30,857,533 | 11 | 1,517,401 | 9 | 10,977,751 | 7 | 18,362,381 | 16 | |
| Other Government | 1,916,091 | 1 | 309,358 | 2 | 477,236 | <1 | 1,129,497 | 1 | |
| Third Party | 6,614,033 | 2 | 497,189 | 3 | 4,239,492 | 3 | 1,877,352 | 2 | |
| Bad Debts | 861,329 | <1 | 94,027 | 1 | 362,290 | <1 | 405,012 | <1 | |
| Charity | 560,964 | <1 | 184,088 | 1 | 368,487 | <1 | 8,389 | <1 | |
| Other Deductions | 305,181 | <1 | 28,116 | <1 | 83,476 | <1 | 193,589 | <1 | |
| Reported Total Deductions | 43,037,407 | 15 | 2,955,497 | 17 | 15,663,121 | 11 | 24,418,789 | 21 | |
| NET PATIENT REVENUE | \$239,176,701 | 85 | \$14,069,931 | 83 | \$132,512,918 | 89 | \$92,593,852 | 79 | |
| Donations | 1,447,298 | 1 | 300 | <1 | 1,446,228 | 1 | 770 | <1 | |
| Other Agency Revenue | 6,364,017 | 2 | 487,084 | 3 | 1,783,881 | 1 | 4,093,052 | 4 | |
| TOTAL AGENCY REVENUE | \$246,988,016 | 88% | \$14,557,315 | 86% | \$135,743,027 | 92% | \$96,687,674 | 83% | |

Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Notes: Revenue and deductions are self-reported by agencies and based on their most recently completed fiscal year. Gross patient revenue is the total amount that an agency has billed for services to patients. Deductions from revenue are disallowances from Medicare, Medicaid, or private insurance; bad debts; and charges to patients that have not been paid. Total deductions from revenue are subtracted from gross patient revenue to yield net patient revenue. Net patient revenue is the total revenue that agencies are paid by patients or their insurers. Donations and other revenues are added to net patient revenue to obtain total agency revenue.

- Reported gross patient revenue of home health agencies statewide increased 5.4 percent, from \$267.7 million in 2004 to \$282.2 million in 2005.
- Gross revenue from Medicare increased 5 percent, constituting 42 percent of gross patient revenue in 2005 (the same percentage as in 2004). Gross revenue from Medicaid also increased 5 percent, constituting 39 percent (the same percentage as in 2004).
- Proprietary agencies reported \$117.0 million in gross patient revenue in 2005, an increase of 11 percent from \$105.9 million in 2004. Governmental agencies reported \$17.0 million in gross patient revenue in 2005, up 8 percent from \$15.7 million in 2004. Nonprofit agencies reported \$148.2 million in gross patient revenue in 2005, an increase of 1 percent from \$146.1 million in 2004.
- Total agency revenue statewide was \$247.0 million in 2005, up 8 percent from \$228.3 million in 2004.

Figure 10. Net Agency Revenue by Ownership Type, Wisconsin, 2004 and 2005



Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

- Statewide, total expenses reported by home health agencies exceeded total self-reported revenue by \$6.1 million in 2005, 40 percent less than the reported difference in 2004 (\$10.2 million).
- Proprietary agencies had positive net agency revenue in 2005 (\$5.3 million); this amount was more than twice their 2004 net agency revenue (\$2.6 million). For nonprofit agencies, total self-reported expenses surpassed revenue by \$9.0 million. For governmental agencies, total self-reported expenses surpassed revenue by \$2.3 million.

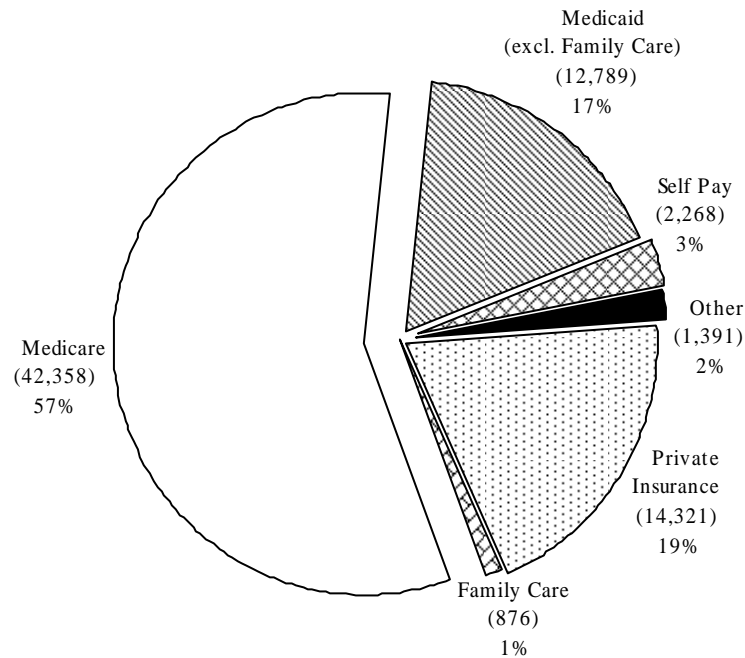
Table 18. Self-Reported Agency Revenue and Expenses by Ownership Type, Wisconsin 2005

| | State Total | Governmental | Nonprofit | Proprietary |
|---------------------------|----------------------|----------------------|----------------------|--------------------|
| Total Agency Revenue | \$246,988,016 | \$14,557,315 | \$135,743,027 | \$96,687,674 |
| Total Expenses | \$253,075,789 | \$16,907,268 | \$144,741,569 | \$91,426,952 |
| Net Agency Revenue | (\$6,087,773) | (\$2,349,953) | (\$8,998,542) | \$5,260,722 |

Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Note: Total agency revenue equals gross patient revenue, less deductions, plus any donations.

Figure 11. Home Health Patients by Payment Source, Wisconsin 2005

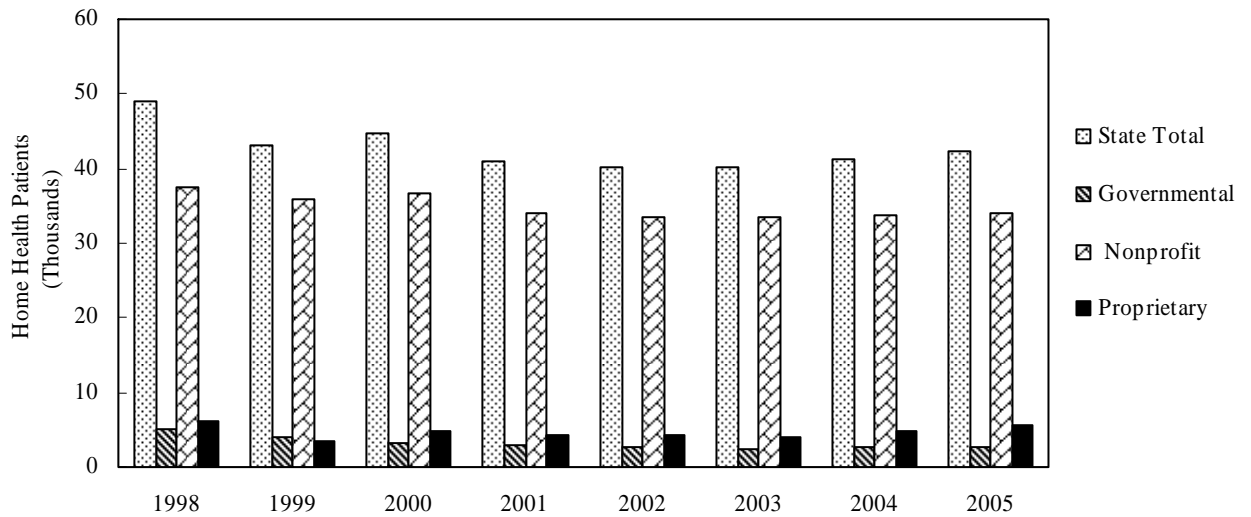


Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Notes: Patients may be counted in more than one payment source.
 Percents may not add to 100 percent due to rounding.
 See Technical Notes, Page 32, for a definition of the Family Care program.

- In 2005, 57 percent of home health patients used Medicare as a payment source (the same percentage as in 2004); 17 percent used Medicaid (16 percent in 2004); 1 percent used Family Care (the same as in 2004); 19 percent used private insurance (21 percent in 2004 and 23 percent in 2003); and 3 percent paid by themselves (3 percent in 2004).
- A total of 42,358 home health patients used Medicare as a source of payment in 2005, an increase of 3 percent from 2004 (41,319).
- Medicaid was used by 12,789 home health patients in 2005, an 8 percent increase from 2004 (11,831). Beginning in 2001, the Medicaid number excludes patients using the Medicaid-funded Family Care benefit, available to eligible patients in five counties (see Technical Notes, page 32).
- Private insurance was used by 14,321 home health patients in 2005, a decline of 5 percent from 2004 (15,029). This follows a 12 percent decline from 2003 to 2004.
- The number of self-pay home health patients declined 4 percent, from 2,354 in 2004 to 2,268 in 2005. The 2005 number represented a 59 percent decline from 1997.

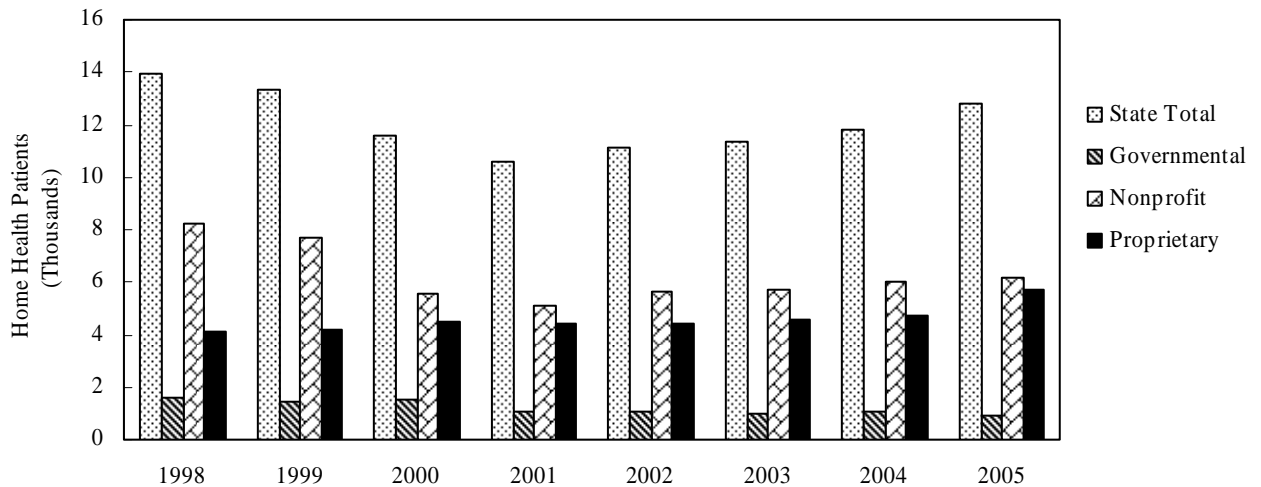
Figure 12. Home Health Patients Using Medicare as a Source of Payment by Ownership Type, Wisconsin 1998-2005



Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

- The total number of Wisconsin home health patients using Medicare as a source of payment increased 3 percent in 2005 (to 42,358). Proprietary agencies had the highest rate of increase (13 percent). The number of Medicare patients increased 1 percent for nonprofit agencies, and less than 1 percent for governmental agencies.

Figure 13. Home Health Patients Using Medicaid as Source of Payment by Ownership Type, Wisconsin 1998-2005



Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

- The total number of home health patients using Medicaid as a payment source increased 8 percent in 2005 (to 12,789). This overall increase reflected a 3 percent increase in Medicaid patients served by nonprofit agencies and a 21 percent increase in Medicaid patients served by proprietary agencies. The number of Medicaid patients served by governmental agencies declined 18 percent in 2005.

Table 19. Medicare Payments to Home Health Agencies by Ownership Type, Wisconsin 2005

| Payment Source | State Total | Ownership of Agency | | |
|----------------|---------------|---------------------|--------------|--------------|
| | | Governmental | Nonprofit | Proprietary |
| Medicare | \$115,380,583 | \$7,632,328 | \$89,079,375 | \$18,668,880 |

Source: Annual Survey of Home Health Agencies, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Notes: The dollar amounts shown in this table were unaudited at the time they were reported on the Annual Survey of Home Health Agencies. Agencies that closed during the year did not report (see Introduction).

- In 2005, Medicare payments as reported by home health agencies statewide totaled \$115.4 million, an increase of 8 percent from \$106.7 million in 2004. The number of home health patients using Medicare as a source of payment increased 3 percent in 2005.

Table 20. Medicaid Payments to Home Health Agencies and Other Home Care Providers as Reported by the Wisconsin Division of Health Care Financing, Wisconsin FY 2005

| State Fiscal Year | Home Health Agencies | Other Home Care Providers | Home Care Industry Total |
|-------------------|----------------------|---------------------------|--------------------------|
| 2005 | \$69,188,278 | \$134,782,476 | \$203,970,754 |

Source: Wisconsin Medicaid, Division of Health Care Financing, Department of Health and Family Services.

Note: Dollar amounts shown in this table include all Medicaid payments to Wisconsin home health agencies for State Fiscal Year 2005 (July 1, 2004 – June 30, 2005). The amounts reported in the “Home Health Agencies” category include payments to agencies providing home health services only, as well as to agencies providing home health and personal care services. The “Other Home Care Providers” category includes amounts paid to agencies that provided personal care *only*, and to independent nurses providing private duty nursing services, including private duty nursing to ventilator-dependent recipients.

- In State Fiscal Year 2005, total Medicaid payments to the state’s home care industry, as reported by the Wisconsin Division of Health Care Financing, were approximately \$16.2 million more than in SFY 2004. This represents an increase of 9 percent. DHCF-reported payments to home health agencies only (excluding other home care providers) increased by \$4.9 million, or 8 percent.

Technical Notes

OASIS Data (Tables 9, 10, 11, 12, 13, and 14)

The detailed patient-based data in these tables were derived from the federally mandated Home Health Care Outcome and Assessment Information Set (OASIS). Home health agencies collect OASIS data as part of a comprehensive assessment of each patient used to develop the patient's plan of care, assess that care over the course of treatment, and improve the quality of care provided. OASIS includes information on medical conditions and patient history; medical, physical, mental and cognitive status; drug therapy; and other measures of mental and physical well-being. It also includes information on living arrangements and supportive assistance, and needs for assistance with activities of daily living (ADLs) and instrumental activities of daily living (IADLs).

Although the OASIS database also includes data from some patients who used payment sources other than Medicare and/or Medicaid, those records are excluded from this report because OASIS reporting is mandated only for home health patients at the skilled level of care who use Medicare and/or Medicaid. Data for other patients are submitted voluntarily by home health agencies and thus are not fully representative. The OASIS data presented in this report, while an important source of patient-based information, are not representative of all patients receiving home health services in Wisconsin.

To reflect the profile of all home health patients who used Medicare and/or Medicaid and received skilled care, Tables 12, 13, and 14 included data from all types of assessments: start of care; resumption of care after an inpatient stay; follow-up assessments, such as after recertification; transfer to an inpatient facility; and discharge from agency. These three tables are based on data from 41,170 patient records (59 percent of all Wisconsin home health patients).

Tables 9, 10, and 11 provide information about the health status of patients, so only records from the latest "start of care" assessment were used. That is, if a patient had more than one "start of care" assessment in 2005, the latest was used. These three tables are based on data from 33,194 patient records (47 percent of all Wisconsin home health patients).

Definitions for Activities of Daily Living (ADLs):

Ambulation/locomotion: Ability to SAFELY walk, once in a standing position, or use a wheelchair, once in a seated position, on a variety of surfaces.

Transferring: Ability to move from bed to chair, on and off toilet or commode, into and out of tub or shower, and ability to turn and position self in bed if patient is bedfast.

Toilet Use: Ability to get to and from the toilet or bedside commode.

Bathing: Ability to wash entire body. Excludes grooming (washing face and hands only).

Eating: Ability to feed self meals and snacks. Note: this refers only to the process of eating, chewing, and swallowing, not preparing the food to be eaten.

Definitions for Instrumental Activities of Daily Living (IADLs):

Shopping: Ability to plan for, select, and purchase items in a store and to carry them home or arrange delivery.

Housekeeping: Ability to safely and effectively perform light housekeeping and heavier cleaning tasks.

Laundry: Ability to do own laundry – to carry laundry to and from washing machine, to use washer and dryer, to wash small items by hand.

Transportation: Physical and mental ability to safely use a car, taxi, or public transportation (bus, train, and subway).

Family Care (Figure 11, Page 28)

Family Care is a program being piloted in nine Wisconsin counties: Fond du Lac, La Crosse, Milwaukee (serving the elderly population only), Portage, Richland, Kenosha, Marathon, Trempealeau, and Jackson. The programs in four of these nine counties (Kenosha, Marathon, Trempealeau, and Jackson counties) have resource centers only (see below). Family Care serves people with physical disabilities, people with developmental disabilities, and frail elders, with the goals of:

- Giving people better choices about where they live and what kinds of services and support they get to meet their needs.
- Improving access to services.
- Improving quality through a focus on health and social outcomes.
- Creating a cost-effective system for the future.

Family Care has two major organizational components:

1. Aging and disability resource centers, designed to be single-entry points where older people and people with disabilities and their families can get information and advice about a wide range of resources available to them in their local communities.
2. Care management organizations (CMOs), which manage and deliver the Medicaid-funded Family Care benefit. The Family Care benefit combines funding and services from a variety of existing programs into one flexible long-term care benefit, tailored to each individual's needs, circumstances and preferences. CMOs offer the Family Care benefit package in five counties: Fond du Lac (opened in February 2000), La Crosse and Portage counties (April 2000), Milwaukee (July 2000, serving the elderly population only), and Richland (January 2001).

For details of the services provided by Family Care, please visit:

<http://dhfs.wisconsin.gov/LTCare/>

Prospective Payment System (PPS)

Under Medicare's prospective payment system or PPS, home health agencies receive a single payment for all items and services furnished during each 60-day episode of care for a Medicare beneficiary, regardless of the services actually delivered during the period. There is no limit on the number of episodes a beneficiary may have. The base payment is adjusted to reflect patient characteristics that have been shown to affect service use; payments for patients expected to use the most services in an episode will be over five times the payment for patients expected to use the fewest services. Each episode payment is also adjusted for differences in labor costs across geographic areas. Medicare makes outlier payments for certain extremely high-cost episodes of care.

ATTACHMENT I 2005 ANNUAL SURVEY OF HOME HEALTH AGENCIES

The Statistical Summary is to be provided by agencies submitting an annual report. If you have questions about completing Attachment I, call Jane Conner (608-267-9055), Kitty Klement (608-267-9490), Lu Ann Hahn (608-266-2431), or Kim Voss (608-267-1420).

Time Periods:

The Statistical Summary requests information from varying time periods. Some questions refer to the entire calendar year, (January 1 - December 31, 2005); others refer to a specific day (January 1 or December 31, 2005). Financial information is requested for the agency's last closed fiscal year. Be careful to answer questions for the correct time period.

Patient Counts:

Patients are counted two ways:

1. Only once to determine the number of individual patients the agency served by county.
2. Multiple times, when appropriate to identify the number of patients who received various types of services, whose payments came from various pay sources, and who were admitted and/or discharged from various places and programs.

In some instances, patient counts in one question must equal patient counts in other questions. When this is the case, a footnote is used as a reminder.

Diagnoses Reporting:

All diagnostic categories in Section VII, A. are based on the ICD-9-CM classification system, Volumes 1,2,3 -- 2005.

Follow-up for corrections/clarifications:

All responses will be edited for completeness, accuracy and clarity. If any problems are found, the contact person named below will be telephoned for corrections/clarifications.

Selected definitions are incorporated into the survey form. Read them carefully before filling out the survey.

OUT OF STATE AGENCIES SHOULD REPORT WISCONSIN DATA ONLY.

Person responsible for completing Attachment I _____
(This is who will be contacted if further information is required.)

Contact person's area code/telephone number _____

Area Code/Fax Number _____

Email Address _____

Home health agency's area code/telephone number _____
(This number will be published in the Home Health Directory.)

Does the agency have Internet access? 1. Yes 2. No

If you are the contact person for *another* home health agency, list the name, city and license number of that agency below.

Name _____

City _____

License No. _____

I certify that I have reviewed the information reported in this document for accuracy and the information is true and correct.

Name of Administrator (*type or print*) _____

SIGNATURE - Administrator _____

Date signed _____

STATISTICAL SUMMARY

I. GENERAL INFORMATION

- A. If the agency began operation after January 1, 2005, provide the date operations began / /
Month Day Year
- B. 1. Is the agency a department of a hospital? 1. Yes 2. No
2. If no, is the agency formally affiliated with a hospital? 1. Yes 2. No
If "yes" was answered to (1) or (2), specify name of hospital and city:

- C. Is the agency certified for Medicare (Title 18)? 1. Yes 2. No
- D. Is the agency certified by Medicare and/or Medicaid to provide Hospice Care? (Do not include hospice data on this survey.) 1. Yes 2. No
- E. Is the agency certified by Medicaid (Title 19)? 1. Yes 2. No
- F. Is the agency certified by Medicaid for Personal Care Services? 1. Yes 2. No

II. SERVICES PROVIDED

A. Shared Home Health Services:

1. Does the agency share cases with other home health agencies? 1. Yes 2. No
If yes, how many patients were considered shared cases in 2005?
2. Does the agency share cases with personal care agencies? 1. Yes 2. No
If yes, how many patients were considered shared cases in 2005?
3. Does the agency share cases with nurses in independent practice? 1. Yes 2. No
If yes, how many patients were considered shared cases in 2005?

B. Other Types of Services:

1. Did the agency provide services at Community Based Residential Facilities? 1. Yes 2. No
(Defined in Wis. Stats., Chap. 50.01(1g) as 5 or more unrelated adults reside and receive care, treatment or services above the level of room and board but that include no more than 3 hours of nursing care per week per resident.)
If yes, as of December 31, 2005, how many patients were receiving services?
2. Did the agency provide services at adult family homes? 1. Yes 2. No
(Defined in Wis. Stats., Chap. 50.01(1) as a private residence where 3-4 unrelated adults reside and receive care, above the level of room and board but not including nursing care. Is certified under 50.032 and licensed under 50.033.)
If yes, as of December 31, 2005, how many patients were receiving services?
3. Did the agency provide services at residential care apartment complexes? 1. Yes 2. No
If yes, as of December 31, 2005, how many patients were receiving services?
4. Did the agency provide services at adult day care centers? 1. Yes 2. No
If yes, as of December 31, 2005, how many patients were receiving services?
5. Did the agency provide other types of services? 1. Yes 2. No
If yes, please describe: _____

II. SERVICES PROVIDED (continued)

C. Statistics [HFS 133]

Type of Service: Report the information below for the calendar year 2005.

Home Health services are performed by home health staff, either a registered nurse, a home health aide under the supervision of a registered nurse, a licensed practical nurse, or a licensed therapist.

Personal Care services are performed by personal care workers, under the supervision of a registered nurse.

Number of Patients: Report the number of patients, by type of service. Patients are to be counted in each type of service category to reflect all services received. Patients may be counted in more than one category, but can only be counted once within any single category. For example, if a patient received skilled nursing service at two different points in time during the year, he/she should be counted as one patient in the skilled nursing category. If a patient received skilled nursing care and also received home health aide service, count the patient twice; once for skilled nursing care and once for home health aide service.

Number of Visits: A visit is defined as one of the following: a) A home health visit is an encounter with a home care recipient where medically necessary care is provided by a physician, nurse, therapist, medical social worker or home health aide, for the purpose of rendering medically oriented home care services; b) A personal care visit is an activity required in the plan of care which is related to assisting an individual with medically necessary activities of daily living necessary to maintain the individual in his or her place of residence in the community; or c) A supervisory visit is an on-site authoritative procedural guidance to the home health aide, provided by the registered nurse or therapist.

Count as one visit each time a visit is made to the patient, regardless of the length of time spent with the patient. The number of visits may be greater than the number of patients due to multiple visits to a patient.

Total Hours: Include only actual care time; **exclude travel and charting time. Round to the nearest whole hour. No decimals.**

Charge Per Visit: Report the agency's end of the year "usual and customary" **Per Visit** rate. This is the rate that the agency charged patients for each service. Report per-hour rates for private duty nursing, personal care and homemaker services.

| Type of Service | Number of Patients | Number of Visits | Total Hours | Charge per Visit |
|---|--------------------|------------------|-------------|------------------|
| Home Health Services include skilled nursing, physical therapy, occupational therapy, speech and language therapy, home health aide services, medical social services, or respiratory therapy provided by a qualified individual in accordance with a patient's plan of care. Also includes private duty nursing for reporting purposes. | | | | |
| 1. Skilled Nursing (include medication management, on-going assessment, supervisory visit, etc.) | | | | \$ |
| 2. Physical Therapy | | | | \$ |
| 3. Occupational Therapy | | | | \$ |
| 4. Speech Therapy | | | | \$ |
| 5. Medical Social Service | | | | \$ |
| 6. Home Health Aide | | | | \$ |
| 7. Private Duty Nursing (Ventilator-Dependent) | | | | \$ |
| 8. Private Duty Nursing (Excluding Ventilator-Dependent) | | | | \$ 1 |
| 9. Other Therapeutic <u>Home Health Care</u> Specify: | | | | |
| Personal Care Services include activities to assist an individual with activities of daily living necessary to maintain the individual in his/her place of residence in the community. It may include assistance with bathing, transferring, personal hygiene, changing bedding and clothing, toileting, meal preparation, light housekeeping and other services specified in HFS 107.112. | | | | |
| 10. Personal Care | | | | \$ 1 |
| 11. Personal Care RN Supervisory Activities | | | | \$ |
| 12. Homemaker Service | | | | \$ 1 |
| 13. Other <u>Non-therapeutic Care</u> Specify: | | | | |
| TOTAL (1 - 13) | | | | |

1 Please report the hourly rate for private duty nursing, personal care and homemaker services.

NOTE: The number of patients in any single service category above, (1-13), cannot be greater than the total number of individual patients listed on page 7, question F, line 3.

IV. NUMBER OF PATIENTS BY PAY SOURCE

For the calendar year 2005, report the number of patients served by pay sources. Report patients in a pay source category only if the agency received monies for the patient from that particular pay source. If the agency received monies for a patient from more than one pay source during the year, include the patient in the count for all appropriate pay source categories.

| Pay Source | Number of Patients |
|---|--------------------|
| 1. a. Medicare (excluding Title 18 Managed Care/HMOs) | _____ |
| b. Medicare (Managed Care/HMOs) | _____ |
| c. Total Medicare (a + b) | _____ |
| 2. a. Medicaid (excluding Title 19 Managed Care/HMOs) | _____ |
| b. Medicaid (Managed Care/HMOs) | _____ |
| c. Total Medicaid (a + b) | _____ |
| 3. Family Care Program | _____ |
| 4. Block Grants | _____ |
| 5. a. Private Insurance (except Managed Care/HMOs) | _____ |
| b. Private (Managed Care/HMOs) | _____ |
| c. Total Private Insurance (a + b) | _____ |
| 6. Self Pay | _____ |
| 7. Other (specify: _____) | _____ |
| 8. TOTAL | _____ * |

* **TOTAL MUST NOT** be less than the Total individual patient count on page 7, question F, line 3.

V. ADMISSIONS & DISCHARGES

Please record the number of patients admitted to and discharged from the agency's program during 2005 for each of the following areas. Count patients as many times as necessary for Sections B and D.

A. Number of patients on the agency's open caseload on January 1, 2005

(As reported on the 2004 survey, Page 7, E. If different, explain the change/reason.)

(Any admissions on or after January 1, 2005 should be listed below on line B, NOT on line A above.)

- 1. Of the number of patients who were on the agency's open caseload beginning January 1, 2005 (Line A above), how many of those patients are also listed as an admission(s) during 2005 on Line B.10?

B. Admissions during the year from:

(Report all admissions to the agency, regardless of the number of times an individual person was admitted. For example, if the same person was admitted ten times during 2005, count each and every admission.)

- 1. private residences (exclude patients who had been in a location listed on lines B.2 - B.9 within 2 weeks prior to admission):
- 2. general hospitals
- 3. psychiatric hospitals
- 4. facilities for the developmentally disabled
- 5. community based residential facilities (CBRF)
- 6. nursing homes
- 7. adult family homes
- 8. alternate care programs (*specify:* _____)
(e.g., free standing rehabilitation, subacute care, supervised apartment living program, group home, homeless shelter, domestic abuse shelter)
- 9. other (*specify:* _____)
- 10. **TOTAL ADMISSIONS** (sum of lines B.1 through B.9)

C. Of the Total Admissions (line B.10, above) how many:

- 1. Were readmissions?
(Readmissions are the number of admissions above and beyond a patient's first admission during 2005. If an individual was formally admitted more than once during the calendar year, count each admission, except the first one, as a readmission. For example, if a patient was formally admitted to the agency five times during the calendar year, that would be five admissions of which four were readmissions.)
- 2. Used Medicare as their primary pay source **at the time of admission?**
- 3. Used Medicaid as their primary pay source **at the time of admission?**

V. ADMISSIONS & DISCHARGES (continued)

D. Discharges during the year to:

- 1. private residences _____
- 2. general hospitals _____
- 3. psychiatric hospitals _____
- 4. facilities for the developmentally disabled _____
- 5. community based residential facilities (CBRF) _____
- 6. nursing homes _____
- 7. adult family homes _____
- 8. alternate care programs (*specify:* _____) _____
- 9. hospice _____
- 10. deaths _____
- 11. other (*specify:* _____) _____
- 12. **Total Discharges** (include deaths) (sum of lines D.1 through D.11) _____

E. Persons on the caseload on December 31, 2005 _____
(Page 6, line A, plus line B.10, minus Page 7, line D.12.)

F. Please report the Total Number of Individual Patients for 2005, using the following formula to calculate the total.

- 1. Patients on January 1, 2005 caseload (page 6, line A) _____
Minus page 6, line A1 (1/1/05 patients also counted as an admission during 2005) _____

Subtotal
- 2. Admissions (page 6, line B.10) _____
Minus Readmissions (page 6, line C.1) _____
Equals the Number of Patients Admitted _____

Subtotal
- 3. **Total** individual patient count (unduplicated) for 2005. (add subtotals from F.1 and F.2) _____
*(The number reported here **MUST** equal the "TOTALS" at the bottom of Pages 8, 9 and 10.)*

G. How many persons requesting the agency's services were turned away because the agency could not reasonably expect to meet the medical, nursing and social needs of the patient adequately (HSF 133.0(1))? _____

VI. MARKET AREA

COUNTY OF SERVICE DELIVERY

Report the total individual patients cared for during 2005 as reported on page 7, question F, line 3.

| COUNTY | Number of Home Health Patients During 2005 |
|-------------|--|
| Adams | |
| Ashland | |
| Barron | |
| Bayfield | |
| Brown | |
| Buffalo | |
| Burnett | |
| Calumet | |
| Chippewa | |
| Clark | |
| Columbia | |
| Crawford | |
| Dane | |
| Dodge | |
| Door | |
| Douglas | |
| Dunn | |
| Eau Claire | |
| Florence | |
| Fond du Lac | |
| Forest | |
| Grant | |
| Green | |
| Green Lake | |
| Iowa | |
| Iron | |
| Jackson | |
| Jefferson | |
| Juneau | |
| Kenosha | |
| Kewaunee | |
| La Crosse | |
| Lafayette | |
| Langlade | |
| Lincoln | |
| Manitowoc | |
| Marathon | |
| Marinette | |
| Marquette | |
| Menominee | |

| COUNTY | Number of Home Health Patients During 2005 |
|------------------------------------|--|
| Milwaukee | |
| Monroe | |
| Oconto | |
| Oneida | |
| Outagamie | |
| Ozaukee | |
| Pepin | |
| Pierce | |
| Polk | |
| Portage | |
| Price | |
| Racine | |
| Richland | |
| Rock | |
| Rusk | |
| St. Croix | |
| Sauk | |
| Sawyer | |
| Shawano | |
| Sheboygan | |
| Taylor | |
| Trempealeau | |
| Vernon | |
| Vilas | |
| Walworth | |
| Washburn | |
| Washington | |
| Waukesha | |
| Waupaca | |
| Waushara | |
| Winnebago | |
| Wood | |
| Out of State | |
| Illinois | |
| Iowa | |
| Michigan | |
| Minnesota | |
| Other States | |
| | |
| TOTAL (in and out-of-state) | * |

* TOTAL **MUST** equal the Total individual patient count on page 7, question F, line 3.

VII. PATIENT CHARACTERISTICS

- A. Age and Primary Diagnosis** for total individual patients treated during 2005 as reported on page 7, question F, line 3.
Each patient should be recorded only once, in the category which best explains why he/she is receiving services.
(i.e., the diagnosis accounting for the greatest resource consumption during the patient's illness or the chief reason for the patient's admission.)
Shaded areas appear for readability purposes only. These areas do need to be filled in.

| PRIMARY DIAGNOSIS | Age | | | | | | | | | |
|---|--------|---------|----------|----------|----------|----------|----------|----------|-----|-------|
| | 0 to 3 | 4 to 18 | 19 to 34 | 35 to 44 | 45 to 54 | 55 to 64 | 65 to 74 | 75 to 84 | 85+ | Total |
| HIV Infection, AIDS (042) | | | | | | | | | | |
| Other Infectious & Parasitic Diseases (001-041, 045-139) | | | | | | | | | | |
| Cancer (140-239) | | | | | | | | | | |
| Diabetes (250) | | | | | | | | | | |
| Dehydration (276) | | | | | | | | | | |
| Diseases of Blood & Blood Forming Organs (280-289) | | | | | | | | | | |
| Senile Dementia (290) | | | | | | | | | | |
| Psychoses (291-299) | | | | | | | | | | |
| Neurotic Disorders (300-316) | | | | | | | | | | |
| Mental Retardation (317-319) | | | | | | | | | | |
| Dis. of Central Nervous System & MS (320-341, except 331.0) | | | | | | | | | | |
| Alzheimer's Disease (331.0) | | | | | | | | | | |
| Paralysis (342, 344) | | | | | | | | | | |
| Cerebral Palsy (343) | | | | | | | | | | |
| Disorders of Eye and/or Ear (360-389) | | | | | | | | | | |
| Cardiovascular (other than stroke) (390-435, 440-459) | | | | | | | | | | |
| Stroke (436-438) | | | | | | | | | | |
| Respiratory (460-519) | | | | | | | | | | |
| Digestive Disorders (520-579) | | | | | | | | | | |
| Genitourinary System (580-629) | | | | | | | | | | |
| Pregnancy & Childbirth (630-676) | | | | | | | | | | |
| Arthropathies, Dorsopathies, & Rheumatism (710-729) | | | | | | | | | | |
| Osteopathies (730-739) | | | | | | | | | | |
| Congenital Anomalies (740-759) | | | | | | | | | | |
| Conditions Originating in the Perinatal Period (760-779) | | | | | | | | | | |
| Ill-defined Conditions (780-799) | | | | | | | | | | |
| Fractures, Dislocations & Sprains (800-848) | | | | | | | | | | |
| Wounds, Burns, & Other Injuries (850-959) | | | | | | | | | | |
| Poisoning & Toxic Effects (960-989) | | | | | | | | | | |
| Complications of Surgery (996-999) | | | | | | | | | | |
| Other Conditions | | | | | | | | | | |
| TOTAL | | | | | | | | | | * |

* TOTAL **MUST** equal the Total individual patient count on page 7, question F, line 3. **NOTE:** Totals by age, **MUST** equal age totals on page 10.

VII. PATIENT CHARACTERISTICS (continued)

B. Age, Race, Gender and Hispanic Origin of Patients

Report each patient treated during 2005 (as reported on page 7, question F, line 3) in the appropriate categories on the table below.

Each patient should be entered in:

- an age and race category;
 - an age and gender category;
 - and when appropriate, an age and Hispanic/Latino category.
- (Be sure to include each Hispanic person in an appropriate race category. Hispanic is not considered a race.)*

When possible, use the patients' self-identification of race/ethnicity. Otherwise, the agency should make a "best guess".

| | Age | | | | | | | | | Total |
|--|--------|---------|----------|----------|----------|----------|----------|----------|-----|-------|
| | 0 to 3 | 4 to 18 | 19 to 34 | 35 to 44 | 45 to 54 | 55 to 64 | 65 to 74 | 75 to 84 | 85+ | |
| Race | | | | | | | | | | |
| White | | | | | | | | | | |
| Black or African American | | | | | | | | | | |
| American Indian ¹ | | | | | | | | | | |
| Asian or Pacific Islander ² | | | | | | | | | | |
| Other <i>Specify:</i> | | | | | | | | | | |
| TOTAL | | | | | | | | | | (a) |
| Gender | | | | | | | | | | |
| Males | | | | | | | | | | (b) |
| Females | | | | | | | | | | (c) |
| <i>Total males, (line b), plus total females, (line c), MUST equal the Total number of patients, (line a). Total number of patients, (line a), MUST equal the Total individual patient count, page 7, question F, line 3.</i> | | | | | | | | | | |
| Hispanic/Latino³ | | | | | | | | | | |

NOTE: Totals by age on line (a), **MUST** equal age totals on page 9.

1 Includes members of tribes indigenous to the Americas including Eskimo and Aleut.

2 Includes Southeast Asian.

3 Includes individuals of Hispanic/Latino descent (e.g., Mexican, Cuban, Puerto Rican, Central or South American, Spain, etc.)
Hispanic is representative of an ethnicity (i.e., there are black, white, American Indian people of Hispanic ethnicity, culture or descent.)

Do the **individual age category totals, (line a), equal the corresponding age category totals reported on Page 9?** 1. Yes 2. No
(THESE MUST MATCH.)

VIII. STAFFING

Personnel: Report the number of personnel *employed* by the agency during the week of November 26 - December 2, 2005. Include staff on vacation or other paid leave. Out-of-state agencies should report only staff time serving Wisconsin patients.

Full-Time Persons: Report the number of persons employed full-time (37 ½ hours or more per week).

Part-Time Persons: Report the number of persons employed part-time (less than 37 ½ hours per week).

Part-Time Hours: For each employed person working less than full-time hours, report the number of hours worked in that position. If a person serves in more than one job position, place an asterisk (*) next to the job title, record the hours worked in the part-time hours column for each position, but only record the person once in the part-time person column for the job position worked the most hours. (e.g., A person may work as a Home Health Aide for 25 hours and may also work as a Personal Care Worker for 15 hours. Record "25" in the part-time hours column for Home Health Aides, and record "15" in the part-time hours column for Personal Care Workers. Record a "1" in the part-time persons column for Home Health Aides, since the majority of the hours were worked in that capacity).

ROUND HOUR FIGURES TO THE NEAREST WHOLE HOUR. NO DECIMALS.

Contracted Staff Persons: Report the number of persons providing services through a formal contractual arrangement.

Staff On Leave: Report the number of persons employed by the home health agency but temporarily on leave of absence, (e.g., maternity/paternity leave, educational leave, family leave, etc.).

DO NOT WRITE IN SHADED AREA

(NO FTE'S)

| EMPLOYEE CATEGORY | Full-time Persons | Part-Time Persons | | Contracted Staff (No. of Persons) | Staff on Leave |
|--|----------------------|-------------------|-------|--------------------------------------|-------------------|
| | | Personnel | Hours | | |
| Administrative Staff | | | | | |
| 1. Administrator | | | | | |
| 2. Registered Nurse Supervisor | | | | | |
| Nursing Staff | | | | | |
| 3. Registered Nurses | | | | | |
| 4. Licensed Practical Nurses | | | | | |
| Therapeutic Staff | | | | | |
| 5. Home Health Aides | | | | | |
| 6. Physical Therapists | | | | | |
| 7. Registered Occupational Therapists | | | | | |
| 8. Speech Pathologists | | | | | |
| 9. Respiratory Therapists | | | | | |
| 10. Medical Social Workers | | | | | |
| 11. Other, (e.g., dietitian, pharmacist, audiologist) <i>Specify:</i> | | | | | |
| Other Staff | | | | | |
| 12. Personal Care Workers | | | | | |
| 12a. Related to Patient | | | | | |
| 12b. Not Related to Patient | | | | | |
| 13. Homemakers | | | | | |
| 14. Other, (e.g., office staff, etc.) | | | | | |
| TOTAL (sum of lines 1 - 14, excluding 12a. & 12b.) | | | | | |

Number of hours in work week? (Enter as a 3-digit number, e.g., 40.0, 37.5, 35.0, etc.)

